



Flexible Spending Account (FSA) Covered & Excluded Expenses

Over-the-counter drugs

Effective January 1, 2011: Over the counter medicines or drugs (other than insulin) are no longer eligible for reimbursement unless accompanied by a physicians prescription to be reimbursed under a Flexible Spending Account (FSA) or a Health Reimbursement Account (HRA). This change applies to all plans on January 1, 2011 regardless of your plan year.

Partial list of items available **without** a prescription

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| Insulin and diabetic supplies | Ace bandages |
| Birth control | Reading glasses |
| First aid supplies, Band aids, bandages | Contact lens solutions and cleaners |
| Smoking cessation gum or patches | Crutches |

Partial list of OTC items that **will need** to be accompanied by a physicians prescription or Rx number

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| Allergy medications and Antihistamines | Acid Controllers | Allergy & Sinus medicine |
| Anti-Gas products | Antibiotic Ointments/Products | Cold Sore Remedies Digestive Aids |
| Anti-Diarrheals | Anti-Parasitic Treatments | Respiratory Treatments |
| Hemorrhoidal Preps | Motion Sickness | Pain relief medications |
| Stomach Remedies | Anti-Itch & Insect Bite | Antacid medications |
| Baby Rash Ointments/Creams | Cough, Cold & Flu medications | Laxatives |
| Feminine Anti-Fungal/Anti-Itch | Sleep Aids & Sedatives | Digestive Aids |
| Wart Remover treatments | | |

Health care expense eligible for reimbursement

Allowable health care expenses must be submitted under medical, vision, dental, and prescription drug coverage before they can be considered for reimbursement. Only the portion of the qualified expense that is not covered by any other source can be paid under a health care flexible spending account.

Qualified expenses include*:

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| Acupuncture | Learning disabilities – tuition or fees for special schools (call for details) |
| Alcoholism and drug treatment | Legal abortions |
| Ambulance costs | Legal fees (to authorize treatment for mental illness) |
| Artificial limbs | Mental nervous disorders |
| Birth control pills | Nursing services |
| Braille books and magazines (the added cost of having materials in Braille) | Obesity (call for details) |
| Car controls for the handicapped | Obstetrical expenses |
| Chiropractors and chiropractic care | Operations, if medically necessary |
| Christian Science practitioners | Organ transplants |
| Contact lens solution, cleaners and replacement coverage | Orthodontic treatment (call for details – only if payment is being paid directly to orthodontist) |
| Copays | |

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

Qualified expenses* (continued):

Crutches	Orthopedic shoes (cost difference between regular shoes and orthopedic shoes)
Deductibles	Oxygen
Dental fees, exams and cleanings	Periodontal fees
Dental implants, dentures and bridges	Prescription drugs (drugs with Rx #)
Diagnostic tests	Psychiatric care
Experimental medical treatment	Psychoanalysis
Eye examinations	Psychologist fees (see exclusions)
Eyeglasses; reading and prescription sunglasses	Radial keratotomy
Guide dogs (purchase, training and maintenance)	Smoking cessation programs (includes nicotine gum or Patches)
Hearing treatment including devices and batteries	Telephone for the deaf
Hospital services	Transportation for medical care
Invitro fertilization (restrictions apply – call for details)	Vaccinations
Inpatient therapy	Walkers
Insulin injections	Weight loss treatments and prescriptions (restrictions apply – call for details)
Laboratory fees	Wheelchairs
Lasik (laser) eye surgery	X-rays
Lamaze classes (for mothers only)	
Lead based paint removal	

*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 unless you have a certain medical condition, or diagnosis for which you can obtain a letter of medical necessity from your treating physician.

Breast pump (general health)	Maternity clothes
Cosmetic surgery or procedures	Medical savings account deposits
Dancing lessons (even if recommended by a doctor)	Over-the-counter drugs, products, or formulas for general health (vitamins, beauty aids, lotion, toothpaste)
Diaper services	Personal use items
Domestic help fees (for non-medical services)	Physical or massage therapy for general health
Electrolysis	Solutions for the care and maintenance of eyeglasses
Funeral expenses	Supplements prescribed by alternative providers (i.e., Naturopath, Acupuncturist)
Health insurance premiums	Swimming lessons (even if recommended by a doctor)
Homeopathic items	Teeth bleaching
Household help	Union dues
Illegal operations and treatments	Veneers
Liposuction	
Marriage counseling	

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. If you are requesting reimbursement for an Over-the-Counter (OTC) drug expense we will require **both a doctor's prescription or Rx number and** an itemized receipt that includes the name of the merchant, the name of the product purchased, the cost of the item, and the date it was purchased, (i.e., Walgreen's, 01/10/08: Tylenol-\$6.99, Vicks 44 - \$4.99, etc).

If a cash register receipt from the merchant includes all the information listed above, it will be considered acceptable documentation. If the cash register receipt does not include all that information, your claim may not be reimbursed. For example, if your receipt is missing the name of the merchant, 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.

Plans may vary on covered items, refer to your Summary Plan Description to view the detail of your benefit design.