



Expenses that Qualify for Reimbursement Under a Health Flexible Spending Account

The following list includes medical expenses which qualify for reimbursement under a Flexible Benefit Plan. These expenses may be incurred on behalf of you, your spouse, or your dependents claimed on your tax return. For more information, contact FlexConnect or refer to [IRS Publication 502](#), Medical and Dental Expenses.

- ▲ Acupuncture
- ▲ Adaptive Equipment for the Disabled
- ▲ Air Filter to treat specific medical condition
- ▲ Alcoholism Treatment
- ▲ Ambulance Service
- ▲ Annual Physical Exams
- ▲ Artificial Limbs and Teeth
- ▲ Birth Control Pills and Devices
- ▲ Braille Books and Magazines
- ▲ Breast Augmentation for Medical Conditions
- ▲ Capital Improvements made to your home that are medically necessary
- ▲ Car Controls for Handicapped
- ▲ Chiropractors
- ▲ Childbirth/Lamaze Classes for Mother
- ▲ Christian Science Practitioners
- ▲ Contact Lenses, Solutions and Cleaners
- ▲ Co-pays
- ▲ Crutches
- ▲ Deductibles
- ▲ Dental Care
- ▲ Dentures
- ▲ Disabled Dependent Care Expenses
- ▲ Drug Addiction Treatment
- ▲ Eye Examinations
- ▲ Eyeglasses
- ▲ Fertility/Infertility Treatments
- ▲ Health Institute Services
- ▲ Hearing Devices and Batteries
- ▲ Hospital Services
- ▲ Human Guide for the Blind
- ▲ Insulin and monitoring supplies
- ▲ Lab Fees
- ▲ Lead-based Paint Removal
- ▲ Learning Disabilities (tuition or fees for special schools)
- ▲ Lodging, if essential to medical care limited to \$50.00 per person per night
- ▲ Maintenance of Medical Aids
- ▲ Medical Records Fees
- ▲ Mental Nervous Disorder
- ▲ Nursing Home
- ▲ Nursing Services
- ▲ Obstetrical Expenses
- ▲ Orthodontic Treatment
- ▲ Orthopedic Shoes
- ▲ Oxygen and Oxygen Equipment
- ▲ Periodontal Fees
- ▲ Prescription Drugs
- ▲ Psychiatric Care
- ▲ Psychoanalysis
- ▲ Radial Keratotomy
- ▲ Schools and Education for Mentally or Physically Impaired
- ▲ Smoking Cessation Program
- ▲ Surgery
- ▲ Telephone for the Hearing Impaired
- ▲ Therapy, including “patterning” exercises
- ▲ Transportation Primarily for and Essential to Medical Care
- ▲ Transplants of Organs
- ▲ Vaccinations
- ▲ Vasectomy
- ▲ Walkers
- ▲ Weight Loss Programs as prescribed for medical care (does not cover special foods)
- ▲ Wheelchairs and Wheelchair Lifts
- ▲ X-rays





Expenses that are Typically DENIED for Reimbursement Under a Health Flexible Spending Account

The following list includes expenses, or types of documentation, which are typically denied for reimbursement under a Flexible Benefit Plan. Please feel free to contact a FlexConnect representative if you have any question regarding the allowability of an item. For more information contact FlexConnect or refer to [IRS Publication 502](#), Medical and Dental Expenses.

- ▲ Aroma Therapy
- ▲ Baby Bottles/Cups
- ▲ Baby Wipes
- ▲ Chapstick
- ▲ Controlled Substances
- ▲ Cosmetics
- ▲ Cosmetic Surgery*
- ▲ Deodorants
- ▲ Dietary Foods
- ▲ Exercise Equipment*
- ▲ Weight Loss Program Food Products
- ▲ Diet Drinks
- ▲ Feminine Hygiene Products*
- ▲ Food Supplements*
- ▲ Funeral Expenses
- ▲ Hair Color
- ▲ Hair Replacement*
- ▲ Health Club Dues*
- ▲ Herbal Supplements*
- ▲ Income Protection Insurance Premiums
- ▲ Life Insurance
- ▲ Lip Balm/Lipstick
- ▲ Long-Term Care Expenses or Insurance Premiums
- ▲ Low "Carb" Foods
- ▲ Low Calorie Foods
- ▲ Marriage or Family Counseling
- ▲ Massage Therapy*
- ▲ Maternity Clothes
- ▲ Meals During Travel for Medical Visits
- ▲ Medicare A Insurance
- ▲ Nursing Care for a Health Baby
- ▲ Nutritional Supplements*
- ▲ Perfumes
- ▲ Petroleum Jelly
- ▲ Premiums incurred by an employee or spouse for accident and health insurance policies
- ▲ Skin Moisturizers
- ▲ Shaving Cream
- ▲ Suntan Lotion
- ▲ Shampoo and Conditioner
- ▲ Swimming Lessons
- ▲ Teeth Whitening/Bleaching*
- ▲ The 1.45% hospital insurance benefits tax withheld from your pay as part of the Social Security tax or paid as part of Social Security self-employment tax
- ▲ Toothbrush (including electric)*
- ▲ Toothpaste
- ▲ Travel for Rest or Change
- ▲ Vitamins*
- ▲ Weight loss programs for general health or appearance

Unacceptable Claim Documentation

- ▲ Balance Forward Statements
- ▲ Credit Card Receipts
- ▲ Cancelled Checks

Required Documentation

- ▲ Orthodontia Service Agreement or Contract needed, if required to make payments/required down payment
- ▲ Reimbursement for nonprescription/over the counter medication purchases will require a receipt of purchase indicating the date of purchase, the amount, and the name of the product

**Note: In some instances, items on the list may be allowed if the expense is prescribed by a physician for a specific medical condition.*



INSURANCE COORDINATORS
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FLEXCONNECT



Save Money & Enhance Benefits with a Flex Plan

(Also Referred to as Flexible Benefit Plans, Cafeteria Plans, Section 125 and Flexible Spending Accounts)

Example: An employee makes \$2,500 each month and decides to participate in her employer's Flexible Benefits Plan. As a result, her insurance premiums and health and daycare expenses are paid with tax-free dollars, giving her an additional **\$112** each month! This translates into an additional **\$1,344** annually.

Without the Plan		With the Plan	
Gross Earnings	\$2,500	Gross Earnings	\$2,500
FICA, Federal, State Taxes	- \$700	Insurance Premiums	- \$100
Insurance Premiums	- \$100	Health & Daycare Expenses	- <u>\$300</u>
Health & Daycare Expenses	- <u>\$300</u>	Adjusted Gross Earnings	\$2,100
		FICA, Federal, State Taxes	- <u>\$588</u>
Take Home Pay	\$1,400	Take Home Pay	\$1,512

And as an EMPLOYER, you save matching FICA contributions (6%) for every dollar deducted pre-tax. This savings can really add up. In this example you would save **\$24** in FICA monthly, **\$288** annually, on just this one employee. Your FICA savings will not only save your employees and your company money but can actually pay for the plan!

**Example Assumes 6% FICA, 15% Federal and 7% State Taxes*

FlexConnect
 PO Box 2019
 Helena, MT 59624
 Ph: 1-866-640-(FLEX)3539
 flex@icmont.com
 www.insurancecoordinators.com

