

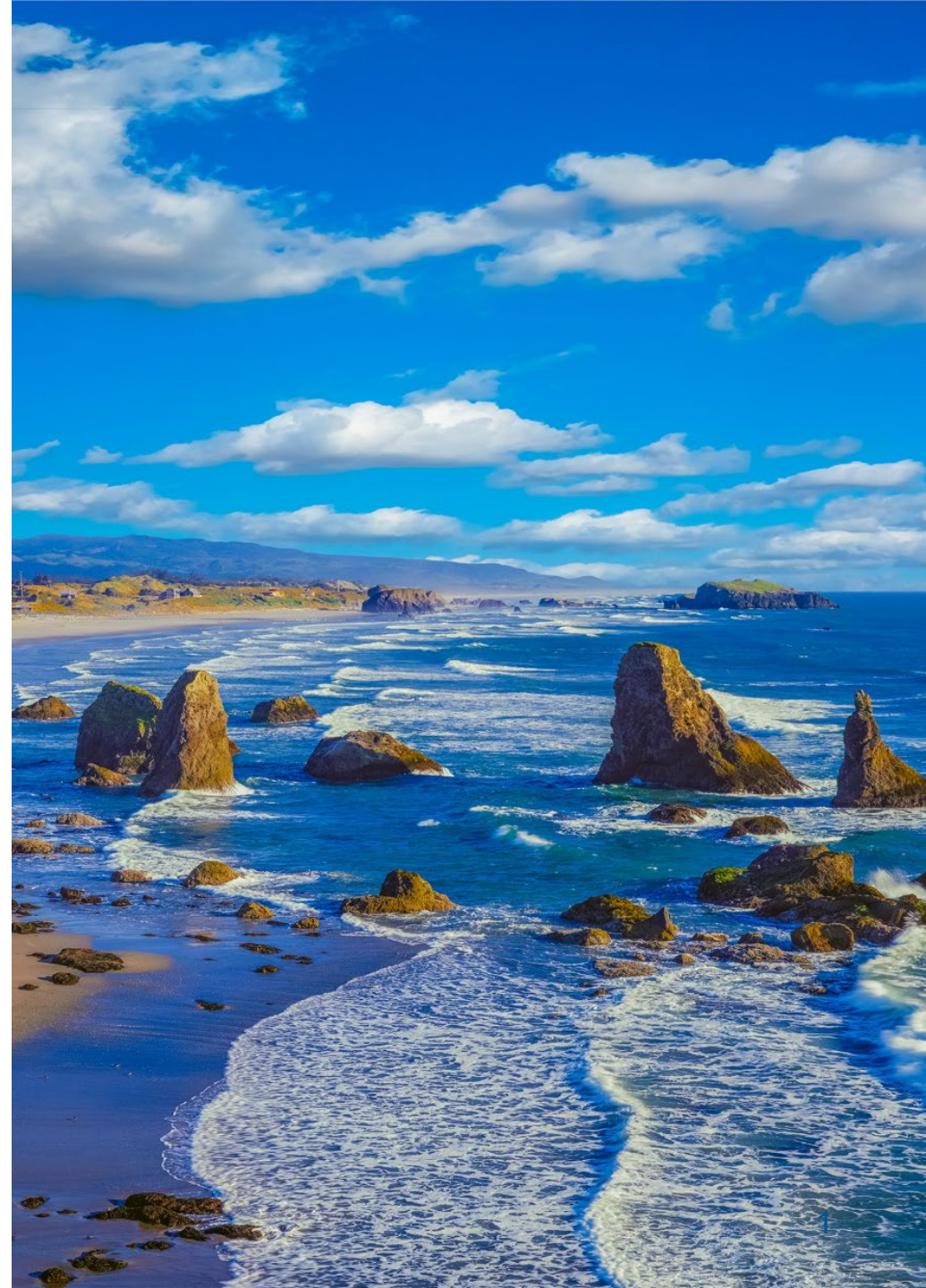
# Flexible Spending Accounts (FSAs) & Commuter Accounts

Administered by ASIFlex

[www.asiflex.com/ORPEBB](http://www.asiflex.com/ORPEBB)



Presented by:  
Linda Freeze



# Webinar Tips

## Check your audio.

- If you're not hearing the webinar, go to the "Audio" tab in GoTo Webinar.
- Select your preferred speaker and microphone.

## Ask questions.

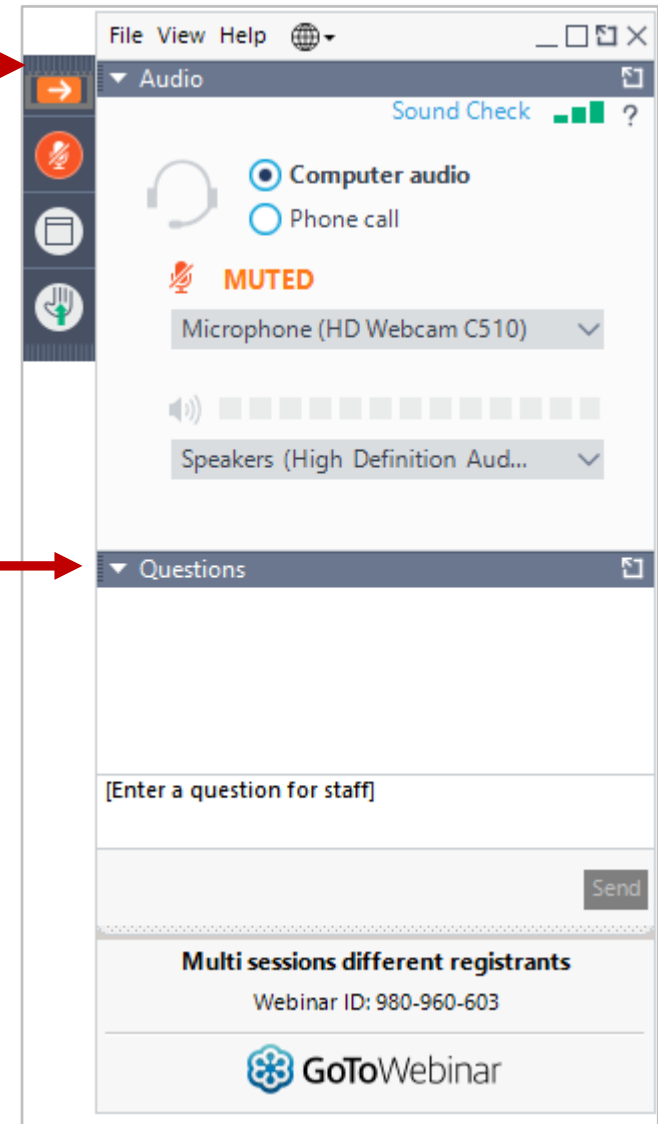
- Type in the "Questions" panel.
- Staff and carriers will answer questions in the panel and during the presentation, as appropriate

## Review the presentation on demand.

- You'll receive a follow-up email when the recording is available.
- Captions are included in the recording.

## Find additional benefits information.

- 2026 Benefits Information page at [PEBBinfo.com](https://www.pebbinfo.com).



# Agenda

- Confirmation Letters
- ASIFlex Corrections
- Flexible Spending Accounts (FSAs) Overview
- Commuter Benefit Accounts Overview

# Confirmation Letters and Corrections

## Flexible Spending Accounts (FSAs) and Commuter Accounts

- Health Care FSA
- Dependent Care FSA
- Parking Commuter Account
- Transportation Commuter Account

# ASIFlex Confirmation Letters

PEBB will send letters and emails to verify your ASIFlex enrollments.

- You will receive one USPS mailing and one email for each ASIFlex benefit enrollment (FSAs, Commuter)
- Letters are printed on different colors of paper depending on the type of enrollment:
  - **Health Care FSA = Blue**
  - **Dependent Care FSA = Pink**
  - **Parking Account = Orange**
  - **Transportation Account = Green**



# Four Letters: Did you get one?

The image shows four overlapping email newsletters from the Public Employees' Benefit Board (PEBB) and Oregon Health Authority. Each newsletter is addressed to a PEBB Member and contains important information about their benefit plan for December 20, 2019. The newsletters are: 1. DCFA (Dependent Care Flexible Spending Account) with a contribution of \$400.00 per month. 2. Parking Commuter Account with a contribution of \$75.00 per month. 3. HCFA (Health Care Flexible Spending Account) with a contribution of \$100.00 per month. 4. Transportation Commuter Account with a contribution of \$75.00 per month. Each newsletter includes contact information for PEBB and Oregon Health Authority, and a deadline of December 20, 2019, for corrections.



Kate Brown, Governor



Public Employees' Benefit Board  
500 Summer Street NE, E-89  
Salem, Oregon 97301-1063  
Phone: 503-373-1102  
Fax: 503-373-1654  
www.oregon.gov/oha/PEBB  
Email: [inquiries.pebb@state.or.us](mailto:inquiries.pebb@state.or.us)

November 8, 2019

Dear PEBB Member:

## IMPORTANT INFORMATION ABOUT YOUR HEALTH CARE FLEXIBLE SPENDING ACCOUNT\* (HCFA) You may need to act to correct your PEBB benefit plan by December 20, 2019!

You are currently enrolled in a Health Care Flexible Spending Account (HCFA) effective January 1, 2020. You have chosen to contribute **\$ 100.00 per month** with 12 monthly withdrawals from your paycheck. Is this correct?

With a HCFA you may deduct money from your paycheck pre-tax. You can then use this money to pay for uncovered or partially covered medical, dental or vision expenses during the months your account was active in the plan year.

### Is this the account you meant to enroll in?

PEBB is hosting an informational webinar on Tuesday, November 19<sup>th</sup> at 10 am to answer questions regarding your ASIFlex enrollments. Register at [www.PEBBWebinars.com](http://www.PEBBWebinars.com).

There are specific rules that apply to HCFSAs. For a complete list, please visit: <http://www.asiflex.com/HCFA.asp>.

You will need to act right away if you find that:

- You are enrolled in the wrong account.
- Your contribution amount is wrong.

Note: If you are an OUS or ODE employee with less than 12 paychecks in the plan year, check the monthly withdrawal to confirm the months are correct.

You have until **December 20, 2019** to request a correction. You can do this by faxing a FSA Open Enrollment Correction form to PEBB at 503-373-1654. You can find the form at: <https://www.oregon.gov/oha/PEBB/FORMS/Flexible-Spending-Open-Enrollment.pdf>

You don't need to take any action if you are enrolled correctly.

**Note: If you do not send in a correction by December 20, 2019, your HCFA contributions will continue through December 2020. You may then only make changes to your 2020 account if you have a qualifying event.**

PEBB Customer Service

\*Health Care Flexible Spending Accounts are subject to non-discrimination testing.

# ASIFlex Corrections

The purpose of PEBB sending the letters and emails is to:

- Confirm the account(s) you selected during Open Enrollment are correct.
- Explain how the account(s) work, what's covered, and what's not allowed.
- Confirm your monthly contribution amount.
- Confirm the number of months you plan to contribute.
- Explain rules for making corrections.
- Provide corrections deadline and penalties for not making corrections, if needed.

# Blue Letter: Health Care FSA



Kate Brown, Governor

November 8, 2019



Public Employees' Benefit Board  
500 Summer Street NE, E-89  
Salem, Oregon 97301-1063  
Phone: 503-373-1102  
Fax: 503-373-1654  
[www.oregon.gov/oha/PEBB](http://www.oregon.gov/oha/PEBB)  
Email: [inquiries.pebb@state.or.us](mailto:inquiries.pebb@state.or.us)

Dear PEBB Member:

**IMPORTANT INFORMATION ABOUT YOUR HEALTH CARE FLEXIBLE SPENDING ACCOUNT\* (HCFSAs)  
You may need to act to correct your PEBB benefit plan by December 20, 2019!**

You are currently enrolled in a Health Care Flexible Spending Account (HCFSAs) effective January 1, 2020. You have chosen to contribute \$ 100.00 per month with 12 monthly withdrawals from your paycheck. Is this correct?

With a HCFSAs you may deduct money from your paycheck pre-tax. You can then use this money to pay for uncovered or partially covered medical, dental or vision expenses during the months your account was active in the plan year.

**Is this the account you meant to enroll in?**

PEBB is hosting an informational webinar on Tuesday, November 19<sup>th</sup> at 10 am to answer questions regarding your ASIFlex enrollments. Register at [www.PEBBWebinars.com](http://www.PEBBWebinars.com).

There are specific rules that apply to HCFSAs. For a complete list, please visit: <http://www.asiflex.com/HCFSAs.aspx>.

You will need to act right away if you find that:

- You are enrolled in the wrong account.
- Your contribution amount is wrong.

Note: If you are an OUS or ODE employee with less than 12 paychecks in the plan year, check the monthly withdrawal to confirm the months are correct.

# Pink Letter: Dependent Care FSA



Kate Brown, Governor

November 8, 2019



Public Employees' Benefit Board  
500 Summer Street NE, E-89  
Salem, Oregon 97301-1063  
Phone: 503-373-1102  
Fax: 503-373-1654  
www.oregon.gov/oha/PEBB  
Email: [inquiries.pebb@state.or.us](mailto:inquiries.pebb@state.or.us)

Dear PEBB Member:

**IMPORTANT INFORMATION ABOUT YOUR DEPENDENT CARE FLEXIBLE SPENDING ACCOUNT\* (DCFSA)  
You may need to act to correct your PEBB benefit plan by December 20, 2019!**

You are currently enrolled in a Dependent Care Flexible Spending Account (DCFSA) effective January 1, 2020.

You have chosen to contribute \$ 400.00 per month with 12 monthly withdrawals from your paycheck. Is this correct?

With a DCFSA you may deduct money from your paycheck pre-tax. You can then use this money to pay for the care of a qualified person. Expenses must be work-related and incurred during the months your account was active in the plan year. This usually means day care expenses for an eligible child under age 13.

**A DCFSA cannot be used for medical, dental or vision expenses.**

**Is this the account you meant to enroll in?**

PEBB is hosting an informational webinar on Tuesday, November 19<sup>th</sup> at 10 am to answer questions regarding your ASIFlex enrollments. Register at [www.PEBBWebinars.com](http://www.PEBBWebinars.com).

There are specific rules that apply to DCFSAs. For a complete list, please visit:  
<http://www.asiflex.com/DCFSA.aspx>.

# FSA Corrections

Act now to correct your:

- Enrollment (change/cancel)
- Contribution amount

## **Important!**

- You can only make changes to your FSA enrollment during the FSA correction period, ending December 12, 2025.
- If you don't make changes during the correction period, your FSA contributions will continue through December 2026.
- After the correction period, you can only make changes to your FSA with a Qualified Status Change (QSC).

# FSA Corrections

**pebb**  
Public Employees' Benefit Board

**2026 Open Enrollment & Correction**  
**Healthcare Flexible Spending Account (HC FSA)**  
**Dependent Care Flexible Spending Account (DC FSA)**

Open Enrollment 10/01/2025 - 10/31/2025  
FSA Correction Period 11/01/2025 - 12/12/2025

Office use only  
Approved by: \_\_\_\_\_  
Approved date: \_\_\_\_\_  
Effective date: \_\_\_\_\_

All current FSA accounts terminate 12/31 each plan year. To have an FSA in 2026 you must sign up during Open Enrollment. You cannot make an Open Enrollment Correction without completing Open Enrollment.

**Enrollment type**

Open Enrollment FSA (new enrollment for 2026 plan year)

Open Enrollment correcting elections.  
I am making a correction to my FSA:  
 Amount     Type     Number of withdrawal months

Cancel my Healthcare FSA     Cancel my Dependent Care FSA

**Enrolling in (check all that apply)**

Healthcare FSA     Dependent Care FSA

**Contact information (you must complete all fields)**

PEBB benefit number (P#####), OR#, University ID or Lottery ID

Last name    First name    Middle    Gender  
 M     F     Other

Check if new address

Contact address    Apartment #    City    State    ZIP

Residence ZIP code    Work ZIP code    Work email    Personal email (optional)

Date of birth (mm/dd/yyyy)    Work phone    Home phone (optional)

Page 1 of 3    MSC 5516 (09/2025)

**Download and submit:**  
2026 FSA Open Enrollment and  
Correction Form (MSC 5516)

**Find the form at:**  
[PEBBinfo.com](https://pebbinfo.com) > Resources > Forms

# Golden Letter: Parking



Kate Brown, Governor

November 8, 2019



Public Employees' Benefit Board  
500 Summer Street NE, E-89  
Salem, Oregon 97301-1063  
Phone: 503-373-1102  
Fax: 503-373-1654  
[www.oregon.gov/oha/PEBB](http://www.oregon.gov/oha/PEBB)  
Email: [inquiries.pebb@state.or.us](mailto:inquiries.pebb@state.or.us)

Dear PEBB Member:

**IMPORTANT INFORMATION ABOUT YOUR PARKING COMMUTER ACCOUNT**  
**You may need to act to correct your PEBB benefit plan by December 20, 2019!**

You are currently enrolled in a Parking Commuter Account effective January 1, 2020.

You have chosen to contribute \$ 75.00 per month from your paycheck. Is this correct?

With a Parking Commuter Account, you may deduct money from your paycheck pre-tax. You can then use this money to pay for parking at or near your work location for the months your account was active in the plan year.

**If you already have parking costs withheld from your paycheck, you should not be enrolled in a PEBB Parking Commuter Account.**

**Are you eligible for this account?**

PEBB is hosting an informational webinar on Tuesday, November 19<sup>th</sup> at 10 am to answer questions regarding your ASIFlex enrollments. Register at [www.PEBBWebinars.com](http://www.PEBBWebinars.com).

There are specific rules that apply to Parking Commuter Accounts. For a complete list, please visit: <http://www.asiflex.com/Commuter.aspx>.

You will need to act right away if you find that:

# Green Letter: Transportation



Public Employees' Benefit Board

Kate Brown, Governor

November 8, 2019



Public Employees' Benefit Board  
500 Summer Street NE, E-89  
Salem, Oregon 97301-1063  
Phone: 503-373-1102  
Fax: 503-373-1654  
[www.oregon.gov/oha/PEBB](http://www.oregon.gov/oha/PEBB)  
Email: [inquiries.pebb@state.or.us](mailto:inquiries.pebb@state.or.us)

Dear PEBB Member:

**IMPORTANT INFORMATION ABOUT YOUR TRANSPORTATION COMMUTER ACCOUNT**  
**You may need to act to correct your PEBB benefit plan by December 20, 2019!**

You are currently enrolled in a Transportation Commuter Account effective January 1, 2020.

You have chosen to contribute \$ 75.00 per month from your paycheck. Is this correct?

With a Transportation Commuter Account, you may deduct money from your paycheck pre-tax. You can then use this money to pay for work-related commuting expenses like van pools and bus passes for the months your account was active in the plan year. ***It does not include parking or use of personal vehicles or bikes.***

**If you already have transit costs withheld from your paycheck, you should not be enrolled in a PEBB Transportation Commuter Account. Are you eligible for this account?**

PEBB is hosting an informational webinar on Tuesday, November 19<sup>th</sup> at 10 am to answer questions regarding your ASIFlex enrollments. Register at [www.PEBBWebinars.com](http://www.PEBBWebinars.com).

There are specific rules that apply to Transportation Commuter Accounts. For a complete list, please visit: <http://www.asiflex.com/Commuter.aspx>.

You will need to act right away if you find that:

- You should not be enrolled in this account.

# Commuter Account Corrections

## Act now to correct your:

- Enrollment (change/cancel)
- Contribution amount
  - If you already have parking expenses withdrawn directly from your paycheck, you are not eligible for the Parking Reimbursement program.
  - If you enrolled by error, act now to cancel your enrollment.

## Important!

You can change or cancel commuter accounts anytime, but **we can't refund money**. After six months of no activity, accounts become inactive, and the funds default to PEBB.

# Commuter Account Corrections

 **2026 Commuter Program Enrollment**

Office use only  
Approved by: \_\_\_\_\_  
Approved date: \_\_\_\_\_  
Effective date: \_\_\_\_\_

For more information go to <http://orpebb.asiflex.com>

**Contact information** (You must complete all fields.)  
PEBB benefit number (P#####), OR#, University ID or Lottery ID \_\_\_\_\_

Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle \_\_\_\_\_ Gender  M  F  Other

Check if new address

Contact address \_\_\_\_\_ Apartment # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Residence ZIP code \_\_\_\_\_ Work ZIP code \_\_\_\_\_ Work email \_\_\_\_\_ Personal email (optional) \_\_\_\_\_

Date of birth (mm/dd/yyyy) \_\_\_\_\_ Work phone \_\_\_\_\_ Home phone (optional) \_\_\_\_\_

**Parking**  
If you already have parking expenses withdrawn directly from your paycheck DO NOT sign up for this program. A PEBB Parking account is not used to pay for monthly, state lot parking.

New election  
 Change my monthly parking contribution  
 Cancel election

**1. Parking Account** Monthly contribution (minimum \$20)  
(Maximum monthly contribution or reimbursement is \$325.00) \$ \_\_\_\_\_

**1a. I am changing my monthly parking election amount.**  
From: \$ \_\_\_\_\_ To: \$ \_\_\_\_\_

Page 1 of 2 MSC 5515 (09/2025)

Download and submit:  
2026 Commuter Program Enrollment  
Form (MSC 5515)

Find the form at:  
[PEBBinfo.com](http://PEBBinfo.com) > Resources > Forms

# ASIFlex Corrections

## Before January 1, 2026:

- You must request changes to your 2026 FSA by **December 12, 2025**.
- Updates will be effective January 1, 2026.
- If you didn't enroll during Open Enrollment in October, you can't sign up for an FSA.
- Make sure you understand your choices, amounts, and any penalties if you fail to make a change before January 1, 2026.

# ASIFlex Corrections

## As of January 1, 2026:

- All ASIFlex issues go to PEBB as appeals.
- No Health Care or Dependent Care FSA cancellations or changes unless you experience a Qualified Status Change (QSC).
- No retroactive FSA corrections or enrollments (members may lose money).
- No mid-year enrollments or prospective increases/decreases without a QSC.
- PEBB will adjust the number of months prospectively if you enroll mid-year with a QSC.

# ASIFlex Corrections

## University members only

- When enrolling online, be sure you select the correct number of contributions and indicate any months without contributions.
- Errors may impact your balance.

| Summary for employee of 58030 Oregon State University   |  | (Open)  |
|---|--|---|
| <b>Number of Contributions per year:</b><br><input checked="" type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 |  | <b>No Contribution Months for the year:</b><br><input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September |
| Action  | Plan Type/Plan Name                      |   |
| <a href="#">Enroll</a>  | Dependent Care Flexible Spending Account |   |
| <a href="#">Enroll</a>  | Health Care Flexible Spending Account    |   |
| <a href="#">Enroll</a>  | Transportation                           |   |
| <a href="#">Enroll</a>  | Parking                                  |   |
| <a href="#">Back</a>  | <a href="#">Continue</a>                 |   |

# Flexible Spending Accounts (FSAs)

## What is an FSA?

- IRS-regulated spending account.
- Annual account to save pre-tax money for eligible expenses.
- Must enroll or re-enroll annually (enrollment does not carry over).
- Pretax contributions made through monthly payroll deductions.
- Pay for current year's eligible expenses.
- "Use it or lose it" – funds do not roll over at the end of the plan year.

### Administrator:

- ASIFlex administers PEBB's FSA and Commuter Benefits.

# Flexible Spending Accounts (FSAs) Overview

# Flexible Spending Accounts (FSAs)

## PEBB offers two types of FSAs

- **Health Care FSA:**

- Covers eligible medical, dental, and vision expenses
- Includes deductibles, copays, office visits, tests, supplies
- Find a full list of eligible expenses at <https://asiflex.com/orpebb/HCFSA.aspx>

- **Dependent Care FSA:**

- Covers your eligible dependent care expenses
- Includes childcare for children up to age 13 and care for dependent elders (daycare, after-school care, pre-school expenses)
- Find a full list of eligible expenses at <https://asiflex.com/orpebb/DepCareFSA.aspx>

# Flexible Spending Accounts (FSAs)

## IRS rules

- Enroll annually; elections last the full plan year unless a Qualified Status Change (QSC) occurs.
- Not required to be covered under PEBB health insurance.
- Access full health care funds anytime during the year.
- Unused funds are forfeited if not used within the year.
- Expenses can be for spouse and dependent children (not domestic partners).
- Grace period extends 2.5 months (through March 15), if you continue to be enrolled through Dec. 31.

### **Important!**

PEBB chooses to offer the 2.5 month grace period rather than a rollover. If eligible, be sure to incur all expenses between January 1 and March 15 of the following year.

# Flexible Spending Accounts (FSAs)

## How FSAs work

- 1 Estimate your expenses for the upcoming year
- 2 Make pretax contributions via paycheck throughout the year
- 3 Incur eligible expenses
- 4 Submit claims to ASIFlex by the deadline



# Health Care FSA

## Annual maximum

- \$3,300/year per subscriber

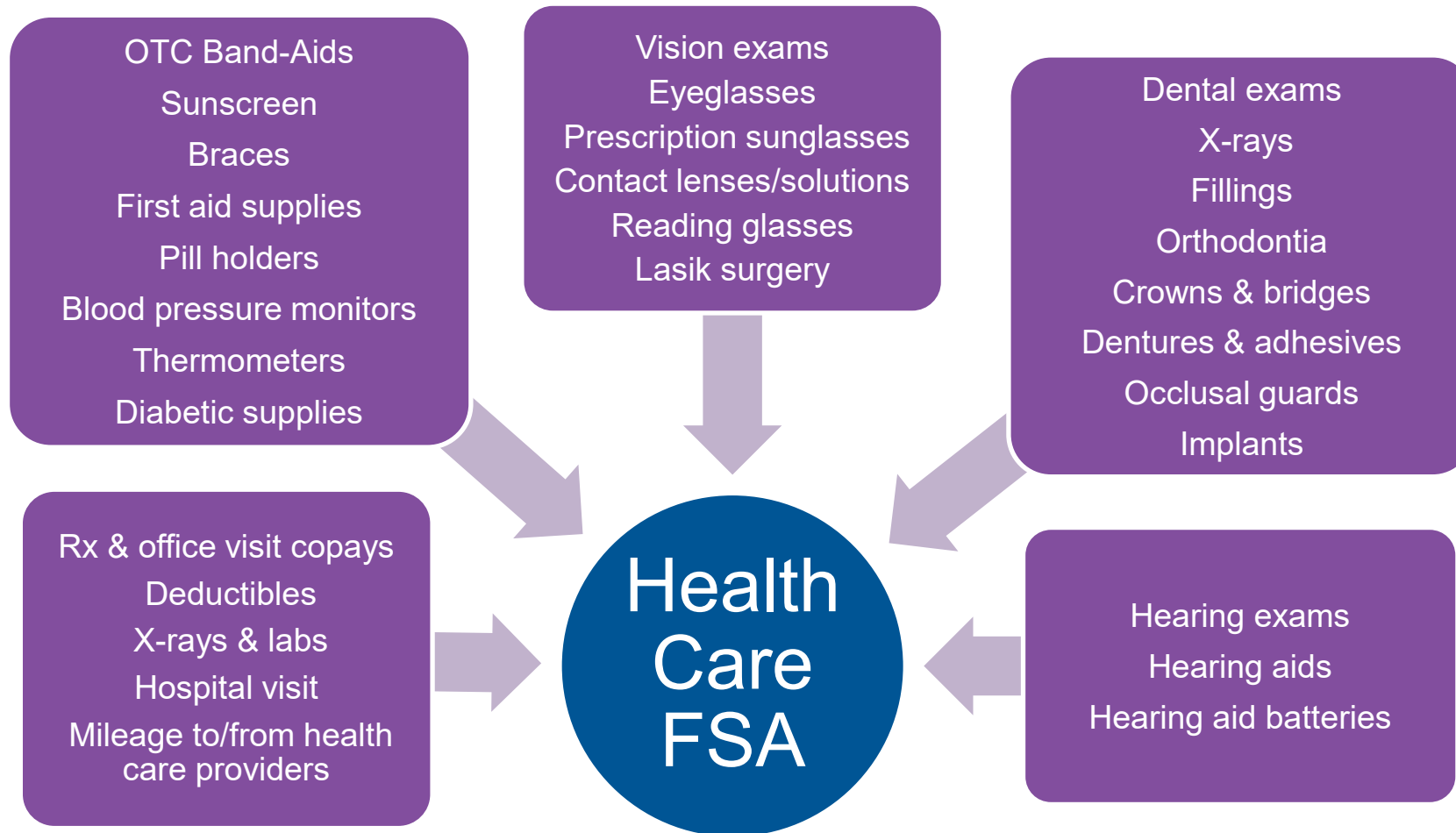
### Avoid forfeitures:

- Plan for predictable, recurring expenses.
- Review past expenses as a guide.
- Be conservative – elections are final once enrolled.
- Use these tools:
  - [ASIflex.com/ORPEBB](https://www.asiflex.com/ORPEBB) – expense estimator, eligible expense list
  - [FSASore.com](https://www.fsastore.com) for over-the-counter (OTC) products.
- Take advantage of the grace period – you have an extra 2.5 months to use your funds, if you continue to be enrolled through Dec. 31.

**Use it or lose it!**  
Funds do not roll over to the next plan year.

# Health Care FSA

## Eligible expenses



For you and your eligible dependents

# Health Care FSA

## Ineligible expenses

- Services not provided yet; pretreatment estimates
- Cosmetic treatments or medications
- Illegal operations
- Expenses paid by insurance
- Diapers, maternity clothes
- Insurance premiums
- Dancing, swimming lessons
- Holistic treatments, natural remedies, vitamins
- Warranties
- Health care services for your domestic partner

### Eligible FSA Expenses

Find a full list of eligible Health Care expenses:

<https://asiflex.com/orpebb/HCFSA.aspx>

# Health Care FSA

## Using your FSA and Garner

If you are enrolled in a Providence Health Plan or Moda medical plan and plan to use Garner, keep in mind...



**You can't "double dip." That means you can't get paid back from both Garner and your Health Care FSA for the same expense. The IRS does not allow this.**

Garner is technically considered a Health Reimbursement Arrangement or HRA. The IRS requires using an HRA first before a Health Care FSA.

For more details about using Garner with an FSA, review the [Frequently Asked Questions \(FAQs\)](#).

# Health Care FSA

## Using your FSA and Garner (continued)

When you receive care from a Garner-approved provider, get reimbursed by Garner first. Then, use your Health Care FSA for other expenses not covered by Garner. **Garner is for eligible medical expenses only (not vision or dental expenses).**

### Step 1: Get Reimbursed by Garner

Use Garner to find a Garner-approved provider. Pay costs out of your pocket, and Garner will reimburse you.

Garner reimburses eligible expenses such as office visits, lab work, procedures, and prescriptions.

### Step 2: Use Your Health Care FSA to Pay for Other Expenses

Use your Health Care FSA to pay for out-of-pocket costs not covered by Garner.

This may include dental work, glasses/contacts, and over-the-counter medication.

After Garner reimburses you up to the annual limit, you can then use your Health Care FSA for Garner Top Provider-related expenses.

# Dependent Care FSA

## Annual maximum

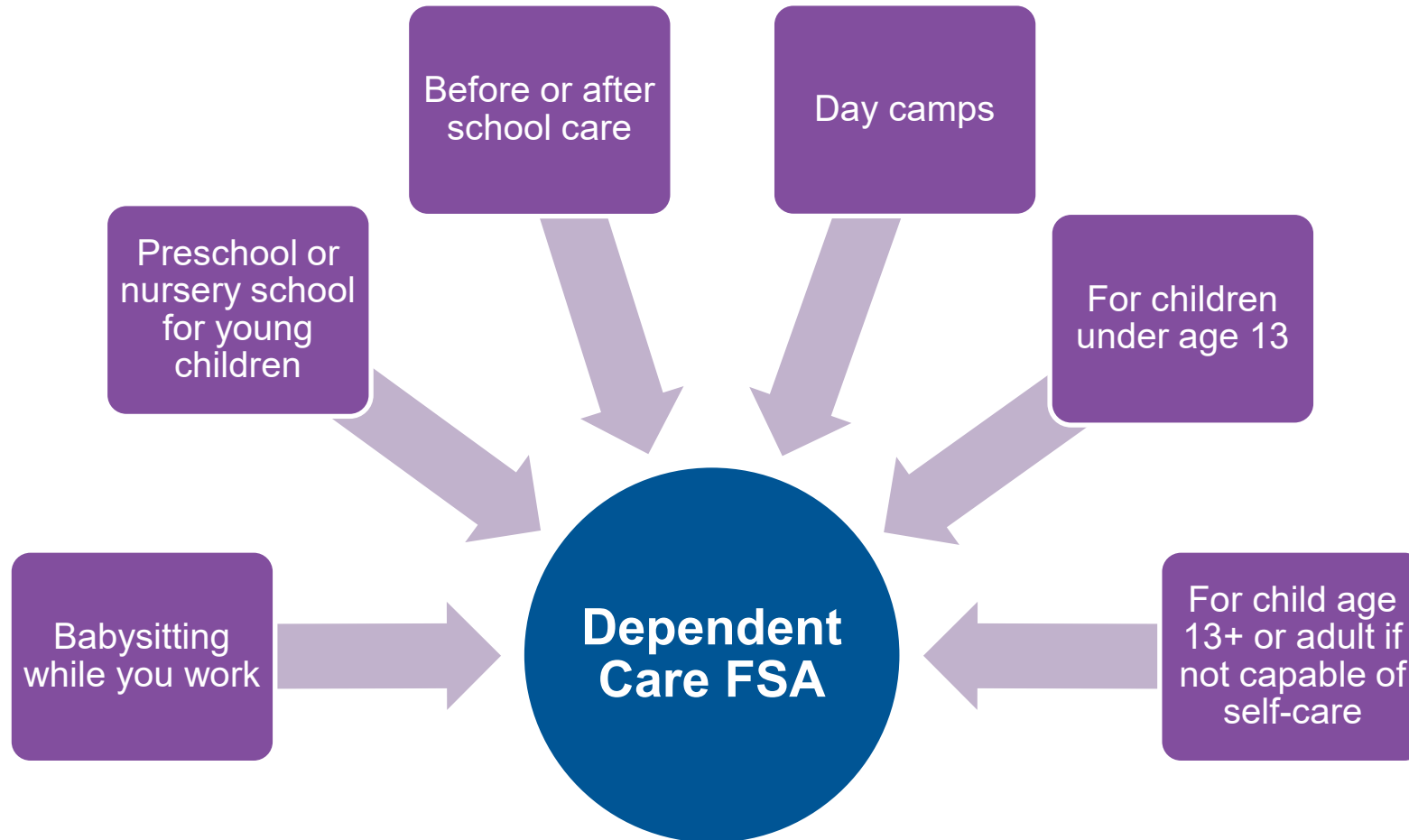
- \$7,500/year per family
- \$3,750/year if married and filing separate income tax returns
- Find a full list of eligible Dependent Care expenses:  
<https://asiflex.com/orpebb/DepCareFSA.aspx>

**Use it or lose it!**

Funds do not roll over to the next plan year.

# Dependent Care FSA

## Eligible expenses



# Dependent Care FSA

## Ineligible expenses

- Services not yet provided
- Educational or tuition expenses
- Kindergarten or higher education costs
- Overnight camp expenses
- Services during vacation, holidays, or leave of absence
- Only custodial parent's expenses eligible in divorce situations
- Expenses exceeding \$7,500/year per family

### Eligible FSA Expenses

Find a full list of eligible Dependent Care expenses: <https://asiflex.com/orpebb/DepCareFSA.aspx>

# Dependent Care FSA

## Helpful tips

- Start a Dependent Care FSA when you're ready to begin childcare, not at birth or during Open Enrollment.
- Notify PEBB within 30 days if your childcare situation changes in 2026 to adjust FSA contributions.
- Submit claims promptly to avoid losing funds.
- Dependent Care FSA cannot be used for healthcare expenses for your dependents.

# Flexible Spending Accounts (FSAs)

## Important dates

- Claims must be incurred between January 1 and March 15 of the following year (14 ½ months) or during your coverage period.
- Incurred means the service was received or the product secured, regardless of payment timing.
- Claims submission deadline: March 31.
- Submit early to avoid missing the deadline.

### Remember!

**You must continue to be enrolled through Dec. 31 to be eligible for the 2.5-month grace period.**

# Commuter Benefit Accounts Overview

# Commuter Benefit Accounts

## Two types: Parking and Transit

### Parking Reimbursement Account:

- Parking at your place of employment, or
- Parking at a non-state-owned location from which you commute to work.

Note: If you park at a state-owned lot or garage, you don't qualify for the Parking Reimbursement Account. You will pay for your parking expense through payroll deductions.

### Important!

You can only use a Parking Reimbursement Account if you park at a non-state-owned lot or garage.

### Transit/Vanpool Reimbursement Account:

- Commuting expenses via a transit reimbursement account.
- Bus, rail, ferry, vanpool expenses that you incur commuting to and from work.
- Bicycles are **not** included.

# Commuter Benefit Accounts

## How do they work?

- IRS-regulated account
- You can enroll, change, or cancel anytime
- Your election is month-to-month
- Make pretax contributions through payroll deductions
- Pay for current month commuting expenses
- Submit claims for parking or transit expenses incurred during your coverage period
- Reimbursements are capped at the IRS monthly limit
- Unused funds are forfeited after 6 months

# Parking Reimbursement Account

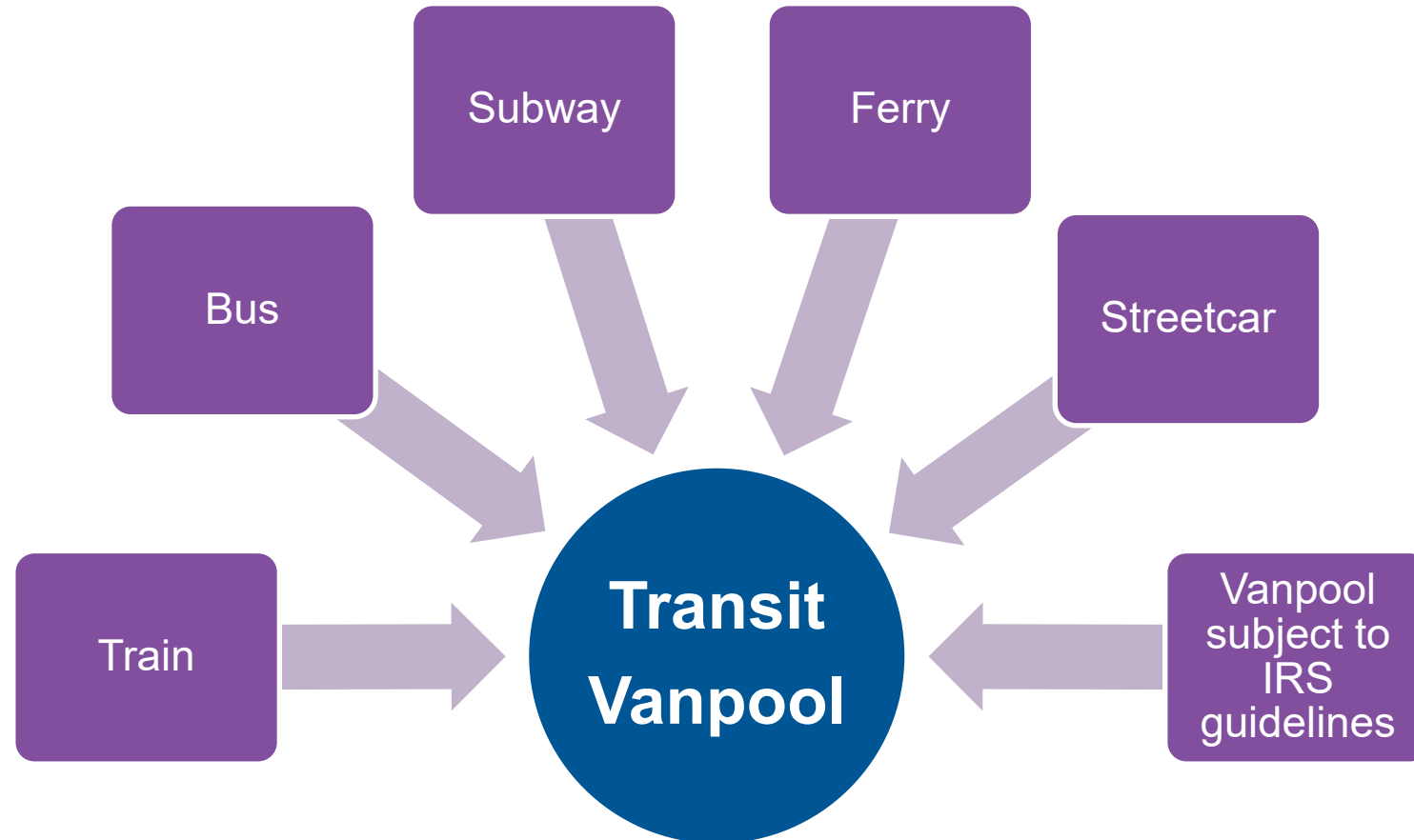
\$325 maximum per month\*



\* Limits are set annually by IRS regulations.

# Transit/Vanpool Reimbursement Account

\$325 per month\*



\* Limits are set annually by IRS regulations.

# Commuter Benefit Accounts

## Ineligible Expenses

- Non-work-related parking or transit costs
- Parking at a state-owned lot already deducted pretax
- Bicycle or repairs
- Rideshare (Uber, Lyft)
- Gas, fuel, or vehicle repairs

# Commuter Benefit Accounts

## IRS requires proof with claims



The IRS requires you to:

- **Certify** that expenses are eligible and not reimbursed elsewhere.
- **Provide third-party documentation**, or explain if unavailable (e.g., metered street parking).
- **Submit claim form:** Required for manual submissions (mail/fax), but not for online or debit card claims.

# Commuter Benefit Accounts

## Important dates

- Claim deadline: Submit by **March 31** for expenses incurred the previous year.
- Inactive accounts (no activity for 180 days) are terminated, and balances are forfeited.

## University members only:

- When enrolling online, be sure you select the correct number of contributions and indicate any months without contributions.
- Errors may impact your balance.

| Summary for employee of 58030 Oregon State University   |  | (Open)   |
|---|--|--|
| <b>Number of Contributions per year:</b>  |  | <b>No Contribution Months for the year:</b>  |
| <input checked="" type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 |  | <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September |
| Action  | Plan Type/Plan Name                      |  |
| Enroll  | Dependent Care Flexible Spending Account |  |
| Enroll  | Health Care Flexible Spending Account    |  |
| Enroll  | Transportation                           |  |
| Enroll  | Parking                                  |  |
| Back Continue   |  |  |

# ASIFlex Customer Service



Contact ASIFlex for account details and claims questions.

- **Web:** [asiflex.com/ORPEBB](http://asiflex.com/ORPEBB)
- **Email:** [asi@asiflex.com](mailto:asi@asiflex.com)
- **Phone:** 800-659-3035
- **Mailing address:**  
PO Box 6044  
Columbia, MO 65205

Hours of operation:  
Monday – Friday: 5 a.m. – 5 p.m. PT  
Saturday: 7 a.m. to 11 a.m. PT

# PEBB Member Services

**Phone:** 503-373-1102

Monday – Friday, 8 a.m. – 5 p.m.  
(closed weekends and holidays)

**Email:** [pebb.benefits@odhsoha.oregon.gov](mailto:pebb.benefits@odhsoha.oregon.gov)

**Enroll:** [PEBBenroll.com](http://PEBBenroll.com)

**Forms:** [oregon.gov/OHA/PEBB/Pages/forms.aspx](http://oregon.gov/OHA/PEBB/Pages/forms.aspx)

**Plan Info:** [PEBBinfo.com](http://PEBBinfo.com)

Interpreters available –  
email to set an  
appointment

Intérpretes disponibles:  
envíe un correo  
electrónico  
para programar una  
cita