

Authorization for Pre-Tax Payroll Reduction Open Enrollment is May 9 - May 20, 2022.

* Enroll/Re-enroll deadline is 5/20/2022. Late enrollments not accepted. *

Tel.: 781-848-9848

INSTRUCTIONS: New Enrollees: Complete & return this form to Payroll/Benefits at City Hall or fax 978 829-1969.

If Already in Plan: Enroll for the new plan year online via your account portal—not the app! Go to cpa125.com, click on

Sign In: Employee Online Access; log into your account on left side of the log-in page; on your account

home page, click ENROLL/RE-ENROLL and follow the steps; click SUBMIT at the end of the process.

Participant Name:	Employer	City of Fitchburg	
Mailing Address:	Plan Year:	: 7/1/2022 to 6/30/2023 (Expenses must be incurred between these dates)	
City/Town, State, ZIP:	SSN:	DOB:	
E-Mail:		Daytime Phone: personal work	
Employment/Payroll Info.: I am a (check one):	_	School Employee	
I am paid (check one):	_ , _	∃ Bi-weekly 18	
Flexible Spending Account (FSA) Benefit Selectio			
for employee, legal spouse, and eligible dependents' qua medical, dental, vision expenses. <i>Benefit card included.</i>	lified plan year f	t Care FSA Election: \$ for the for qualified childcare expenses of eligible s under age 13, and elderly or special needs	
Max. Annual Election: \$2,850.	dependents	s requiring day care.	
Rollover Option: Any unspent Health Care balance—up to \$5 will roll over to the next plan year if you re-enroll for the next year. (Note: The maximum rollover amount for the 2021-2022 year is \$550; re-enrollment is required for funds to roll over.)	plan plan <i>Claim-based pla</i>	ual Election: \$5,000. per family an; no benefit card. Participants must submit lan year to receive accrued funds.	
Ineligibility Note: You are <u>NOT</u> eligible for this plan if you or spouse have a Health Savings Account ("HSA").	your	inrollment flyer for more plan information.	
Direct Deposit Info. Direct deposit is our preferred methorile with Cafeteria Plan Advisors, please set up direct deposit only Certification. I hereby authorize a salary reduction agreeme Cafeteria Plan Advisors will hold these funds until eligible expenses allowable deductions under Internal Revenue Service (IRS) Publication eligible balance isn't incurred and/or submitted for reimbursement by	ine via your account port ent for the amount(s) sho are incurred and a claim is on 969, and funds may be fo y plan year deadline.	tal once you receive enrollment confirmation own above and understand that: submitted. FSA expenses must be consistent with	
 All claims for the Plan Year must be submitted within ninety (90) days of Your Health Care FSA plan has a Rollover option. Eligible balances roll plan year and the rollover occurs after the current plan year's 90-day r This election cannot be revoked or changed during the plan year un 	over to the next plan year w unout period ends.	·	
 Your Health Care FSA plan has a Rollover option. Eligible balances roll plan year and the rollover occurs after the current plan year's 90-day r This election cannot be revoked or changed during the plan year un Current participants must enroll each plan year; re-enrollment is not 	over to the next plan year wi unout period ends. ess the participant experier automatic.	nces a qualifying event as defined by the IRS.	
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