WHAT'S FIIGIBLE?



A Health Care FSA covers a wide variety of expenses. We've assembled a list of common expenses that are eligible for reimbursement. Not all eliqible items are on this list. Visit our website for more information: www.naviabenefits.com.

ELIGIBLE HEALTH CARE EXPENSES

Items marked with an asterisk (*) are considered over-the-counter (OTC) medicines or drugs and require a prescription for reimbursement.

Acne treatment* Acupuncture

Allergy & Sinus medication*

Antacids*

Antibiotic ointment* Anti-diarrheal* Antifungal foot cream* Anti-gas medication* Anti-itch cream/gel*

Antiseptic* Asthma treatment*

Bandages/gauze Birthing classes or Lamaze Blood pressure monitor

Braces (knee, ankle, wrist)

Breast pump Burn cream*

Chiropractic services Coinsurance Cold/hot pack

Cold sore treatment* Cold/cough medication* Compression stockings

Contacts & solutions

Contraceptives

Copavs CPAP machine Crutches Deductibles Dental services

Diabetic supplies Diaper rash ointment* Digestive Aids*

Drug addiction treatment Ear wax removal kits*

Eye drops

Feminine Anti-Fungal/Anti-

Itch*

Fertility monitor Fertility treatment First Aid Kit Flu shots Genetic testing Group therapy

Hearing aids & supplies Hemorrhoid medication* Hormone therapy Hospital fees

Humidifiers **Immunizations** Incontinence supplies Individual counseling Insect bite treatment*

Lab work

Lactation Consultant Lactose intolerance pills*

Laser eye surgery

Laxative*

Lice treatment products* Massage therapy

Medical records Motion sickness relief*

Nasal strips Naturopathic visits Orthodontia

Orthotic inserts Oxygen and equipment Pain relievers*

Parasitic treatment* Physical exams Physical therapy Pregnancy test

Prenatal vitamins Prescription drugs Prescription glasses Reading glasses

Respiratory Treatments* Saline nasal spray Sleep Aids & Sedatives* Sleep deprivation treatment Smoking cessation products* Smoking cessation programs

Speech therapy

Sterilization procedures

Stool softener* Thermometer Throat lozenges* Vision care Walker

Wart treatment* Wheelchair & repair

X-rays

ADDITIONAL DOCUMENTATION REQUIRED

Certain medical expenses are not reimbursable under a Health Care FSA unless a licensed health care practitioner states that the service or product is medically necessary. Flex-Plan will need a Letter of Medical Necessity (LMN) for these items to be reimbursed. The LMN is available on our website. Please note that certain expenses may require additional documentation to be reimbursed.

Automobile modifications Cosmetic procedures Braille books Family therapy Breast augmentation Home medical equipment Learning disability fees Breast reduction

Lumbar support Mole removal Motorized scooter Nutritionist expenses

Vitamins and supplements Weight loss programs

INELIGIBLE HEALTH CARE EXPENSES

The following expenses are **not** eligible under a Health Care FSA. Under no circumstances will the following items be reimbursed. Please do not submit claims for these items.

Books Boutique practice fees COBRA premiums College insurance **CPR** classes

Electrolysis/laser hair removal

Face lift Finance charges Funeral expenses Gym membership Hair transplant Household help Hygiene products

Illegal operations/substances Imported OTC items

Imported prescriptions

Insurance premiums Late fees

Liposuction Marijuana Marriage counseling Massage chair

Missed appointment fee

Mattress

Hair growth products Electric toothbrush/picks

Teeth whitening **Toiletries** Veneers Warranties