



MARATHON COUNTY

Flexible Spending Account (FSA)

Important Plan Information

01/01/2024 – 12/31/2024 Plan Year

ENROLLMENT METHOD:

Data Feed

See your Human Resources Department for enrollment instructions.

MAXIMUM ELECTION AMOUNT:

Health Care FSA: \$3,200

Dependent Care FSA: \$5,000

(Note: Group insurance premiums are deducted pre-tax automatically. Contact your employer's benefits representative if you have questions.)

FSA DEDUCTIONS:

26 FSA Deductions – Bi-Weekly

(Your plan year election will be divided by the number shown above.)

FSA CARRYOVER:

Your FSA plan allows you to carryover unused funds from your Health Care FSA to be spent in the next plan year. **A maximum of \$640 can be carried over into the 2025 plan year.**

RUNOUT PERIOD:

You will have until **03/31/2025** to **submit** claims for expenses **incurred** during the **2024** Plan Year.

Termination Runout Period: You have 90 days from your termination date to submit claims for expenses incurred during your employment.

REIMBURSEMENTS:

Reimbursement Schedule

Eligible claims received Friday by 9:00 a.m. will have reimbursements released the following Friday.

Reimbursement Method

Mandatory Direct Deposit

Please complete a direct deposit form and attach a voided check with your FSA enrollment form.

CLAIM EMAIL NOTIFICATIONS:

Email notifications will be sent to inform you of claims processed, reimbursements issued or requests for additional information needed to process your claims. By providing your email address, you will automatically receive these notifications.

ONLINE ACCOUNT ACCESS:

You may view account details including balance, claims and reimbursements via the DBS phone app or online at dbsbenefits.com.

You will need the following PIN to create an online account if you have not done so already: **Marathon**