




# Don't Lose Your Unused 2025 Flexible Spending Account (FSA) Funds

## Submit 2025 claims by April 30

ECU Health offers Health Care and Dependent Care FSAs to help you lower taxes on your take-home pay and make health care and dependent care more affordable. You have until April 30 to submit reimbursement claims to WEX to make your 2025 money go further.

It's Time to Take Action		
	Today <i>(or as soon as possible)</i>	Check your FSA account balance(s) at <b>WEX</b> .
	April 30	Submit reimbursement claims online (have receipts handy!): <ul style="list-style-type: none"> <li>▶ <b>Health Care FSA:</b> Expenses must be incurred Jan. 1 through Dec. 31, 2025.</li> <li>▶ <b>Dependent Care FSA:</b> Expenses must be incurred Jan. 1, 2025, through March 15, 2026.</li> </ul>
	Health Care FSA Rollover	Don't forget you will be able to carry over up to \$660 of Health Care FSA funds from calendar year 2025 to 2026. Rollover funds are not available until after the April 30 deadline for claims reimbursement.

## How to file 2025 claims

Submit your receipts with a completed **reimbursement claim form (English | Spanish)**. If needed, complete the **Dependent Care Verification Form (English | Spanish)** for the Dependent Care FSA. Some debit card transactions may still require a receipt.

## Additional resources and important contact information

- ▶ Visit the ECU Health Total Rewards website at [totalrewards.ECUHealth.org/flexible-spending-accounts](https://totalrewards.ECUHealth.org/flexible-spending-accounts)
- ▶ Contact WEX by visiting [wexinc.com](https://wexinc.com) or calling **866-451-3399**
- ▶ Call HR Services at **252-816-7446**

## Reminder of ways to spend FSA funds and examples of eligible expenses\*

Health Care FSA (HCFSA)* and Limited Purpose FSA**	Dependent Care FSA (DCFSA)*
<ul style="list-style-type: none"> <li>▶ Dental plan copays, deductibles and coinsurance</li> <li>▶ Orthodontia expenses</li> <li>▶ Vision care expenses, including contacts, glasses and LASIK surgery</li> <li>▶ Prescriptions</li> </ul>	<ul style="list-style-type: none"> <li>▶ Cost of child or adult day care***</li> <li>▶ Nursery school</li> <li>▶ Preschool (excluding kindergarten)</li> <li>▶ Summer day camp</li> </ul>

\* This is only a sample of eligible expenses. Visit WEX for a complete list.

\*\* Eligible expenses for the Limited Purpose FSA include eligible dental and vision expenses only.

\*\*\* An eligible dependent is a tax-dependent child under age 13 or a tax-dependent spouse, parent or child unable to care for themselves. Visit [irs.gov](https://irs.gov) for definition of eligible tax dependent.