

Flexible Spending Account (FSA) Covered & Excluded Expenses

HEALTH CARE EXPENSES ELIGIBLE FOR REIMBURSEMENT Allowable health care expenses must be submitted under medical, vision, dental, and/or prescription drug coverage before they can be considered for reimbursement. Only the portion of the qualified expense that is not covered by any other coverage can be paid under a health care flexible spending account. Qualified expenses include:

Acupuncture

Alcoholism and drug treatment

Ambulance costs

Artificial limbs and teeth

Birth control pills

Braille books and magazines (the added cost of having materials created in Braille)

Car controls for the handicapped Chiropractors and Chiropractic care

Christian science practitioners

Contact lens, solutions, cleaners and replacement

coverage

Copays Crutches

Deductibles

Dental fees, exams, and cleanings

Dental implants, Dentures and Bridges

Diagnostic tests

Experimental medical treatment

Eve examinations

Eyeglasses, prescription sunglasses and reading

glasses

Guide dogs (purchase, training, and maintenance)

Hearing treatment including devices and batteries

Hospital services Invitro fertilization Inpatient therapy Insulin injections

Laboratory fees

Lasik (laser) eye surgery

Lamaze classes (for mothers only)

Lead based paint removal

Learning disabilities - tuition or fees for special schools (call for details)

Legal abortions

Legal fees (to authorize treatment for mental illness)

Mental nervous disorders

Nursing services

Obesity (call for details)
Obstetrical expenses

Operations, if medically necessary

Organ transplants

Orthodontic treatment (call for details)

Orthopedic shoes (call for details)

Over-the-counter drugs (to alleviate or treat illness or

injuries)

Oxygen

Periodontal fees

Prescription drugs (drugs with Rx #)

Psychiatric care Psychoanalysis

Psychologist fees (see exclusions)

Radial keratotomy

Smoking cessation programs (includes nicotine gum or

patches)

Telephone for the deaf

Television with audio display for the hearing impaired

(call for details)

Transportation for medical care

Vaccinations

Walkers

Weight loss treatments and prescriptions (restrictions

apply - call for details)

Wheelchairs

X-rays

*And other items as may be allowed by the IRS under Section 213

Following is a partial list of health care expenses that are usually **not** covered under the health care spending account. Contact your Human Resources department or call 877-372-4730, prompt #2 for further details.

- Cosmetic surgery or procedures
- Dancing lessons (even if recommended by a doctor)
- Diaper services
- Domestic help fees (for non-medical services)
- Electrolysis
- Funeral expenses
- Health Insurance Premiums
- Homeopathic items
- Household help
- Illegal operations and treatments
- Liposuction
- Marriage counseling

- Maternity clothes
- Medical savings account deposits
- Over-the-counter drugs, products, or formulas for general health (vitamins, beauty aids, lotion, toothpaste)
- Personal use items
- Physical or massage therapy for general health
- Solutions for the care and maintenance of eyeglasses
- Supplements prescribed by alternative providers (i.e., Naturopath, Acupuncturist)
- Swimming lessons (even if recommended by a doctor)
- Teeth bleaching
- Union dues

HEALTH CARE EXPENSES: CLAIM FILING INSTRUCTIONS

- 1. The total annual election for eligible medical expenses (less any previous reimbursements paid) is available upon request.
- 2. Refer to the provisions in your Summary Plan Document for the minimum and maximum annual election amounts.
- 3. To be reimbursed, you must include the patient's name, date of service, name of service provider, description of the expense, and the amount of the claim (net of any amount that has been or is going to be paid by insurance or other sources).
- 4. IRS Section 125 regulations indicate that an expense is considered incurred at the time the service giving rise to the expense is provided, and not when you are formally billed for, charged for or pay for an expense. The expense must be incurred during the period you and your dependents are covered under this plan.
- 5. The documentation necessary to reimburse an OTC drug expense will be similar to that requested for all other types of health care FSA expenses. We will require an itemized receipt that includes the name of the provider, the name of the product purchased, the cost of the item, and the date it was purchased, (i.e., Walgreen's, 01/10/04: Tylenol-\$6.99, Vicks 44 \$4.99, etc).

If a cash register receipt from the provider includes all the information listed above, it will be considered acceptable documentation. If the cash register receipt does not include all that information, and (for example) is missing the name of the provider, the date, or just lists OTC and an amount, rather than the actual name of the OTC drug, we will not be able to reimburse the participant for that OTC drug.

WE UNDERSTAND WHAT YOU'RE WORKING FORsm



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