



If you choose to participate in this valuable benefit, you, your spouse, and your eligible family members can pay for medical, dental, vision, and dependent care expenses on a tax-free basis. *You are encouraged to review this flier to help determine if you and your family would benefit by enrolling.* Use this guide as a quick reference for questions you may have initially or throughout the year.

**Your Spendable Income** Your spendable income increases when you contribute pre-tax dollars to a 'flexible benefits plan'. You lower your taxable income and you pay fewer taxes which increases your spendable income. Depending on your tax bracket, this plan may save you 25% to 40% in taxes.

### Change in Elections

Once enrolled in the medical plan, you may not change elections. To comply with IRS regulations, you may only make a change in your election at the beginning of each plan year. This means you may not make a change in your elections after the open enrollment period, unless you have a family status change. Examples include marriage, adoption, death, loss of spouse's employment, etc.

### The "Use It or Lose It Rule"

Remember this important rule when deciding how much to place in your account. If you contribute dollars to a reimbursement account and do not use all of the monies you deposit, you will lose any remaining balance in the account at the end of the year. \*\*

### Grace Period Extension/ \$500 Carryover

An additional time period may be allowed to incur expenses or claim reimbursements. Speak with your employer to determine if either of these options is available for your Plan. With either option, qualified expenses will be paid with unused funds from the previous Plan Year.

### Limited Purpose Flex Healthcare Account

Persons participating in a Health Savings Account (HSA) may only have a Limited Purpose Flex Healthcare Account. Only vision and dental expenses may be reimbursed through a Limited Purpose Flex Healthcare Account.

### How Much Should You Budget?

After reviewing the list of qualified expenses (see below), estimate how much you will spend on these expenses during the next Plan Year. For a more extensive list visit [www.fsastore.com](http://www.fsastore.com).

\*\*COBRA laws may apply. For questions about expenses not on this list or for further clarification, please visit our web site or contact us.

## How to submit a Flex Claim

### With your cell phone

Begin by searching "KBSFlex" in the appropriate app store and downloading the app. Login using your username and password from the website

- You will be prompted to set up a 4 digit security code which will serve as your password going forward.
- Click "File a Claim"
- Fill out the appropriate information.
- Click "Upload Receipt" and take a picture of the receipt.
- Click "Add Claim"



FILE A CLAIM ONLINE

### First time login instructions

- Go to <https://kabelparticipant.lh1ondemand.com>
- Under Existing User -
- Your username will be: First name initial, last name, last 4 digits of social security number (example: Name: John Doe Social Security Number 123-45-6789. Username = JDoe6789)
- Your first time password is: changeit
- Click "Login".

OR from any page on the portal, expand the "I want to..." section on the right hand side of the screen.

- The claim filing wizard will walk you through the request including entry of information, payee details and uploading a receipt.
- For submitting more than one claim, click "Add Another", from the Transaction Summary page.
- When all claims are entered in the Transaction Summary, agree to the terms and conditions and click "Submit" to send the claims for processing.
- The Claim Confirmation page displays. You may print the Claim Confirmation Form as a record of your submission. If you did not upload a receipt, you can upload the receipt from this screen or print a Claim Confirmation Form to submit to the administrator with the required receipts.



515-224-9400  
800-300-9691  
flexteam@kabelbiz.com  
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## Frequently Asked Questions

### How can I find out if I have money left in my account?

You can get full account information by visiting the "Home" tab on the consumer portal at <https://kabelparticipant.lh1ondemand.com>.

### What types of documentation are acceptable when submitting reimbursement claims or sending in receipts to verify card use?

We cannot accept debit or credit card receipts, as they do not have all the required information. The documentation needed is a detailed bill or receipt that states the date of service, service provided, name of the service provider, name of the patient and the amount.

### What types of documentation are acceptable when submitting dependent care?

You can either have your dependent care provider sign the claim form or submit a receipt from the provider that contains the dates of care, charge amount, provider name, and child's name. It can be a handwritten receipt.

### What happens if I terminate employment before the end of the Plan Year?

You will have 60 days to seek reimbursement for expenses incurred prior to your termination date. Any funds not spent prior to your termination date are forfeited.

### How do I sign up for direct deposit?

Login to your account on the consumer portal at <https://kabelparticipant.lh1ondemand.com>, click on the "Profile" tab and click "Banking".

### I have not received my check in the mail. How can I get a replacement check sent to me?

If it has been 15 business days since the original check was issued, you can call us at 515-224-9400 and we can have a replacement check direct deposited to your account within 3 business days. If you need a replacement check and you are not set up for direct deposit, we strongly recommend that you sign up on the consumer portal under "Banking" as there is a \$30 fee to reissue a paper check.

### Are over-the-counter medications eligible expenses?

Only if the claim is accompanied by a prescription from your healthcare provider. Many participants take over-the-counter medications regularly for allergies, acid reflux, etc. If that is the case, your healthcare provider may write you a prescription for that medication. A copy of the prescription must accompany each reimbursement claim.

### How is orthodontia reimbursed under the Flex Plan?

IRS rules allow an employee to turn in expenses incurred only during a Plan Year. With orthodontia treatment the down payment can be claimed when incurred. The employee can then claim the monthly payment amount each month. Documentation for the down payment is a copy of the contract from the orthodontist. The documentation needed to pay out a monthly claim is a coupon booklet or a monthly statement from the orthodontist.

### Do I have to pay for my Unreimbursed Medical expenses before I can be reimbursed?

No. You can be reimbursed for the expense as soon as it is incurred.

### I lost my card. How do I report it lost and order a new one?

Login to your account on the consumer portal at <https://kabelparticipant.lh1ondemand.com>, click on the "Profile" tab and click "Banking".

### I need another card. How do I order another one?

Login to your account on the consumer portal at <https://kabelparticipant.lh1ondemand.com>, click on the "Profile" tab and click "Banking".

### Why do I have to submit substantiation for some debit card swipes?

The IRS requires your plan to confirm that the debit card was used for an eligible expense. [For example some dentists and optometrists provide services that are cosmetic, like teeth whitening or non-prescription sunglasses that are not eligible expenses.] To not require substantiation for some claims would jeopardize your plan.

### How do I change my contact information?

Login to your account on the consumer portal at <https://kabelparticipant.lh1ondemand.com> and click on the "Profile" tab.

For a list of eligible expenses, visit [www.kabelbiz.com/Kabel-Eligible-Expenses.pdf](http://www.kabelbiz.com/Kabel-Eligible-Expenses.pdf)