STATE OF CONNECTICUT
OFFICE OF THE STATE COMPTROLLER

MEDICAL FLEXIBLE SPENDING ACCOUNT (MEDFLEX)

2012 PLAN YEAR OPEN ENROLLMENT!

The open enrollment period for the 2012 Plan Year is from November 1, 2011 through November 30, 2011.

The Medical Flexible Spending Account Program (MEDFLEX) provides a tax-free way to pay out-of-pocket medical care expenses not covered by our State health and dental plans. This will allow you to save money on the cost of these products and services. The State of Connecticut provides comprehensive medical and dental benefits; however, many employees incur a variety of medical and dental care expenses that are not covered under our plan. For this reason the Office of the State Comptroller makes the MEDFLEX available.

How Does It Work?

Before you enroll, estimate your family's yearly medical expenses that are not covered under the health insurance plan and choose the amount you'd like to set aside for MEDFLEX. For Plan Year 2012, contribution limits are between $520 and $2,500. Throughout the year, the amount chosen will be deducted evenly from your paychecks based on your pay frequency (ex. 26 pays, 24 pays, 12 pays). Be conservative in estimating your annual expenses. **Any MEDFLEX monies that are not spent during the plan year will be forfeited.**

You can obtain reimbursement for eligible medical expenses by submitting a claim reimbursement request to Progressive Benefit Services (PBS), the State's third party administrator. You have the option of receiving reimbursements by check, direct deposit or by using the pre-paid benefits card, called the Benny Card.

Dear State Employee:

I encourage you to give careful consideration to this attractive employee benefit as a way to assist in managing your non-covered medical care expenses while reducing the amount you pay in taxes each year.

Sincerely,

Kevin Lembo
State Comptroller

Who is eligible to participate?

- Active State employees working at least on a half-time (0.5 full time equivalent) basis.

What are some eligible expenses?*

✓Co-payments & Deductibles ✓Lasik ✓Contact lenses ✓Dentures ✓Eyeglasses ✓Prescription Sunglasses ✓Orthopedic shoes ✓Orthodontia ✓Wheelchairs

Eligible expenses may be reimbursed for yourself, your spouse, your tax-qualified dependent(s) and/or your tax-qualified relative(s).

What are some ineligible expenses?**

✓Childcare ✓Cosmetic Surgery ✓Dance Lessons ✓Health Club Dues ✓Insurance Premiums ✓Massage Therapy ✓Medicines & Drugs from other countries ✓Swimming Lessons

Contact PBS at 1-866-906-8023 for additional information about eligible/ineligible expenses, program information and the enrollment process. Enrollment forms may be downloaded from the OSC web site: www.osc.ct.gov, the PBS web site: www.ctpbs.com or by contacting PBS at 1-866-906-8023. **Enrollment forms must be postmarked by November 30, 2011. The plan cannot accept late enrollments for any reason.**

**In order to qualify for reimbursement expenses must: (1) qualify and be medically necessary health care services; (2) not be reimbursed under another health insurance carrier; (3) not be deducted from your income tax return; (4) be incurred during the Plan Year of coverage.*

***May be considered an eligible expense if prescribed by a physician to treat a specific medical condition. Written proof of medical necessity is required.*