



PLAINVIEW-OLD BETHPAGE CENTRAL SCHOOL DISTRICT

106 Washington Avenue, Plainview, New York 11803

www.pobschools.org

November 10, 2021

It's that time of year again for the Open Enrollment Period of the District's Flexible Spending Plan. If you wish to participate in the Flexible Spending Plan, open enrollment will take place between November 10, 2021 and December 3, 2021. You must re-enroll in the flexible spending account for medical and/or dependent care if you wish to participate in 2022. This benefit does not roll over and your benefit will be cancelled if you do not re-enroll.

If you are re-enrolling for the upcoming plan year that runs from January 1, 2022 through December 31, 2022, your benefit debit card will be replenished with the dollar amount you elect for the 2022 Plan Year. Please DO NOT discard your current Benefit Debit Card.

If you are enrolling for the first time, your Benefit Debit Card will be mailed to the address provided on your Plainview-Old Bethpage CSD enrollment form.

Election Period – If you would like to continue your flexible spending plan or enroll for the January 1, 2022 through December 31, 2022 benefit period, you must complete the attached enrollment form and return the form to *Carol Portugal*, in the Business Office, no later than December 3, 2021. *If you do not complete and return the new election form by Friday, December 3, 2021, you will not be allowed to participate until the next open enrollment period (next year).*

*Elections are irrevocable (use it or lose it) unless you experience a **Qualifying Life Event (QLE)** such as change in legal marital status, birth or adoption of a child, death of spouse or dependent, loss of employment, child reaches age 13 or change in child care services. **PLEASE RETURN THE ATTACHED FORM TO CAROL PORTUGAL, BUSINESS OFFICE, NO LATER THAN DECEMBER 3, 2021.***

Benefit Period – Period from January 1, 2022 to December 31, 2022. Expenses for eligible services must be incurred during this time.

1) **Health Reimbursement Account**

Allows you to set aside pre-tax money through payroll deductions for incurred out-of-pocket health expenses (expenses not covered by your health, dental or vision plan). Out-of-pocket expenses can be incurred by yourself, your eligible spouse and eligible dependents.

2) **Dependent Care Account**

Allows your set aside pre-tax money through payroll deductions for incurred out-of-pocket charges for child and dependent care. Examples of eligible expenses would be baby-sitting, day care of children under the age of 13 or care for a dependent who is physically or mentally incapable of caring for him or herself. The tax ID number or Social Security number of the provider must be reported to the Plan Administrator for charges to be reimbursed.

Please visit the District website for a complete list of eligible expenses.

Claims for Reimbursement – If you choose not to use your Benefit Debit Card at the time of service, you must include appropriate documentation (e.g. explanation of benefits from your insurance provider, itemized bill, etc.) for out-of-pocket medical, dental and vision expenses before you can be reimbursed. All forms are to be sent to the Plan Administrator, FBA National (formerly FBA of Syosset) for reimbursement. These forms are available on the District website or [click here](#).

USE IT OR LOSE IT! – You will **FORFEIT** any money that you do not use in your account(s) by the end of the Benefit Period.