Princeton University
Flexible Spending Account Plans
Summary Plan Description
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January 2023

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**Introduction**
Princeton offers Flexible Spending Account Plans, administered by PayFlex Systems USA, Inc. The Flexible Spending Account Plans include the following features:

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<tr>
<th>Your Options</th>
<th>Who Can Be Covered</th>
<th>What You Pay</th>
<th>What Can Be Reimbursed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare Flexible Spending Account (HFSA)</td>
<td>Only you participate, but you can be reimbursed for expenses incurred by anyone you can declare as a dependent on your federal tax return.</td>
<td>You may contribute between $100 and $3,050 a year on a pre-tax basis to reimburse yourself for out-of-pocket health care expenses.</td>
<td>Health care expenses that would qualify as tax deductions on your federal income tax return, such as out-of-pocket expenses (including deductibles, coinsurance or copays) for eligible services covered under a medical, dental, vision, or prescription plan that covers you or your eligible dependents—and eligible expenses that are not covered by such a plan—but excluding health insurance premiums. Reimbursements are made only on expenses that are incurred in the year during which contributions are made (e.g. 2023 expenses are reimbursed from contributions made during 2023).</td>
</tr>
<tr>
<td>Your Options</td>
<td>Who Can Be Covered</td>
<td>What You Pay</td>
<td>What Can Be Reimbursed</td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------</td>
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<td>------------------------</td>
</tr>
</tbody>
</table>
| Dependent Care Flexible Spending Account (DFSA) | Only you participate, but you can be reimbursed for expenses incurred on behalf of any dependent child under the age of 13 or any other dependent (including a spouse, domestic partner or parent) physically and/or mentally incapable of self care, who lives with you, and depends on you for support. | You may contribute between $100 and $5,000 each year on a pre-tax basis to reimburse yourself for dependent care expenses. Your contributions are limited to:  
- $2,500, if you are married but file separately; or  
- your spouse’s earned income (or your earned income if less). | Expenses incurred so that you (and, if you are married, your spouse) can work (or so your spouse can look for work or attend school full time)—such as:  
- care at licensed nursery schools, day camps (not overnight camps) and day care centers for children under age 13;  
- services from individuals who provide care in or outside your home;  
- dependent care centers that provide day care—not residential care—for dependent adults; and  
- care provided outside the home for your disabled dependent as long as your dependent is over age 13 and spends at least eight (8) hours a day in your home. |
How the Plans Work

The University offers two (2) Flexible Spending Account Plans, the Healthcare Flexible Spending Account (HFSA) and the Dependent Care Flexible Spending Account (DFSA) to assist you with the cost of health care and dependent care. You can use your HFSA to reimburse yourself for many of the health care expenses incurred by you and your eligible dependents. The Expense Account plans also help to reduce your taxes since they are funded on a pre-tax basis. Expense Account plans operate on a calendar year. In return for the tax break, however, the Internal Revenue Service (IRS) requires that you forfeit any money left in your DFSA at the end of the year.

Rollover Provision under the HFSA

Princeton will allow for balances of $50 up to a maximum of $610 of unused funds to be automatically rolled over each calendar year. The rollover amount will not reduce the maximum $3,505 HFSA contribution limit allowed for 2023. The rollover amount may be used to get reimbursed for eligible medical expenses under the HFSA. These expenses must be incurred during the calendar year in which they are rolled over. You must be active in the HFSA on the last calendar day of the calendar year for the funds to be rolled over into the next calendar year. Also, if your employment terminates with Princeton, your expenses incurred after your termination date will not be eligible for reimbursement, unless you elect to continue your HFSA through COBRA.

Flexible Spending Account

Each year, you can elect to set aside a portion of your pay on a pre-tax basis, subject to the limits described on pages 2. The amount you set aside is not subject to federal and, in some cases (although not for New Jersey or Pennsylvania), state income taxes (see table below). Eligible expenses are reimbursed to you tax free from your account with dollars that have not been taxed.

State Income Tax Exemption Status

<table>
<thead>
<tr>
<th>State</th>
<th>Healthcare Flexible Spending Account</th>
<th>Dependent Care Flexible Spending Account</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Jersey</td>
<td>Contributions are not exempt from NJ state income tax.</td>
<td>Contributions are not exempt from NJ state income tax.</td>
</tr>
<tr>
<td>New York</td>
<td>Contributions are exempt from NY state income tax.</td>
<td>Contributions are exempt from NY state income tax.</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>Contributions are exempt from PA state income tax.</td>
<td>Contributions are not exempt from PA state income tax.</td>
</tr>
</tbody>
</table>
Federal law permits reimbursement only for expenses incurred during the calendar year in which you have enrolled and only if you are still a participant in the Plan. If you are a new hire, you may only be reimbursed for expenses incurred after the date your enrollment is effective.

Similarly, if you terminate employment or are no longer a participant due to a qualified life status change event, you may only be reimbursed for expenses prior to the date of termination.

**Eligibility**
If you are a regular or term employee who fills an approved budgeted position, and you work at least 4.5 months of the year at 50% duty time or greater, you are eligible to participate in the Expense Account Plans. If you are a newly hired employee, you may participate in the Plans as long as you enroll within 31 days of your date of hire.

Expenses incurred by your eligible dependents may be eligible for reimbursement under the Expense Account Plan. The definition of an *eligible dependent* differs under the two (2) Flexible Spending Account Plans. Please refer to page 9 for the definition of dependent for the HFSA and page 13 for the definition of dependent for the DFSA.

**Date Participation Begins**
The Expense Account Plans are calendar year plans. Normally you enroll during the annual open enrollment period. However, if you are a newly hired employee, you are eligible on the first of the month coincident with or next following your date of hire provided you have submitted your election within your first 31 days of hire or appointment. You may also enroll during the annual open enrollment period with coverage effective the following January 1.

However, if you have a qualified life status change event, you may also enroll. You must notify the Human Resources Benefits Team and make the change within 31 days of the event—90 days for birth or adoption. The change will be effective the first of the month coincident or next following the date of the event that prompted the mid-year election change. The effective date will be retroactive to the date of the event for birth or adoption. Please refer to the About Your Benefits section of the Summary Plan Description Handbook for more information about qualified life status change events.

**Enrollment**
When you enroll, you indicate the amount you want to set aside in each Flexible Spending Account for the calendar year for which you are making the election. If you are newly hired, keep in mind that you may only submit expenses incurred on or after your enrollment date. The amount you set aside is reduced from your paycheck on a pre-tax basis, subject to certain limits described on page 2.
Keep in Mind: You must make a separate election for each Flexible Spending Account, and you may be reimbursed only for those expenses for which the account was established. In other words, you cannot be reimbursed through the DFSA for health care expenses incurred by your dependents. You are not permitted to transfer money between accounts during the year.

Your election remains in effect through the end of the calendar year. You must complete a new election each year in order to continue your Flexible Spending Account for the next calendar year. Once an election is made, it cannot be changed during that calendar year unless you have a qualified life status change event. (See the About Your Benefits section for more information.) If you do change your elections, you are not permitted to reduce the total to an amount less than the amount you have already contributed.

How Much You Can Contribute
In 2023, you can contribute between $100 and $3,050 in the HFSA, and between $100 and $5,000 in the DFSA.

If your spouse participates in a similar plan sponsored by his or her employer, your combined calendar year non-taxable DFSA benefits cannot exceed $5,000. The amount you contribute to the DFSA may also not exceed:

- $2,500 if you are married but file separate tax returns; or
- your or your spouse’s earned income, if less than $2,500.

In addition, if you are a highly-compensated individual (as defined by the Internal Revenue Service), a portion of your DFSA contribution may be refunded if the Plan is found to favor highly-compensated faculty and staff. The Human Resources Benefits Team will notify you if this recalculation applies to you.

A Word of Caution for Planning Your Elections
Because there is a tax advantage to using the Flexible Spending Accounts, under current IRS regulations you forfeit any unspent balances in your DFSA account at the end of the calendar year. To avoid forfeiting any of your contributions, you should carefully estimate your expected dependent care expenses for the upcoming calendar year before you choose the amount you will set aside into your DFSA.

For the HFSA, rollover balances of $50 up to a maximum of $610 will be rolled over automatically from one calendar year into the next year, regardless of whether you elect to contribute to the HFSA for the next calendar year. However, unused amounts under $50 or over $610 will be forfeited. You can use the rollover amount to be reimbursed for expenses incurred in the next calendar year. In order to be able to roll over unused funds, you must be active in the HFSA on the last day of the year for the amount to roll over to the next calendar year. If you employment with Princeton ends, expenses you incur after your termination date will be ineligible for
reimbursement unless you continue your HFSA through COBRA. The roll over amount does not impact your election amount for the next year.

When making your elections, you should take into account your expenses for the previous year:
- exclude expenses which were "one-time";
- include expenses which are likely to recur in the next calendar year;
- plan for any unusual expenses you expect to have in the coming calendar year; and
- be sure your projected expenses are eligible for reimbursement under the appropriate account.

A list of eligible expenses to help you estimate your annual expenditures appears on pages 10 and 11.

**How Your Flexible Spending Accounts Affect Your Other Benefits**

With the exception of the contributions made by both you and the University to Social Security, establishing a Flexible Spending Account has no effect on the other benefits the University provides. However, because you pay no Social Security taxes on the amounts set aside for your Flexible Spending Accounts, your participation in a Flexible Spending Account may reduce your future Social Security benefits. If your taxable income is less than the annual maximum Social Security taxable wage base, the reduction in taxes will result in a slight reduction in your future Social Security benefits.

**When Participation Ends**

Your participation in both of the Flexible Spending Accounts ends on the earliest of the following dates:
- you are no longer a benefits eligible University faculty or staff member;
- you stop making contributions; or
- the Flexible Spending Accounts are discontinued or restricted.

**Specifically, participation ends when one (1) of the following events occurs:**

| You begin a leave of absence without pay | When you go on a leave of absence without pay, contributions to your Flexible Spending Account stop, but you can continue to file for eligible expenses for your HFSA or DFSA while you are on your leave without pay. The total amount you elected for the plan year is eligible for reimbursement from the HFSA. Reimbursements from the DFSA are limited; however, to the amount you have already contributed prior to the start of your leave. When you return from leave during the same calendar year, your contributions to your account will resume. The monthly reductions for the remaining portion of the calendar year will be pro-rated based on the total amount you elected for the calendar year. Claims for |

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elible expenses may be filed through March 31 following the calendar year in which you took your leave.

<table>
<thead>
<tr>
<th>You begin receiving long term disability insurance plan payments</th>
<th>Once you begin receiving Long Term Disability (LTD) Insurance Plan benefits, contributions to both Flexible Spending Accounts stop. The total amount you elected to contribute to the HFSA is available to you for reimbursement of eligible expenses incurred through the end of the calendar year in which your LTD benefits begin. You may be reimbursed from the DFSA for eligible expenses incurred prior to the onset of LTD—but only up to the amount contributed before you began receiving LTD benefits. You have through March 31 following the calendar year in which you begin receiving LTD benefits to file your claims.</th>
</tr>
</thead>
<tbody>
<tr>
<td>You terminate employment or reduce your duty time to less than 50% or 4.5 months</td>
<td>Contributions to your Flexible Spending Accounts end with the last paycheck you receive as an eligible employee. Reimbursements from the HFSA for eligible expenses incurred through your date of termination or reduction in duty-time may be for the total amount elected. Reimbursements from the DFSA for eligible expenses are only for contributions made prior to your date of termination or reduction in duty-time. You must submit requests for reimbursement from the HFSA and the DFSA no later than the March 31 following the end of the calendar year in which your participation terminates. Under COBRA, you and your eligible dependents are eligible to continue to participate in a HFSA. Please see page 8 for more information.</td>
</tr>
<tr>
<td>You retire</td>
<td>If you retire, the total amount you elected to contribute to the HFSA is available to you for reimbursement of eligible expenses incurred through the end of the calendar year in which you retire. You may be reimbursed from the DFSA for eligible expenses incurred prior to your retirement—but only up to the amount contributed before you retired. You have through March 31 following the calendar year in which you retire to file your claims.</td>
</tr>
<tr>
<td>You die</td>
<td>If you die, the total amount that you elected to contribute to the HFSA is available to your eligible dependents to cover any expenses incurred prior to your death. Claims must be submitted by the March 31 following the end of the calendar year in which you died. Your dependents may also be reimbursed from the DFSA for eligible expenses incurred prior to your death—but only up to the amount contributed before you died.</td>
</tr>
</tbody>
</table>
**Continued Participation (COBRA)**
The table below describes what happens to each account if your coverage ends and you elect COBRA:

<table>
<thead>
<tr>
<th>Account Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Healthcare Flexible Spending Account</strong></td>
<td>Under federal law, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), as amended, you are eligible to continue contributing to your HFSA after you leave the University (this includes termination for reasons other than gross misconduct or if your participation ceases because your work hours are reduced below 50% duty time and/or less than 4.5 months). However, because your contributions must be made on an <em>after-tax</em> basis and will be subject to a 2% administrative fee, continuing to contribute may be useful only if you have contributions remaining in your account when you leave. If you choose to continue making contributions, you can request reimbursement for eligible expenses incurred while contributions continue.</td>
</tr>
<tr>
<td><strong>Dependent Care Flexible Spending Account</strong></td>
<td>Participation in the DFSA cannot be continued under COBRA.</td>
</tr>
</tbody>
</table>
The Healthcare Flexible Spending Account (HFSA)
You can use your HFSA to reimburse yourself for many of the health care expenses incurred by you and your eligible dependents.

Definition of Eligible Dependent
Eligible dependents include your spouse, dependent children, and any other person you can legally claim as a dependent on your federal income tax return. You do not need to cover them as dependents under your health care plan in order to be reimbursed for their health care expenses. Under federal regulations, you cannot be reimbursed for expenses incurred by your same-sex domestic partner and/or his or her children unless you can claim them as dependents on your federal income tax return (See the About Your Benefits section of the Summary Plan Description Handbook for more information).

PayFlex Debit Card
PayFlex provides a debit card to all participants who elect the HFSA. You will receive one PayFlex card and have the option to order additional cards by contacting PayFlex at 1-800-284-4885 or online at www-payflex.com.

When you use the card, it debits your HFSA automatically. The PayFlex card is a limited purpose MasterCard that can only be used to pay for eligible products and services, as determined by the IRS, at any qualifying location where MasterCard is accepted, including hospitals, physician offices and pharmacies. After using the PayFlex card, certain services may require that you provide documentation, such as the submission of an Explanation of Benefits (EOB) and receipt from the service provider describing the service, the date and the amount paid to PayFlex to substantiate the claim and comply with IRS regulations. If a claim needs to be substantiated, you will receive a "Request for Documentation" letter from PayFlex. All charges shall be conditional pending confirmation and substantiation. If such a purchase is later determined by PayFlex to not qualify as an eligible expense, PayFlex can use one of the following correction methods to make the HFSA whole. Until the amount is repaid, PayFlex shall take further action to ensure that further violations of the terms of the card do not occur, up to and including denial of access to the care.

1. Repayment of the improper amount by the Participant;
2. Claims substitution or offset of future claims until the amount is repaid
3. Since this account is governed by IRS regulations, Princeton is required to report any overpayment amount as taxable income.

Eligible Expenses
You can be reimbursed for certain expenses incurred for you or an eligible dependent through a Princeton University healthcare plan or through a benefit plan outside of Princeton. Medical plan deductibles, copayments, coinsurance, prescription costs, certain dental costs including orthodontia, over the counter (OTC)
drugs and medicines, feminine care products, personal protective equipment, and vision care expense, such as eye glasses, contact lenses and LASIK are considered eligible expenses. In addition, eligible health care expenses not payable under a medical, dental, vision, or prescription care plan can be reimbursed through your HFSA. You may not use the account to be reimbursed for insurance premiums.

By law, if you reimburse yourself for medical, dental, vision, prescription drug expenses from your HFSA, you cannot also deduct those expenses on your federal income tax return. For each expense, you must choose one (1) method, either you deduct the amount on your federal tax return or reimburse yourself through your HFSA.

IRS rules determine the health care expenses that are deductible and therefore eligible for reimbursement. IRS rules can change from year to year so it is important for you to know what health care expenses are eligible for reimbursement before you elect your annual contribution.

Eligible expenses generally include:
- medical and dental plan copays, coinsurance, deductibles and certain out-of-pocket expenses;
- amounts that exceed a plan's reasonable and customary limits;
- vision care expenses;
- prescription drug plan deductibles or copays;
- hearing care expenses, such as exams and hearing aids;
- the cost of modifying your home to accommodate your disability or the disability of a dependent
- over the counter drugs and medicines
- feminine care products
- personal protective equipment

A list of eligible expenses can be found below and on the next page. For a complete list of eligible and ineligible expenses go to PayFlex’s website at www.payflex.com.

The IRS has identified the following expenses as eligible for reimbursement. Note: These expenses are eligible only if you do not receive full reimbursement.

<table>
<thead>
<tr>
<th>Expense</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abortion</td>
<td></td>
</tr>
<tr>
<td>Acupuncture</td>
<td>Performed by a licensed practitioner</td>
</tr>
<tr>
<td>Alcoholism or drug dependency</td>
<td>Payment to a treatment center</td>
</tr>
<tr>
<td>Ambulance</td>
<td></td>
</tr>
<tr>
<td>Birth control pills</td>
<td></td>
</tr>
<tr>
<td>Chiropractor Fees</td>
<td></td>
</tr>
<tr>
<td>Expense</td>
<td>Comments</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Christian Science practitioners</td>
<td></td>
</tr>
<tr>
<td>Contact lenses</td>
<td>Including related equipment and materials such as saline solutions, enzyme cleaners, and cleansers</td>
</tr>
<tr>
<td>Crutches</td>
<td>Purchase or rental</td>
</tr>
<tr>
<td>Deductibles and coinsurance</td>
<td>Balance not paid by other health insurance</td>
</tr>
<tr>
<td>Dental fees</td>
<td>X-rays, fillings, orthodontia, extractions, dentures, treatments and other dental expenses. Cosmetic procedures are usually not covered. Lenses, frames and exams</td>
</tr>
<tr>
<td>Eyeglasses</td>
<td></td>
</tr>
<tr>
<td>Hearing aids</td>
<td>Including private room coverage</td>
</tr>
<tr>
<td>Hospitalization</td>
<td>May be eligible if for treatment of illness by a licensed professional. A doctor's statement is required.</td>
</tr>
<tr>
<td>Hypnosis</td>
<td></td>
</tr>
<tr>
<td>Laboratory fees</td>
<td>Tutoring by licensed school or therapist for child with severe learning disability</td>
</tr>
<tr>
<td>Lasik Eye Surgery</td>
<td>Prescribed drugs</td>
</tr>
<tr>
<td>Learning disability</td>
<td>Confinement for treatment of illness or injury</td>
</tr>
<tr>
<td>Medicines</td>
<td>By registered or licensed practical nurse for medical care</td>
</tr>
<tr>
<td>Optometrist</td>
<td>Services within scope of license</td>
</tr>
<tr>
<td>Oxygen</td>
<td></td>
</tr>
<tr>
<td>Physical therapy</td>
<td>Services within scope of license</td>
</tr>
<tr>
<td>Physician's fees</td>
<td></td>
</tr>
<tr>
<td>Psychologist</td>
<td>Includes prescription drugs to treat nicotine withdrawal</td>
</tr>
<tr>
<td>Refractive eye surgery</td>
<td>Reversal of Sterilization also covered. Including experimental procedures</td>
</tr>
<tr>
<td>Smoking Cessation Programs</td>
<td></td>
</tr>
<tr>
<td>Sterilization</td>
<td>Physical or occupational therapy by a licensed therapist</td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
</tr>
<tr>
<td>Syringes, needles and injections</td>
<td></td>
</tr>
<tr>
<td>Therapy</td>
<td>Covered only if provide prescribed for treatment of illness.</td>
</tr>
<tr>
<td>Transplants</td>
<td></td>
</tr>
<tr>
<td>Vaccinations and immunizations</td>
<td></td>
</tr>
<tr>
<td>Vitamins and mineral supplements</td>
<td></td>
</tr>
<tr>
<td>Wheelchairs</td>
<td></td>
</tr>
<tr>
<td>X-ray fees</td>
<td></td>
</tr>
</tbody>
</table>
You can also obtain a more complete and detailed list of eligible expenses through IRS Publication #502, "Medical and Dental Expenses." To get a free copy of this publication, call 1-800-TAX-FORM (1-800-829-3676), or visit the IRS Web site at www.irs.gov.

You may contact or the Human Resources Benefits Team at (609) 258-3302 or benefits@princeton.edu if you have any questions about whether an expense qualifies for reimbursement through the HFSA.

**Expenses That Are Not Covered**

You cannot be reimbursed from your HFSA for expenses which are not eligible to be deducted on your federal income tax return, such as:

- premium payments paid for coverage under health care plans, including dental insurance premiums, contact lens replacement insurance, the cost for coverage under COBRA, and premiums paid for health coverage under a plan maintained by your spouse or dependent's employer;
- penalties charged by any health care plan for non-notification prior to hospitalization and certain types of surgery, or for non-compliance when a decision is made by medical management;
- expenses reimbursed by any other health care plan, including Workers' Compensation, Medicare, Medicaid, or the medical insurance portion of an auto insurance policy;
- non-medically supervised weight loss programs;
- any cosmetic surgery or procedure (as defined in IRS rules), unless needed to correct a deformity arising from, or directly related to, a congenital abnormality, a personal injury resulting from an accident or trauma, or disfiguring disease. (Generally, a surgery or procedure is "cosmetic" if it is performed to improve appearance rather than to promote the proper functioning of the body or to prevent or treat an illness);
- payments for long-term care insurance or expenses; and
- expenses that are not considered deductible under IRS regulations.

**The HFSA vs. A Tax Deduction for Medical Expenses**

Generally, you can be reimbursed from your Flexible Spending Account for all health care expenses that would qualify as tax deductions on your federal income tax return, whether or not they exceed the IRS minimum applied to these deductions. If you use money from your Flexible Spending Account for a health care expense, you cannot claim that expense as a deduction on your income tax return.
The Dependent Care Flexible Spending Account (DFSA)

Generally, you can be reimbursed from your DFSA for any dependent care expense that would qualify for a child and dependent care tax credit on your federal income tax return. IRS regulations determine what dependent care expenses are eligible for a child and dependent care tax credit. If you claim an expense as a tax credit on your income tax return, you cannot also be reimbursed from your DFSA for that expense. By making an election to contribute to a DFSA, you are representing to the University that your contributions are not expected to exceed the following limits:

- $2,500, if you are married but file separate federal income tax returns; or
- your spouse’s earned income, or your earned income, if less.

If your spouse has a DFSA, your combined contributions cannot exceed $5,000 per year.

Definition of Eligible Dependent

Your eligible dependents include any child under age 13 who depends on you for support. In addition, any dependents over age 13, including your spouse or a parent, are eligible if they:

- are physically or mentally incapable of caring for themselves;
- live with you;
- depend on you for support; and
- earn less than $4,400 in 2022 (this amount is subject to change each year; this information will be updated once announced by the IRS).

Under federal regulations:

- If you are single, you can be reimbursed for dependent care if you are unable to care for an eligible dependent while you work.
- If you are married, you can be reimbursed for dependent care expenses only if:
  - the expenses are incurred to enable your spouse to work or look for work;
  - your spouse is a full-time student for at least five (5) months during the year; or
  - your spouse is incapable of self-care.

You cannot be reimbursed for expenses incurred by your same-sex domestic partner and/or his or her children unless you can claim them as dependents on your federal income tax return.

Eligible Expenses

Generally, dependent care expenses qualify for reimbursement only if their primary purpose is to assure the dependent’s well being and safety, rather than to provide education, food, or clothing.
However, where the manner of providing care is such that your expenses include expenses for other benefits, which are incidental to and inseparably a part of the care, the full amount of the expense (tuition) is considered to be incurred for care.

For example, the full amount paid to a nursery school is considered as being for the care of the child, even though the school also furnishes lunch and educational services. Educational expenses incurred for a child in kindergarten or a higher-grade level are not considered as expenses incurred for the care of that child.

If you reimburse yourself for dependent care expenses from your DFSA, by law you cannot also claim a tax credit for those expenses on your federal income tax return.

Examples of eligible dependent care expenses:
- Care at licensed nursery schools, day camps (not overnight camps) and day care centers for children or dependent adults. To qualify, a school or center that provides care for more than six (6) individuals (other than residents of the facility) must comply with state and local laws, and receive a fee, payment, or grant for its services even if it is not run for profit;
- Services from individuals who provide care in or outside your home;
- Care provided outside the home for your disabled dependent who is age 13 or older as long as that dependent spends at least eight (8) hours a day at your home; and
- Services provided by a housekeeper, maid, or cook as long as he or she is partly responsible for the care of your qualified dependent.

Keep in Mind: You can obtain a more complete and detailed list of eligible dependent care expenses through IRS Publication #503, "Child and Dependent Care Expenses." To get a free copy of this publication, call 1-800-TAX-FORM (1-800-829-3676) or visit the IRS Web site at www.irs.gov.

Expenses That Are Not Covered
The following expenses are not reimbursable from the DFSA:
- amounts you pay to an immediate family member under age 19 or to any person you claim as a dependent on your federal income tax return;
- costs for any person caring for a child or children when you or your spouse are not working (e.g., the cost of a babysitter while you and your spouse go to dinner);
- transportation expenses, including chauffeur services;
- charges for a convalescent nursing home;
- educational expenses (tuition) for children in kindergarten or above;
- overnight camp expenses;
- costs for childcare that enable you or your spouse to do volunteer work; and
- costs for childcare after a child reaches his/her 13th birthday.
The DFSA vs. the Federal Child and Dependent Tax Credit

By using the DFSA and/or the dependent care federal tax credit, you may be able to reduce your federal income tax. However, there are limits on how these two options can work together. The best approach for you depends on your specific income and tax situation. You may want to seek professional tax advice before making your decision.

In general, the federal child and dependent care tax credit is the better option for you if you (or you and your spouse together) earn under $39,000.

The amount of expenses you can apply toward the child and dependent care tax credit (up to $3,000 for one child and up to $6,000 for two or more children) is reduced by any DFSA reimbursements you receive.

Information regarding your contributions to Flexible Spending Accounts is reported each year to the IRS on your Form W-2. In addition, the law requires that you write the name, address, and Social Security or tax identification number of your dependent care provider on your federal tax return in order to exclude from your taxable income the amount contributed to your DFSA.
Claims Information
The Plan Administrator, PayFlex, processes Flexible Spending Account claims. When you have an eligible HFSA expense, you can use the PayFlex card, file a claim online at www.payflex.com, or fax or mail the claim form and supporting documentation to PayFlex for processing. You can obtain the necessary claim form from the Human Resources website at www.princeton.edu/hr/forms.

When you have an eligible DFSA expense, you can file a claim online at www.payflex.com, or fax or mail the claim form and supporting documentation to PayFlex for processing. You can obtain the necessary claim form from the Human Resources website at www.princeton.edu/hr/forms.

If you submit a paper claim via fax or mail, be sure to retain a copy of your claim form and the supporting documentation for your records. You may need the copies to check the amount of your reimbursement or track a lost or unpaid claim. Completed claim forms for both Flexible Spending Accounts should be mailed to the address on the form.

If you have a question about your claim, contact PayFlex at 1-800-284-4885.

Healthcare Flexible Spending Account (HFSA)
As noted above, use the Health Care Reimbursement Form or log onto www.payflex.com to submit claims. Follow instructions on the form or online regarding when to attach original receipts, bills, and Explanations of Benefits (EOB).

Dependent Care Flexible Spending Account (DFSA)
As noted above, use the Dependent Care Reimbursement Form or log onto www.payflex.com to submit claims. Attach an original, itemized bill or paid receipt showing the dates of service, the person or organization providing the service, and the actual expenses. You must also indicate the Social Security or tax identification number of the service provider.

- There is no minimum claim amount, so you may submit claims as you incur expenses. Reimbursements are only up to amount contributed at the time the claim is submitted.
- If you are based overseas, you need only submit proof of payment—a tax ID number is not required if your local provider does not have one. If your provider is not paid in U.S. dollars, you can convert payment on your claim form or have the Plan Administrator convert the amount.
- Please note that the following items are not considered acceptable documentation of a dependent care expense:
  - Canceled checks;
  - Credit card receipts; or
  - Receipts for payments that do not show dates of service and name of the person or organization providing the service.
Receiving Your Reimbursement
HFSA
The total amount you have designated as a contribution to your HFSA is available for reimbursement of eligible expenses, at any time during the year. That is, the amount available for reimbursement at any time during the year is not limited by the amount you have contributed at that time.

DFSA
If your claim for reimbursement is for more than your account balance, you will receive payment for only the balance in your account. The additional amount will be paid to you when enough additional money has been contributed to your account. You do not need to submit another claim.

Your claims from either Flexible Spending Account will not be reimbursed if:
- the expense is not an eligible expense;
- the required documentation is not provided;
- the claim is not submitted by March 31 of the following calendar year; or
- the claim form is completed improperly.

You must submit claims for reimbursement to PayFlex for a given calendar year by March 31 of the following year (example: for 2021 you have until March 31, 2022 to submit claims for expenses incurred in 2021). Any balance left in your account after March 31 is forfeited, except for the rollover provision allowed under the HFSA.

Claim submission information is:

PayFlex Systems USA, Inc.
P. O. Box 14879
Lexington, KY 40512-4879

Telephone: 1-800-284-4885
Fax: 1-85888-238-3539

You may also submit and track claims reimbursement online with PayFlex at www.payflex.com.

Review Procedure for Denied Claims
If your claim for reimbursement is denied, you are entitled to an explanation of the reason for the denial and you have the right to appeal. Please see the About Your Benefits section of the Summary Plan Description Handbook for an explanation of the claims review and appeal process.
Your Rights Under ERISA
For information about your rights under the Employee Retirement Income Security Act (ERISA) and other important information, see the About Your Benefits section of the Summary Plan Description Handbook.

The University reserves the rights to amend, suspend, or terminate its Flexible Spending Accounts in whole or in part, at any time and for any reason. The University has full authority and discretion to construe, interpret and administer its plans. The plans are unfunded, and no employee or dependent shall have any right to, or interest in, any assets of the University which may be applied by the University to the payment of benefits. Neither the establishment of the plan, nor the provision of benefits to any person, shall be construed as giving an employee the right to be retained in the service of the University. The plans will be construed and enforced according to New Jersey State law.