

FSA Overview

Your Health Care Flexible Spending Account is a helpful resource that allows you to be reimbursed for eligible medical, dental, and vision expenses that are not completely covered by your health plans. You may be reimbursed for eligible expenses incurred by you, your spouse, and your eligible dependents. Reimbursements will be made from the plan year in which services occur.

Based on your annual election, pre-tax contributions will be deducted from your paycheck each pay period. While your contributions are made in fixed increments, your full annual election will be available to you at the beginning of the year. You must use your election by the end of the plan year. Any funds that remain unused at the end of the plan year will be forfeited.*

*Under the IRS Carryover Provision, you may be allowed to carryover up to \$500 remaining in your Health Care or Limited Purpose FSA to the next plan year. Any funds in excess of \$500 will be forfeited to the plan after the runout period. Please check with your Human Resource Department to learn if this is offered through your employer.

Your Dependent Care FSA can be used for **non-medical daycare** for your children under 13 years of age or for any individual you may claim on your federal tax return that is incapable of self care. You (and your spouse, if married) must be working, looking for work, or attending school full time to claim expenses under a DCFSA.

Submitting Online Claims

Incurred expenses can be submitted online from your desktop or mobile device.

Log into www.myfsaexpress.com

1. Follow the prompted instructions to enter your User ID and Password
2. On the welcome page, click on View My Account link
3. Once inside the participant portal, under My Account, click on the Claims link located on the left side navigation pane
4. On the request reimbursement page fill in all required fields and click next
5. Attach any/all documentation necessary
6. Click on the highlighted box to certify, then click Submit

Please ensure that all documentation is clearly legible and sufficient. Illegible or insufficient documentation may delay your reimbursement.

For Dependent Care claims, you **must** submit the Tax Identification Number for each service provider.

Looking for additional claim forms?
Visit www.myfsaexpress.com and select FSA Reimbursement Request from the drop-down menu.

Direct Deposit 3-Step Process

Get your reimbursement even faster by submitting your request online!

1. Log-in to access your account at www.myfsaexpress.com
2. Under the Get Reimbursed Faster section, click "ADD"
3. Complete the prompted fields and click "Save".



FSA

Health and Dependent Care

QUICK REFERENCE GUIDE



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The contents of this document are not meant to be legal advice. The eligibility list within is not definitive or exhaustive, may be subject to further restriction, and is subject to change without notice. Any questions regarding reimbursable expenses should be forwarded to a tax consultant.

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Eligible Medical Expenses

- Acupuncture
- Ambulance Fees
- Breast Pumps & Supplies
- Child Birth Classes
- Chiropractic Services
- Coinsurance & Deductibles
- Counseling
- Diagnostic Services
- Fertility Treatments
- Guide Dogs
- Hearing Aids & Exams
- Heart Defibrillators
- Hospital & Laboratory Services
- Nursing Services
- Prescription Medication
- Physical Therapy
- Psychotherapy
- Prosthetics
- Substance Abuse Treatment
- Surgical Procedures
- Ultrasounds & X-Rays
- Walkers & Wheelchairs

Did you know?

Your Health Care Flexible Spending Account can also be used to reimburse you for parking and transportation costs related to your medical expenses! This includes parking fees, gas mileage, and bus and taxi fares (proper substantiation is required).

Eligible Over-the-Counter Items

- Blood Pressure Monitors & Diabetic Supplies
- Contact Lens Solution & Reading Glasses
- Family Planning Items & Pregnancy Tests
- First Aid Kits, Joint Supports, Wraps, & Bandages
- Hydrogen Peroxide & Rubbing Alcohol
- Sunscreen, SPF 15 or Higher

Potentially Eligible Medical Expenses

- Cosmetic Procedures
- Gym Memberships
- Massage Therapy
- Non-prescription Medication
- Nutritional Supplements
- Vitamins
- Weight Loss Programs

Eligible Dental Expenses

- Crowns
- Dentures
- Implants
- Orthodontics
- Root Canals
- Routine Cleanings
- Tooth Extraction

Eligible Vision Expenses

- Contact Lenses
- Eye Exams
- Eye Surgery
- Eyeglasses
- Prescription Sunglasses
- Vision Shaping Programs

Not all expenses are immediately eligible for reimbursement from your Health Care Flexible Spending Account. "Potentially eligible" expenses are those which are generally not considered to be primarily of medical necessity, however, may be considered for reimbursement if recommended or prescribed by your doctor. If you have any doubt as to whether an expense is in fact, eligible, the appropriate documents should be obtained before submitting your claim.

Ineligible Medical Expenses, Even with Prescription

- Adoption Fees (non-medical in nature)
- Baby Formula
- Clothing
- Concierge Services
- Dental Enamel Micro-Abrasion
- Household Assistants
- Insurance Premiums
- Marriage Counseling
- Medical Alert Programs
- Personal Use Items (e.g. Toothbrushes)
- Pre-payment for Services
- Savings Clubs
- Vacations
- Warranties

Eligible Dependent Care Expenses

- Au Pairs and Babysitters
- Before and After School Care
- Day Camps
- Day Care Centers and Nursery Schools
- Elder Care
- Nursery Schools

Ineligible Dependent Care Expenses

- Boarding School Tuition
- Field Trip Fees
- Food
- Late Pick-up Fees
- Overnight or Residential Camps
- Pre-payment for Services
- Private School Tuition
- Transportation to and from the Place of Care
- Weekend and "Night-out" Babysitters

For a complete list, please visit www.IRS.gov