

Types of Eligible and Non-Eligible Expenses

The following list, while not intended to be complete, illustrates expenses that may be reimbursed under the Flexible Spending Account. Some restrictions may apply.

HEALTH CARE FSA EXPENSES	
Eligible Dental Expenses	Eligible Vision Expenses
Routine & Preventive Services	Eye Exams
X-Rays	Prescription eyeglasses & sunglasses
Orthodontia <i>(A treatment plan may be required. See Plan Specifics page for your plan's orthodontia guideline.)</i>	Contact lenses & supplies
Restorative services, fillings, extractions and dentures	Corrective surgery (RK & LASIK)
ELIGIBLE MEDICAL CARE EXPENSES	
Medically Necessary Medical Equipment	Diabetic Supplies
Wheelchair, crutches & lifts	Insulin
Oxygen equipment & supplies	Test strips, lancets, etc.
Blood pressure monitor	Glucose monitor
Physical Examinations	Hearing Expenses
Annual physical exam <i>(including prostate screening, pap smears & mammograms)</i>	Testing
School & work physicals	Hearing aids & hearing aid batteries & repairs
Counseling & Psychiatric Treatment	Miscellaneous Fees & Services
<i>Must be prescribed by doctor to treat a medical condition. Doctor's statement may be required.</i>	Physicians, surgeons, anesthesiologists or OB/GYN
Psychologists	Ambulance
Psychotherapists	Nursing (including room & board)
Psychiatrists	Chiropractic services
Other Eligible Expenses	
Prosthesis & artificial limbs	Orthotics & orthopedic shoes <i>(medically necessary)</i>
Organ tissue donation expenses	Laboratory fees
Tuition at special schools for the handicapped	Acupuncture
Travel necessary to seek medical treatment <i>(limitations apply)</i>	Alcohol & drug rehabilitation expenses
Special equipment for those who are deaf and/or blind <i>(i.e., Braille books, hearing devices, guide dogs)</i>	Medical Supplies
Weight loss programs and drugs (ONLY when prescribed by doctor to treat obesity and/or specific medical condition-statement required from the doctor)	Therapy treatments <i>(when prescribed by doctor)</i>
ELIGIBLE DEPENDENT CARE FSA EXPENSES	
Dependent Care FSA Eligible expenses include expenses necessary for you and your spouse (if married) to be gainfully¹ employed or a full-time student. Eligible expenses include:	
Expenses paid for the care of a dependent under age 13	Expenses paid to an eligible dependent care provider
Expenses paid for the care of a dependent who is physically or mentally incapable of caring for themselves <i>(if older than age 13)</i>	If you are divorced, your child must be in your custody for at least six (6) months out of the year
INELIGIBLE EXPENSES	
The following list illustrates some Medical Care Expenses that are NOT ELIGIBLE under the plan.	
Cosmetic treatments or surgery <i>(certain exceptions apply)</i>	Marriage & family counseling
Expenses <i>(treatments & drugs)</i> only to improve your general health or well being	Nutritional supplements/vitamins (may be approved with letter of medical necessity from physician)
Hair replacement treatments & drugs	Teeth whitening, toothbrushes
Health club dues	Vacations
Vitamins to improve or to preserve general health <i>(even when prescribed by doctor)</i>	Long Term Care Insurance
The following list illustrates some of the Dependent Care expenses that are NOT ELIGIBLE under the plan.	
Care for dependent that lives outside the employee's home	Kindergarten or Overnight Camps
Field trips, lunches, supplies and transportation fees	Registration fees (if not required to hold child's spot)
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giving arrangement requires the employee to pay for care during the absence. An absence of up to two consecutive calendar weeks is treated as a short, temporary absence.