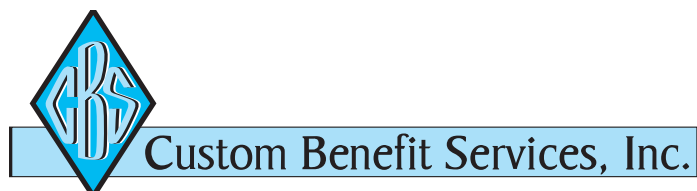


take care[®] OF YOURSELF
with the
FLEXIBLE BENEFITS PLAN!



Reduce taxes and increase your take-home pay



A Flexible Benefits Plan

helps your paycheck buy more!

Sometimes referred to as a cafeteria plan, flex plan, or a Section 125 plan, a Flexible Benefits Plan lets you set aside a certain amount of your paycheck into an account before paying income taxes. During the year you have access to this account for reimbursement of expenses you regularly pay for, such as healthcare and dependent daycare.

When you use tax-free dollars to pay for these expenses, you realize an increase in your spending power, and substantial tax savings.

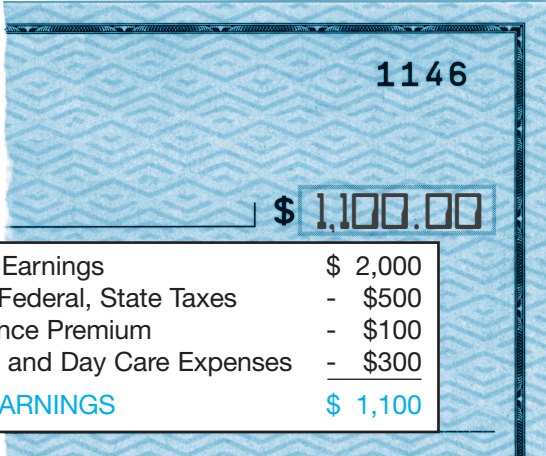
Reimbursable expenses can include:

- Deductibles, co-pays, and prescription drugs
- Expenses not covered by insurance
- Dental services & orthodontics
- Eyeglasses, contacts, solutions & eye surgery
- Weight-loss programs (associated with a specific disease)
- Chiropractic services
- Psychiatric care & psychologist's fees
- Smoking cessation programs
- Over-the-counter drugs that are medically necessary, like allergy medications or aspirin (prescription required)
- Adult & child daycare services
- And more!

Here's how it works...

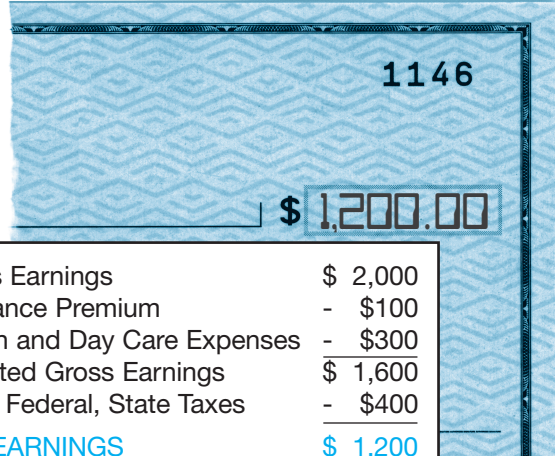
Example: An employee makes \$2,000 each month and decides to participate in her employer's Flexible Benefits Plan. As a result, her insurance premiums and health and daycare expenses are paid with tax-free dollars, giving her an additional \$100 each month!

Without the Plan



	1146
	\$ 1,100.00
Gross Earnings	\$ 2,000
FICA, Federal, State Taxes	- \$500
Insurance Premium	- \$100
Health and Day Care Expenses	- \$300
NET EARNINGS	\$ 1,100

With the Plan



	1146
	\$ 1,200.00
Gross Earnings	\$ 2,000
Insurance Premium	- \$100
Health and Day Care Expenses	- \$300
Adjusted Gross Earnings	\$ 1,600
FICA, Federal, State Taxes	- \$400
NET EARNINGS	\$ 1,200

Over-The-Counter Medications/Items

Effective January 1, 2011 there are new IRS guidelines for over-the-counter medications/items.

- Obtain a prescription for OTC medications/items from your doctor.
- Do not use debit card for over-the-counter medications and items.
- Over-the-counter medications/items may only be reimbursed by submitting a paper claim form with receipt and doctor's prescription.

Over-the-counter medications/items that can be reimbursed without a prescription include: blood sugar monitors, insulin/diabetic supplies, contact lens solution and denture bond.

It's as easy as...

1 Carefully read this material and choose which options make sense for you to participate in.

2 Determine how much you expect to spend during the year for each option.

3 Complete an Election Form and return it to a representative or to your Human Resources office.

Step I: Your Options

There are several accounts you can participate in with the Flexible Benefits Plan.

I: Healthcare Reimbursement Account

This account reimburses you for healthcare expenses not covered by insurance. You set aside money, tax-free, through regular payroll deductions. During the year, you can be reimbursed directly from your account for those qualified healthcare services provided that are not covered by insurance.

Common expenses that qualify for reimbursement are doctor visits, deductibles, co-payments, prescriptions, mental health care, dental services and orthodontics, chiropractor services, eye exams, glasses and contacts.

II: Dependent Care Reimbursement Account

This account reimburses you for daycare expenses for eligible children and adults. Through regular payroll deductions, you set aside part of your income to pay for these expenses on a tax-free basis. To qualify, your dependents must be:

- a child under the age of 13, or
- a child, spouse or other dependent who is physically or mentally incapable of self-care and spends at least 8 hours a day in your household.

Qualified expenses for reimbursement include adult and child daycare centers, preschool and before/after school care.

Please note: A dependent care credit is available on your annual tax return. Whether or not to participate in the daycare portion of this plan depends on your income, filing status, number of dependents and annual daycare expenses. You will also receive your tax savings throughout the year, rather than once a year when you file your taxes. Contact your plan administrator for further information.

Maximum Contribution

Medical Reimbursement – \$5,000.00
 Dependent Care Reimbursement
 Married filing jointly – \$5,000.00
 Single or married filing separate – \$2,500.00

Step II: Determining Your Reimbursable Expenses

By completing the following information, you can calculate your annual reimbursable expenses. Take into consideration the services to be provided during the upcoming plan year for you and your dependents.

Healthcare Expenses

Medical (1)*

Deductibles \$ _____
 Co-payments \$ _____
 Doctor visits \$ _____
 Prescriptions \$ _____
 Medications \$ _____
 Other \$ _____
Total \$ _____

Vision (2)

Exams \$ _____
 Eye Surgery \$ _____
 Lenses/Frames \$ _____
 Contacts \$ _____
 Solutions \$ _____
 Other \$ _____
Total \$ _____

Dental (3)*

Routine Check-ups \$ _____
 Fillings/Crowns \$ _____
 Orthodontics \$ _____
 Other \$ _____
Total \$ _____

Dependent Daycare Expenses

Children \$ _____
 Adults \$ _____
Total \$ _____

Estimated Annual Expenses and Tax Savings

Total Healthcare Expenses (add 1 + 2 + 3) \$ _____
 Total Dependent Daycare Expenses \$ _____
 Total Adoption Expenses \$ _____
 Total Other Reimbursable Expenses \$ _____
 Total Expenses \$ _____
 Tax Bracket Percentage (see below) _____ %
 Annual Tax Savings \$ _____
 (multiply total expenses by tax bracket percentage)

Savings Amount Per Paycheck

\$ _____
 (divide total expenses by number of paychecks you receive each year - 52, 26, 24, 12)

Tax Estimate Table

Based on a combination of social security, federal, and state income taxes.

If your annual household earnings are:	Estimated tax rate is:
Less than \$30,000	25%
\$30,000 to \$40,000	29%
\$40,000 to \$70,000	31%
Greater than \$70,000	33%

These tax rates are estimates based on national averages and may not reflect your actual tax rate.

* Cosmetic procedures like teeth bleaching and face lifts are not eligible expenses for reimbursement.

Step III: To Enroll

Complete an Enrollment Form and return it to your Human Resources Office.

Procedures for Filing Paper Claims

In order for a claim to be processed, the following information must be provided:

1. Receipt/Statement/Insurance EOB must show name of provider
2. Receipt/Statement/Insurance EOB must show date of service
3. Receipt/Statement/Insurance EOB must show type of services and charges incurred.
4. Dependent day care claims – claim form may be signed by provider in lieu of submitting receipt. Expenses must be itemized either weekly or monthly on claim form.

In order to be an eligible expense, services must have been rendered. Prepayment of treatment will not be reimbursed until the services are rendered. Contract fee notice or treatment form is not considered a receipt. Cancelled checks, bank statements and credit card statements cannot be accepted as a receipt.

Please note: Certain expenses, i.e. vitamins/supplements, massage therapy, weight loss program, and over-the-counter medications/items will require a doctor's prescription.

Important

To avoid delays in claim processing, **all expenses must be itemized on claim form** and the claim form must be signed by employee.

Ineligible Expenses

- Prescriptions from outside USA (ordered/shipped)
- Vision warranties and service contracts
- Insurance premiums
- Cosmetic/elective procedures that are not medically necessary to correct or prevent a medical condition.

For a complete list of qualified expenses, please visit our website at www.myflexonline.com.

24-Hour Account Access

The MyFlex website has everything you need to manage your Flexible Benefit Account

- Verify your election
- View your account balance
- Claim forms
- How and where to file claims
- View qualified expenses
- How to contact us
- Track claims and disbursements

To access your account go to www.myflexonline.com

Instructions for Filing Claims

OPTION 1 FOR FASTER PROCESSING

- Visit employee website: www.myflexonline.com to complete claim form online
- Click: Request Payment tab at top
- Itemize expenses by completing an Internet claim form (Ice)
- Follow instructions to SAVE and PRINT form
- **Submit copy of form and receipts to our office by fax: (352) 369-9461 or (352) 291-6690; or mail to Custom Benefit Services, Inc., P.O. Box 4078, Ocala, Florida 34478.**

OPTION 2 MANUAL COMPLETION

- Contact Human Resources or Custom Benefit Services for paper claim forms
- **Itemize expenses on claim form then fax or mail form with receipts/statements or insurance EOBs to (352) 369-9461 or (352) 291-6690; or mail to Custom Benefit Services, Inc., P.O. Box 4078, Ocala, FL 34478.**

Your Flex Benefits Card is the easiest way to access your Flexible Benefit Account!



What you can purchase with your take care card:

- Doctor, dental, and pharmacy co-pays and expenses not covered by your health plan;
- Child and elder dependent care expenses, and much more!
- Do not swipe your debit card for over-the-counter medications/items.

How it works

When you swipe your flex benefits card to pay for qualified plan expenses for current plan year, the money is taken directly from your flexible benefit account(s). No need to pay for qualified plan expenses with a personal check, cash, or credit card and then submit a claim to get reimbursed from your plan account. It's that simple!

- Swipe your flex card when you're ready to pay for your purchases. Note: Your card has no PIN, so select CREDIT instead of DEBIT, or ask the cashier for assistance.
- Remember to save all itemized receipts for your tax records, or for purchase verification – you may be occasionally asked to provide receipts for certain purchases. **No substantiation after 90 days will result in a balance due on account and must be paid back.**

You won't have to submit receipts* when you use your flex card at participating retailers

- Only FSA eligible purchases will ring up on your card.
- Swipe and save receipts as certain expenses may require submission of receipts.



Participating Retailers

- CVS/Pharmacy
- Target Stores
- Walgreens
- Wal-mart
- Publix

To view an updated list of participating retailers visit www.myflexonline.com, then click on debit card tab. 100% of Rx swipes at these locations will be automatically adjudicated (no claim submission required).

Adjudicating Swiped Expenses

- Swipe & Save** – It's important to keep all receipts for purchases made with your Take Care Flex Benefits card. **There may be an occasion when you will be requested to verify a purchase made with your card.**
- Adjudicating Swiped Expenses** – If swipes need to be adjudicated, you will receive a "Take Care" e-mail. The e-mail provides a link to the myflexonline.com site where the participant can create a debit card claim form. After completing the claim form, **SAVE & PRINT**. Then sign printed copy and mail or fax with receipts to Custom Benefits Services, Inc.

Note: Should there be a time when your flexible benefits card is not accepted, you may pay the qualified expense with personal funds, then submit a claim with the appropriate receipt(s) and you will receive a reimbursement from the plan.

Direct Deposit Option

Direct Deposit of funds is available. Contact Human Resources or Custom Benefit Services, Inc.

Extended FSA Claims Deadline

Employees may now take up to 2-1/2 months following the end of their plan year to incur expenses against their FSA accounts for medical, dental, and vision care. Even daycare expenses can be included in this new deadline. In essence, participants can carry over funds into the next plan year.

This extra breathing room for miscalculation of annual election amounts and submitting claims should avoid forfeiting of unused benefit funds.

Questions & Answers

What is a Flexible Benefits Plan?

A benefit provided by your employer that lets you set aside a certain amount of your paycheck into an account before paying income taxes. Then, during the year you can be directly reimbursed from your account for qualified healthcare and daycare expenses.

Why should I participate in the Healthcare Reimbursement Account when I already have health insurance?

This account is used to pay for expenses not covered by insurance. For example — annual physicals, co-payments, eye exams, glasses, orthodontics, prescription drugs, and hospital care, to name a few. Covered expenses also include over-the-counter drugs that are medically necessary, like allergy medications, aspirin, antacids, or non-prescription drugs recommended by your physician.

Can I change my contributions during the year?

Only if you have a change in status such as: marriage, birth, adoption, or a change in your, your spouse's, or your dependent's employment status.

What if I currently take the dependent care credit on my annual tax return?

Whether or not to participate in the daycare portion of this plan depends on your income, filing status, number of dependents and annual daycare expenses.

The amount you deposit in your Dependent Care Reimbursement Account reduces the amount, dollar for dollar, that you can claim as a credit on your tax return. Contact your plan administrator for further information.

Are there any negatives that I should know about?

Yes. Because you are not paying any social security tax on the portion of your income that has been redirected, your social security benefits may be slightly reduced.

Do I have to wait for the money to be deposited in my account in order to make a claim for reimbursement?

The annual amount you have allocated for the Healthcare Reimbursement Account is available to you at any time throughout the plan year. The amount available to you from your Dependent Care Reimbursement Account is the amount you have contributed to date.

How do I know how much is available in my accounts?

Account information is available 24/7 by going to www.myflexonline.com.

What happens to my accounts if I terminate my employment?

You will be able to request reimbursement for healthcare and daycare expenses for services provided prior to your termination. Check your SPD for any additional rights or benefits provided by your company's plan.

What if I don't use all of the money I set aside in my accounts?

Carefully review your estimated expenses before making the decision to participate. Any contributions that are not used during the plan year may not be paid to you in cash or used in a later plan year.

What if I am not covered under my company's health insurance plan?

Good news! You and your family can still participate in the Healthcare or Dependent Care Reimbursement Accounts.

How do I benefit by participating?

Your biggest advantage is the tax savings. Every dollar you set aside in your account reduces your income taxes, and you can be reimbursed for qualified expenses that you are already paying for!

Custom Benefit Services, Inc.

P.O. Box 4078

Ocala, Florida 34478

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www.myflexonline.com