

FY2020 Open Enrollment Health Care Spending Accounts (HCSA) Dependent Care Assistance Program (DCAP)

We are excited to announce all enrollments for FY2020 Flexible Benefit Plans are online!

You may enroll in these benefits between
Open Enrollment: April 3, 2019 – May 1, 2019

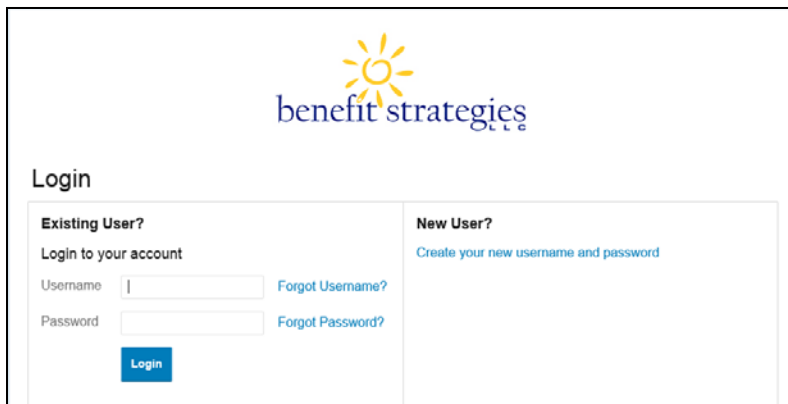
Current Enrollees in the FY2019 FSA Program Administered by ASIFlex: Please use this enrollment process below.

New Enrollees to the GIC's FY2020 FSA Program: Please complete the FSA enrollment e-form available at www.benstrat.com/gic

HOW TO LOGIN:

Open your browser (e.g. Internet Explorer) and log into our website:

<https://benstrat.navigatorsuite.com/>.



Create Username and Password

Create your account by selecting the "Create your new username and password" link and following the registration steps.

User Identification (Step 1 of 3)

Complete the information below to verify your identity. *Required

First Name*	<input type="text"/>
Last Name*	<input type="text"/>
Zip Code*	<input type="text" value="Please enter your 5 digit zip code"/>
SSN or Employee ID*	SSN <input type="text"/> - <input type="text"/> - <input type="text"/>
	-- OR --
	<input type="text" value="Employee ID"/>

Next

Step 1: Enter your First Name, Last Name, Zip Code and SSN or Employee ID.

Security Questions (Step 2 of 3)

*Required

Please enter an answer to any 3 security questions to complete your user setup. To keep your information secure, you will be asked to answer 3 of these questions to complete sensitive actions within the portal such as resetting a forgotten password.

View All

Select a question... * View

Select a question... * View

Select a question... * View

Step 2: Select and enter your **Security Questions**.

Change Username and Password (Step 3 of 3)

*Required

Please change your login information.

Username*
Your username may contain alphanumeric characters and any of the following special characters: period (.), at sign (@), underscore (_), and dash (-).

New Password*
The password must: • Have a minimum of 6 characters • Contain both upper and lower case letters • Contain at least one number • Not be one of your last 3 passwords

Confirm Password*

Step 3: Choose your **Username and Password**.

- You can use the pre-assigned username or change to one you prefer
- Username's may contain alphanumeric characters and any of the following special characters: period (.), at sign (@), underscore (_), and dash (-).
- Your password must have a minimum of 6 characters, contain both upper and lower case letters, and contain at least one number

TIP! Be sure to take note of your user name and password, and keep in a secure place, as you'll need this to access your FY2020 account when logging in.

HOW TO BEGIN ENROLLMENT:

The screenshot shows a navigation bar with links: Home, Dashboard, Accounts, Tools & Support, Profile, and Message Center. Below the navigation is a large banner with the text "It's Annual Enrollment Time" and "Sign up today! View More". A yellow "Enroll Now" button is prominently displayed. Below the banner is a section titled "I Want To:" with two buttons: "Enroll Now" and "Manage My Expenses".

Step 4: If you are ready to enroll, click **Enroll Now**.

The screenshot shows a navigation bar with links: HOME, DASHBOARD, ACCOUNTS, TOOLS & SUPPORT, STATEMENTS & NOTIFICATIONS, and PROFILE. The user's name "Taylor Kalmes" and a "Logout" link are visible. The main heading is "Enrollment". Below the heading is a question "Are you ready to enroll?" followed by a "Begin Your Enrollment Now" button. Below this is a paragraph of text: "Enrolling in a Pre-Tax Benefit plan allows you to save taxes on dollars you put into the plan. You could save approximately 30% on every plan dollar you spend, depending on your tax bracket."

Step 5: Click **Begin Your Enrollment Now**

ENROLLING IN BENEFITS:

You will be guided step-by-step through the enrollment process, so just follow along, enter the required information and click on "Continue" after each screen.

The screenshot shows a "Profile" form with a progress indicator showing 6 steps, with step 1 highlighted. The form contains the following fields and options:

- First Name: Taylor
- Middle Initial:
- Last Name: Kalmes
- Social Security Number: xxx-xx-2333
- Consumer Communication ID: 987654
- Home Address:
 - Country: * United States (dropdown)
 - Address Line 1: * 123 ABC Street
 - Address Line 2:
 - City: * Manchester
 - State: * New Hampshire (dropdown)
 - Zip Code: * 03101
- Mailing Address: Same as Home Address
- Home Phone: * ()
- Birth Date: * 2/28/1992 (mm/dd/yyyy)
- Gender: * Female Male
- Marital Status: * Married Single
- Email Address: tchurch@benstrat.com
- [THIS TEXT CAN BE CUSTOMIZED]
- Do you have any dependents? Yes No

Step 6: Verify/ update your Personal Information.

Dependents

steps: 1 2 3 4 5 6

* = required field

First Name: *

Middle Initial:

Last Name: *

Social Security Number:

Birth Date: * (mm/dd/yyyy)

Gender: * Female Male

Full Time Student: * Yes No

Relationship:

Eligible Dependents

Name	SSN	Relationship	
Patrick Kalmes		Spouse	Update Remove

Step 7: Add and/or Verify Dependents to the system.

- Review any dependents already listed on your account.
- Enter your dependent's information and click **Add to List** to add this dependent. Repeat this step for each eligible dependent you would like to add.

Plan Rules

steps: 1 2 3 4 5 6

It is important to be aware of some of the basic rules of these accounts before you enroll. Make sure you keep these in mind when you are making your elections. We also encourage you to review the FY2020 Participant Handbook for more detailed rules regarding these Pre-tax Accounts.

2020 HCSA

- I cannot change this election during the Plan Year *unless* I have a qualifying change in status as described in the Plan.
- I must make my elections carefully and conservatively. Expenses paid under the HCSA or DCAP cannot be reimbursed from any other source and I will not seek reimbursement from any other source.
- Expenses must be incurred during the Plan Year or the Grace Period. The Grace Period is a 2.5 month period following the end of the Plan Year during which I may continue to incur expenses for the prior plan year. (September 15)

I have read and understand the [2020 HCSA rules](#)

Step 8: Review Plan Rules.

- Your employer has listed important plan rules you should be aware of before you enroll. Read these rules carefully.
- Check **I have read and understand the Rules** for each plan

Elections

steps: 1 2 3 4 5 6

Enter your actual elections in the field provided. To calculate the total elections, tax savings, and estimated per pay period deduction select the calculate button. If you choose to not enroll in a plan leave the field blank.

	Your Election	Max Employee Election
2020 HCSA ?	<input type="text" value="2700.00"/>	\$2,700.00
Total election for the year:		
Total tax savings for the year *:		<input type="button" value="Calculate"/>
Estimated per pay period deduction:		

* Tax savings estimate is based on a 30% tax rate. True tax savings will be based on your individual circumstances.

Step 9: Make Plan Elections.

- Enter your annual election for each plan in which you want to enroll within the "Max Employee Election" as indicated to the right of the box.
- Click the **Calculate** button to view your estimated savings.
- Please note: minimum election is \$250.

Payment Method

steps: 1 2 3 4 5 6

Select the method in which you would like to be reimbursed.

Check


All completed claims received will be scheduled for payment or denied within 3-5 business days. Please allow at least 5 business days following the schedule of payment for receipt of payment.

Direct Deposit

All completed claims received will be scheduled for payment or denied within 3-5 business days. We cannot guarantee overnight posting of direct deposit to your bank account. Direct deposits may take three to four business days from the date of payment processing at Benefit Strategies to actual posting in your account.

FlexExpress Debit Card

Pay for your qualified expenses directly out of your plan account with the Debit Card. Substantiation may be required after purchase. *An annual fee may be assessed to your account for this option.



If you choose to be reimbursed using the Debit Card, please answer the questions below.

1) What alternate reimbursement method would you like to use for the reimbursement of claims that are filed online?

Check

Direct Deposit

Step 10: Select the payment method for reimbursement.

- If you select Direct Deposit, you must complete the direct deposit set up.
- If you want to order a **new card** you must select FlexExpress Debit card and an **alternate reimbursement method**.

Enrollment Verification

steps: 1 2 3 4 5 6

You must click submit at the bottom of this page to complete your enrollment.

Profile Edit Information

Name: Taylor Kalmes
 Social Security Number: xxx-xx-2333
 Home Address: 123 ABC Street
 Manchester, NH 03101
 United States
 Mailing Address: 123 ABC Street
 Manchester, NH 03101
 United States
 Home Phone: (888) 401-3539
 Birth Date: 2/28/1992
 Gender: Female
 Marital Status: Married
 Email Address: tchurch@benstrat.com
 Do you have any dependents? Yes

Dependents Edit Information

Full Name	SSN	Birth Date	Gender	Full Time Student	Relationship
Patrick Kalmes		4/19/1990	Male	No	Spouse
Harper Kalmes		4/15/2018	Female	No	Dependent

Enrollment Elections Edit Information

	Employee Contribution	Company Contribution
2020 HCSA	\$2,700.00	
Total Election for the year: \$2,700.00		
Estimated per pay period reduction : * \$112.50		

* Begins on the first pay date of the Plan Year.

Method of Reimbursement Edit Information

You have chosen Check as your method of payment.

Step 11: Review/Complete your enrollment.

- Make sure you click **Submit** to complete enrollment.

CONFIRMATION:

Enrollment Confirmation

Congratulations! You have successfully completed your enrollment in the FY2020 FSA Plan Year, starting July 1, 2019. Benefit Strategies will be providing your enrollment information to your agency coordinator.

Please print this page for your records.

Plan	Company Contribution	Employee Contribution	Estimated Per Paycheck Reduction
2020 HCSA		\$2,700.00	\$112.50
Total Estimated Reductions Per Paycheck :* \$112.50			

* Pay check reductions are based on your election and the number of scheduled pay periods within the plan year. True reductions will be determined by your employer.

You have chosen to be reimbursed by Check.

The payroll deduction to fund your spending accounts will begin on 7/9/2019 and end on your last paycheck of the plan year. You may begin filing claims for eligible expenses on 7/1/2019. All claims must be filed for expenses incurred while you are a participant, within the plan year 7/1/2019 - 6/30/2020

You will receive a confirmation email with instructions on how to file a claim, check your account balance, and obtain additional information about your pre-tax benefit plans. You can also view this information now by downloading the [Next Steps](#) document.

← **Print**

Step 12: Print Enrollment Confirmation.

- Keep all enrollment information for your personal records.

For assistance, Benefit Strategies, LLC at 877.FlexGIC (1.877.353.9442)