



Enrollment Kit



Flexible Spending Account



Paying for medical expenses made easy.

Dear Employee,

Our goal at MidAmerica is to make your life easier by ensuring your benefits plan is administered properly, and that you have the resources you need to take full advantage of it.

Your employer has placed the administration of your benefits in our hands, and this is not a responsibility we take lightly. It's our promise to you that no matter where you're at in life—actively working, nearing retirement or retired—we will dedicate the time and effort to simplify how you access and manage your benefits.

This Enrollment Kit was developed to help you get started, but as you dive deeper into your benefits, you may find that you still have questions. Don't worry. We are here to help. If you need additional materials, further explanation or guidance, don't hesitate to contact us at (855) 329-0095 or healthaccountservices@myMidAmerica.com.

Welcome to your new benefits plan. We're happy you're here.

Sincerely,

MidAmerica Administrative & Retirement Solutions

What you'll find in your Enrollment Kit



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Meet MidAmerica

Making sure you receive the health care **benefits you deserve.**

At our core, we are a group of people helping people achieve their retirement and wellness goals. We're just like you. We work hard so that we can have fulfilling and well-earned retirement and healthcare benefits.

We understand that your benefits should be stress-free, so we're here to make sure your plan is administered properly. We take care of the administrative details of your plan, including your plan's funding, processing your distribution requests, and everyday questions.

Since 1995, MidAmerica has grown dramatically while remaining focused on what truly matters most: people. Whether it's you, your employer, our employees or our community, we focus on connecting people with retirement and wellness solutions that lead to a more fulfilled life.



Getting Started

An **introduction** to your plan.



Understanding Your Plan

Your employer has established a Flexible Spending Account (FSA) with MidAmerica to allow you to set aside money on a pre-tax basis to pay for eligible medical expenses. Enrolling in the plan gives you a tax-free way to pay for your eligible medical expenses throughout the year! You can control how much or how little you contribute. For more information on how your FSA operates, please review your [Plan Highlights](#).



MidAmerica Journey

You can access your account online through MidAmerica Journey at www.myMidAmericaJourney.com. The Journey portal is an interactive website that gives you around-the-clock access to plan details, online claims submission, forms, system guides and much more. If it's your first time accessing the portal, select [Create Your New Username and Password](#). Next, simply input the prompted information to establish your login credentials.



Journey Benefits Card

You will receive a debit card to pay for eligible medical expenses, reducing the need for claim forms. Hold on to your documentation, though! When you swipe your card at the point of sale, any transaction with eligible, plan-established Merchant Category Codes (MCC) will be approved; however, we may still ask for documentation to verify its eligibility under your plan design. For more information on your Journey Benefits Card, please review the Debit Card FAQ on page 5.



The Journey Mobile App

You are encouraged to download the Journey mobile app, a powerful, on-the-go mobile app that gives you the freedom to submit your claims, ask a question or view your account anywhere at any time. To download, go to your Apple or GooglePlay app store and search [MidAmerica Journey](#).



Online Enrollment

You've decided to enroll. What happens next?

During your employer's open enrollment period, you will likely want to take advantage of enrolling in the Flexible Spending Account. Enrolling online is simple and only takes a few steps.

Enrolling in a Plan

If you do not have a username and password:

- Go to www.myMidAmericaJourney.com
- Select **Create Your New Username and Password** from the login page
- Follow the prompts to establish your credentials
- Once logged in, you should see an **Enroll Now** button in the **I Want To** section on your homepage
- Simply select the **Enroll Now** button and follow the enrollment wizard to make your elections and enroll in the plan

If you have a username and password:

- Go to www.myMidAmericaJourney.com and log in
- When you access your account during your open enrollment period, an **Enroll Now** button will appear in the **I Want To** section
- Simply select the **Enroll Now** button and follow the enrollment wizard to make your elections and enroll in the plan

Making an Election that Makes Sense

Your plan may or may not allow a \$500 carryover (consult your employer for more details). This is why it's important to estimate your expenses to the best of your ability. To help you make an election that makes sense, we've included an FSA Worksheet in your Enrollment Kit. Using the worksheet, you can evaluate your expected expenses, and determine a sensible annual election.

What Happens Next?

Once you're enrolled, each month thereafter, your annual election is taken out of your paycheck in equal installments.

Election Changes

Once you've enrolled, per the IRS, you have the opportunity to change your election if you have a qualifying change in status during the plan year. Qualifying changes include marriage, divorce, death, change in coverage, dependent enrolled in school, birth/adoption, or a change in employment. You must make sure the adjustment is relevant to the change in status, and the requested election change has to be consistent with the event. For example, if you have a child, you could increase your election amount because you have a new dependent. However, it would not be appropriate to decrease your election amount in that scenario.

Downloading Plan Forms & Guides

Once logged into your online account, select **Tools & Support** from the Tools & Support dropdown menu. From here, you can download plan forms as well as system guides that will walk you through online processes.

Debit Card FAQ

Common Questions about Required Documentation

How do I know if documentation is required?

Your debit card purchase may be auto-approved. However, if documentation is needed to substantiate your purchase, we will send a request via email, if we have an email address on file, or USPS.

Why was my expense approved at the point of sale if I still have to provide documentation?

The purpose of your debit card is to prevent out-of-pocket payments, which means no waiting around to get your reimbursement! Documentation may be required, however, per IRS regulations.

What documentation is required?

Documentation should always include the name of the service provider, patient name, date of service, description of the services rendered, and your out-of-pocket costs. Some examples include:

- **Explanation of Benefits (EOB):** An EOB returned to you from the insurance carrier indicating the amount for which you are responsible.
- **If there is no insurance for the health care expense, request an Itemized Receipt:** Be sure to request an itemized receipt every time you use your Journey Benefits Card.
- **If an Itemized Receipt is Not Available:** Request documentation on the letterhead of the licensed health care provider that details the service(s) provided and the cost per service. Be sure to include this with your transaction receipt.
- **Pro Tip!:** Keep your medical documentation in a safe location so they're easy to locate if needed.

How do I submit documentation?

- **Online:** Upload your receipt through MidAmerica Journey by visiting www.myMidAmericaJourney.com.
- **From Your Phone:** Download the Journey mobile app, snap a picture of your documentation with your phone and upload it right from the app! To download, go to your Apple or GooglePlay app store and search "MidAmerica Journey."
- **Email:** Email your receipt to claims@myMidAmerica.com.
- **Mail:** Mail it to PO Box 24927, Lakeland, FL 33802
- **Fax:** Fax it to (863) 577-4460

If we do not receive the requested documentation within 30 days, we will send a 2nd notice via USPS. If we do not receive the documentation after an additional 60 days, the card will be temporarily suspended until documentation is submitted.

How can I make sure my purchase is auto-approved?

- **Establish a Recurring Claim**
The first time you use your card to pay for a recurring expense, you will be asked for supporting documentation such as a statement or itemized invoice from the provider, or an itemized receipt. Once this has been provided, all purchases for the same dollar amount at the same merchant (or at another merchant with the same MCC) will be automatically approved throughout the plan year.
- **Shop at IIAS Merchants**
Many major pharmacies are registered as Inventory Information Approval System (IIAS) certified. This means you may see an F or FSA next to eligible items on your receipt. The pharmacy's IIAS system allows them to differentiate between eligible and ineligible expenses, making it possible for eligible HRA and FSA products to be automatically approved at the point of purchase.
- **Ask if Copayments Have Been Established Under the Plan**
Copayments that have been established under your employer's Group Health Plan can be used as a substantiation method. For example, if we have on file that there is a pharmacy copay of \$30 and you use your card to make a \$30 copay payment at a pharmacy, the transaction would be automatically approved.

Does my card remain in effect from year to year?

Yes. Your Journey Benefits Card will carry whatever funds are rolled over or contributed.

Questions?

(855) 329-0095

healthaccountservices@myMidAmerica.com

Customer Service Hours

Monday through Thursday, 8:30 a.m.–8 p.m. ET

Friday, 8:30 a.m.–6 p.m. ET



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Flexible Spending Account Worksheet

Estimate your expenses

Projected Uninsured Plan Year Expenses

Medical and dental deductible	\$ _____
Medical insurance co-payments and coinsurance	\$ _____
Dental insurance co-payments and coinsurance	\$ _____
Immunizations, injections and vaccinations	\$ _____
Routine examinations	\$ _____
Dental and orthodontic expenses	\$ _____
Prescription drugs or co-payments	\$ _____
Eye examinations, glasses and contacts	\$ _____
Hearing examinations	\$ _____
Transportation to and from medical provider	\$ _____
Medically necessary elective surgery	\$ _____
Other expenses	\$ _____
Total expenses	\$ _____

The above items are some common expenses. Please see the FSA List of Eligible and Ineligible Expenses for a more comprehensive list.

Calculate your savings

Estimated Tax Savings

Desired FSA Plan Year Election	\$ _____
Multiply the number above by 25% (estimated tax savings)	x _____ .25
Estimated tax savings for the year	\$ _____

We want you to make a smart annual FSA election. To help you do this, we've put together a worksheet you can use to estimate your expenses and savings.

Your total estimated costs will help you determine what election amount makes sense for you.

Take it a step further by calculating your estimated tax savings using your total projected expenses!



Flexible Spending Account

Eligible Expense Guide



Understanding Your FSA

Depending on your unique Flexible Spending Account (FSA) type, the expenses that are eligible for reimbursement can vary. To help you better understand what type of FSA you have and, most importantly, which expenses are eligible, we've created this eligible expense guide just for you.



Identify Your FSA

Simply log into your plan at www.myMidAmericaJourney.com. If it's your first time logging in, select **Create Your New Username and Password** from the login screen. Once logged in, locate the **Accounts** section from your homepage. From here, you can identify the type of FSA you have. You can also contact our Participant Services team at healthaccountservices@myMidAmerica.com or (855) 329-0095.



Understanding the Account Types

Below is a description of each account type as well as the expenses eligible within each. Pages 2–5 provide additional details on common eligible and ineligible expenses.

Flexible Spending



Includes:

- FSA Eligible Medical Expenses

Dependent Care



Includes:

- Dependent Care Account Expenses

Flexible Spending: Limited Purpose



Includes:

- Limited Purpose Medical Care Expenses

Questions?

If you have questions on FSA eligible expenses, simply email us at healthaccountservices@myMidAmerica.com or call us at (855) 329-0095.



FSA Eligible Medical Care Expenses

A Partial Listing

What are medical care expenses?

The IRS defines these expenses as amounts paid for the diagnosis, cure, mitigation or treatment of a disease, and for treatments affecting any part or function of the body. The expenses must be primarily to alleviate a physical or mental defect or illness.

With that in mind, we have created a list of medical expenses inquired about most frequently. For a full listing of eligible expenses, we encourage you to download the IRS Publication 502 Medical and Dental Expenses from IRS.gov.*

Dental Services

- Crowns/Bridges
- Dental X-Rays
- Dentures
- Exams/Teeth
- Cleaning
- Extractions
- Fillings
- Gum Treatment
- Oral Surgery
- Orthodontia/Braces

Insurance-Related Items

- Co-pay Amounts
- Deductibles
- Preexisting condition expenses (medical)
- Private Hospital Room Differential

Lab Exams/Tests

- Blood Tests
- Cardiographs
- Diagnostic
- Laboratory Fees
- Metabolism Tests
- Spinal Fluid Tests
- Urine/Stool Analysis
- X-Rays

Medications

- Aspirin, if plan allows
- Insulin
- Nicotine Gum or Patches, if plan allows
- OTC Medicines, if plan allows and accompanied by a doctor's prescription

- Prescribed Birth Control
- Prescribed Vitamins (to treat specific disease)
- Prescription Drugs

Obstetric Services

- Midwife Expenses
- OB/GYN Exams
- OB/GYN Prepaid Maternity Fees (reimbursable after date of birth)
- Post-Natal/Pre-Natal Treatment
- Pre-Natal Vitamins

Practitioners

- Allergist
- Chiropractor
- Christian Science
- Dermatologist
- Homeopath
- Naturopath
- Osteopath
- Physician
- Psychiatrist
- Psychologist

Other Medical Treatments/Procedures

- Acupuncture
- Alcoholism (inpatient treatment)
- Cosmetic Surgery (if medically necessary)
- Drug Addiction
- Hearing Exams
- Hospital Services

- Infertility
- In-Vitro Fertilization
- Norplant Insertion or Removal
- Patterning Exercises
- Physical Examination (not employment related)
- Physical Therapy
- Pregnancy Tests
- Rolfing
- Smoking Cessation Programs
- Speech Therapy
- Sterilization
- Transplants (includes organ donor)
- Treatment for Handicapped
- Vaccinations/Immunizations
- Vasectomy
- Well-Baby Care

Other Medical Equipment, Supplies and Services

- Abdominal/Back Supports
- Ambulance Services
- Arches/Orthopedic Shoes
- Contraceptives
- Counseling
- Crutches
- Guide Dog (for visually/hearing impaired person)
- Hearing Aids &

- Batteries
- Hospital Bed
- Learning Disability (special school/teacher)
- Medic Alert Bracelet or Necklace
- Oxygen Equipment
- Prescribed Medical and Exercise Equipment
- Prosthesis
- Splints/Casts
- Support Hose (if medically necessary)
- Syringes
- Transportation Expenses (essential to medical care)
- Tuition Fee at Special School for Disabled Child
- Wheelchair
- Wigs (hair loss due to disease)

Vision Services

- Artificial Eyes
- Contact Lenses
- Contact Lens Solution
- Eye Examinations
- Eyeglasses
- Laser Eye Surgeries
- Ophthalmologist
- Optometrist
- Prescription
- Sunglasses
- Radial Keratotomy



Dependent Care Account Expenses

How it can work for you

A Dependent Care Account (DCA) is a type of FSA that allows you to pay for eligible dependent care expenses with pre-tax dollars throughout the year, eliminating the need to take the annual Federal Tax Credit. The amount you contribute to your DCA is not subject to Federal, State or FICA taxes, which generally means a tax savings of 15% to 40%, depending on your tax bracket.

Who is considered a qualified dependent?

Dependents are defined as children under 13 years of age, or children 13 and over who are physically or mentally unable to care for themselves. A spouse or an elderly parent residing in your home who is physically or mentally unable to live independently also qualifies.

Eligible Providers

You are able to use any provider you choose; however, they cannot be your own child if they are under 19 and still claimed as a dependent. An example of this may be paying your 16-year-old to babysit your 10-year-old. You cannot be reimbursed for the amount you paid the 16-year-old for babysitting. However, a provider can be as informal as a neighbor who watches your children after school, as long as they claim the money received for the services as income when determining their taxes at the end of the year. Note: you will need to obtain the provider's Federal Identification / Social Security Number for inclusion on your tax filing.

Eligible DCA Expenses

Expenses which allow you (and your spouse, if married) to work, look for work or attend school as a full-time student are eligible. Below are expenses that would qualify for reimbursement from your DCA:

- Day care facility fees (including transportation, lunches, educational services)
- Before-school and after-school care
- Local day camp
- In-home babysitting fees (income must be claimed by your care provider)
- Nursery school and preschool (preschool expenses are eligible if the amount you pay for schooling cannot be separated from the cost of care.)



Limited Purpose Medical Care Expenses

A Partial Listing

What are limited-purpose medical care expenses?

The IRS defines these expenses as expenses limited to dental, vision and preventative care.

With that in mind, we have created a list of medical expenses inquired about most frequently. For a full listing of eligible expenses, we encourage you to download the IRS Publication 502 Medical and Dental Expenses from IRS.gov.**

Dental Services

- Crowns/Bridges
- Dental X-Rays
- Dentures
- Exams/Teeth
- Cleaning
- Extractions
- Fillings
- Gum Treatment
- Oral Surgery
- Orthodontia/Braces

Vision Services

- Artificial Eyes
- Contact Lenses
- Contact Lens Solution
- Eye Examinations
- Eyeglasses
- Laser Eye Surgeries
- Ophthalmologist
- Optometrist
- Prescription
- Sunglasses
- Radial Keratotomy

Preventative Care Expenses***

- Periodic health evaluations, including tests and diagnostic procedures ordered in connection with routine examinations, such as annual physicals
- Routine prenatal and well-child care
- Tobacco cessation programs
- Obesity weight loss programs
- Screening services



Common Ineligible Expenses

A Partial Listing

Common Ineligible FSA Expenses

The IRS does not allow the following to be reimbursed under your Flexible Spending Account as expenses to promote general health are not eligible. This is not an inclusive listing.

Babysitting and Child Care	Health Club Dues	Rogaine****
Breast Pumps****	Treatment Program (at a Health Club)****	Special Foods**** (cost difference of common product)
Calcium Supplements	Herbs & Herbal Medicines	Student Health Fee
Canceled Appointment Fees	Homeopathic Drugs	Swimming Lessons
Contact Lens Insurance	Illegal Operation or Treatment	Tattoo Removal
Cosmetic Surgery/Procedures	Insurance Premium Interest Charge	Teeth Whitening/Bleaching
Custom Fit-overs (clip-ons)	Insurance Premiums	Toiletries, Toothpaste, etc.
Dancing Lessons	Lamaze Class*****	Varicose Vein Treatment****
Diaper Service	Marriage Counseling	Veneers
Discounted Fees/Write-offs	Massage Therapy*****	Vision Discount Program Premiums
Electrolysis	Maternity Clothes	Vitamins****
Exercise Equipment****	Personal Trainer	Weight Loss Programs &/or Drugs****
Eyeglass Insurance	Prescription Drug Discount Program Premiums	
Fitness Programs****	Retin-A****	
Hair Loss Medication		
Hair Transplant		

Common Ineligible DCA Expenses

Dependent care expenses are not considered incurred until the child care is actually provided. Reimbursement may not exceed your year-to-date deductions. Divorced parents should be aware that the Dependent Care Reimbursement Account is only available to the custodial parent, as it can only be used to allow the parent to be gainfully employed. The following are examples of common ineligible expenses:

- Diaper changing fees
- Fees for lessons (e.g., dance, piano, swim, etc.)
- Field trips
- Household services (housekeeper, maid, cook)
- Kindergarten
- Lunches/food
- Maternity Leave (if you or your spouse are on maternity leave and you place your other children in day care, those expenses are not eligible)
- Overnight camp expenses (this is not considered a work-related expense)
- Transportation for day care

* There are two exceptions to be aware of: 1) Insurance premiums are not reimbursable under a Health Care Reimbursement Account / Flexible Spending Account, and 2) the reimbursement is based only upon when the expense was incurred. For example, the date of service, not the date paid.

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*** Based on the definition described in Section 223(c)(2)(C).

**** Eligible only with Doctor's certification identifying the medical condition and length of treatment program.

***** IRS Section 213(d) has indicated that therapy provided for the general improvement of mental health, relief of stress, or personal enjoyment, is not an eligible expense reimbursable from your HRA or FSA account. Therapy used to treat a specific medical need remains eligible. Therefore, this type of expense will require a doctor's note, with a diagnosis, to state the medical need for eligibility to be determined.

*****Eligible expenses are limited to the mother's instruction related to birth.

The Interaction Among HRAs, FSAs, & HSAs

Helping you understand how these plans work together.

Health Reimbursement Arrangement (HRA)	Flexible Spending Account (FSA)	Health Savings Account (HSA)
An account funded by employer contributions which participants in eligible employee classes may use to reimburse eligible medical expenses as specified in the plan document for each class. Unused funds in the account at the end of the plan year typically carry over to the following plan year.	An account funded by elected employee pre-tax payroll deductions that participants may use for certain health care and dependent care expenses. Unused funds in the account at the end of the plan year may forfeit and not carry over to the following plan year, unless otherwise specified by the plan document, as some plans allow for a \$500 rollover.	An account available to employees enrolled in a qualifying High Deductible Health Plan and funded by elected employee pre-tax payroll deductions that participants may use to pay for qualified medical expenses. Unused funds in the account carry over to the following year.

If you have...

An HRA and HSA

If during the HRA plan year, you or your employer, or your spouse or spouse's employer, contributes to an HSA, your HRA must be restricted for the plan year. While restricted, you can only seek reimbursement for dental, vision, preventive care, post-deductible, and premium expenses from your HRA.

An FSA and HSA

If you, your employer, your spouse or your spouse's employer are contributing to an HSA, your FSA must be a limited purpose FSA, meaning reimbursements are limited to dental and vision expenses.

An HRA and FSA

If both the FSA and HRA provide coverage for the same medical expenses, reimbursements are processed based on the ordering rules established in the plan. For example, if the plan identifies that the FSA "pay first," your expense will be applied to the FSA until the balance is depleted and then reimburse from the HRA. However, if the HRA is limited purpose or premium only, then the HRA and FSA accounts can be accessed concurrently for different expenses.