



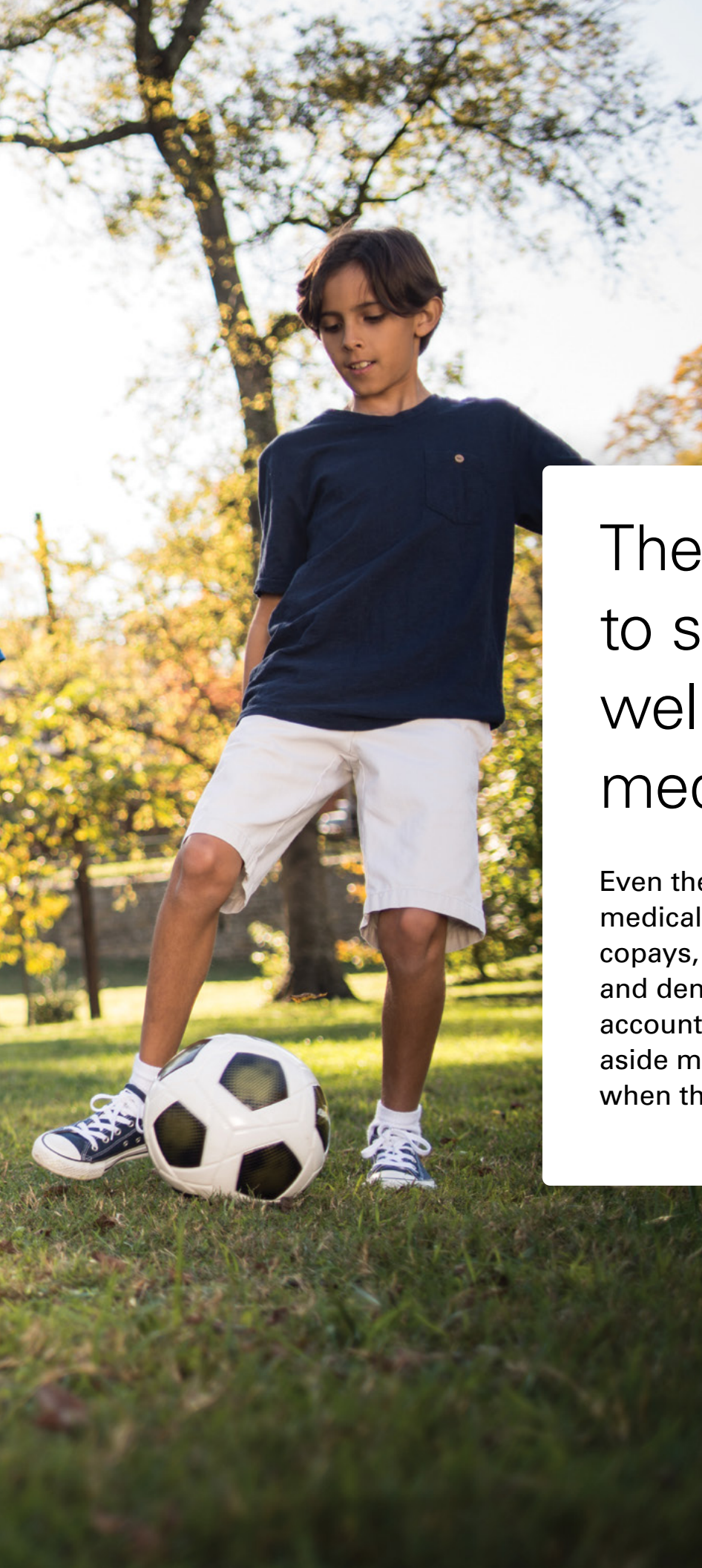
HEALTH CARE FUNDING GUIDE

# Your HealthCare FSA



A flexible spending account for wellness and medical expenses





## The easy way to save for your wellness and medical expenses

Even the healthiest families have medical expenses each year — like copays, prescriptions, new glasses and dental costs. A flexible spending account (FSA) is perfect for setting aside money to pay for those costs when they come around.



# What's an FSA?

An FSA lets you set aside money to pay for health care expenses. It can help you save money because you fund it with pre-tax dollars.

**With a HealthCare FSA, you can:**

- › Take pre-tax dollars from your paycheck to fund your FSA.
- › Reduce your taxable income and save on taxes.
- › Have money on hand for your health and medical needs.

# What you should know about a HealthCare FSA



## What can you use it for?

You'll want to be careful to only use your FSA money on health care expenses like:

- › Deductibles
- › Copays
- › Coinsurance
- › Dental and vision care
- › Glasses, contact lenses, braces and hearing aids
- › Prescription drugs
- › Over-the-counter medications



## Making changes

You can only change your contribution amount if you have a big life event or family status change, like:

- › Marriage
- › Divorce
- › Birth
- › Adoption
- › A job change



## How much to set aside

To help you guess what you'll use, start by reviewing your health care expenses (including dental and vision costs) for the past two years.

Use your Personal Health Statements from your account at **[bcbst.com/spendingaccounts](https://bcbst.com/spendingaccounts)**. They give you full details of all your health care claims and expenses, including dental and vision, for the past two years.



## Be sure to use your funds each year.

Only set aside as much money as you'll spend on health expenses for one year. While the IRS allows you to contribute up to \$3,300 in 2025 and \$3,400 in 2026, HealthCare FSA funds don't carry over to the next year unless your employer has told you differently.

# How HealthCare FSAs work

## Funding Your FSA

- 1 Decide how much money you want to put in the FSA (up \$3,300 in 2025 and \$3,400 in 2026).
- 2 Ask your employer to withhold a portion of that amount each pay period, which will go into your FSA before taxes.
- 3 Use your FSA funds throughout the year to pay for qualified health care expenses.
- 4 Remember, your FSA funds don't carry over from year to year, so make sure you spend all of your money by the end of the year.

## Using your FSA

- 1 Visit a provider in your network.
- 2 Pay the provider for your care.
- 3 The provider will submit a claim to us.
- 4 We'll automatically reimburse you from your FSA. If you want more control over your FSA, you can manually file claims for the expenses you want the FSA to cover.

You can easily check your claims and FSA balance anytime by logging in to **[bcbst.com/spendingaccounts](https://www.bcbst.com/spendingaccounts)**.

# Here's an example of how you save with an FSA

John estimates that his family will spend at least \$3,400 for copays, deductibles, out-of-pocket drug costs, eyeglasses and braces for his daughter. Funding an FSA will help him pay for care with pre-tax dollars.

## How John Saves



John's expenses are the same with or without an FSA, but by funding a HealthCare FSA with pre-tax dollars, he saves **\$850**.

	<b>With an FSA</b> (pre-tax dollars)	<b>Without an FSA</b> (after-tax dollars)
<b>Annual Earnings</b>	\$ 30,000	\$ 30,000
<b>Pre-Tax Contribution</b>	<b>\$ 3,400</b>	
<b>Taxable Income</b>	\$ 26,600	\$ 30,000
<b>Taxes*</b>	\$ 6,650	\$ 7,500
<b>Take-Home Pay</b>	\$ 19,950	\$ 22,500
<b>Health Care Costs</b>		<b>\$ 3,400</b>
<b>Spendable Income</b>	\$ 19,950	\$ 19,100
<b>JOHN'S SAVINGS</b>	<b>\$ 850</b>	

\*Based on a 25% tax rate (includes federal, state and Social Security/FICA)

BlueCross BlueShield of Tennessee (BlueCross) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex<sup>1</sup>. BlueCross does not exclude people or treat them less favorably because of race, color, national origin, age, disability or sex.

BlueCross:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as: (1) qualified sign language interpreters and (2) written information in other formats, such as large print, audio and accessible electronic formats.
- Provides free language assistance services to people whose primary language is not English, such as: (1) qualified interpreters and (2) information written in other languages.

If you need these reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711).

If you believe that BlueCross has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance ("Nondiscrimination Grievance"). For help with preparing and submitting your Nondiscrimination Grievance, contact a consumer advisor at the number on the back of your Member ID card or call 1-800-565-9140 (TTY: 1-800-848-0298 or 711). They can provide you with the appropriate form to use in submitting a Nondiscrimination Grievance. You can file a Nondiscrimination Grievance in person or by mail, fax or email. Address your Nondiscrimination Grievance to: Nondiscrimination Grievance; c/o Manager, Operations, Member Benefits Administration; 1 Cameron Hill Circle, Suite 0019, Chattanooga, TN 37402-0019; (423) 591-9208 (fax); Nondiscrimination\_OfficeGM@bcbst.com (email).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

You can contact BlueCross's Nondiscrimination Coordinator at 423-535-1010 (TTY: 1-800-848-0298 or 711); Nondiscrimination\_CoordinatorGM@bcbst.com (email); or Corporate Compliance, 1 Cameron Hill Circle, 1.4, Chattanooga, TN 37402.

This notice is available at BlueCross's website: [bcbst.com](http://bcbst.com).

BlueCross BlueShield of Tennessee, Inc., an Independent Licensee of the BlueCross BlueShield Association.

BlueCross BlueShield of Tennessee is a Qualified Health Plan Issuer in the Health Insurance Marketplace.

<sup>1</sup> Consistent with the scope of sex discrimination described at 45 CFR 92.101(a)(2))

ATTENTION: If you speak English, free language assistance services and appropriate auxiliary aids and services are available to you. Please call the Member Service number on the back of your Member ID card or 1-800-565-9140 (TTY: 1-800-848-0298).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma, así como ayudas y servicios auxiliares adecuados. Llame al número de Servicio de atención a miembros que figura en el reverso de su tarjeta de identificación de miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

اتباه: إذا كنت تتحدث العربية، فستوفر لك خدمات المساعدة اللغوية المجانية والخدمات والأدوات المساعدة المناسبة. يرجى الاتصال برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو الخاص بك أو بالرقم (1-800-848-0298) (الهاتف النصي: 1-800-565-9140)

注意: 如果您說中文，我們提供免費的語言協助服務，以及適當的輔助協助和服務。請撥打會員ID卡背面的會員服務部號碼或 1-800-565-9140 (聽障專線 (TTY): 1-800-848-0298)。

LƯU Ý: Nếu quý vị nói tiếng Việt, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các dịch vụ và công cụ hỗ trợ phù hợp. Vui lòng gọi đến số của bộ phận Dịch vụ Hội viên ở mặt sau Thẻ ID Thành viên của quý vị hoặc số 1-800-565-9140 (TTY: 1-800-848-0298).

주의: [한국어]를 사용하시는 경우, 무료 언어 지원 서비스 및 적절한 보조 기구와 서비스가 제공됩니다. 가입자 ID 카드 뒷면의 가입자 서비스 전화번호 또는 1-800-565-9140(TTY: 1-800-848-0298)번으로 전화하시기 바랍니다.

ATTENTION : Si vous parlez français, des services gratuits d'assistance linguistique et des aides et services auxiliaires appropriés sont à votre disposition. Veuillez appeler le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ເອົາໃຈໃສ່: ຖ້າທ່ານເວົ້າພາສາ ພາສາລາວ, ມີການບໍລິການ ຊ່ວຍເຫຼືອດ້ານພາສາ ແລະ ການຊ່ວຍເຫຼືອ ແລະ ການບໍລິການທີ່ ເໝາະສົມໃຫ້ທ່ານ. ກະລຸນາໃບຫາມາເປື່ອງຜ່ານບໍລິການສະມາຊິກ ທີ່ມີຢູ່ດ້ານຫຼັງບັດ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማሰጠንዘን: አማርኛ የሚናገሩ ከሆኑ፣ ነጻ የቋንቋ እርዳታ አገልግሎቶች እና ተገቢ ረዳት መርጫዎች እና አገልግሎቶች እርስዎ ይገኛሉ። በአባልነት መተዋወቅዎ ጀርባ ላይ በሚገኘው ይገባሉት አገልግሎት ቁጥር ወይም 1-800-565-9140 (TTY: 1-800-848-0298) ይደውሉ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzen und geeignete Hilfsmittel und Dienstleistungen zur Verfügung. Bitte rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

ध्यान आपो: जो तमे गुजराती भाषी छी, तो तमारा माटे निःशुल्क भाषा सहायता सेवाओ अने योग्य सहायक साधनो अने सेवाओ उपलब्ध छी. कृपया इतिहास तमारा सभ्य ID कार्ड-नी पाछवना सभ्य सर्वांस नंबर उपर अथवा 1-800-565-9140 (TTY: 1-800-848-0298) पर कॉल करी.

お知らせ：日本語をお話しになる場合は、無料の支援サービスと適切な補助器具・サービスがご利用いただけます。会員IDカードの裏面に記載の会員サービス番号あるいは1-800-565-9140 (TTY: 1-800-848-0298)まで、お電話にてご連絡ください。

PANSININ: Kung kayo ay nagsasalita ng Tagalog, magagamit para sa inyo ang libreng mga serbisyong tulong sa wika at kaukulang mga karagdagang tulong at mga serbisyo. Mangyaring tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng inyong Kard ng ID ng Miyembro o sa 1-800-565-9140 (TTY: 1-800-848-0298).

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएँ और उपयुक्त सहायक साधन और सेवाएँ उपलब्ध हैं। कृपया अपने सदस्य ID कार्ड के पीछे दिए गए सदस्य सेवा नंबर या 1-800-565-9140 (TTY: 1-800-848-0298) पर कॉल करें।

ВНИМАНИЕ! Если Вы говорите по-русски, Вам будут предоставлены услуги языковой поддержки и соответствующие вспомогательные средства и сервисы на бесплатной основе. Позвоните в отдел обслуживания участников по номеру, указанному на обратной стороне Вашей идентификационной карты участника, или по номеру 1-800-565-9140 (TTY: 1-800-848-0298).

توجه: اگر به زبان فارسی صحبت می کنید، خدمات کمک زبانی رایگان و مساعدت ها و خدمات کمکی مناسب در دسترس شما هستند. در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت عضویت خود یا (TTY: 1-800-848-0298) 1-800-565-9140 تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, genyen sèvis asistans gratis pou lang ansanm ak ed pou sèvis oksilyè apwopriye k ap disponib pou ou. Tanpri rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Osoby posługujące się językiem polskim mogą bezpłatnie skorzystać z pomocy językowej oraz rozwiazań i usług pomocniczych. Prosimy zadzwonić pod numer działu obsługi ubezpieczonych podany na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se você fala Português, serviços gratuitos de assistência linguística e recursos e serviços auxiliares apropriados estão disponíveis para você. Ligue para o número de telefone do serviço de Atendimento ao Membro informado no verso de seu cartão de identificação de membro ou para 1-800-565-9140 (TTY: 1-800-848-0298).

ATTENZIONE: se parla italiano, sono disponibili per Lei servizi gratuiti di assistenza linguistica nonché aiuti e servizi ausiliari adeguati. Chiami il numero del Servizio per i membri riportato sul retro della Sua scheda identificativa del membro oppure il numero 1-800-565-9140 (TTY: 1-800-848-0298).

BAA'áKOHWIINIDZIN: Diné bizaad bee yáanii'ti'go, t'áá jiik'eh saad bee áka'aná'awo' bee áka'anida'awo'í dóó t'áadoole'e binahj'í bee adahodoon'íigíí diné bich'í' anidahazt'í'í bee bika'aanida'awo'í ná dahóló. T'áá shóódí Bii' Ha'dít'éhí Bika'aná'awo' Bii' Ha'dít'éhí ID naaltsoos nit'í'ziz bine'déé' binámboo bee hodilniiln doodago 1-800-565-9140 (TTY: 1-800-848-0298).

WICHDICH: Wann du Deutsch schwetzschst un brauchschst Hilf fer communicat-e kenne mer dich helfe unni as es dich ennich eppes koschde zell. Mir kenne differnti Sadde Schprooch-Hilf beigrige aa fer nix. Ruf der Member Service Number uff die hinnerscht Seit vun dei Member ID Card uff odder 1-800-565-9140 (TTY: 1-800-848-0298).

FAASILASILAGA: Afai e te tautala i le faa-Samoa, o loo avanoa mo oe auanaga fesoasoani mo gagana e aunoa ma se totogi faapea ma fesoasoani fa'aopo'opo ma auanaga talafeagai. Faamolemole vala'au le numera o le Member Service (Auanaga mo Tagata Auai) o lo'o i tua o lau pepa ID o le Member (Tagata Auai) po o le 1-800-565-9140 (TTY: 1-800-848-0298).

GAKIULA: Gare iga go kapetal Faluwasch, ye toore paliuwal yamem bwe tepangung rel gamatefal lane kapetal Faluwasch. Fale peshem kol yegilli nampal Member Service ila yelog liugul tagurul Member ID kard la yam gare 1-800-565-9140 (TTY: 1-800-848-0298).

ATENSION: Guaha setbisio siha para hágu yanggen finfino' CHamorú hao, dibátde na setbision inayudon fumino' CHamorú yan propriu na inasisten trástes yan setbisio siha. Put fabot ágang i numiron Setbision Membro gi santatten i kattá-mu Member ID pat 1-800-565-9140 (TTY: 1-800-848-0298).

For additional details and forms, including a complete list of qualifying expenses, go to **[bcbst.com/spendingaccounts](https://www.bcbst.com/spendingaccounts)**. You may also talk to your tax advisor. If you have specific questions about your BlueCross FSA, your Consumer Coach is ready to help.



Just call **1-800-527-9206**



Email **[ConsumerCoach@bcbst.com](mailto:ConsumerCoach@bcbst.com)**



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