It’s time to get serious about reducing your out-of-pocket costs.
Why PEHP FLEX$?

The simple answer: It saves you money.

How? By reducing your taxable income. You set aside a portion of your pre-tax salary for your account. Use it to pay eligible expenses.

PEHP offers two types of FLEX$: health care and dependent day care. You can enroll in one or both. Plan ahead wisely and set aside only what you will need for eligible expenses each year.

FLEX$ is use-it-or-lose-it – money does not carry over from year to year.

The total amount you elect to withhold for healthcare expenses will be immediately available as soon as you begin FLEX$.

Services paid for with FLEX$ must be received during the FLEX$ plan year.
**Eligible expenses**

As required by federal law, regardless of the timing of your plan year, beginning Jan. 1, 2011, over-the-counter medicine will no longer be eligible for reimbursement from a Flex plan or HRA without a prescription. All over-the-counter medications must be obtained prior to Dec. 31, 2010, to be eligible for reimbursement.

**FLEX$: HEALTH CARE ACCOUNT**

may be used for eligible out-of-pocket expenses for you or your eligible dependents. A partial list of eligible expenses is on the back of this brochure.

**FLEX$: DEPENDENT DAY CARE ACCOUNT**

may be used for eligible day care expenses for your eligible dependents to allow you and/or your spouse to work or to look for work.

*For more information about which expenses are eligible, visit [www.pehp.org](http://www.pehp.org) or [www.irs.gov](http://www.irs.gov).*
Examples of eligible expenses

• Alcohol & drug treatment program
• Band-Aids, bandages & gauze pads
• Body Scan – diagnostic or screening tests
• Cold, flu medicine, cough drops & throat lozenges
• Cold/hot packs for injuries
• Condoms & spermicidal foam
• Contact lenses, including lens care supplies
• Eyeglasses
• First aid cream & antibacterial ointment
• Hearing aids & batteries
• Infertility treatment

• Laser eye surgery
• Muscle or joint pain reliever
• Nicotine gum or patches for smoking cessation
• Orthodontia (copy of contract required)
• Orthotics
• Prescriptions drugs
• Routine physical exams
• Sinus medication, nasal strips & nasal sinus sprays
• Smoking cessation program
• Sunburn ointment or cream
• Thermometer

Not a complete list. For more eligible expenses, visit www.irs.gov

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Examples of expenses requiring a doctor’s note

• Arthritis treatment
• Chinese herbs, naturopathic & dietary supplements
• Massage therapy
• Medical equipment and qualified home improvements
• Nasal spray for snoring
• Special school to treat a specific disability
• Sunglasses
• Sunscreen
• Topical creams
• Vitamins to treat a medical condition
• Weight loss drugs & programs

Examples of non-eligible expenses

• Aromatherapy
• Botox
• Contact lens service agreement or insurance
• Cosmetic procedures & surgery
• Deodorant
• Face cream, suntan lotion & moisturizers
• Health Club Dues
• Insurance premiums
• Electrolysis or hair removal
• Payments for services performed outside the current plan year
• Teeth Bleaching
• Toiletries
• Vitamins & Supplements

Using your FLEX$ card

The easiest way to utilize your FLEX$ account is with the FLEX$ Benefit Card you will automatically receive at no extra cost. It works just like a credit card and is accepted at most places that take MasterCard.

The FLEX$ card is a vehicle to access your funds; you may be asked to verify expenses.

For places that don’t accept the FLEX$ card, simply pay for the charges and submit a copy of the receipt and a claim form to PEHP for reimbursement.

You will be responsible to keep all receipts for tax and verification purposes. PEHP may ask for verification of any charges.

QUESTIONS? Contact the PEHP FLEX$ Department at 801-366-7503 or 1-800-753-7703 or go to www.pehp.org.