Flexible Spending Account FAQs

2022

Reminder: Temporary Relief for Your 2021 Account*

The State of North Carolina adopted temporary provisions to the Flexible Spending Account plan under the Consolidated Appropriations Act of 2021. These provisions provided temporary relief to Health Care FSA and Dependent Day Care FSA participants due to the COVID-19 pandemic. Below is a summary of the temporary changes that affected your 2021 plan.

THE HEALTH CARE FSA CARRY FORWARD LIMIT WAS TEMPORARILY REMOVED

Under this provision, the maximum carry forward limit of $550 was temporarily removed, which allowed you to carry forward any unused funds from your Health Care FSA (you must have a minimum balance of $25 to carry forward). This provision was applied to your 2020 plan and 2021 plan. Unspent funds in your 2021 Health Care FSA, from $25 to any dollar amount, will be rolled over into the 2022 plan year.

YOUR DEPENDENT DAY CARE FSA GRACE PERIOD WAS EXTENDED BY 12 MONTHS

Your Dependent Day Care FSA grace period, which gives you additional time to incur eligible dependent day care expenses and use your account, is typically March 15. Under the temporary provision, however, your grace period was extended for 12 months after the plan year ends, which is December 31. For the 2021 plan, you have until December 31, 2022 to use your 2021 Dependent Day Care FSA funds.

*The temporary provisions listed above will not apply to your 2022 FSA plan. The maximum carry forward limit will apply to your 2022 Health Care FSA and the grace period of March 15, 2023, will apply to your Dependent Day Care FSA.

IMPORTANT PLAN DATES TO REMEMBER

Plan Year	2020 January 1, 2020 – December 31, 2020	2021 January 1, 2021 – December 31, 2021	2022 January 1, 2022 – December 31, 2022
Removal of the Health FSA Carry Forward Limit?	**Yes;** Health Care FSA participants can carry forward any amount over $25 into the 2021 plan.	**Yes**; Health Care FSA participants can carry forward any amount over $25 into the 2022 plan.	**No**; for the 2022 plan, the maximum carry forward limit of $550 is effective. Only $550 can be carry forward into the 2023 plan.
12 Month Dependent Care Grace Period Extension?	**Yes**; Dependent Care FSA participants have until December 31, 2021 to incur expenses for the 2020 plan year.	**Yes**; Dependent Care FSA participants have until December 31, 2022 to incur expenses for the 2021 plan year.	**No**; for the 2022 plan, the grace period reverts back to March 15, 2023.
Run-Out Period	April 30, 2022 is the last day to submit claims.	March 31, 2023 is the last day to submit claims.	March 31, 2023 is the last day to submit claims.

FSA Rules

1. If I don't use all of the money in my FSA(s), can I get it back or roll it over for the next year?

   You can carry forward unused Health Care FSA funds, up to $550, into the next plan year provided you have a minimum balance of $25. You are not required to re-enroll in the next plan year in order to access rollover funds. Please note that this carry forward feature only applies to the Health Care FSA .

   Any unused money in your Dependent Day Care FSA cannot be refunded to you or rolled over into the FSA for the following year. You can incur eligible expenses until March 15, 2023 and be reimbursed with money from your 2022 Dependent Day Care FSA if you submit claims no later than March 31, 2023.

2. Can I transfer my Health Care Flexible Spending Account (HCFSA) balance to my Dependent Daycare Flexible Spending Account (DDCFSA)?

   No. You may not transfer balances between your Flexible Spending Accounts. The money in each account may only be used for that account's eligible expenses. Please plan carefully.

3. If my spouse is contributing to a Health Savings Account (HSA), can I elect the NCFlex Health Care FSA?

   You will have to choose between either the NCFlex Health Care FSA or your spouse's HSA. Here's why: IRS regulations will not let your spouse contribute to an HSA if you participate in the NCFlex Health Care FSA. The FSA covers first dollar medical expenses of your spouse. This means your spouse has other medical coverage (the FSA) that can cover his/her expenses, regardless of whether the deductible has been met or not. Your enrollment in a FSA would make your spouse ineligible to contribute to his/her HSA. It doesn't matter if you never submit medical expenses from your spouse. It's enough that those expenses are considered eligible under your FSA. Because of this IRS regulation, you and your spouse need to determine the best option for your situation- your NCFlex Health Care FSA or your spouse's HSA.

4. With FSA reimbursements received through direct deposit, what do I do if I switch banks or change bank accounts?

   You must change your bank account information directly with your HR/payroll system. Changes are then submitted electronically to P&A Group for processing.

FSA NCFlex Convenience Card

Reminder: you can use the NCFlex Convenience Card to pay for eligible dependent care expenses, up to the amount available in your account.

5. I thought I had to sign up for a Convenience Card, but I've also heard that all participants will get a card automatically. Which is the case?

   If you enroll in a Health Care Flexible Spending Account or a Dependent Day Care FSA, you will automatically receive the NCFlex Convenience Card free of charge.

6. How do I activate my card?

   Your card is automatically active upon first use.

7. Is there a charge for replacement cards? Can we obtain a card for a dependent/spouse?

   P&A Group does not charge for a lost, stolen, replacement or dependent/spouse cards. Debit cards for a spouse and/or dependents over the age of 18 are available and can be ordered electronically online at ncflex.padmin.com. If you need assistance ordering a new card, please contact P&A Group's Customer Service Team (see page 5 for contact information).

8. If I use up all my FSA money, can I throw away my card?

   No, cards are good through three years from the date of issue and will not be automatically re-issued each January. The expiration date is also located on the front of each card. (Remember to re-enroll in the FSA during each annual enrollment period!)

Claim Submission

9. How do I submit a claim for reimbursement*?

   - MOBILE APP
     Download our mobile app to manage your account on-the-go. Search for "P&A Group" on the App Store or Google Play to download the app. Then, log into your account to submit claims.

   - ELECTRONIC UPLOAD
     Submit a claim directly from your smartphone or computer. Capture a picture of your receipt or supporting documentation, and log into your P&A account from your mobile device, tablet or computer at ncflex.padmin.com. You can submit a claim request and upload the image of your receipt/documentation from your picture/document gallery. You can also complete an FSA claim form and submit via fax or mail.

   - FAX: Toll- free (877) 213-8917

   - MAIL: P&A Group, Attn: State of North Carolina FSA Plan
     17 Court Street, Suite 500 Buffalo, NY 14202

   * Remember to complete all required information and sign your FSA claim form. Unsigned claim forms cannot be processed and will delay your reimbursement. When submitting documentation for debit transactions, please remit a copy of the MBI Receipt Notification Letter. Please submit to the dedicated fax number and address listed on the letter for faster service.

10. What type of documentation do I need to submit?

    You must submit an itemized receipt or an Explanation of Benefits (EOB) if covered by your insurance, along with a claim form. Remember you must sign and submit the claim form via mail or fax, along with your documentation. For NCFlex Convenience Card users: You only need to submit sufficient documentation if P&A Group requests this information to you directly. If you do not receive communication sent to you, P&A has approved the transaction. If P&A Group requests documentation and it is not received within 40 days of the incurred date, card privileges will be suspended.

11. What is the deadline for submitting 2022 claims for my HCFSA and DDCFSA?

The deadline to submit claims for the 2022 plan year is March 31, 2023.

DEPENDENT DAY CARE FSA

Claims with dates of service from January 1, 2022 through March 15, 2023 must be submitted to P&A Group by electronic claim upload, fax or mail by March 31, 2023.

HEALTH CARE FSA

You can submit claims for expenses incurred between January 1, 2022 – December 31, 2022 if you remain in the plan for all of 2022. After December 31, 2022, unused funds will be rolled over into the 2023 plan year, provided you have a minimum balance of $25. If you have a rollover from your 2022 account and re-enroll in the 2023 plan, your NCFlex Convenience card will reduce any remaining balance from your 2023 account balance first, then the 2022 FSA carry forward account.

12. Can I check my claim status online? What is the web address and how do I log on?

Yes, you can check your claim status and view account details online when you log into your account at ncflex.padmin.com. (If this is your first time logging in, click the "first time logging in" hyperlink to set up your unique login credentials.) You can also receive claim status updates through text messages by updating your account profile with your mobile number. Once completed, text the code CLM to the number 70626 and receive a text message with your claim update.

13. What will the turnaround time be for claims processing?

P&A Group processes claims 24 hours a day/7 days a week. Claims, on average, take 3-5 business days for approval and, pending the availability of funds for the Dependent Day Care FSA, reimbursements are issued to the participants the next business day.

14. What is the HIPAA authorization form and why do I need to fill one out?

This form authorizes another person to have access to your protected health information. If you are unable to contact P&A Group regarding your personal claims information, this completed form will allow P&A Group to share some of that information with your named representative. For instance, let's say that you enroll in the NCFlex Health Care FSA. Your spouse uses the account for an eligible medical expense and later has a question about a claim for the expense. Your spouse contacts the P&A Group about the inquiry. P&A can't speak to your spouse because you have not signed the HIPAA authorization form, which essentially says that the account holder (in this case, you) gives permission for a named representative to inquiry about any claims associated with the account.

Completing this form is important because it allows a designated person to speak on your behalf. Please visit ncflex.padmin.com and log into your P&A account to fill out the HIPAA authorization form electronically. This is the fastest and easiest way to submit the form. You can also access the NCFlex HIPAA form at ncflex.org and submit the form via fax or mail to the appropriate vendor.

Claim Reimbursements

15. Is direct deposit mandatory or can a check be issued?

    Direct deposit is a mandatory requirement per the State of North Carolina.

16. Is documentation still required on all Convenience Card purchases?

    No. P&A Group will notify the participant of any NCFlex Convenience Card purchase that needs documentation. If P&A Group does not request documentation from you via mail or e-mail, you do not need to substantiate the Convenience Card purchase. If P&A Group does notify you, please follow the instructions on the letter you receive.

17. Is there a way I can be notified when there's been activity on my account (Convenience Card use, claims status, etc.)?

    Yes, if your e-mail address is provided to P&A Group, notifications are sent to you regarding Convenience Card usage, claim submission, claim denial, claim reimbursement, and periodic account balance statements.

18. I received a notice that a reimbursement was sent to my bank on x/x/xxxx, but when I checked my bank balance online, it wasn't there. Why?

    There could be a few reasons for this. Upon receipt of banking information, P&A Group verifies all banking information and will receive a notice back from your banking institution when the account has been verified. This process may take up to five days. Once this is received from your banking institution, all reimbursements will be sent to you via direct deposit. If your bank account is successfully updated and there is still a delay, it may be a timing delay of when your banking institution processes funds from P&A Group. It may take on average 2-4 days for your banking institution to process funds. If there is a longer delay, you may contact P&A Group, who will contact your banking institution.

19. If I need to re-pay the plan for an ineligible expense, where do I send my NCFlex Convenience Card repayments?

    P&A Group, Attention: State of North Carolina FSA Plan
    17 Court Street, Suite 500
    Buffalo, NY 14202

    Make checks payable to P&A Group. Please include a copy of the NCFlex Convenience Card letter with your repayment.

P&A Group Contact Information

- Customer service hours are Monday – Friday, 8:00 a.m.- 10:00 p.m. EST.
- Website: ncflex.padmin.com | Participant Support Specialists: (716) 362-5595 or (866) 916-3475
- Receive your account balance via text message. Update your P&A online profile with your mobile number by logging into your account, and then text the word BAL to the number 70626.