City of Dover

Pre-Tax Flexible Spending Accounts 2027

How to Enroll or Re-Enroll Online

November 9, 2026 – November 20, 2026

If you are a current participant, you may re-enroll under Account Detail:

a. Go to **asiflex.com** and click on the "Account Detail" tab.

b. Once you are on the Main Menu, simply click on the green "Open Enrollment" button under the "Participant Services" section of the webpage.

c. See Making Elections (Below)

If you are not a current participant:

a. Go to https://enroll.asiflex.com

b. Enter your employer code: **CODOVER** and click ***"Continue".***

c. Enter your social security and click "***Continue***".

d. Enter the first three letters of your last name and then the initial of your first name. You may be prompted to enter your full first name, last name or ID for verification purposes. Click ***"Continue".***

Making Elections

1. Health Care Flexible Spending Account - If you wish to participate in this account, check the box. You may then enter either the amount of your per pay period or annual election and hit "**Calculate**". Once you are satisfied with your election, click "**Continue**" to go to the next page. If you do not wish to participate in the HCFSA, simply click "**Continue**" to go to the next page.

2. Dependent Care Flexible Spending Account - If you wish to participate in this account, check the box. You may then enter the amount of your per pay period or annual election and hit "**Calculate**". Once you are satisfied with your election, click "**Continue**" to go to the next page. If you do not wish to participate in the DCFSA, simply click "**Continue**" to go to the next page.

3. Reimbursement - To have your reimbursements deposited to a bank account, complete the bank routing number, account number and type of account. You may also sign up for text alerts by providing your mobile phone number and wireless carrier information. To sign up for email alerts, enter and confirm your email address. Click ***"Continue"***.

4. Debit Card - Choose Yes or No to indicate if you wish to receive a debit card. Click ***"Continue"***. If you are a current debit card holder, you must choose yes if you would like your card to be funded for the new plan year.

5. Debit Card Application for Health Care FSA - Complete the application, and click ***"Continue"***.

6. Final Review - Review and confirm your elections. Click ***"Confirm"*** to complete your enrollment, or click ***"Go Back"*** to change your enrollment.

7. Your Elections Have Been Recorded - The final screen will display your confirmation number and election. **Print or save this screen for your records**.

Note: If you need to make a change after exiting this web site and before open enrollment closes, simply login and enroll again using this procedure. The last on-line enrollment submitted is the one saved for your 2027 participation.

All online enrollments must be completed by 11:59 p.m. ET on November 20, 2026.
Call ASIFlex at (800) 659-3035 if you need assistance with enrollment or have plan questions.