

20-15

OFFICE OF THE COUNTY EXECUTIVE ALL-EMPLOYEES MEMORANDUM

DATE: December 11, 2015

PRE-TAX FLEXIBLE BENEFITS PROGRAM

ENROLLMENT EXTENDED THROUGH DECEMBER 22, 2015

This is your final opportunity to enroll in the Pre-Tax Flexible Benefits Program for 2016. Enrollment for participation in the 2016 plan year has been extended through December 22, 2015. New enrollments cannot be accepted after that date. Employees currently in the program must re-enroll if they wish to continue to participate in 2016.

Section 125 of the Internal Revenue Code allows employees to voluntarily direct a portion of their salary, pre-tax, to pay for health and dependent care expenses not covered by an existing health, dental or child care plan. Depending on the individual's tax status, the tax savings for most participating employees ranges between 28% and 42% for each dollar channeled through the program. For Suffolk County employees this program is referred to as Suffolk F-L-E-X.

What Can You Do With the Pre-Tax Flexible Benefits Program?

Below are some of the programs available to you under the Pre-Tax Benefits Program. Please visit the Pre-Tax Flexible Benefits website at www.flexbene.com for a more in-depth description of each available benefit and to view the Summary Plan Description.

1. Health Insurance Benefits Contributions

If you previously chose not to participate in the Health Insurance Benefits Contributions and wish to participate in 2016, please contact the Employee Benefits Unit via e-mail at ebu@suffolkcountyny.gov to obtain the "Suffolk County Pre-Tax Health Insurance Benefits Contribution Enrollment Form".

All new employees required to contribute a percentage toward their health benefits will be able to pay for their share of the contributions with pre-tax dollars by completing a "Suffolk County Pre-Tax Health Insurance Benefits Contribution Enrollment Form". You will not be required to submit claim forms or request reimbursements to obtain the pre-tax savings. This is not a reimbursement account; your savings are AUTOMATICALLY included in your paycheck. **This will go into effect ONLY if you authorize this pre-tax deduction on the enrollment form or in the on-line box for "Suffolk Health Insurance Benefits Contributions".**

If you choose **not** to participate in the Health Insurance Benefits Contributions Plan prior to your effective date for health benefits, you will not be able to enroll until the next Open Enrollment Period, with an effective date of January 1st of the following year.

2. Medical Flexible Spending Account

Beginning January 1, 2016, the Health Care Reform legislation limit for medical flexible spending account plans increased to a \$2,550 maximum contribution per enrollee. The plan allows an employee to “rollover” up to \$500 of unused **medical flexible spending account dollars** from the previous year to the current year **provided that you enroll for the following year.** No more than \$500 of “rollover” dollars can be carried forward from year to year. Your salary deduction amount must be at least \$1 per payroll for unreimbursed medical, dental and vision expenses in order to rollover remaining funds. **Failure to fill out a 2016 Enrollment Form will result in a loss of excess funds from 2015.**

Eligible Health Expenses

This pre-tax reimbursement program covers many health care services that are not covered by our current medical plan, like plan deductibles, unreimbursed doctor/drug co-payments, partially reimbursed dental bills, optical bills, Lasik eye surgery, contact lenses and solutions. Please note that cosmetic procedures of any kind **are not** covered.

Over-the-counter medications and drugs (except insulin) used to treat an illness or condition are eligible for pre-tax reimbursement **ONLY** with a valid prescription.

Preventive items such as vitamins and supplements prescribed for a particular medical condition are eligible for pre-tax reimbursement.

Your dependents are eligible for coverage under the Unreimbursed Medical, Dental and Vision Care program through age 26 regardless of their financial dependence on you, residency with you, marital status, student status or employment status. *Please be sure to list this dependent on your enrollment form if you choose to cover him/her under your Flex Plan.*

3. Coverage for Dependent Care Expenses

Dependent Care, including both childcare and elder care, continues to be eligible for pre-tax reimbursement if such care is required so that you and your spouse may continue to work, or go to school. A maximum of \$5,000 per family household is eligible. Please see the Summary Plan Description for more information.

4. Adoption Assistance

Beginning January 1, 2016, the adoption assistance limit increased to \$13,400. Please see the Summary Plan Description for more information.


Claims

Participants are able to file claims electronically or by mail. If you file your claims electronically, you must fax or email copies of receipts to M.A. Services, our third-party administrator. You may complete a DIRECT DEPOSIT AUTHORIZATION FORM to receive your reimbursements as an electronic transfer of funds DIRECTLY from the Plan to your designated checking or savings account. If you choose electronic funds transfer, you will receive an e-mail notice of your reimbursement statement and the date that your reimbursement will appear in your account. This is the quickest method of reimbursement.

Forfeitures

The Pre-Tax Flexible Benefits Program is operated in accordance with Federal IRS regulations. Therefore, funds allocated by a member for a certain benefit during the Plan Year and not totally utilized will remain in the comingled benefit account. This balance is forfeited to the Plan and not reimbursable directly to the member who forfeited it.

If you are interested in enrolling in the Program or would like additional information, please contact M.A. Services by telephone at 1-800-836-8100, 631-863-8887 or via email at info@flexbene.com. You may also contact the Employee Benefits Unit, S.C. Department of Civil Service/Human Resources, Division of Employee Services, via email at ebu@suffolkcountyny.gov or via telephone at 631-853-4868.



Dennis M. Cohen
Chief Deputy County Executive

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