



Have Questions?  
Contact Participant Services  
1-800-633-8818, option 1  
[flex@goigoe.com](mailto:flex@goigoe.com)

## Flexible Benefit Plan Highlights for City of Fullerton

Plan Year: 1/1/2022 through 12/31/2022

Run Out Period: 3/31/2023

### Existing Eligibility and Claim Submittal Deadlines:

Expense eligibility and claim submittal deadlines can vary by plan. We encourage you to visit our website, [www.goigoe.com](http://www.goigoe.com), to view expense eligibility. We also encourage you to set up an online account so that you can access a personalized timeline for expense eligibility and claim submittal.

Generally speaking, eligible expenses must be incurred during your active participation within the plan and/or within the Plan Year dates shown above (whichever period of time is shorter). If the plan you elect has the grace period feature, claims may be incurred through the Grace Period end date as shown in the Available Spending Accounts section (if applicable).

Claims for all plans must be submitted prior to the Run Out Period listed above. PLEASE NOTE: Should you lose eligibility to a plan within the Plan Year, claims must be incurred on or prior to your loss of eligibility and must be submitted by the Termination Submittal Deadlines as listed in the Available Spending Accounts section. If you lose eligibility for this program (for example, if your employment ends), this will impact how much time you have to incur expenses, charge expenses on your benefit card, and/or submit claims for reimbursement. For your convenience, a personalized spending and submittal timeline is available online via your personal account and on the Igoe Mobile App.

## Available Spending Accounts

### Limited Purpose Medical Care Reimbursement Account

Reimburses certain out of pocket dental, vision and orthodontia expenses for you and your tax dependents

Carryover Amount Allowed: \$550.00

Term Submittal Deadline: 90 days following the date of termination

Maximum Election Allowed: \$2,750.00

### Medical Care Reimbursement Account

Reimburses certain out of pocket medical care expenses for you and your tax dependents

Carryover Amount Allowed: \$550.00

Term Submittal Deadline: 90 days following the date of termination

Maximum Election Allowed: \$2,750.00



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## Dependent Care Reimbursement Account

Reimburses certain day care related expenses

Grace Period End Date: 3/15/2023 (Claims can be incurred up through this date)

Term Submittal Deadline: March 31 following the close of the plan year

Maximum Election Allowed: \$5,000.00



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## Online Registration

Go to [www.goigoe.com](http://www.goigoe.com). Click on the Participants tab and then click on the Sign In button. On the next page click the Register button.

### Step 1 (Establish Your Login Credentials)

1. Enter the required registration information
2. Enter your Registration ID: Ensure Employer ID Is selected from the dropdown and enter **IGOFULLER** in the field below.
3. Enter Employee ID: Your Employee ID is the **Employee ID assigned to you by your employer**.
4. Accept Terms of Use and click the Next button.

### Step 2 (Security Questions)

- Select 4 different security questions and supply answers to each of them.

### Step 3 (Confirm Email)

- Confirm your email address

### Step 4 (Verify and Submit)

- Verify your information and make any necessary edits. Click Submit to register.

### Your registration allows you to:

- Monitor your real time election and balance details
- Keep track Of your spending timelines
- Securely enter claims and attach saved receipts or use Igoe Mobile to take photos of receipts and submit a claim
- Review transaction details
- Manage account communication options
- Report your Benefit Card lost/stolen
- Securely enter and update your Direct Deposit details
- Access eligible expense lists and more!

Download our Igoe Mobile App from the Apple or Android Google Play store to manage your account and submit claims on the fly.

