WHY JOIN FLEX?

SAVE MONEY!

A Flexible Spending Account (FSA) offers you an easy way to reduce your taxes. When you participate in an FSA, you are only taxed on the income left over after you have paid certain out-of-pocket healthcare and daycare expenses. An FSA provides valuable benefits and tax savings since many of your normal expenses can be paid with pre-tax money!

THE TAX SAVINGS ARE SIGNIFICANT

Money withheld for the FSA is not subject to Federal and State income taxes and Social Security Tax. By adding these three tax brackets together, you will find that your tax savings can be as great as 40% of the amount contributed to the FSA.

<table>
<thead>
<tr>
<th>Enrolling in an FSA Can Save You Money</th>
<th>FSA</th>
<th>NO FSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Income (before taxes)</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
<tr>
<td>Pretax Medical FSA Contribution</td>
<td>($2,440)</td>
<td>$0</td>
</tr>
<tr>
<td>Pretax Dependent Care FSA Contribution</td>
<td>($5,000)</td>
<td>$0</td>
</tr>
<tr>
<td>Taxable Income</td>
<td>$42,560</td>
<td>$50,000</td>
</tr>
<tr>
<td>Estimated Taxes (27%)</td>
<td>$11,491</td>
<td>$13,500</td>
</tr>
<tr>
<td>Available Income</td>
<td>$38,509</td>
<td>$36,500</td>
</tr>
<tr>
<td>ESTIMATED SAVINGS</td>
<td>$2,009</td>
<td></td>
</tr>
</tbody>
</table>

Actual savings will depend on your income, how much you contribute into the FSA, your tax bracket, and how you file your taxes (single, married, etc.).

FLEX ISN’T JUST FOR YOU, IT’S FOR THE WHOLE FAMILY!

You can include expenses for you, your spouse, your qualified tax dependents as well as your adult children (through December 31st of the year in which he or she turns 26). Their expenses are eligible for the FSA even if they aren’t enrolled in your employer’s health coverage.

COMMON ELIGIBLE MEDICAL EXPENSES INCLUDE:

- Insurance: co-pays, deductible, co-insurance
- Medical: medical doctor fees, office visit charges, annual physical exams, x-rays, lab fees
- Vision: vision exams, frames and lenses, including prescription sunglasses, contact lenses, LASIK eye surgery
- Medicines and drugs: Prescription and Over-The-Counter (see below)
- Dental: exams, x-rays, fillings, false teeth, retainers, caps, crowns, orthodontia, implants
- Chiropractors / Acupuncturists

COMMON ELIGIBLE OVER-THE-COUNTER (OTC) MEDICAL SUPPLIES:

- Contact lens solution
- Insulin & diabetic supplies
- Band-aids/bandages
- Reading glasses
- Birth control products and pregnancy tests
- Supports/braces (e.g. ankle, knee, wrist, therapeutic gloves)

A comprehensive list of eligible and non-eligible FSA/HSA expenses can be found at: http://24hourflex.com/eligible-fsa-expenses

“I SAVED OVER $2,000!”
DEPENDENT CARE:
A Dependent Care Account helps you save money on daycare expenses for dependent children and adults so you can work. Qualifying dependents include children under the age of 13, whom you claim as a dependent on your federal income tax return (special rules apply for divorced parents), a disabled spouse, and any other dependent on your tax return who resides with you and is physically or mentally disabled. Be sure to budget for Health Care Account & Dependent Care Account expenses separately. Elections to, and reimbursement from, these accounts cannot be blended. Also the “use it or lose it” provision applies. Expenses must be incurred during the period of time you are a participant in the Dependent Care Plan, and any amounts remaining in your accounts at the end of the plan year will be forfeited.

COMMON ELIGIBLE DEPENDENT CARE EXPENSES:
The following dependent care expenses are eligible when you and your spouse, if applicable, are working.
- Pre-school expenses for dependent child
- Daycare for a child under the age of 13
- Before and after school expenses for a dependent child

INELIGIBLE EXPENSES:
- Kindergarten tuition
- Teeth whitening products
- Resident/overnight camps
- Mouthwash, toothpaste/brushes & floss
- Hair re-growth

ITEMS THAT DO NOT QUALIFY FOR REIMBURSEMENT UNDER AN FSA/HSA PLAN:
- Elective cosmetic surgery
- Teeth whitening products
- Kindergarten tuition expenses
- Resident/overnight camps
- Mouthwash, toothpaste/brushes & floss
- Hair re-growth

COMMON ELIGIBLE OVER-THE-COUNTER (OTC) DRUGS AND MEDICINES REQUIRING AN RX, DOCTOR’S NOTE, OR THE 24HOURFLEX FORM:
- Cold, flu, allergy and sinus medications (throat lozenges)
- Pain relievers (Aspirin, Excedrin, Tylenol, Advil, Motrin)
- Acne medications
- Acid controllers
- Anti-gas products
- Sleep aids & sedatives

ITEMS THAT DO NOT QUALIFY FOR REIMBURSEMENT UNDER AN FSA/HSA PLAN:
- Cold, flu, allergy and sinus medications
- Pain relievers (Aspirin, Excedrin, Tylenol, Advil, Motrin)
- Acne medications
- Acid controllers
- Anti-gas products
- Sleep aids & sedatives

ITEMS THAT DO NOT QUALIFY FOR REIMBURSEMENT UNDER AN FSA/HSA PLAN:
- Elective cosmetic surgery
- Teeth whitening products
- Kindergarten tuition expenses
- Resident/overnight camps
- Mouthwash, toothpaste/brushes & floss
- Hair re-growth

Shop through thousands of FSA/HSA eligible items online at http://24hourflex.com/fsastore/ and receive $5 off a purchase of $50 or more with promo code 24EG5

Thousands of FSA Eligible Products Online

FSA Store
THE FLEXIBLE SPENDING ACCOUNT SITE

www.24HourFlex.com
ENROLLING IS EASY!

1. You must be eligible for the plan
2. Decide which Spending Account(s) you want to participate in — the Medical FSA and/or the Dependent Care FSA
3. Complete your employer’s Benefit Enrollment Form or online enrollment

It’s important to understand your company’s Medical FSA plan when making your annual election. Read your Summary Plan Description carefully to understand the specific terms of your Plan; your rights and benefits under the Plan through your employer.

Your Employer may or may not have elected an IRS grace period extending the claims-incurrence date by 2 ½ months or the $500 Medical Flexible Spending Account carry-over.

If your Employer does not have the $500 Medical FSA carry-over, the “use it or lose it” provision applies, meaning that any account balances left at the end of the plan year will be forfeited.

WHEN CAN I ENROLL?
You may enroll in the FSA...
- During your employer’s annual open enrollment. You must enroll no later than the last day of the open enrollment.
- When you become eligible for benefits.
- During the plan year if you or an eligible family member has a qualifying change in status (birth, marriage, divorce, etc.) that creates a special open enrollment.

GETTING PAID IS EASY

HOW DO I ACCESS MY FUNDS?
The 24HourFlex Debit Card provides a convenient way to pay for eligible out-of-pocket medical expenses for you and your family. The IRS has regulations regarding where the card can be used and when follow-up documentation is required.

BENEFITS OF THE 24HOURFLEX CARD
- Immediate access to the funds in your FSA plan.
- The 24HourFlex Card allows you to pay your co-payments and deductibles using the Card. Co-payments will auto-approve, meaning no further receipts will be required.

DIRECT DEPOSIT
Sign up for direct deposit at www.24Hourflex.com and receive reimbursements directly to your bank account.

SAVING RECEIPTS IS IMPORTANT

HOW DO I SUBMIT MY RECEIPTS TO 24HOURFLEX?
24HourFlex will contact you by email, text or letter when a card transaction requires verification with directions to your online account for detailed information. The required receipts can be submitted securely and be matched properly to your account by uploading them online or by downloading the mobile app.

Acceptable receipts must include:
- Date of service
- Service performed
- Vendor providing the service
- Amount

Credit card authorization is not a valid receipt.

To receive the fastest reimbursement for an eligible out-of-pocket expense, file a claim by logging in to your account at www.24Hourflex.com. Supporting receipts and documentation can be uploaded directly in your account.

Read your Summary Plan Description (SPD) carefully to understand the specific terms of your Plan. The Plan Document governs your rights and benefits under each Plan and is available through your employer.
NO RECEIPTS REQUIRED

When you use your card to purchase FSA-eligible items at a merchant with an IRS compliant inventory approval system, no receipts will be required to be submitted. Thousands of merchants have installed this inventory approval system and more merchants are being added all the time. Please check our website www.24HourFlex.com for the latest list.

- Albertsons – SuperValu
- COSTCO
- CVS
- FSAsstore
- King Soopers/City Market
- Kroger
- Safeway
- Sam’s Club
- Target
- Walgreens
- Wal-Mart
- VisionDirect.com
- Vons

The 24HourFlex Card provides secure, 24-hour access to your flex account through our website, www.24HourFlex.com

DO I STILL NEED TO KEEP AND SUBMIT MY RECEIPTS?

Yes, you will need to submit copies of your receipts to 24HourFlex unless the charge equals the exact amount of one of your healthcare providers’ co-payment amounts, is a pre-approved repetitive expense, or the merchant has an IRS-compliant inventory approval system in place. 24HourFlex will notify you in writing when a receipt is required to be submitted. It is a good idea to retain all your receipts!

DO I CHOOSE DEBIT OR CREDIT AT THE CREDIT CARD TERMINAL WHEN I USE MY CARD?

Choose “credit” when making eligible purchases.

WHAT IF THE DOCTOR’S OFFICE, OR SOME OTHER PROVIDER, DOESN’T TAKE CREDIT CARDS?

In this instance, you will pay the provider with cash or a check and then submit a Claim Form to 24HourFlex for reimbursement. Easily complete a claim form by signing into your account at www.24HourFlex.com. Specific instructions on submitting your claim(s) are also provided.

DOESN’T 24HOURFLEX ALREADY KNOW WHAT I PURCHASED ON THE 24HOURFLEX CARD?

No. 24HourFlex knows only the date, amount, and place of the transaction. A description of the purchased item is not captured by the card vendor or 24HourFlex, and is not given to 24HourFlex.

CAN I CHANGE MY FLEXIBLE SPENDING ACCOUNT ELECTION MID-YEAR?

In general, once the plan year has started an election may not be changed unless there is a status change event. Status change events as defined by the IRS include:

- Change in legal marital status
- Judgments, decree or court order
- Entitlement to or loss of Medicare or Medicaid
- Dependent satisfies or ceases to satisfy eligibility requirements
- Special requirements related to Family Medical Leave Act (FMLA)
- Entitlement to COBRA
- Change in employment status that affects eligibility for coverage
- HIPAA Special Enrollment Rights
- Change in residence that affects eligibility for coverage

There are special rules for making mid-year election changes for Dependent Care FSA accounts.
ESTIMATE YOUR EXPENSES
PLANNING WORKSHEET

This worksheet will help you determine how much your medical and dependent expenses may be during the upcoming plan year.

MEDICAL, DENTAL & VISION EXPENSES
NOT COVERED BY INSURANCE

<table>
<thead>
<tr>
<th>Expense</th>
<th>Annual Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deductible</td>
<td>$______________</td>
</tr>
<tr>
<td>Co-pays</td>
<td></td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td></td>
</tr>
<tr>
<td>OTC Medicines*</td>
<td></td>
</tr>
<tr>
<td>Chiropractic Treatments</td>
<td></td>
</tr>
<tr>
<td>Medical Equipment (crutches, oxygen, etc)</td>
<td></td>
</tr>
<tr>
<td>Dental Checkups/Cleanings</td>
<td></td>
</tr>
<tr>
<td>Annual Deductible</td>
<td></td>
</tr>
<tr>
<td>X-rays, Fillings, Root Canals</td>
<td></td>
</tr>
<tr>
<td>Crowns</td>
<td></td>
</tr>
<tr>
<td>Implants</td>
<td></td>
</tr>
<tr>
<td>Dentures</td>
<td></td>
</tr>
<tr>
<td>Exams</td>
<td></td>
</tr>
<tr>
<td>Eyeglasses and/or Reading Glasses</td>
<td></td>
</tr>
<tr>
<td>Contact Lenses</td>
<td></td>
</tr>
<tr>
<td>Contact Lens Solution</td>
<td></td>
</tr>
<tr>
<td>Corrective Eye Surgery (LASIK, PRK, cataract)</td>
<td></td>
</tr>
<tr>
<td>Hearing Exams, Hearing Aids</td>
<td></td>
</tr>
<tr>
<td>Other:________________</td>
<td></td>
</tr>
</tbody>
</table>

TOTAL MEDICAL CARE EXPENSES: $______________

DEPENDENT CARE EXPENSES $______________

TOTAL MEDICAL AND DEPENDENT CARE EXPENSES: $______________

*Most OTC medicines or drugs are ineligible unless prescribed.

OVER THE COUNTER PRESCRIPTION MEDICATION TEMPLATE:

- Form to be completed by physician found at:
  http://24hourflex.com/forms-and-resources/

VIEW YOUR ACCOUNT ONLINE 24/7 VIA 24HOURFLEX.COM

WHILE ONLINE, YOU CAN:

- SUBMIT CLAIMS online and use the easy step-by-step process
- UPLOAD RECEIPTS online
- SEE YOUR SPENDING categories (medical, pharmacy, vision, etc.)
- VIEW ACCOUNT BALANCE and claims history
- VIEW SAVINGS by setting your tax rate
- SIGN UP for text and email notices
- ORDER ADDITIONAL DEBIT CARDS
- ADD DIRECT DEPOSIT for quick reimbursement
- VIEW ELIGIBLE EXPENSES and non-eligible expenses

24HOURFLEX MOBILE APP

Register online at www.24HOURFLEX.COM to use the mobile app.

DOWNLOAD THE FREE MOBILE APP ON YOUR PHONE OR TABLET: (Android or iPhone)

- Take a picture from your phone to upload receipts
- Submit a claim
- Check account balance
- See contribution details
- View notifications

IT’S REALLY THAT SIMPLE!
WHO IS 24HOURFLEX?

EXPERTS WHO CARE

“"I just wanted to write to you to give a HUGE compliment to Jessica. She was extremely helpful AND friendly. She was very knowledgable about everything and knew exactly what I was talking about every step of the way. It truly was a pleasure to talk with her. After finding out she had only been there for 3 weeks, I was even MORE impressed. :) Thank you!”

24HourFlex Participant

“"Good morning Stephen,
I wanted to let you know what great customer service you give and being sufficient in what you do. You have always shown competency and made me feel you were concerned about my situation and I just want to say THANKS! Have a Fabulous Day!!!”

24HourFlex Participant

WEB ACCESS FEATURES

LEARNING CENTER

VISIT THE 24HOURFLEX WEBSITE AT 24HOURFLEX.COM

- Helpful Videos
  - Website Features
  - How to File a Claim Online
  - Why Do You Ask for Receipts?
  - 24HourFlex Mobile App
  - Mobile Expense Tracker Overview

- Tax Savings Calculator
- Eligible Medical and Dependent Care Expenses
- Why Enroll in a Flex Plan
- FSA Store Link

NEED MORE INFORMATION?

CUSTOMER SERVICE

VISIT:

WWW.24HOURFLEX.COM

CALL:

800-651-4855

FAX:

800-837-4817

7a.m. to 6p.m. (Mountain Time)

EMAIL:

INFO@24HOURFLEX.COM

LIVE CHAT ONLINE