

Flexible Spending Customer Service Information

These are the questions we get calls for most frequently. Before you call or email, please reference these questions & answers. If you still need assistance, contact Consociate • Dansig at 217.423.7788 or support@consociatedansig.com.

Frequently Asked Questions

What is a Flexible Spending Account Plan? A benefit provided by your employer that lets you set aside a certain amount of your paycheck into an account before paying income taxes. Then, during the year you can be directly reimbursed from your account for qualified healthcare and dependent care expenses.

Why should I participate in the Healthcare Reimbursement Account when I already have health insurance? This account is used to pay for expenses that are not covered by insurance. For example, your insurance may not cover annual physicals, co-payments, eye exams, eye surgery, glasses, orthodontics, prescription drugs, or dental care, just to name a few.

If I set aside part of my pay, won't I make less money? No. Your net take-home pay will increase by the amount of taxes you did not pay.

Can I change my contributions during the year? Only if you have a change-in-status, such as: marriage, birth, adoption, or a change in your or your spouse's employment status.

What if I currently take the dependent care credit on my annual tax return? Whether to participate in the daycare portion of this plan depends on your income, filing status, number of dependents and annual daycare expenses.

The amount you deposit in your Dependent Care Reimbursement Account reduces the amount, dollar for dollar, that you can claim as a credit on your tax return. Contact your plan administrator for further information. Important changes to the Dependent Care Credit for 2005 - The amount for which you can claim as a credit for 2005 has increased. [Click here for a comparison.](#)

How do I get reimbursed for my expenses? Once you have completed the Enrollment Form, you will receive a claim form and instructions on how to file your claim. Simply complete the form, attach a copy of the healthcare or dependent care bill, and mail or fax your form to Consociate • Dansig. Within a short time, you will receive your reimbursement.

Do I have to wait for the money to be deposited in my account in order to make a claim for reimbursement?

The amount you set aside each year for the Healthcare Reimbursement Account is available to you at any time throughout the plan year. The amount available to you from your Dependent Care Account is the amount you have contributed to date.

How do I know how much is available in my accounts?

Each time you receive a reimbursement, a statement (attached to your reimbursement check) will show the dollar amount you have set aside as well as the amount you have been paid to date. Or you may check your account online.

What happens if I terminate employment? Dependent Care

Your deductions will cease when you leave the company. You may send in claims incurred before or after your termination date for qualified dependent care expenses. These expense should be sent to Consociate for processing by the end of your company's grace period

Health FSA

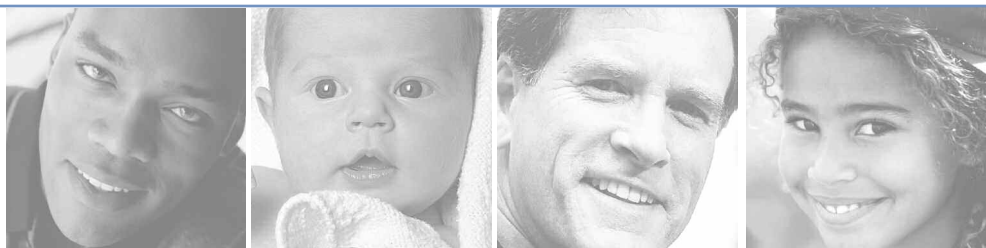
Your deductions will cease when you terminate employment. You have 2 options when you leave your employer:

1. You may not elect COBRA and send in claim that were incurred up to your termination date.
2. If you have a positive account balance you may elect COBRA. This requires you to pay the monthly deduction to your employer on an after tax basis. By doing this, you are entitled to send in claims for reimbursement from the beginning of your coverage, usually your plan year start date, through your COBRA effective date.

What if I don't use all of the money I set aside in my account(s)? Carefully review your estimated expenses before making the decision to participate. Any contributions that are not used during the plan year may not be paid to you in cash or used in a later plan year.

What if I am not covered under my company's health insurance plan? You and your family can still participate in the Healthcare, Dependent Care, and Adoption Reimbursement Accounts.

How do I benefit by participating? Your biggest advantage is the tax savings. Every dollar you set aside in your account reduces how much you pay in income taxes. Plus, you can be reimbursed for qualified expenses that you are already paying for!



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Are there any negatives that I should know about? Yes.

Because you are not paying any social security tax on that portion of your income that has been set aside, your social security benefits may be slightly reduced. Most tax advisors would tell you that the benefit of saving taxes now will be far greater than the potential loss of social security benefits when you retire.

What documentation do I need to submit my claim?

All prescription reimbursement requests must include the receipt from the pharmacy and include the prescription number. Cash register receipts or credit card payment slips are not considered valid receipts.

Please be sure that you are using the most recent claim form for reimbursement requests. You can download one at www.consociatedansig.com

If you have any additional questions, please call Consociate • Dansig at 217.423.7788

Tips for Quicker Claims Reimbursement

Do's

- Confirm that your fax actually went through at your end
- Print information on your claim form so we can read it
- Use most recent claim form
- Fax your claims
- Make sure your receipts are legible
- Circle the dates and amounts on your receipts
- Make sure your receipts are legible
- Put your email address on the claim form
- Mailed claims should be stapled in the top left hand corner with the date of service and amount legible

Dont's

- Fax your claim multiple times
- Send a receipt with a "balance due"
- Do not submit a canceled check as proof of payment
- Send in a receipt without a date of service
- Send in a cash receipt for prescriptions
- Use a cover page with your fax
- Do not send a receipt without a RX # for prescriptions
- Do not highlight on your fax

Day Care

Claims can only be sent in 1 month in advance... you can't send in a claim for summer camp in January even if you paid for it.

Missing a Check?

Members who wish to have a claim reimbursement check reissued must wait 14 days from the date of the issue. If you would like a check reissued, please email your Social Security number or member number along with the amount of the check and/or check # to support@consociatedansig.com



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Consociate Care Preferred Provider Organization