

Frequently Questioned Services

This chart lists items the Office of Personnel Management often receives inquiries on as to how, or if, the items are covered under our benefit Programs.

If an item on this list is important to you,

1) review your health insurance coverage under the Federal Employees Health Benefits (FEHB) Program to determine if it is sufficient;

2) consider dental or vision coverage under the Federal Employees Dental and Vision Insurance Program (FEDVIP) if your FEHB coverage doesn't meet your needs; and

3) consider a flexible spending account (FSAFEDS) to save money and pay for eligible health care expenses that are not covered or reimbursed under FEHB or FEDVIP. FSAFEDS allows you to contribute money from your salary before taxes are withheld, to an account that reimburses you after you incur eligible out-of-pocket dependent care and/or healthcare expenses. Links to Program materials are on the last page.

If the following services are important to you and/or your family...	<i>review your health insurance coverage...</i>	<i>consider dental or vision coverage...</i>	<i>consider a flexible spending account.</i>
Alternative medicine such as chiropractic care, acupuncture, massage therapy	<p>Some alternative medicine services may be covered by your FEHB plan.</p> <p>Review your plan's current brochure for the services that are covered.</p> <p>If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.</p>	N/A	<p>Acupuncture and chiropractic expenses are eligible.</p> <p>Massage therapy expenses if prescribed by a physician for a specific illness, injury, trauma or condition are potentially eligible. A letter of medical necessity is required.</p>
Assisted reproductive technology (ART) procedures such as in vitro fertilization	<p>Assisted reproductive services may be covered by your FEHB plan.</p> <p>Review your plan's current brochure for services that are covered.</p>	N/A	<p>Assisted reproductive expenses are eligible.</p>

Always refer to the individual FEHB and FEDVIP brochures and the www.FSAFEDS.com website before making your final enrollment decisions.

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	If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.		
Artificial insemination or other infertility treatment	<p>Artificial insemination is covered by FEHB Health Maintenance Organization (HMO) plans and may be covered by other types of FEHB plans.</p> <p>Review your plan's current brochure for limitations or exclusions (such as the cost of donor sperm).</p> <p>If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.</p>	N/A	Artificial insemination expenses are eligible.
Charges above the Plan's allowance	<p>Charges above the plan's allowance will not be paid by the plan.</p> <p>If you use a plan's participating or preferred provider, you will not be responsible for these charges.</p>	For in network providers, charges above the plan's allowance will not be paid by the plan. In some plans, out of network provider payments are based on usual and customary fees, not the plan allowance.	Medical expenses in excess of your FEHB or FEDVIP plan's allowance may be eligible.
Dental services	<p>Common services such as: diagnostic services; preventive services; exams; x-rays; cleanings; and care for accidental injury may be covered by your FEHB plan.</p> <p>Review your plan's current brochure for the dental services that are covered.</p>	FEDVIP dental plans cover services that FEHB plans may cover plus: fillings; extractions; periodontal scaling; complete dentures and adjustments; root canals; crowns; oral surgery; bridges; and orthodontic services	Non-cosmetic dental expenses are eligible.

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If the following services are important to you and/or your family...	<i>review your health insurance coverage...</i>	<i>consider dental or vision coverage...</i>	<i>consider a flexible spending account.</i>
	If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.	for dependent children younger than 19.	
Diabetic testing supplies	<p>Diabetic testing supplies are covered.</p> <p>Review your plan's current brochure for the level of reimbursement.</p> <p>If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.</p>	N/A	Diabetic testing supplies are eligible.
First aid kits/supplies	<p>Dressings, antiseptics and other first aid supplies generally are not covered, but some plans may offer additional benefits that are not part of the FEHB contract.</p> <p>Check your FEHB plan's brochure for details on non-FEHB benefits.</p>	N/A	First aid kits/supplies are eligible.
Gym memberships	<p>Gym memberships generally are not covered under regular FEHB benefits, but some plans may offer additional benefits that are not part of the FEHB contract.</p> <p>Check your FEHB plan's brochure for details on non-FEHB benefits.</p>	N/A	Fees paid for a gym membership may be eligible expenses if prescribed by a physician and substantiated by his or her statement that membership is necessary to alleviate a medical condition. A letter of medical necessity is required.
Hearing aids	Hearing aids may be covered by your FEHB plan.	N/A	Hearing aids and batteries are eligible expenses.

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If the following services are important to you and/or your family...	<i>review your health insurance coverage...</i>	<i>consider dental or vision coverage...</i>	<i>consider a flexible spending account.</i>
	<p>Review your plan's current brochure for services that are covered.</p> <p>If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.</p>		
Lead based paint removal	Paint removal is not a covered service under FEHB plans.	N/A	Expenses for removing lead-based paint from surfaces in your home to prevent a child who has, has had, or is in danger of having lead poisoning from eating the paint are eligible. The surfaces must be in poor repair and within a child's reach.
Orthodontics	<p>Orthodontic services may be covered by your FEHB plan.</p> <p>Review your plan's current brochure for the orthodontic services that are covered.</p> <p>If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.</p>	<p>FEDVIP dental plans provide orthodontic care for dependent children younger than 19.</p> <p>The plans may have a waiting period and a lifetime maximum.</p>	Orthodontic expenses are eligible.
Over-the-counter (OTC) medicine and supplies	Drugs that do not require a prescription for their purchase are generally excluded from coverage.	N/A	<p>Eligible items include medicines or drugs that have a prescription for that item written by a physician. The only exception is insulin.</p> <p>Items that are not medicines or drugs do not require a prescription.</p> <p>These items are not cosmetic in nature or merely beneficial to your general health.</p>

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Prescription drugs (including maintenance medications)	<p>Prescription drugs are covered.</p> <p>Review your plan’s current brochure for the level of reimbursement and any categories of drugs that are excluded from coverage.</p> <p>If your current plan doesn’t meet your needs, then you may want to consider another FEHB plan.</p>	Prescription drugs obtainable at a pharmacy are not covered.	Deductibles, copayments and coinsurance as well as costs for prescription drugs are eligible.
Speech generating devices	<p>Speech generating devices may be covered by your FEHB plan.</p> <p>Review your plan’s current brochure for services that are covered.</p> <p>If your current plan doesn’t meet your needs, you may want to consider another FEHB plan.</p>	N/A	Speech generating devices and other adaptive equipment used for a major disability and to assist with activities of daily living may be eligible. A letter of medical necessity is required.
Transportation for medical care	<p>Ground transportation by ambulance is covered when medically appropriate.</p> <p>Air transportation by ambulance when required because of a medical emergency may also be covered.</p> <p>Transportation costs other than for ambulance services are generally not covered</p>	N/A	Costs of transportation to/from locations of medical care may be eligible for reimbursement provided certain requirements are met.
Vision services	Diagnosis and treatment of medical conditions, such as glaucoma and cataracts, are covered.	FEDVIP vision plans cover services that FEHB plans may cover plus: frames, lenses (bifocal, trifocal, lenticular) and laser vision correction discounts.	Vision care expenses are eligible (i.e. eye exams, vision correction procedures, vision therapy, eyeglasses and contact lenses).

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	<p>Common services such as: examinations, eyeglasses, contacts and replacement lenses may be covered by your FEHB plan.</p> <p>Review your plan's current brochure for the vision services that are covered.</p> <p>If your current plan doesn't meet your needs, then you may want to consider another FEHB plan.</p>		

Program information is found on our website at www.opm.gov/insure.

Go to www.opm.gov/insure/fastfacts/index.asp to read *FastFact* highlights on each of these benefit Programs.

Health insurance plan brochures are at www.opm.gov/insure/health/planinfo/index.asp.

Dental insurance plan brochures are at www.opm.gov/insure/dental/planinfo/index.asp.

Vision insurance plan brochures are at www.opm.gov/insure/vision/planinfo/index.asp

For information on FSAFEDS, please visit the FSAFEDS website at www.fsafeds.com.