



MARATHON COUNTY

Flexible Spending Account (FSA)

Important Plan Information

01/01/2025 – 12/31/2025 Plan Year

ENROLLMENT METHOD:

Data Feed

You must complete your enrollment in Workday. See your Human Resources Department for enrollment instructions.

OPEN ENROLLMENT DEADLINE TO ENROLL

11/14/2024

MAXIMUM ELECTION AMOUNT:

Health Care FSA: \$3,300

Dependent Care FSA: \$5,000

(Note: Group insurance premiums are deducted pre-tax automatically. Contact your employer's benefits representative if you have questions.)

FSA DEDUCTIONS:

26 FSA Deductions

(Your plan year election will be divided by the number shown above.)

FSA CARRYOVER:

Your FSA plan allows you to carryover unused funds from your Health Care FSA to be spent in the next plan year. **A maximum of \$660 can be carried over into the 2026 plan year.**

You must have a minimum balance of \$1.00 to carryover to the new Plan Year. If a new election is not made by the second year, carryover balances will be forfeited (see example).

RUNOUT PERIOD:

You have until **03/31/2026** to **submit** claims for expenses **incurred** during the **2025** Plan Year.

Termination Runout Period: You have 90 days from your termination date to submit claims for expenses incurred during your employment.

REIMBURSEMENTS:

Reimbursement Schedule

Eligible claims received Friday by 9:00 a.m. CT will have reimbursements released the following Friday.

Reimbursement Method

Mandatory Direct Deposit

Please complete a direct deposit form and attach a voided check with your FSA enrollment form.

If you have a current FSA plan and there is no change to your banking information on file, you do not need to complete the form.

CLAIM EMAIL NOTIFICATIONS:

Email notifications will be sent to inform you of claims processed, reimbursements issued or requests for additional information needed to process your claims. By providing your email address, you will automatically receive these notifications.

ONLINE ACCOUNT ACCESS:

You may view account details including balance, claims and reimbursements via the DBS phone app or online at dbsbenefits.com.

You will need the following PIN to create an online account if you have not done so already: **Marathon**

HEALTH CARE FSA CARRYOVER EXAMPLE:

If you had a carryover from 2023 into 2024 and you did not make an election for new contributions in 2024 or 2025, your carryover will be forfeited on 12/31/2024. If you have eligible Health FSA expenses incurred in 2024, you have until 03/31/2025 to submit these claims to DBS.