

Unlock Savings with Ameriflex FSA & DCA Accounts

As part of your employer's benefit plan, you have the option to enroll in a flexible spending account (FSA) to save money on out-of-pocket healthcare expenses. Participating in an FSA is an easy way to pay for everyday health needs and unexpected medical emergencies.

Flexible Spending Account (FSA): An FSA is a tax-advantaged spending account for healthcare expenses. When you enroll, you choose an amount to contribute, tax-free, to pay for thousands of eligible expenses. Your full annual election is available at the start of the plan year, providing immediate access to funds.

Dependent Care Account (DCA): A DCA helps you pay for essential care services like daycare, preschool, and elder care using pre-tax dollars. Unlike an FSA, DCA funds are available only as they are contributed through your payroll deductions. You can set up a recurring dependent care claim for hassle-free, automatic reimbursements.

How They Help You Save Money

By contributing to a tax-advantaged spending account, you can reduce your taxable income and make the most of your benefits. This means you pay less in taxes and increase your take-home pay. For example, a person with \$6,000 in eligible expenses could see a net increase of \$1,500 in take-home pay annually by contributing those funds pre-tax through an FSA and DCA.

Contribution Limits & Availability

For the FY27 plan year that runs from July 1, 2026 - June 30, 2027, benefit plan limits are as follows:

FSA: You can enroll for **\$250 to \$3,400/year**. Your full annual election is available at the start of the plan year.

DCA: You can enroll for **\$250 to \$7,500/year** (or \$3,750 if married filing separately). Funds are available as payroll deductions are made.

Eligible Expenses

It's important to verify that an expense is eligible under your plan rules before making a purchase. You can find full eligibility lists at myameriflex.com/eligibilitylist or in the [Help Center](#), or shop directly with [Care Covered](#) for items that have already been reviewed for eligibility.

FSA Eligible Expenses

- Prescriptions
- Over-the-counter medicine
- Glasses, contacts, and LASIK
- Dental services and procedures
- Copays and deductibles
- Flu shots

DCA Eligible Expenses

- Tuition for a licensed daycare facility
- Preschool and nursery school
- Before-school and after-school programs
- Elder care
- Summer day camps

Grace Period

Your FSA and DCA plans have a 2.5-month grace period. For the plan year ending June 30, 2027, you have until September 15, 2027 to incur claims (based on the date of service) and until October 15, 2027 to submit them for reimbursement. During this period, any remaining funds from the previous year are used first for qualifying claims.

Managing Your Accounts

Ameriflex Debit Mastercard®: You'll receive an **Ameriflex Debit Mastercard®** linked to your account(s) that you can use to pay for eligible expenses like a regular debit card. If you have both an FSA and a DCA, the card knows which funds to pull based on your purchases.

Submit Claims for Reimbursement: If you paid out-of-pocket for an eligible expense, you can request a reimbursement via your online account or the Ameriflex mobile app.

Simply log in, select **File a Claim**, and choose to **Pay Myself** or **Pay My Provider**. Then upload your documentation, such as an itemized receipt or an Explanation of Benefits (EOB). Reimbursement funds can be returned via direct deposit (fastest) or check. Claims processing takes 3-5 business days from receipt, with an additional 3-5 business days for direct deposit or 7-10 days for check delivery.

Submitting Additional Documentation for an Expense: Due to the tax-advantaged nature of your account, the IRS has guidelines in place to ensure that purchases made with the account are for eligible medical, dental, or vision expenses. As the administrator of your account, Ameriflex has controls in place to ensure you and your employer are always in compliance with IRS regulations.

Your Ameriflex Debit Mastercard® attempts to auto-verify transactions. If additional documentation is required, you will be notified. This typically includes an itemized receipt, EOB, or letter of medical necessity that shows the name of the person, date(s) of service, services rendered, provider name, and total cost. Please note that a standard credit card terminal receipt is not an acceptable form of documentation. You can upload documentation through your Ameriflex account or mobile app.

1. Log into your Ameriflex account.
2. Locate the transaction that requires additional documentation.
3. Click Add Documents next to the specific transaction. A new window appears.
4. Locate and select the documentation you'd like to upload. This can be a picture from your mobile device.
5. Follow the remaining window prompts on your screen to complete the uploading process.

Need Help?

The Ameriflex team is here to assist you.

Visit myameriflex.com/HelpCenter for quick answers.

Participant Services

Email: service@myameriflex.com

Live Chat: myameriflex.com

Call: 888.868.3539

Hours: Monday - Friday: 7:00 AM to 8:00 PM CST and Saturday: 9:00 AM to 1:00 PM CST