



# HEALTH CARE

## FLEXIBLE SPENDING ACCOUNT

THE HEALTH CARE FLEXIBLE SPENDING ACCOUNT (FSA) CAN REIMBURSE YOU FOR ELIGIBLE EXPENSES YOU OR YOUR ELIGIBLE DEPENDENTS INCUR THAT ARE NOT PAID BY YOUR EXISTING HEALTH CARE PLAN.

### YOUR STEPS TO SAVINGS!

#### 1 REALIZE THE TAX SAVINGS

You can set aside pre-tax money into an account to be reimbursed for eligible medical expenses. Savings will depend on your tax bracket. For example, if you are taxed at 25% and you enroll for \$2,850 you would save **\$712.50** in taxes.

#### 2 ESTIMATE YOUR EXPENSES

Plan for your upcoming expenses and include your spouse and dependents, if eligible. A brief list of expenses can be found to the right. A comprehensive list of allowable expenses and an expense worksheet can be found at [www.flores247.com](http://www.flores247.com).

#### 3 ENROLL AND MANAGE YOUR ACCOUNT

Contact your Human Resources Department to find out how to enroll for this benefit. Flores will send a custom Participant ID number via mail or email to help you manage your account. Contact information can be found on the back of this flyer.

#### ELIGIBLE EXPENSES

- Medical co-payments, co-insurance and deductibles
- Routine wellness visits
- Prescription expenses
- Vision expenses (including eye exams, eyeglasses and contact lenses)
- LASIK surgery
- Dental expenses (excluding cosmetic procedures)
- Orthodontia payments
- Hearing expenses
- Over-the-counter Medications
- Menstrual Care Items
- COVID-19 Related PPE

# HEALTH CARE FSA FAQs

## FREQUENTLY ASKED QUESTIONS

### HOW CAN I SUBMIT A CLAIM?

Claims may be uploaded to your account on our participant Flores247 Web Portal, [www.flores247.com](http://www.flores247.com), or using our Flores Mobile app. You may also submit your request for reimbursement via fax or mail, if you prefer. Please note that all claims must be received by the filing deadline for the applicable plan year in which your expenses were incurred.

### WHAT MUST BE INCLUDED ON RECEIPTS?

All receipts for reimbursement must include the following information: Date of service, Description of Service, Out-of-Pocket Cost, Provider Name, and Patient Name.

### WILL I HAVE A DEBIT CARD?

Possibly. If your plan offers the debit card, you can use your Flores Benefits Card at the point of purchase. Remember to keep all of your receipts in case they are requested for review.

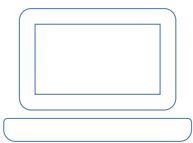
### DO I NEED TO RE-ENROLL IN THE HEALTH CARE FSA EACH YEAR?

Yes, you must re-enroll with each new plan year. Elections do not rollover from year to year.

### WHEN WILL I HAVE ACCESS TO THE FUNDS IN MY HEALTH CARE FSA?

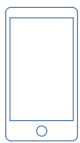
After your first Health Care FSA contribution to the plan, you will have access to the total amount you have elected for the plan year, regardless of the current balance in your flexible spending account.

## HOW DO I OBTAIN MY ACCOUNT DETAILS?



#### WEBSITE

Visit [www.flores247.com](http://www.flores247.com) and log in using Participant ID or User Name and password



#### MOBILE APP

Download our mobile app from your app store



#### PID & PASSWORD ASSISTANCE

Dial 800.840.7684

### HOW WILL REIMBURSEMENTS BE ISSUED?

Reimbursements will be mailed as a check to your home address. If you would like to have your reimbursement issued as a direct deposit, you may add your direct deposit information on the participant website ([www.flores247.com](http://www.flores247.com)) or submit a completed Direct Deposit Information Form. If your plan offers the debit card, you may use this card at the point of purchase to access your FSA dollars.

### CAN I CHANGE MY ELECTION DURING THE PLAN YEAR?

You may only change your annual election during the plan year if you experience a qualifying status change event. You must notify your employer within 30 days of any status change event in order to change your election. See the Allowable Status Changes Guide on our website ([www.flores247.com](http://www.flores247.com)) for further information.

### CAN I SUBMIT MY SPOUSE'S / DEPENDENT'S MEDICAL EXPENSES TO MY HEALTH CARE FSA?

Regardless of who is covered on your medical insurance, the Health Care FSA may reimburse expenses for your spouse or any qualifying tax or adult dependent.

### WHAT HAPPENS TO MY HEALTH CARE FSA IF I TERMINATE FROM THE COMPANY?

Any expenses submitted for reimbursement must be incurred prior to your termination date or the benefit end date specified by your company. Claims must be submitted prior to the claims filing deadline for the plan year during which you terminated. In certain situations you may be eligible to continue your participation in the Health Care FSA through the election of COBRA. Please contact your Human Resource Department for further information.

## HOW DO I SUBMIT DOCUMENTS TO FLORES?

#### ONLINE

Visit [www.flores247.com](http://www.flores247.com) and upload documents securely

#### MOBILE

Download Flores Mobile app Available for Apple or Android devices

#### MAIL

Flores & Associates, LLC  
PO Box 31397  
Charlotte, NC 28231

#### FAX

800.726.9982 or 704.335.0818

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CUSTOMER SERVICE 1.800.532.3327

# Allowable Medical Expenses



















This is a general listing of accepted items. Please check your company's plan documents for specific exclusions. For example, participation in a Health Savings Account would limit the reimbursable expenses listed below. To verify if a certain expense is covered if it is not listed below, please call 1-800-532-3327.























Expense		Allowed?	Comments
Acupuncture	<input checked="" type="checkbox"/>	Yes	If it is to treat a medical condition.
Adoption – medical expenses incurred before adoption is finalized.	<input checked="" type="checkbox"/>	Yes	This expense will qualify as long as the child qualifies as a tax dependent when the services were incurred.
Air conditioner, air purifier or water filters	<input type="checkbox"/>	Maybe	Must be prescribed by licensed health care provider and primarily used for treatment of medical condition and be detachable from the property. If attached to property only the amount which exceeds the value added to the property is reimbursable.
Alcoholism	<input checked="" type="checkbox"/>	Yes	Amount paid for inpatient treatment including meals and lodging at a therapeutic center for alcohol addiction.
Alternative remedies	<input type="checkbox"/>	Maybe	Must be primarily for treatment of a medical condition and service must be performed by a professional who is providing a legal service.
Allergy treatment products and household improvements to treat allergies (filters, pillows, special vacuums)	<input type="checkbox"/>	Maybe	Generally no, if the product is one which would be owned even without allergies (such as a pillow or vacuum) except where the difference in cost between a regular item and the allergy proof item can be established. Items such as air purifier or water filters may be allowable (see above).
Ambulance	<input checked="" type="checkbox"/>	Yes	
Artificial limb or teeth	<input checked="" type="checkbox"/>	Yes	
Asthma Treatments	<input checked="" type="checkbox"/>	Yes	Medications and devices such as inhalers and nebulizers are accepted.
Baby-sitting and childcare	<input checked="" type="checkbox"/>	No	These expenses are reimbursable under a DCAP account.
Birth control pills	<input checked="" type="checkbox"/>	Yes	If prescribed by licensed health care provider.
Birthing classes	<input type="checkbox"/>	Maybe	No for parenting or childrearing. Yes if they related to the birth only.

Blood Pressure and Blood Sugar Kits	<input checked="" type="checkbox"/>	Yes	Monitoring devices are accepted.
Braille books	<input checked="" type="checkbox"/>	Yes	Amount paid which exceeds cost of regular printed materials.
Breast pumps	<input checked="" type="checkbox"/>	Yes	Yes, if they are for the purpose of affecting a structure or function of the body of the lactating woman.
Childbirth classes	<input type="checkbox"/>	Maybe	No, unless there is an underlying medical condition.
Chinese herbal provider & herbal treatment	<input type="checkbox"/>	Maybe	Yes, for licensed health care provider charges if legal and primarily for treatment of a medical condition.
Chiropractors	<input checked="" type="checkbox"/>	Yes	Yes, if primarily for treatment of a medical condition and not for general health reasons.
Christian Science practitioners	<input checked="" type="checkbox"/>	Yes	Yes, if legal and primarily for treatment of a medical condition.
COBRA Payments	<input checked="" type="checkbox"/>	No	COBRA premiums are not reimbursable from the FSA.
Coinsurance amounts, co-pay amounts and deductibles	<input checked="" type="checkbox"/>	Yes	
Contact Lenses	<input checked="" type="checkbox"/>	Yes	Requires Rx (non-cosmetic). Includes materials and equipment needed for contact lens care such as saline solution and enzyme cleaners.
Contraceptives (over-the-counter)	<input checked="" type="checkbox"/>	Yes	
Cosmetic surgery	<input checked="" type="checkbox"/>	No	Except as required to correct congenital deformity or personal injury from an accident, trauma or disfiguring disease. Cosmetic surgery which is directed at improving the patient's appearance and does not meaningfully promote the proper function of the body or prevent or treat illness or disease is not an allowable expense.
Counseling	<input type="checkbox"/>	Maybe	No, for marriage counseling. Yes, for medical reasons – see Psychiatric care and Psychologist.
Crutches	<input checked="" type="checkbox"/>	Yes	
Dancing Lessons	<input type="checkbox"/>	Maybe	No, if for general health. Yes, if prescribed by licensed health care provider for specific medical condition (such as rehabilitation after surgery).
Deductibles	<input checked="" type="checkbox"/>	Yes	
Dental treatment	<input checked="" type="checkbox"/>	Yes	Must be medically necessary and non-cosmetic.
Dependent care expenses	<input checked="" type="checkbox"/>	No	
Diabetic Supplies	<input checked="" type="checkbox"/>	Yes	
Diagnostic services	<input checked="" type="checkbox"/>	Yes	

Dietary Supplements		Maybe	No, unless prescribed by a health care provider to treat a medical condition. Must have a licensed health care provider's prescription.
Diet Foods		No	The costs of foods associated with a weight-loss program do not qualify.
Diapers or diaper service		No	Unless medically necessary and prescribed.
DNA Collection & Storage		Maybe	Generally these expenses will not qualify. Temporary storage (one year or less) will if used as a part of a treatment, diagnosis, or prevention of a medical condition.
Drug addiction treatment		Yes	Amount paid for inpatient treatment including meals and lodging at a therapeutic center for drug addiction.
Dyslexia		Yes	Language Training will qualify if the child is disabled or has dyslexia. A licensed health care providers note is required recommending the training to treat the specific medical condition.
Ear plugs		Yes	If medically necessary and prescribed by licensed health care provider.
Egg Donor Fees and Storage Fees		Maybe	Amounts paid for the egg donor fee will qualify. Fees for storage will qualify but only for immediate conception (one year).
Electrolysis/Hair Removal		No	
Exercise equipment		Maybe	No, if for general health. Yes, if prescribed by licensed health care provider for specific medical condition (such as rehabilitation after surgery).
Eye examinations and eye-glasses		Yes	Must be prescription glasses.
Face lifts		No	
Fees for long-term storage of sperm or embryo		Maybe	Only to extent necessary for immediate conception. Fees for future conception not reimbursable.
Feminine Hygiene Products		No	
Fertility treatments		Yes	Expenses paid to or for an in vitro surrogate are not reimbursable.
Fitness programs		Maybe	No, if for general health. Yes, if prescribed by licensed health care provider for specific medical condition (such as rehabilitation after surgery).
Flu shots		Yes	
Foods		Maybe	Generally, no, unless the food is for a specific medical condition. If so, then only the cost of food, which exceeds the cost of commonly available versions of same product, is reimbursable. A licensed health care provider's note is needed.

Funeral expenses	<input checked="" type="checkbox"/>	No	
Genetic testing	<input type="checkbox"/>	Maybe	Yes, if performed to prevent possible defect. No, if performed to determine gender of fetus.
Guide dog or other animal aide	<input checked="" type="checkbox"/>	Yes	Includes charges for purchase, training and care.
Hair removal or transplants	<input checked="" type="checkbox"/>	No	Except as required to correct congenital deformity or personal injury from an accident, trauma or disfiguring disease. Cosmetic surgery which is directed at improving the patient's appearance and does not meaningfully promote the proper function of the body or prevent or treat illness or disease is not an allowable expense.
Health club dues	<input type="checkbox"/>	Maybe	No, if for general health. Yes, if prescribed by licensed health care provider for specific medical condition (such as rehabilitation after surgery).
Hearing Aids	<input checked="" type="checkbox"/>	Yes	Including batteries and maintenance charges.
Holistic or natural remedies	<input type="checkbox"/>	Maybe	Yes, for professional charges if legal and primarily for treatment of a medical condition. No, if for general health.
Hospital services	<input checked="" type="checkbox"/>	Yes	
Immunizations	<input checked="" type="checkbox"/>	Yes	
Infertility treatments	<input checked="" type="checkbox"/>	Yes	Expenses paid to or for an in vitro surrogate are not reimbursable.
Insulin	<input checked="" type="checkbox"/>	Yes	Also includes test strips and testing equipment.
Insurance premiums	<input checked="" type="checkbox"/>	No	
Laboratory fees	<input checked="" type="checkbox"/>	Yes	
Lamaze class	<input checked="" type="checkbox"/>	No	No, unless there is an underlying medical condition.
Language training for disabled child	<input checked="" type="checkbox"/>	Yes	
Laser eye surgery	<input checked="" type="checkbox"/>	Yes	
Late Fees	<input checked="" type="checkbox"/>	No	
Lead-based paint removal	<input checked="" type="checkbox"/>	Yes	Yes, for removal of paint from surfaces in the home. Surfaces must be in poor repair and within child's reach. Cost of repainting is not a medical expense.
Learning disability (special school or specifically trained teacher)	<input checked="" type="checkbox"/>	Yes	Must be prescribed by licensed health care provider for a child who has severe learning disabilities caused by mental or physical impairments.
Lodging	<input type="checkbox"/>	Maybe	Up to \$50 per night will qualify if these conditions are met: 1. Lodging is primarily for medical care. 2. A licensed health care provider or practitioner provides medical care. 3. Lodging is not lavish or extravagant. 4. If there is no significant element of personal pleasure, recreation, or vacation in the travel. Up to \$100 per night will qualify if a parent or companion is traveling with a sick child.

Marijuana or other controlled substance		No	Not even if for medical care and allowed by state law allows with licensed health care provider's prescription.
Massage therapy		Maybe	No, if for general health. Yes, if prescribed by licensed health care provider for specific medical condition (such as rehabilitation after surgery. Must have licensed health care provider's prescription on file to be reimbursed.
Mastectomy-related special bras		Yes	
Maternity clothes		No	
Mattress		No	Unless prescribed by licensed health care provider and mattress possesses a uniqueness used exclusively for treatment of severe medical condition (i.e., hospital mattress as opposed to an extra-firm mattress). If so, then only the cost of the mattress, which exceeds the cost of a commonly available version of the same product, is reimbursable.
Meals		Maybe	No, unless the amount paid is part of the hospital stay.
Medic alert bracelet or necklace		Yes	
Medical monitoring and testing devices (e.g. blood pressure monitor, syringes, glucose kits, etc.)		Yes	
Missed Appointments		No	
Naturopathic expenses		Maybe	Yes, for professional charges if legal and primarily for treatment of a medical condition or for charges for remedies that are characterized as a medicine or drug. Expenses towards vitamin, supplements, or general wellness are not accepted.
Norplant insertion or removal		Yes	
Nursing services		Yes	Yes, for wages and nursing services; No, for a healthy baby care in home.
Nutritionist's professional expenses		Maybe	Yes, if for treatment of medical condition. No, if for general health.
Occlusal guards to prevent teeth grinding		Yes	
Operations		Yes	If legal and medically necessary. Cosmetic expenses are not reimbursable.
Optometrist		Yes	
Organ donors		Yes	Includes amounts paid for surgical, hospital, laboratory and transportation expenses for organ donor.
Orthodontia		Yes	Unless for cosmetic reasons.

OTC Medications		Maybe	No, unless prescribed by a health care provider for a medical condition. Must have a licensed health care provider's prescription. See 'Allowable FSA OTC Meds' listing at <a href="http://www.flores247.com">www.flores247.com</a> for a complete listing.
OTC Supplies		Yes	OTC supplies including bandages, sunscreen with SPF 30 or higher, and first aid kits are reimbursable. See the "Allowable FSA OTC Expenses" listing at <a href="http://www.flores247.com">www.flores247.com</a> for a complete listing.
Oxygen		Yes	Includes oxygen and breathing equipment for treatment of a medical condition.
Patterning exercises		Yes	
Personal Trainer		Maybe	No, if for general health. Yes, if prescribed by licensed health care provider for specific medical condition (such as rehabilitation after surgery).
Physical exams		Yes	
Physical therapy		Yes	If medically necessary.
Pre-payments		No	Services are only reimbursable when/if they are incurred.
Prescription sunglasses		Yes	
Prescription Drugs		Yes	
Propecia		No	
Prosthesis		Yes	
Psychiatric care		Yes	Yes, if for medical reason.
Psychoanalysis		Yes	Yes, if for medical reason.
Psychologist		Yes	Yes, if for medical reason.
Reading glasses		Yes	
Reconstructive surgery following mastectomy		Yes	
Safety glasses (non-prescription)		No	
Seeing-eye dog		Yes	
Shipping and Handling Fees		Yes	As long as the fees are covering the purchase of a qualified medical expense.
Smoking cessation program and medications		Yes	Smoking cessation medications purchased from a licensed health care provider will qualify.
Special foods (i.e., gluten free or salt free)		Maybe	Yes, if for medical condition and only for cost of foods which exceed cost of commonly available versions of same product. No, if for general health. Must have licensed health care provider's prescription on file to be reimbursed.



Stem Cell, harvesting or storage	<input type="checkbox"/>	Maybe	This qualifies only if there is a specific medical condition it is treating. Long-term storage, in hopes of treating a future medical condition, is not accepted.
Sterilization	<input checked="" type="checkbox"/>	Yes	
Supplies to treat medical condition (i.e. bandages, gauze, batteries for hearing aids, etc.)	<input type="checkbox"/>	Maybe	If supply is directly related to a specific medical condition and is not a personal comfort item.
Student health fee	<input checked="" type="checkbox"/>	No	Considered same as insurance premium.
Sunglasses	<input type="checkbox"/>	Maybe	Only prescription sunglasses are accepted.
Surgery	<input checked="" type="checkbox"/>	Yes	If legal and medically necessary. Cosmetic expenses are not reimbursable.
Swimming lessons	<input type="checkbox"/>	Maybe	No, if for general health. Yes, if prescribed by licensed health care provider for specific medical condition (such as rehabilitation after surgery).
Tanning salons and equipment	<input type="checkbox"/>	Maybe	No, if for general health. May be reimbursable if incurred to treat a specifically diagnosable condition.
Teeth Whitening	<input checked="" type="checkbox"/>	No	Not even if prescribed to treat congenital condition.
Telephone (special for hearing-impaired)	<input checked="" type="checkbox"/>	Yes	Includes purchase and repair.
Transplants	<input checked="" type="checkbox"/>	Yes	Includes amounts paid for surgical, hospital, laboratory and transportation expenses for organ donor.
Travel expenses for person seeking treatment	<input checked="" type="checkbox"/>	Yes	Lodging up to \$50 per day. If a parent is traveling with a sick child, up to \$100 (\$50 per person) is allowed. Mileage can also be reimbursed for qualified medical expenses. Current mileage rates are listed on our website at <a href="http://www.flores247.com">www.flores247.com</a> .
Travel expenses for companion	<input type="checkbox"/>	Maybe	Generally no, unless necessary due to the patient's medical condition (e.g., nursing attendant) or a parent traveling with a sick child.
Tuition for special needs program (e.g. reading program for dyslexia)	<input type="checkbox"/>	Maybe	Will qualify if the primary purpose is for medical care.
Umbilical Cord, freezing and storing	<input type="checkbox"/>	Maybe	This qualifies only if there is a specific medical condition it is treating. Long-term storage, in hopes of treating a future medical condition, is not accepted.
Vaccines	<input checked="" type="checkbox"/>	Yes	
Varicose veins	<input checked="" type="checkbox"/>	No	Cosmetic surgeries that are directed at improving the patient's appearance and does not meaningfully promote the proper function of the body or prevent or treat illness or disease is not an allowable expense.

Veneers	<input checked="" type="checkbox"/>	No	
Viagra	<input checked="" type="checkbox"/>	Yes	To extent necessary to treat medical condition.
Vitamins and Supplements	<input type="checkbox"/>	Maybe	No, unless prescribed by a health care provider to treat a medical condition. Must have a licensed health care provider's prescription.
Weight loss program and/or drugs prescribed to induce weight loss	<input type="checkbox"/>	Maybe	No, if for general health. Yes, if prescribed by licensed health care provider to treat medical condition such as diabetes. Must have licensed health care provider's prescription on file to be reimbursed.
Walkers	<input checked="" type="checkbox"/>	Yes	
Wheelchair	<input checked="" type="checkbox"/>	Yes	Includes rental or purchase plus maintenance.
Wigs	<input type="checkbox"/>	Maybe	The full cost of a wig purchased if prescribed by a licensed health care provider for the mental health of a patient who has lost all of his or her hair from disease.
X-ray fees	<input checked="" type="checkbox"/>	Yes	



# Allowable Over-the-Counter Expenses

The following guide has been created to provide guidance on the type of items that are reimbursable. Please check your company's plan documents for specific exclusions. Participation in a Health Savings Account (HSA) would substantially limit the reimbursable expenses listed below for a Limited Health Care FSA (LHSA). To verify if a certain expense is covered if it is not listed below, please call 800.532.3327.

## Acceptable Over-the-Counter Items

Acid Controllers	Ovulation Indicators	Gauze and Tape Incontinence
Acne Medications	Pedialyte	Supplies Diabetic Supplies
Allergy & Sinus	Blood Pressure Monitor	Glucose Meters
Antibiotic Products	Cholesterol Test	Sunscreen SPF 15+
Anti-Diarrheals, Anti-Gas	Pregnancy Test	Crutches
Anti-Itch & Insect Bite	Condoms	Orthopedic Shoe Inserts
Asthma devices and Medication	Flu Shots	Breast Pumps/Lactation Supplies
Smoking Cessation Medication	Reading Glasses	Baby Rash Ointments/Creams
Insulin	Menstrual Care Products	Laxatives
Saline	Baby Rash Ointments/Creams	Motion Sickness
Bandages/Band-Aids	Cold Sore Remedies	Pain Relief
Rubbing Alcohol	Cough, Cold & Flu	Sleep Aids & Sedatives
Thermometers	Digestive Aids	Stomach Remedies
Cold/Hot Packs	Feminine Anti-Fungal/Anti-Itch	Medicated Sunburn Creams
First Aid Kits	Contraceptive Pills	
Oxygen		

## Dual Purpose Over-the-Counter Items (Requires Further Documentation)

Vitamins, Herbs and Supplements  
Compression Hose  
Humidifier

## Non-Acceptable Over-the-Counter Items

Aromatherapy  
Baby bottles and cups  
Baby oil  
Baby wipes  
Cosmetics  
Dental floss  
Facial care

Fragrances  
Hair regrowth  
Oral care  
Petroleum jelly  
Shampoo & conditioner  
Skin care

Spa salts  
Sunscreen/tanning products  
Teeth Whitening Products  
Tooth brushes  
Toiletries (i.e. Deodorants,  
Fragrances, and Tissues)