



Make your money work for you.

Maximize your flexible spending account.



Smart Savings

Get Started

During your enrollment period, you learned that FSAs allow you to set aside pre-tax dollars from your paycheck to pay for eligible expenses.

There are two types of FSAs:

- The **health care FSA** lets you pay for eligible medical, dental and vision expenses.

If you contribute to a health savings account (HSA) and elect to contribute to a health care FSA, you will be enrolled in a limited-use health care FSA. This account allows you to pay for eligible dental and vision expenses.

- The **dependent day care FSA** lets you pay for eligible dependent day care expenses so you and your spouse, if you are married, can work, actively look for work or attend school full-time.

Read on for tips on using your FSAs. For complete information, please reference the TriNet Benefits Guidebook on TriNet (login.TriNet.com). The Guidebook includes deadlines to incur and submit claims and provides additional information on how the plans work. Find it at Benefits > Resources > Benefits Guidebook.

Check it out.

Have a limited-use health care FSA?

Look for this symbol to learn how FSA rules apply to your account.



What's Eligible?

To use your FSA properly, you need to know what's eligible. For a list of eligible expenses, please go to myuhc.com > Claims & Accounts > Forms > Review Eligible Expenses.

Note: TriNet is not responsible for conflicting or inaccurate FSA eligibility posted on retail sites.




Smart Savings

Save Your Receipts—even for debit card purchases

Always keep your FSA-related receipts in one place. Why? Depending on the type of claim that you submit, you may be required to provide supporting documentation to substantiate your claim. This could include providing TriNet with a copy of your itemized receipt. TriNet will notify you if supporting documentation is required.

Here are some examples of acceptable documentation:

- **Health care FSA**—An Explanation of Benefits (EOB) statement from your insurance company or an itemized statement on provider letterhead that includes the date services were provided, patient name, final cost of service and a description of the service.
-  **Limited-use health care FSA**—The same documentation as for a regular health care FSA, but only for eligible dental and vision expenses.
- **Dependent day care FSA**—A third-party bill or itemized statement on provider letterhead showing a tax identification number or Social Security number, date services were provided, dependent name, dependent date of birth, cost of service and a description of the service.

Note: If a debit transaction is not properly supported with documentation when it is requested to support a transaction, you are at risk of losing access to your card. However, available funds always remain accessible by submitting a claim.

Your benefits debit card and the health care FSA grace period

You have a 2½-month “grace period” to incur health care FSA expenses, as long as you’re actively participating in the plan on the last day of the plan year.

When you use the benefits debit card for eligible expenses during this grace period, your claims are reimbursed from the prior plan year’s FSA balance until it’s used up.



Deadlines Matter

Timing is everything when you're using an FSA. The IRS requires that you incur and submit eligible expenses by the appropriate deadline(s), or you'll lose any money left in your account at the end of the plan year.

Mark these dates on your calendar or set up a reminder—they're important to remember!

So how long do you have to make purchases and submit expenses?

2025 Flexible Spending Account (FSA) Dates	
September 30, 2025	This is the last day of the 2025 benefits plan year.
December 15, 2025*	This is the last day of the grace period to incur (or make) eligible health care and dependent day care FSA expenses that can be paid from your 2025 plan year accounts.
January 31, 2026	This is the last day claims can be submitted for eligible expenses incurred for the 2025 plan year for both the health care and dependent day care FSAs.
2026 Flexible Spending Account (FSA) Dates	
September 30, 2026	This is the last day of the 2026 benefits plan year.
December 15, 2026*	This is the last day of the grace period to incur (or make) eligible health care and dependent day care FSA expenses that can be paid from your 2026 plan year accounts.
January 31, 2027	This is the last day claims can be submitted for eligible expenses incurred for the 2026 plan year for both the health care and dependent day care FSAs.

* Applicable only if you are actively participating in your health care FSA as of the last day of the benefits plan year.

If you enrolled in an FSA for the 2026 benefits plan year and you have a remaining 2025 benefits plan year balance, any eligible expenses paid for with your FSA debit card during the grace period will be deducted from your 2026 FSA balance initially, and then adjusted to apply toward your remaining 2025 FSA balance. Eligible expenses incurred after the grace period, or after your 2025 balance has been depleted, will be deducted from your 2026 benefits plan year election.

If you did not enroll in an FSA for the 2026 benefits plan year, your FSA debit card is not active for purchases made during the grace period, and you will be required to submit your claims manually.

Life Changes

When life changes, if you no longer meet TriNet benefits eligibility requirements, are on an unpaid leave of absence or your employment ends, your eligibility to participate in a TriNet-sponsored FSA changes. To learn how your eligibility changes, refer to the current TriNet Benefits Guidebook and Summary Plan Description.

Using Your FSA

You have two ways to pay for eligible expenses during the plan year:

1. Pay with your benefits debit card; or
2. Pay out of your pocket and submit a claim for reimbursement.

Did you know?

If you are enrolled in a UHC medical plan, a third way to pay for eligible healthcare expenses from your health care FSA is through UHC's auto rollover feature. When activated, the feature will automatically pay claims from your health care FSA account, if the carrier determines that you did not use your debit card as a form of payment. The feature is activated upon initial enrollment and remains active each benefits plan year.

Get your card

- Your benefits debit card will be shipped to your home address within 7–10 business days from the date your FSA is effective.
- A card will be issued for your spouse, in his or her name, automatically. If you need additional cards, you will need to reach out to UHC.
- Each card is valid for three years from issue date.



Swipe your card

Your benefits debit card is a fast and easy way to pay for eligible expenses without paying out of your pocket. (Either way, keep your receipts!)

You can pay for both health care and dependent day care eligible expenses with the card.

- Your entire health care FSA election amount is available on the benefits debit card at the start of the plan year.
- Only your year-to-date dependent day care FSA contributions (minus prior reimbursements) are available on the benefits debit card at any time.



With the limited-use health care FSA, your debit card will work only at merchants designated as dental and vision providers.

Submit your claim

When you pay for an eligible expense out of your pocket, you have two ways to submit claims for reimbursement:

To access a claim form, please go to myuhc.com > Claims & Accounts > Forms.

You may either elect to submit your claims online by clicking on the blue “Submit online FSA/HRA Form” link, or you can print the FSA Medical Claim Form or Dependent Care Claim Form and mail it to the address listed on the form.

Tip: Speed up reimbursements by registering your bank account for direct deposit claim reimbursement.

Need more?

For more information on submitting claims or your account, please call UHC at 800.331.0480


Managing Your FSA

Help is available when you need it—24 hours a day, 7 days a week. Log in to myuhc.com > Claims & Accounts to:

- Submit and review the status of your claims.
- Access comprehensive lists of eligible expenses.
- Look up your account balance(s).
- Find information and FAQs on FSA guidelines.

Consult your tax advisor to learn how much an FSA can save you annually, and for any other questions related to your personal tax situation.





TriNet's Notice of Privacy Practices is posted on TriNet (login.TriNet.com) > Benefits > My Benefits.

© 2025 TriNet Group, Inc. All rights reserved. This communication is for informational purposes only, is not legal, tax or accounting advice, and is not an offer to sell, buy or procure insurance. TriNet is the single-employer sponsor of all its benefit plans, which does not include voluntary benefits that are not ERISA-covered group health insurance plans and enrollment is voluntary. Official plan documents always control and TriNet reserves the right to amend the benefit plans or change the offerings and deadlines. Inclusion of 3rd party hyperlinks in this communication does not necessarily imply any endorsement of the material or association with their operators.

