

FLEXSAVE INFORMATION

For CALENDAR YEAR 2019

Open enrollment period: Monday, Nov. 1, 2018 through 4 pm, Tuesday, Nov. 20, 2018.

Return election forms to BCSD - Benefits.

Once enrolled in the Flex Plan, you can manage both your health plan and your FSA in one place using My Health Plan, MMO's secure member website. Any questions regarding your FSA (Flexible Spending Account), contact MMOI (800) 525-9252.

- ✓ www.MedMutual.com/member
 - Log in or Register for a **My Health Plan** account
 - Click My Spending Accounts under the Claims & Balances tab
 - Check off "yes" then Click "Accept Terms & Submit"
 - All information/submission is under the **My Accounts** tab.
 - Allows you to see your Benefit Account Summary, Claims activity, Transaction History, Forms, and Claims. (We do NOT have Debit cards).
 - When Submitting an Online Claim - it creates the form, adding a claim number. Or you can print, sign and fax with supporting documentation. Keep originals in your files for any IRS questions.
- ✓ **Please note:** We do not utilize a debit card - this allows claims to "rollover" from MMO to Flex. (Rollover should not be used if you have a secondary carrier for claims - see below*).
- ✓ The Waiver form is located on the Treasurer Website

* **If you have TWO insurance carriers** (for yourself and/or Spouse/Dependents):

- ✓ **Both insurance carriers must process the claim and only the balance owed after both carriers have paid, should be submitted to Flex Save (**IRS rules**).**
 - **You MUST complete Waiver of Rollover Claim form if you have 2 insurance carriers.**
 - **Mail to Medical Mutual.** Completing the Waiver form notifies Medical Mutual not to roll over your claims automatically to Flex Save.

- ✓ You may also file the Waiver form if you would rather submit all claims yourself. The waiver form is available on the BCSD web page.
 - Forms are accessible from Treasurer Page on BCSD Website. (Sign in)
 - Go to: Departments, Treasurer's office, then scroll down to Quick Link Listing. Choose Flex Save under the [quick links](#) section, click (+) Flex Save to locate Enrollment Form. The enrollment form, informational brochure and Plan outline is located via this link. (or see Secretary). If you choose to print, please print Double Sided.
- ✓ Prescription, vision and any over the counter items must be manually submitted to Flex Save.

To submit a claim that does not roll over: You can fill out a claim form online. (see above). Or, you can print the claim form from the Treasurer's website. You must Fax or mail the claims with your supporting receipts.

Contact for company:	Address:	Medical Mutual FSA (FlexSave) 2060 East Ninth Street MZ: 44-2W-8317 Cleveland, OH 44115-1355
	Phone:	1-800-525-9252
	Fax:	440-878-4890