Healthcare Flexible Spending Account, List of Eligible Healthcare Expenses

The following categorizes medical expenses as eligibile possible reimbursement under this program. This is not all-inclusive. HealthSmart also has a helpful expense table on the HealthSmart website: https://healthSmart.wealthcareportal.com Additional information can be found at: www.igov

All service for medical, dental or vision must be considered by the enrollee's coverage prior to submitting to their flexible spending account. The Explanation of Benefits (EOB) or itemized statement must be submitted with your reimbursement requestor consideration.

- Acne MedicineÌ Acupuncture Ambulance Service Analgesics (all pain relievers) Ì Anti-inflammatories Ì Antacids Ì Car Controls for the Disabled Chiropractic Care Cold Remedies ContactLenses and Solutions Cosmetic Surgery (necessary due to birth Insulin defects, accidents, etc). Ì Cough Suppressants/Expectorants Ì Crutches Decongestants **Dental Fees** Dental Implants (excluding veneers) Dental Plan Deductibles or Copays Dermatologists Dietary Spplements (excluding daily vitamins) Ì **Diagnostic Tests** Diaper Rash Ointments Ì Doctor's Fees
 - Eye Dropsì Fiber Supplements Ì Health Club Dues / Membershids Hearing Aids and Batteries Hearing Exams and Treatment Hospital Servies (minus phone/TV) Humidifiers Ì Immunizations Injections In-Vitro Fertilization Lab / XRay Fees, Deductibles or Copays LaxativesÌ Medical Nursing Home Services Massage Therapy 1 Medical Plan Deductibles or Copays Midwife/Doula Mileage to/fromMedical Services (documentation of service incurred required) Muscle or Joint Pain Ointments

Durable Medical Equipmenit

Ì These items require a prescription or letter of medical necessity that includes diagnosis and treatment description from a licensed doctor and must be dated prior to purchase or service incu**d**rate.