



# Flexible Spending Plans

Maximize your benefits



# Flexible Spending Plans



## Congratulations!

Your employer has established a “flexible benefits plan” to help you pay for your out-of-pocket health and daycare expenses. One of the most important features of the plan is that the benefits being offered are paid for with a portion of your pay before federal income or social security taxes are withheld. This means that you will pay less tax and have more money to spend and save. However, if you receive a reimbursement for an expense under the plan, you cannot claim a federal income tax credit or deduction on your return.

## Available Benefits:

### Health flexible spending account:

The health flexible spending account (FSA) enables you to pay for expenses allowed under Section 105 and 213(d) of the Internal Revenue Code which are not covered by our insured medical plan.

The most that you can contribute to your Health FSA each plan year is set by the IRS. This amount can be adjusted for increases in cost-of-living in accordance with Code Section 125(i)(2).

### Premium expense plan:

A premium expense portion of the plan allows you to use pre-tax dollars to pay for specific premiums under various insurance programs we offer you.



### Dependent care flexible spending account:

The dependent care flexible spending account (DCFSA) enables you to pay for out-of-pocket, work-related dependent daycare costs. Please see the Summary Plan Description for the definition of an eligible dependent. The law places limits on the amount of money that can be paid to you in a calendar year.

Generally, your reimbursement may not exceed the lesser of: (a) \$5,000 (if you are married filing a joint return or you are head of a household) or \$2,500 (if you are married filing separate returns); (b) your taxable compensation; (c) your spouse's actual or deemed earned income.

Also, in order to have the reimbursements made to you and be excluded from your income, you must provide a statement from the service provider including the name, address and, in most cases, the taxpayer identification number of the service provider as well as the amount of such expense and proof that the expense has been incurred.

## Determining contributions

Before each plan year begins, you will select the benefits you want and how much contributions should go toward each benefit. It is very important that you make these choices carefully based on what you expect to spend on each covered benefit or expense during the plan year.

Generally, you cannot change the elections you have made after the beginning of the plan year. However, there are certain limited situations when you can change your elections if you have a “change in status”. Please refer to your Summary Plan Description for a change in status listing.

## How do I receive reimbursements?

During the course of the plan year, you may submit requests for reimbursement of expenses you have incurred. Expenses are considered "incurred" when the service is performed, not necessarily when it is paid for. You can get submit a claim online at:

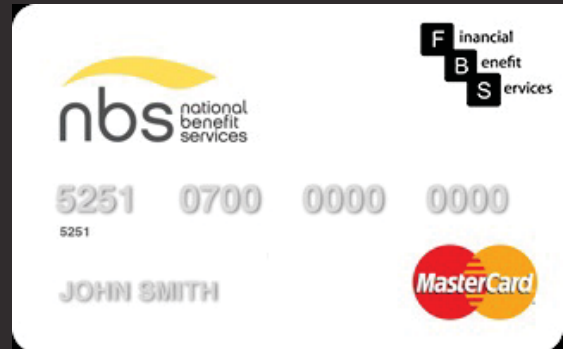
[my.nbsbenefits.com](http://my.nbsbenefits.com)

**Please note:** Policies other than company sponsored policies (i.e. spouse's or dependents' individual policies) may not be paid through the flexible benefits plan. Furthermore, qualified long-term care insurance plans may not be paid through the flexible benefits plan.

### NBS Benefits Card

Your employer may sponsor the use of the NBS Benefits Card, making access to your flex dollars easier than ever. You may use the card to pay merchants or service providers that accept credit cards such as hospitals and pharmacies, so there is no need to pay cash up front then wait for reimbursement.

Orthodontic expenses that are paid fully up-front at the time of initial service are reimbursable in full after the initial service has been performed and payment has been made. Ongoing orthodontia payments are reimbursable only as they are paid.



### Account Information

Participants may call NBS and talk to a representative during our regular business hours, Monday-Friday, 7 a.m. to 7 p.m. Central Time. Participants can also obtain account information using the Automated Voice Response Unit, 24 hours a day, 7 days a week at (385) 988-6423 or toll free at (800) 274-0503. For immediate access to your account information at any time, log on to our website at [my.nbsbenefits.com](http://my.nbsbenefits.com) or download the NBS Mobile App.

## What Can I Save with an FSA?

	FSA	No FSA
Annual taxable income	\$24,000	\$24,000
Health FSA	\$1,500	\$0
Dependent care FSA	\$1,500	\$0
Total pre-tax contributions	-\$3,000	\$0
Taxable income after FSA	\$21,000	\$24,000
Income taxes	-\$6,300	-\$7,200
After-tax income	\$14,700	\$16,800
After-tax health and welfare expenses	\$0	-\$3,000
Take-home pay	\$14,700	\$13,800
<b>You saved</b>	<b>\$900</b>	<b>\$0</b>



Making it Easy

# NBS Mobile App

When you're on the go, save time and hassle with the NBS Mobile App.

Submit claims, check your balances, view transactions, and submit documentation using your device's camera.

## Easy and convenient

- Designed to work just as other iOS and Android apps which makes it easy to learn and use.
- Shares user authentication with the NBS portal. Registered users can download the app and log in immediately to gain access to their benefit accounts, with no need to register their phone or your account.

## It's secure

- No sensitive account information is ever stored on your mobile device and secure encryption is used to protect all transmissions.

## Mobile app features

The NBS mobile app supports a wide variety of features, empowering you to proactively manage your account.

- View account balances
- View claims
- View reimbursement history
- Submit claims
- Submit documentation using your device's camera
- Pay providers
- Setup a variety of SMS alerts
- Edit your personal information
- View contribution details
- View plan information
- View calendar deadlines
- Contact a service representative
- View Benefits Card information



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# Sample Expenses

## Medical expenses

- Acupuncture
- Addiction programs
- Adoption (medical expenses for baby birth)
- Alternative healer fees
- Ambulance
- Body scans
- Breast pumps
- Care for mentally handicapped
- Chiropractor
- Copayments
- Crutches
- Diabetes (insulin, glucose monitor)
- Eye patches
- Fertility treatment
- First aid (i.e. bandages, gauze)
- Hearing aids & batteries
- Hypnosis (for treatment of illness)
- Incontinence products (i.e. Depends, Serene)
- Joint support bandages and hosiery
- Lab fees
- Monitoring device (blood pressure, cholesterol)
- Physical exams
- Pregnancy tests
- Prescription drugs
- Psychiatrist/psychologist (for mental illness)
- Physical therapy
- Speech therapy
- Vaccinations
- Vaporizers or humidifiers
- Weight loss program fees (if prescribed by physician)
- Wheelchair

## Dental expenses

- Artificial teeth
- Copayments
- Deductible
- Dental work
- Dentures
- Orthodontia expenses
- Preventative care at dentist office
- Bridges, crowns, etc.

## Vision expenses

- Braille - books & magazines
- Contact lenses
- Contact lens solutions
- Eye exams
- Eye glasses
- Laser surgery
- Office fees
- Guide dog and upkeep/other animal aid

## Items that generally do not qualify for reimbursement

- Personal hygiene (deodorant, soap, body powder, sanitary products)
- Addiction products
- Allergy relief (oral meds, nasal spray)
- Antacids and heartburn relief
- Anti-itch and hydrocortisone creams
- Athlete's foot treatment
- Arthritis pain relieving creams
- Cold medicines (i.e. syrups, drops, tablets)
- Cosmetic surgery
- Cosmetics (i.e. makeup, lipstick, cotton swabs, cotton balls, baby oil)
- Counseling (i.e. marriage/family)
- Dental care - routine (i.e. toothpaste, toothbrushes, dental floss, anti-bacterial mouthwashes, fluoride rinses, teeth whitening/bleaching)
- Exercise equipment
- Fever & pain reducers (i.e. Aspirin, Tylenol)
- Hair care (i.e. hair color, shampoo, conditioner, brushes, hair loss products)
- Health club or fitness program fees
- Homeopathic supplement or herbs
- Household or domestic help
- Laser hair removal
- Laxatives
- Massage therapy
- Motion sickness medication
- Nutritional and dietary supplements (i.e. bars, milkshakes, power drinks, Pedialyte)
- Skin care (i.e. sun block, moisturizing lotion, lip balm)
- Sleep aids (i.e. oral meds, snoring strips)
- Smoking cessation relief (i.e. patches, gum)
- Stomach & digestive relief (i.e. Pepto-Bismol, Imodium)
- Tooth and mouth pain relief (Orajel, Anbesol)
- Vitamins
- Wart removal medication
- Weight reduction aids (i.e. Slimfast, appetite suppressant)

*These expenses may be eligible if they are prescribed by a physician (if medically necessary for a specific condition).*

