Health Care Spending Account (HCSA)

- At the end of the Policy Year, any unused balance in an employee’s HCSA that has not been paid out for medically related expenses will be carried forward to the next Policy Year. **A Policy Year is defined as the first pay period of the year (typically pay period 26) until the last pay period of the year (typically pay period 25).**
- HCSA credit amounts carried forward, if any, are used before current Policy Year HCSA credit amounts are used.
- At the end of the second Policy Year, if the employee has not used up the full amount of the credits that were carried forward from the previous year, that amount will be forfeited.
- HCSA claims for a prior Policy Year can be submitted until April 30 of the following Policy Year.
- If the health and/or dental claim was directly billed to Alberta Blue Cross (ABC), any unpaid portion not reimbursed will be automatically recorded in the employee’s HCSA and automatically paid either monthly or quarterly.
- If the health and/or dental claim was not directly billed to ABC, the employee will need to submit a HCSA Claim and Payment Request form to ABC.
- The HCSA Claim and Payment Request form is to be used for any health and/or dental expense not eligible for reimbursement through the Supplementary Health and Dental Plans.

**How it works:**

- **HCSA Deposit: $500**
  - HCSA Claims paid over the Policy Year: $375
  - Credit remaining at the Year: $125
- **Carry forward in next Policy Year: $125**
  - **HCSA Deposit: $500**
  - Total available in HCSA: $500 + $125** = $625

**Note: credits used first.**

If the $625 is not used at all in the Policy Year, $125 will be forfeited at the end of the Policy Year and $500 will carry forward into the next Policy Year.