



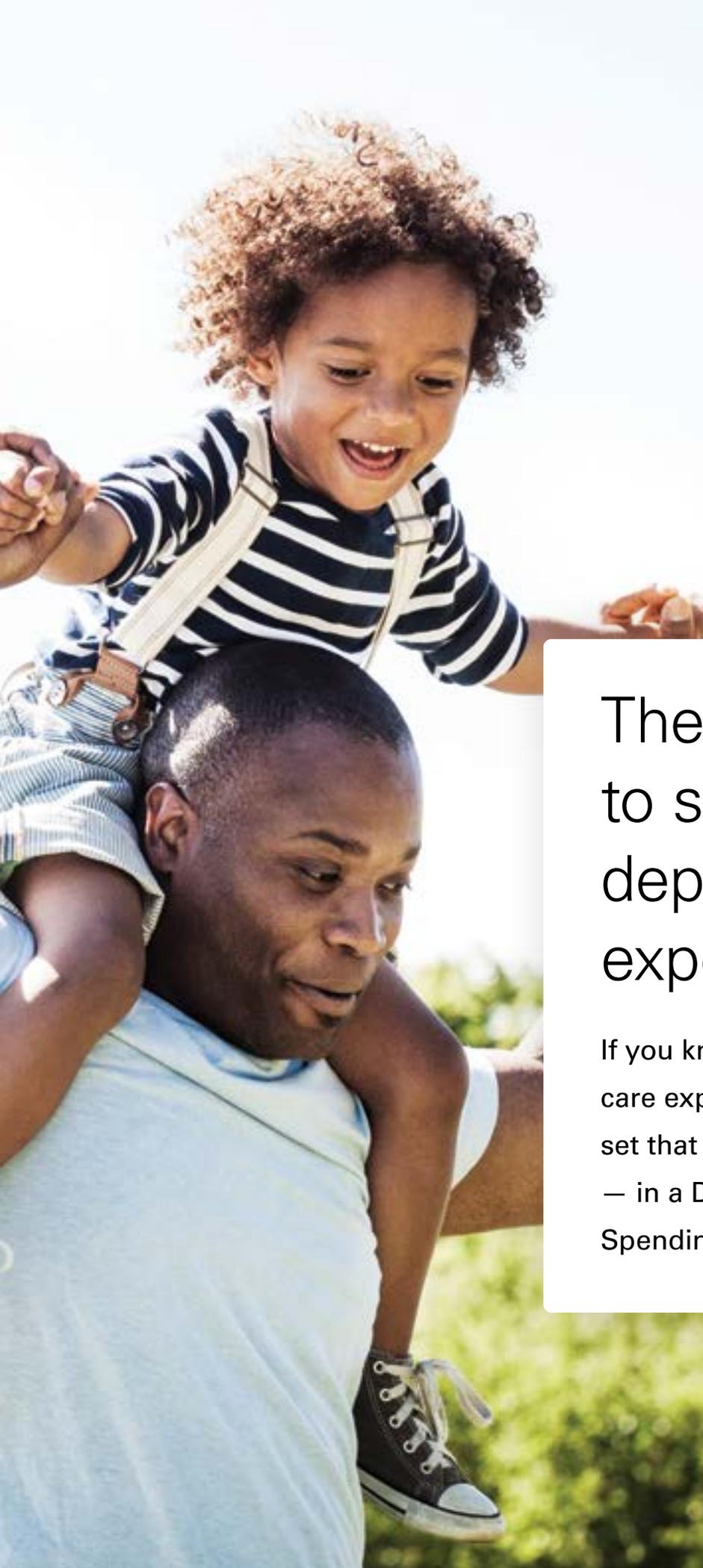
HEALTH CARE FUNDING GUIDE

# Your Dependent Care FSA



A flexible spending account for your family's care





## The easy way to save for your dependent care expenses

If you know you'll have dependent care expenses each year, you can set that money aside — before taxes — in a Dependent Care Flexible Spending Account (DCFSA).



## What's a DCFSA?

A DCFSA allows you to set aside money specifically to pay dependent care expenses for your family. A DCFSA can help you save money because you fund it with pre-tax dollars.

### With a DCFSA, you can:

- › Plan ahead for your dependent care expenses
- › Use easy payroll deduction to fund your FSA
- › Reduce your taxable income so you save on taxes

# What you should know about a DCFSA

## Advantages

Having your estimated expenses deducted from your paycheck before any taxes are taken out means you can also save money on taxes.

## What can you use it for?

DCFSA funds can only pay qualified expenses for your dependent family members. For example, your DCFSA could pay for services like:

- › Infant and child daycare\*
- › Before-school and after-school care\*
- › Summer day camp\*
- › Adult and senior daycare\*
- › Eligible housekeeping services

\*Provider must have state license.

## Making changes

You can change your contribution amount during the year only if you have a qualifying event or family status change, such as a:

- › Marriage
- › Divorce
- › Birth
- › Adoption
- › Job change

## Eligibility

A DCFSA can help you save money if you have a family member or dependent who needs care while you're at work. You may be eligible if the:

- › Dependent is under age 13.
- › Dependent has a mental or physical disability.
- › Cost of care is no more than the income of you or your spouse (whichever is less).



### Be sure to use your funds each year.

Contribute only as much money as you'll spend on dependent care for one year. While the IRS allows you to contribute up to \$5,000 in 2023 and \$5,000 in 2024, FSA funds don't carry over to the next year, unless your employer has selected a grace period.

# How DCFSA's work

## Funding your DCFSA

- 1 Review your dependent care expenses for the past two years to help you decide how much money you want to put in the FSA (up to \$5,000 in 2023 and up to \$5,000 in 2024, or \$2,500 for 2023 and \$2,500 for 2024 if married, and filing separately).
- 2 Ask your employer to withhold an equal part 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 expenses.
- 4 Remember, your FSA funds don't carry over, so make sure you spend all of your money by the end of the year.

## Quick and easy reimbursement

- 1 Pay your dependent care expenses.
- 2 Save your receipts.
- 3 Submit your receipts to BlueCross, along with a DCFSA Claim Form (available at **bcbst.com**).
- 4 You'll receive reimbursement by check or EFT transfer to your designated checking or savings account, as long as you have funds in your FSA.

You can easily check your claims and FSA balance, or get an FSA Direct Deposit Form, anytime by logging in to **bcbst.com**.

# Here's an example of how you save with a DCFSA

Sarah looks at her family's dependent care needs for next year. She estimates they'll spend at least \$5,000 for her son's daycare, her daughter's after-school care and day camps during the summer.

## How Sarah Saves



Her expenses are the same with or without DCFSA, but by funding a DCFSA with pre-tax dollars, she saves **\$1,250** in one year.

	<b>With a DCFSA</b> (pre-tax dollars)	<b>Without a DCFSA</b> (after-tax dollars)
<b>Annual Earnings</b>	\$ 30,000	\$ 30,000
<b>Pre-Tax Contribution</b>	<b>\$ 5,000</b>	
<b>Taxable Income</b>	\$ 25,000	\$ 30,000
<b>Taxes*</b>	\$ 6,250	\$ 7,500
<b>Take-Home Pay</b>	\$ 18,750	\$ 22,500
<b>Health Care Costs</b>		<b>\$ 5,000</b>
<b>Spendable Income</b>	\$ 18,750	\$ 17,500
<b>SARAH'S SAVINGS</b>	<b>\$ 1,250</b>	

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

## Questions about taxes?

You may be able to use a DCFSA and still claim a dependent care tax credit on your income taxes. Certain conditions apply, and you can't claim the same expenses for both. Talk to a tax advisor for details.

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. BlueCross does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

BlueCross:

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

If you need these 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 Compliance Coordinator; 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.

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.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Si usted es miembro, llame al número de Servicio de atención a miembros que figura al reverso de su tarjeta de identificación de Miembro o al 1-800-565-9140 (TTY: 1-800-848-0298).

ملحوظة: إذا كنت تتحدث انكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالامجان. إذا كنت عضواً، فاتصل برقم خدمة الأعضاء الموجود على ظهر بطاقة هوية العضو أو بالرقم 1-800-565-9140 (الهاتف النصي: 1-800-848-0298).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。若您是會員，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)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Nếu quý vị là hội viên, hãy gọi đến số Dịch vụ Hội viên ở mặt sau thẻ ID Hội viên của quý vị hoặc 1-800-565-9140 (TTY: 1-800-848-0298).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 가입자의 경우, 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 d'aide linguistique vous sont proposés gratuitement. Si vous êtes adhérent, appelez le numéro du Service adhérents indiqué au dos de votre carte d'assuré adhérent ou appelez le 1-800-565-9140 (TTY/ATS : 1-800-848-0298).

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ຖ້າທ່ານເປັນສະມາຊິກ, ໃຫ້ໂທຫາເບີຂອງຝ່າຍບໍລິການສະມາຊິກທີ່ມີຢູ່ດ້ານຫຼັງຂອງ ID ສະມາຊິກຂອງທ່ານ ຫຼື 1-800-565-9140 (TTY: 1-800-848-0298).

ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አርዳታ ድርጅቶች፣ በነጻ ሊያገኙዎት ተዘጋጅተዋል። አባል ከሆኑ፣ በአባልነት መታወቁያዎ ጀርባ ላይ በሚገኘው የአባልነት አገልግሎት ቁጥር ወይም በ 1-800-565-9140 (መስማት ለተሳታፊዎች: TTY: 1-800-848-0298) ይያዙ።

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Falls Sie ein Mitglied sind, rufen Sie die Nummer des Mitgliederdienstes auf der Rückseite Ihrer Mitglieds-ID-Karte oder 1-800-565-9140 (TTY: 1-800-848-0298) an.

સુચના: જો તમે ગુજરાતી બોલતા છો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. જો તમે સભ્ય છો, તો તમારા સભ્ય આઈડી કાર્ડની પાછળના સભ્ય સર્વિસ નંબર ઉપર અથવા 1-800-565-9140 (TTY: 1-800-848-0298) પર કોલ કરો.

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。会員のお客様は、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。

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Kung ikaw ay isang miyembro, tawagan ang numero ng Serbisyo sa Miyembro na nasa likod ng iyong 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 मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। अगर आप सदस्य हैं तो अपने सदस्य आईडी कार्ड के पीछे दिए गए नंबर या 1-800-565-9140 (TTY: 1-800-848-0298) पर सदस्य सेवा नंबर पर फोन करें।

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Если Вы являетесь участником, 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 گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. در صورتیکه عضو هستید، با شماره خدمات اعضا در پشت کارت شناسایی عضو خود یا 1-800-565-9140 (TTY: 1-800-848-0298) تماس بگیرید.

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Si ou se youn nanm, rele nimewo Sèvis Manm ki sou do kat ID Manm ou an oswa 1-800-565-9140 (TTY: 1-800-848-0298).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Członkowie mogą dzwonić pod numer działu Member Service podczas na odwrocie karty identyfikacyjnej członka lub numer 1-800-565-9140 (TTY: 1-800-848-0298).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Caso seja membro, ligue para o 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: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Se è un membro, 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).

Díí baa akó nínizín: Díí saad bee yáníłtí'go Diné Bizaad, saad bee áká'anída'áwo'déé', t'áá jiił'eh, éí ná hółó. Naaltsoos bee ná ha'dít'éego, Naaltsoos Bá Hada'dít'éhígíí ninaaltsoos nit'ízi bee neéhozinígíí bine'déé' Naaltsoos Bá Hada'dít'éhígíí Bee Áka'anída'áwo'í bíbéeesh bee hane'í biká'ígíí bee hodílnih doodago 1-800-565-9140 (Doo Adinits'agóogo q TTY: 1-800-848-0298) bee hodílnih.

For a complete list of qualifying expenses for your DCFSA, talk to your tax advisor or visit **bcbst.com**. You can also find additional details and FSA claim forms at **bcbst.com**. 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**



Click to Chat

Log in to your online BlueCross account to chat with us.

Under the Consolidated Appropriations Act of 2021, employers may make changes to their DCFSA plans under certain circumstances. Please ask your employer for details.