Limited-Purpose Health Care Flexible Spending Account

What is a Limited-Purpose Health Care Flexible Spending Account?

A Limited-Purpose Flexible Spending Account (LPFSA) allows you to set aside money from your paycheck pretax to pay for out-of-pocket **dental and vision care** expenses. When you pay less in taxes, you have more money in your pocket. Most people save at least 30% on each dollar set aside pretax. To be eligible for the LPFSA, you must be enrolled in the State's Anchor Choice Plan with HSA, or some other HDHP (as defined by the IRS).

How does it work?

If you are enrolled in a HDHP with a Health Savings Account (HSA) into which you or your employer contributes, you can sign up for a LPFSA. This means you can participate in **both** an HSA and a LPFSA in order to maximize your tax savings.

What expenses are eligible?

While your HSA can be used to pay all types of health care expenses, LPFSA funds can be used to pay for dental and vision expenses as follows:

- **Dental** Cleanings, x-rays, fillings, crowns, bridges, dentures, implants, orthodontia, mouth guards, prescriptions for dental care, etc.
- Vision Care Eye exams, eyeglasses, prescription sunglasses, over-the-counter reading glasses, contact lenses and solution, laser eye surgery, prescriptions for vision care, etc.

Plan carefully to preserve the value of your HSA by using your HSA funds as way to save and invest for future health care expenses. Then, just use your LPFSA to pay for current year dental and vision care expenses.

Will I receive a debit card?

Yes. Each LPFSA participant will receive a set of two ASIFlex debit cards which can be used at the point of service to pay for dental or vision care services or products. Ask for and save itemized statements of services from the provider, and save insurance plan explanation of benefit statements (EOBs) as some transactions will require you to submit backup documentation to substantiate the expense.

How do I submit claims and get reimbursed?

As you incur expenses, you can submit a claim to be reimbursed. ASIFlex offers several easy ways to submit claims for reimbursement. You do not have to choose only one option; you can use multiple options throughout the year.

- ASIFlex mobile app Download the app and log in to your account. Then, just snap a picture
 of your insurance plan explanation of benefits (EOB) statement, or itemized statement from
 your provider and submit a claim via the app. It's easy and it's fast!
- ASIFlex Online Sign in to your online account at ASIFlex.com to submit a claim.
- **Toll-free fax or mail** Download and complete a claim form. Then, submit it with your insurance plan EOB or provider itemized statement. Keep a copy for your records.

Reimbursements will be made to you within three business days following receipt of a complete claim. Log in to your ASIFlex account to sign up for direct deposit reimbursement to a bank account of your choice. You can also sign up for email and text alerts.

For more information, view the employer plan document or visit ASIFlex.com to obtain IRS Publication 502, Medical and Dental Expenses; a list of eligible expenses; and general plan information.

Manage your

account at ASIFlex.com to see your account statement and balance, submit claims, sign up for email, text alerts and direct deposit.

Check out over-thecounter (OTC)

products Contact lens solution, lens cases, rewetting drops for contact wearers, lens wipes, eyeglass repair kits, reading glasses, denture adhesives and cleaners are a few of the eligible OTC items. Go to ASIFlex.com and click on the FSA Store link.

Get the ASIFlex app!

- Submit claims.
- Submit documentation.
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 Search ASIFlex Self Service and download the app today.





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