

# Town of Bolton

## Section 125 Flexible Spending Plan Highlights and Enrollment Instructions

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- Start Date: • July 1, 2021
- Plan Year: • July 1 to June 30
- Eligibility: • Union – Based on collective bargaining agreement  
• Non-Union – based on job title  
• Upon date of hire.

*You do not have to be enrolled in your employer's group health plan to enroll in this Flex Spending plan.*

- Annual Elections: • Health Care (HCR): \$130.00 minimum/ \$2,750.00 maximum  
• Dependent Care (DCR): \$130.00 minimum/ \$5,000.00 maximum

- Limited Health Care: • Limited HCR: For you or your spouse enrolled in an HSA. Submit  
IRS HSA minimum deductible is vision & dental claims until the IRS HSA minimum deductible is met.  
\$1400.00 single / \$2800.00 family Once deductible is met all customary HCR expenses are eligible.

- 2 ½ Month Grace Period\*: • Eligible HCR & DCR expenses can be incurred up to 2 ½  
\*The 2 ½ Month Grace Period & Year months following the end of the plan year and applied  
End Run-off Period Run Concurrently to any remaining account balance in the prior plan year.

- Year End 90 Day Run-off Period\*: • Reimbursements can be submitted up to 90 days following the end of  
the plan year.

- Claim Reimbursement: • Processed weekly (\$20.00 minimum reimbursement)

- Reimbursement Type(s): • Check / Direct Deposit /Debit Card (A fee is charged by the debit card  
company for replacement of lost or stolen cards. The fee is the responsibility of the  
card holder and paid for from your account.)

- Plan Year Payroll Deductions: • 26

- Date of 1<sup>st</sup> Deduction: • July 8, 2021

- Your ABS Account Manager is: • Emily at ext. 417 (emily@abs125.com)
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### Here's How to Enroll in Your Section 125 Plan Follow these simple steps:

1. If you meet the eligibility requirements, please complete the Enrollment Form.
2. Estimate your annual reimbursable health-care/dependent-care related expenses using the worksheet on the back of the enrollment form or the FSA calculator on the ABS website.
3. If you use the Dependent Care Auto-Affidavit a new form must be completed for the new Plan Year.

**\*Send completed enrollment form to Lisa Gonsor by May 21, 2021.** \*Enrollment information submitted less than 30 days prior to the start of the new Plan Year may not have cards reloaded or created by the start date.

**Questions? Need Help?** First, read the "How to Save on Medical & Child Care Expenses" employee handbook. If you do not have one, contact Human Resources, visit us on the web at [www.abs125.com](http://www.abs125.com), check out the [ABS Mobile App](#) or call 1-877-732-8125 from 8:00am to 5:00pm E.S.T. Monday through Friday.