

Sign up **NOW**  
for the  
**2021–2022**  
Plan Year!

# Flexible Spending Benefits Town of Medway

## One of the Few Gifts the IRS Gives!

Discover the benefit that **SAVES YOU MONEY**. This perk allows you to set aside a portion of your pay—**BEFORE TAXES**—to cover out-of-pocket expenses in these categories:

- ◆ **HEALTH CARE.\*** Eligible expenses and services include: non-cosmetic medical, dental, and vision care services; prescription medications; orthodontics, prescription eyeglasses, contact lenses, laser eye surgery, mental health services, alternative health therapies (e.g. chiropractic, acupuncture), and **MORE!**

**Max. Annual Health Care Election: \$2,750.**

**Who's Covered?** You, your legal spouse, and your dependents as defined by the Internal Revenue Service, including those claimed on your tax return and adult children under age 26.

**Benefit Cards.** For employer plans that offer the benefit card, new Health Care FSA enrollees will receive **2 cards** that can be used at most medical facilities, dental offices, optical shops, and pharmacies to pay for eligible expenses. **Keep your cards!** They will reload each plan year that you enroll.

**HSA Ineligibility.** If you or your spouse have a Health Savings Account ('HSA'), you are **NOT** ELIGIBLE to participate in the Health Care FSA plan.

- ◆ **DEPENDENT CARE.\*\*** For dependent children under age 13, elderly dependents, and dependents with special needs. Eligible expenses include day care, pre-school, before/after school care, day camp, and elder day care.

**Max. Annual Dep. Care Election: \$5,000. per family**

*Annual FSA administration fee is paid by your employer so you save even more!*

\* Not all Health Care expenses are FSA-eligible, such as cosmetic procedures or products *even if performed or dispensed by a doctor* (e.g. Botox, teeth whitening, veneers, etc.), couples/family counseling, general health/wellness expenses (i.e., toothbrushes, non-prescription sunglasses, gym dues, etc.), and federally non-permissible products. Effective 1/1/20, non-prescription/over-the-counter medications were made eligible (not vitamins or supplements). Some expenses, such as medical equipment and some services, may be FSA-eligible with a physician's Letter of Medical Necessity. Visit <https://fsastore.com/CPAEligibility> for more info. on FSA-eligible products and services, including an A-Z look-up tool.

\*\* Overnight camp and school tuition are not FSA-eligible; day camp is eligible when utilized as childcare in order for the parent(s)/guardian(s) to be able to work; extra-curricular and enrichment programs/activities that aren't daycare/childcare-based are not eligible; monies paid to a provider who doesn't report childcare income on his/her taxes aren't eligible.

Enroll by **5/14/2021**  
for the  
**7/1/2021 – 6/30/2022**  
Plan Year

**Complete** an "Authorization for Pre-Tax Payroll Reduction" form and send it to **Cafeteria Plan Advisors** by the deadline above.

**Already in the plan?** Log-in to your employee account portal via our website ([www.cpa125.com](http://www.cpa125.com)); log-in as 'Existing User' not 'New User'—even if it's your first time logging in) to enroll for the new plan year by the deadline date above.

**Note: Re-enrollment is not automatic.**

## Track Your Account and File Claims 24/7!

Log in to your **employee portal** via our website ([www.CPA125.com](http://www.CPA125.com)), or use our **app: CPA Flex Mobile**.



Flexible Spending Plans administered by...

**CAFETERIA PLAN ADVISORS** | 420 WASHINGTON ST., SUITE 100, BRAINTREE, MA 02184 | [www.CPA125.com](http://www.CPA125.com)  
**TEL.: 781.848.9848** | **FAX: 781.848.8477** | **E-MAIL: INFO@CPA125.COM**

HD-U/L v. 1.3 (8-12-20)



## ***Important Information About Your PREPAID BENEFITS CARD***

If you're newly enrolled in the Flexible Spending Account Program, you will automatically receive the new blue Prepaid Benefits Card. You'll receive two cards at your home address for you and your family members to use. The Cards will arrive in a special envelope that looks like this – so please don't throw it out!



Your Prepaid Benefits Card is loaded with the value of your annual FSA\HSA election amount (less any amounts you have already spent in this plan year.) Using your Card helps you keep cash in your wallet and makes accessing your FSA funds easy. The Card can be used, instead of cash, to pay for qualified health care expenses such as:

- Prescription and health plan copayments, deductibles and coinsurance
- "Amount Due" on medical and dental statements
- Orthodontics
- Mail-order or online prescription invoices
- Vision services and eyeglasses
- LASIK surgery
- Eligible over-the-counter (OTC) items

You'll simply swipe your Card each time you incur a qualified health care expense and the amount of your purchase will be deducted from your FSA– automatically. You can also fill in your Card number on bills you receive from providers to pay the amount you owe. You'll have no claim forms to complete and you won't have to wait to get a check in the mail. You can check balances or account details anytime – online at [www.cpa125.com](http://www.cpa125.com) or via the mobile app -- **CPA FLEX MOBILE**. It's that easy!

### **It's Important to Save Your Receipts!**

Your Prepaid Benefits Card will definitely improve your cash flow. However, be aware that the IRS requires the Card be used only for eligible expenses. Most of the time, we can verify the eligibility of the expense automatically. Yet, there are instances when you'll receive a letter/notification asking you to furnish an itemized receipt to verify the expense. When you receive such a request, make sure you submit the receipts as soon as possible to avoid having your Card suspended until receipts have been submitted and approved.

### **What is an itemized receipt?**

An itemized receipt must include: merchant or provider name, services received or item purchased, date of service, and amount of the expense. Cancelled checks, handwritten receipts, card transaction receipts or previous balance receipts cannot be used to verify an expense.

### **Using Your Card is as Easy as 1-2-3!**

Look for additional information about how to use your new Prepaid Benefits Cards included with your card packet in the mail. We hope you enjoy this new exciting feature of your plan! Remember, the Card will not work at gas stations or restaurants – only at health care related providers.

**Save your card. Every year you re-enroll, the funds get loaded on to this card!**

*Cafeteria Plan Advisors, Inc.*  
420 Washington Street, Suite 100, Braintree, MA 02184 781.848.9848 [www.cpa125.com](http://www.cpa125.com)

## Health Care FSA Eligible Expenses

<p><b>BABY/CHILD TO AGE 13</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Lactation Consultant*</li> <li><input type="checkbox"/> Lead-Based Paint Removal</li> <li><input type="checkbox"/> Special Formula*</li> <li><input type="checkbox"/> Tuition: Special School/Teacher for Disability or Learning Disability*</li> <li><input type="checkbox"/> Well Baby /Well Child Care</li> </ul> <p><b>DENTAL</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Dental X-Rays</li> <li><input type="checkbox"/> Dentures and Bridges</li> <li><input type="checkbox"/> Exams and Teeth Cleaning</li> <li><input type="checkbox"/> Extractions and Fillings</li> <li><input type="checkbox"/> Oral Surgery</li> <li><input type="checkbox"/> Orthodontia (reimbursable after payment)</li> <li><input type="checkbox"/> Periodontal Services</li> </ul> <p><b>EYES</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Eye Exams</li> <li><input type="checkbox"/> Eyeglasses and Contact Lenses</li> <li><input type="checkbox"/> Laser Eye Surgeries</li> <li><input type="checkbox"/> Prescription Sunglasses</li> <li><input type="checkbox"/> Radial Keratotomy</li> </ul> <p><b>HEARING</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Hearing Aids and Batteries</li> <li><input type="checkbox"/> Hearing Exams</li> </ul> <p><b>LAB EXAMS/TESTS</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Blood Tests and Metabolism Tests</li> <li><input type="checkbox"/> Body Scans</li> <li><input type="checkbox"/> Cardiograms</li> <li><input type="checkbox"/> Laboratory Fees</li> <li><input type="checkbox"/> X-Rays</li> </ul>	<p><b>MEDICAL EQUIPMENT/SUPPLIES</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Air Purification Equipment*</li> <li><input type="checkbox"/> Arches and Orthotic Inserts</li> <li><input type="checkbox"/> Contraceptive Devices</li> <li><input type="checkbox"/> Crutches, Walkers, Wheel Chairs</li> <li><input type="checkbox"/> Exercise Equipment*</li> <li><input type="checkbox"/> Hospital Beds*</li> <li><input type="checkbox"/> Mattresses*</li> <li><input type="checkbox"/> Medic Alert Bracelet or Necklace</li> <li><input type="checkbox"/> Nebulizers</li> <li><input type="checkbox"/> Orthopedic Shoes*</li> <li><input type="checkbox"/> Oxygen*</li> <li><input type="checkbox"/> Post-Mastectomy Clothing</li> <li><input type="checkbox"/> Prosthetics</li> <li><input type="checkbox"/> Syringes</li> <li><input type="checkbox"/> Wigs*</li> </ul> <p><b>MEDICAL PROCEDURES/SERVICES</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Acupuncture</li> <li><input type="checkbox"/> Alcohol and Drug/Substance Abuse (inpatient treatment and outpatient care)</li> <li><input type="checkbox"/> Ambulance</li> <li><input type="checkbox"/> Fertility Enhancement and Treatment</li> <li><input type="checkbox"/> Hair Loss Treatment*</li> <li><input type="checkbox"/> Hospital Services</li> <li><input type="checkbox"/> Immunization</li> <li><input type="checkbox"/> In Vitro Fertilization</li> <li><input type="checkbox"/> Physical Examination (not employment-related)</li> <li><input type="checkbox"/> Reconstructive Surgery (due to a congenital defect, accident, or medical treatment)</li> <li><input type="checkbox"/> Service Animals</li> <li><input type="checkbox"/> Sterilization/Sterilization Reversal</li> <li><input type="checkbox"/> Transplants (including organ donor)</li> <li><input type="checkbox"/> Transportation to Medical Facility</li> </ul>	<p><b>MEDICATIONS/DRUGS</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Insulin</li> <li><input type="checkbox"/> Prescription Drugs</li> <li><input type="checkbox"/> **Over the Counter Drugs/Medicines (such as Tylenol, Advil, NyQuil, etc.)</li> </ul> <p><b>OBSTETRICS</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Doulas*</li> <li><input type="checkbox"/> Lamaze Class</li> <li><input type="checkbox"/> OB/GYN Exams</li> <li><input type="checkbox"/> OB/GYN Prepaid Maternity Fees (reimbursable after date of birth)</li> <li><input type="checkbox"/> Pre- and Postnatal Treatments</li> </ul> <p><b>PRACTITIONERS</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Allergist</li> <li><input type="checkbox"/> Chiropractor</li> <li><input type="checkbox"/> Christian Science Practitioner</li> <li><input type="checkbox"/> Dermatologist</li> <li><input type="checkbox"/> Homeopath</li> <li><input type="checkbox"/> Naturopath*</li> <li><input type="checkbox"/> Optometrist</li> <li><input type="checkbox"/> Osteopath</li> <li><input type="checkbox"/> Physician</li> <li><input type="checkbox"/> Psychiatrist or Psychologist</li> </ul> <p><b>THERAPY</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Alcohol and Drug Addiction</li> <li><input type="checkbox"/> Counseling (not marital or career)</li> <li><input type="checkbox"/> Exercise Programs*</li> <li><input type="checkbox"/> Hypnosis*</li> <li><input type="checkbox"/> Massage*</li> <li><input type="checkbox"/> Occupational</li> <li><input type="checkbox"/> Physical</li> <li><input type="checkbox"/> Smoking Cessation Programs*</li> <li><input type="checkbox"/> Speech</li> <li><input type="checkbox"/> Weight Loss Programs*</li> </ul>
---	---	--

**\*\*Please Note:** Effective 1/1/2020, the IRS now allows personal protective items to prevent the spread of covid, such as, masks, sanitizer and wipes, as well as Over the Counter (OTC) medicines/drugs and feminine care products may now be purchased with Health Care FSA or certain HRA plans. *Vitamins & supplements are not eligible.*

The following is a high-level list of OTC items that are *not* medicine or drugs and are eligible for purchase with Health Care FSA Plans.

<p><b>Denture Adhesives, Repair, and Cleansers</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> PoliGrip, Benzodent, Efferdent</li> </ul> <p><b>Diabetes Testing and Aids</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Insulin, Ascencia, One Touch, Diabetic Tussin, insulin syringes; glucose products</li> </ul> <p><b>Diagnostic Products</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Thermometers, blood pressure monitors, cholesterol testing</li> </ul>	<p><b>Elastics/Athletic Treatments</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> ACE, Futuro, elastic bandages, braces, hot/cold therapy, orthopedic supports, rib belts</li> </ul> <p><b>Eye Care</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Contact lens care</li> <li><input type="checkbox"/> Reading Glasses and Maintenance Accessories</li> </ul>	<p><b>Family Planning</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Pregnancy and ovulation kits</li> </ul> <p><b>First Aid Dressings and Supplies</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Band Aid, 3M Nexcare, non-sport tapes *without antibiotic strip</li> </ul> <p><b>Incontinence Products</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Attends, Depend, GoodNites for juvenile incontinence</li> </ul>
---	---	---

\*Items with an asterisk are potentially eligible with a Letter of Medical Necessity from a licensed physician. For a detailed list, log in to our website at [www.cpa125.com](http://www.cpa125.com) and click on the link to the FSA Store to view the eligibility list.