

Show me my pre-tax solutions:

Limited Health Care FSA

The Limited Health Care FSA allows you to pay for out-of-pocket dental, vision and orthodontia expenses with tax-free dollars. Think of the Limited FSA as a tool to pay for all your regular dental and vision expenses throughout the plan year.

- Expenses for you, your spouse and tax-dependents are eligible for reimbursement, regardless of if they are covered on your medical plan.
- The Limited FSA is a pre-funded benefit. This means you have access to your full annual election amount at any time during the plan year.
- Estimating future expenses is an important step as you prepare to enroll in an FSA. The more accurate you are in estimating your expenses, the better the plan will work for you!

- Once you meet the individual deductible on your medical insurance plan, you can submit an EOB to prove the date you reached your deductible requirement. At that point, any Section 213(d) expenses can be eligible under your plan.

- Your debit card will only function at Dental and Vision locations. You will need to submit a claim (mail, email, mobile-app, or online) for any non-dental/non-vision expenses if you've reached your deductible.

- The FlexConnect tool can be used with the Limited Health Care FSA; however, it is recommended that you use the tool only AFTER you have reached your deductible because medical claims incurred prior to the date you reach your deductible will be denied.

Common Eligible Expenses

- Dental Cleanings and x-rays
- Root Canals
- Crowns
- Bridges
- Orthodontia
- Glasses
- Contacts

Expenses that are cosmetic in nature are not eligible.