

With so many eligible expenses to meet your health care needs, you're sure to pay less with the BESTflex<sup>SM</sup> Plan.

The  
**BESTflex**<sup>SM</sup>  
Plan

## Eligible Expenses

### **Eligible Health Care FSA Expense Examples:**

#### **Dental Services**

Crowns/Bridges  
Dental X-Rays  
Dentures  
Exams/Teeth Cleanings  
Extractions  
Fillings  
Gum Treatments  
Oral Surgery  
Orthodontia/Braces

#### **Insurance-Related Items**

Copays  
Coinsurance  
Deductibles

#### **Lab Exams/Tests**

Blood Tests  
Cardiographs  
Diagnostic Fees  
Laboratory Fees  
Spinal Fluid Tests  
Urine/Stool Analyses  
X-Rays

#### **Medication**

Insulin  
Prescribed Birth Control

Prescribed Vitamins\*

Prescription Drugs\*

#### **Other Medical Treatments/Procedures**

Acupuncture  
Alcoholism (inpatient treatment)  
Chiropractor Services  
Drug Addiction (inpatient treatment)  
Hearing Exams  
Hospital Services  
Infertility  
In-vitro Fertilization  
Norplant Insertion or Removal  
Patterning Exercises  
Physical Examination (not employment related)  
Physical Therapy  
Speech Therapy  
Sterilization  
Vaccinations and Immunizations  
Vasectomy and Vasectomy Reversals  
Well Baby Care

#### **Other Medical Supplies and Services**

Abdominal/Back Supports  
Ambulance Services  
Arches

Orthopedic Shoes

Contact Lens Solution and Cleaners

Contraceptives

Counseling (except for Marriage and Family)

Crutches

Guide Dog (for visually/hearing impaired person)

Hearing Aids & Batteries

Hospital Bed

Insulin Supplies

Learning Disability (special school/teacher)

Lead Paint Removal (if not capital expense and incurred for a child poisoned)

Mastectomy Bras

Medic Alert Bracelet or Necklace

Medical Miles, Tolls, and Parking

Oxygen Equipment

Pregnancy Tests

Prosthesis

Rubbing Alcohol

Splints/Casts

Syringes

Transportation Expenses (essential to medical care)

Wheelchair

\*Excludes drugs imported from Canada and other countries. Some medically necessary items may be covered by the Health Care FSA if prescribed by a physician for a specific medical condition. The prescription should contain the specific medical condition and timeframe for treatment.

Wigs (hair loss due to disease)  
**Vision Expenses**  
Contact Lenses  
Contact Lens Solution

Eye Examinations  
Eyeglasses  
Laser Eye Surgeries

Prescription Sunglasses  
Radial Keratotomy/LASIK  
Reading Glasses

**This list is not meant to be all inclusive. Other expenses not listed may also qualify. Please refer to Section 213 of the Internal Revenue Code or call our toll-free Participant Services line at 800 346 2126.**

### **Examples of Expenses Eligible with Doctor's Prescription**

**Important note about over-the-counter (OTC) medicine reimbursement:** Due to health care reform regulations effective January 1, 2011, the Health Care FSA only reimburses OTC medicine expenses if you have and provide a doctor's prescription for them. Doctor's prescriptions must include the patient name, medication name, dosage, time frame for treatment and any other state law requirements. Make sure you plan your annual election accordingly.

Allergy Medicines	Fever Reducers	Nicotine Gum/Patches
Antihistamines	First Aid Cream (Bactine, special diaper rash ointments, calamine lotion, bug bite medication, wart remover treatments)	Pain Relievers
Analgesics	Digestive Tract Relief Medications	Pedialyte
Antacids	Flu and Cold Medications	Pre-Natal Vitamins
Anti-Diarrhea Medications	Hemorrhoidal Medications	Retin A (non-cosmetic)
Anti-Itch Medications	Laxatives	Sinus Medications
Anti-Nausea Medications	Lice and Scabies Treatments	Sleeping Aids
Aspirin	Menstrual Cycle Products (medication for pain and cramp relief)	Smoking Cessation Products
Athletes Foot Creams and Powders	Motion Sickness Pills	Sore Throat Sprays
Cold Sore Remedies	Muscle/Joint Pain Relievers	Special Ointments/Burn Ointments
Cough Drops	Nasal Sinus Sprays	Throat Lozenges
Cough Syrups		Vapor Rubs
Decongestants		Weight Loss Drugs (to treat specific disease)*
Eye Drops		Yeast Infection Treatments

### **Ineligible Health Care FSA Expense Examples:**

Baby-Sitting	Hair Loss Medications	Prescription Drugs for Hair Loss
Breast Pumps	Hair Transplant	Provider Discounts
Canceled Appointment Fees	Health Club Dues	Rogaine
Chapstick	Illegal Operation or Treatments	Shampoos/Soaps
Contact Lens Insurance	Insurance Premiums	Special Foods
Cosmetics	Long Term Care Premiums	Suntan Lotion/Sunscreen
Cosmetic Surgery/Procedures	Marriage or Family Counseling	Supplements* (for general health)
Dance/Exercise/Fitness Programs	Massage Therapy*	Teeth Whitening/Bleaching
Diaper Service	Maternity Clothes	Toiletries
Electrolysis	Mattresses	Toothbrushes (including battery operated)
Exercise Equipment	Meals that are not part of inpatient care	Toothpaste
Eyeglass Insurance	Moisturizers	Vision Discount Program Premiums
Face Cream	Nutritional Supplements	Vitamins (for general health)
Feminine Hygiene Products	Personal Trainer	Weight Loss Programs* (for general health)
	Prescription Drug Discount Programs	

\*Excludes drugs imported from Canada and other countries. Some medically necessary items may be covered by the Health Care FSA if prescribed by a physician for a specific medical condition. The prescription should contain the specific medical condition and timeframe for treatment.



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