

# HEALTH CARE SPENDING ACCOUNT



- Reimbursement and Documentation Requirements
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## Reimbursement and documentation requirements

### REIMBURSEMENT REQUIREMENTS

All health care claims must be submitted and substantiated when they are incurred. EXPENSES ARE INCURRED WHEN YOU ARE PROVIDED WITH THE HEALTH CARE THAT GIVES RISE TO THE HEALTH CARE EXPENSES AND NOT WHEN YOU ARE FORMALLY BILLED OR CHARGED FOR OR PAY FOR THE EXPENSES.

### DOCUMENTATION REQUIREMENTS (other than over-the-counter drugs)

If the expense is covered by insurance, submit the expense to the insurance carrier first. Once the insurance carrier processes the claim and sends the Explanation of Benefits (EOB) statement to you, you can submit it with the claim form to substantiate the claim.

If the expense is not covered by insurance, the claim form must be accompanied by an itemized statement of services from the **Provider**, which should include the following information as required by federal regulations:

1. Provider name and address
2. Patient name
3. Date the expense was incurred
4. A description of the service or supply
5. Amount charged

Keep a **copy** of the claim form *and* the **original** substantiation for your records.

If a service is performed by someone other than a physician, and an EOB is not submitted, then in addition to the information in items 1-5 above, a statement from an attending physician must be submitted stating that a specific medical condition is present and that treatment is necessary for the condition.

With respect to certain services, e.g. massage therapy, the length of the treatment plan must also be included.

- A paid receipt is acceptable when submitting claims for prescription drugs or copays if it contains the required five items listed above.
- A credit card receipt must contain the required five items listed above.

Reimbursement may be made only for expenses that are for “medical care” as defined by the Internal Revenue Service and as interpreted and applied by the Plan Administrator. To be reimbursed under a Health Care Spending Account:

- You, your spouse or eligible dependent must incur the expense.

- A credit card statement is **NOT** acceptable substantiation.
- A cancelled check alone is **NOT** acceptable substantiation.
- Staple a **legible copy** of the substantiation to the back of the claim form. Illegible copies will delay the processing of your claim.

### Reimbursement of Orthodontia Claims

Under a health care flexible spending account plan, expenses must be “incurred” before they may be reimbursed. Orthodontia services are recognized as being different from other health care services in that there is generally a pre-payment component and the treatment period may span several years. This makes it difficult to match costs with dates that the actual services are incurred. Guidelines for substantiating these claims are outlined as follows:

### Dental Insurance

If there is coverage under a dental plan, payment will be reduced by the amount paid by the dental coverage. If you have dental insurance that covers orthodontia, submit an Explanation of Benefits (EOB) from the carrier with a completed claim form. **Note: Orthodontia differs from other dental procedures that require the actual service to be performed within the Plan Year.**

### Initial Evaluation Fees

Orthodontia services initially performed, such as moldings, diagnostic record keeping, and consultation, etc. are reimbursable when incurred if the expenses are separate from the contracted treatment. These expenses are typically not

- You must **substantiate** the expense as required by federal regulations in accordance with the health care “Documentation Requirements” below.

**Note:** You will be reimbursed only to the extent that the expense has not been reimbursed and that you will not seek reimbursement under any other plan covering health benefits.

included in the total treatment cost for orthodontia and require a fully completed claim form with proper substantiation of the service. If these services are incurred during the Plan Year of your election, they are considered eligible.

### Initial Fee vs. Down Payment

It is a common practice for providers to require an initial fee before the start of the orthodontia treatment. This expense is eligible for reimbursement with a fully completed claim form and proper substantiation of the service. The expense must be paid for during the Plan Year of your election. A down payment is not eligible for reimbursement because it does not represent services that have been incurred.

### Monthly Payments

The monthly liability for orthodontic treatment may be substantiated by the following:

- A coupon from an orthodontist coupon booklet indicating monthly payments
- A paid receipt indicating the payment date
- A monthly statement that indicates the monthly payment amount

### FULL PAYMENT OF ORTHODONTIC TREATMENT

If payment is made in full for the treatment, and proof of payment is included with the completed claim form, the full payment will be reimbursed up to your health care election amount. The payment must be made during the Plan Year of your election.

**Important Note: Reimbursement of full payment is ONLY available if it is the only method of payment that the Orthodontist offers.**

# Examples of qualifying health care expenses

Please note: The examples given are subject to change by the Internal Revenue Service and are not all inclusive. A more extensive list of expenses may be found under "Tools" on [www.avantserve.com](http://www.avantserve.com). Also please note, some items may not be reimbursable under your employer's plan. Refer to your summary plan description (SPD) for further information.

## ABORTION

You may include in health care expenses the amount you pay for a legal abortion.

## ACUPUNCTURE

You may include in health care expenses the amount you pay for acupuncture.

## ALCOHOLISM

You can include in health care expenses amounts you pay for an inpatient's treatment at a therapeutic center for alcohol addiction. This includes meals and lodging provided by the center during treatment.

You can also include in health care expenses transportation costs you pay to attend meetings of an Alcoholics Anonymous Club in your community if your attendance is pursuant to medical advice that membership in the Alcoholics Anonymous Club is necessary for the treatment of a disease involving the excessive use of alcoholic liquors.

## AMBULANCE

You may include in health care expenses amounts you pay for ambulance service.

## ARTIFICIAL LIMB or PROSTHESIS

You may include in health care expenses the amount you pay for an artificial limb.

## ARTIFICIAL TEETH

You can include in health care expenses the amount paid for artificial teeth.

## BIRTH CONTROL

You may include in health care expenses birth control pills prescribed by your doctor. You may also include the cost of condoms and spermicides.

## BRAILLE BOOKS, MAGAZINES

You may include in health care expenses the part of the cost of Braille books and magazines for use by a visually impaired person that is more than the cost for regular printed editions.

## BREAST PUMPS

You may include the cost of a breast pump if there is a medical reason. Expenses **MAY NOT** be included if only used for convenience, scheduling or other personal reasons. A note from an attending physician stating that a medical condition exists must be provided.

## CAR

**Special equipment.** You may include in health care expenses the cost of special hand controls and other special equipment installed in a car for the use of a person with a disability.

**Special design.** The amount by which the cost of a car specially designed to hold a wheelchair is more than the cost of a regular car is a health care expense.

## CHIROPRACTORS

You may include in health care expenses fees you pay to a chiropractor for health care.

## CHRISTIAN SCIENCE PRACTITIONERS

You may include in health care expenses fees you pay to Christian Science practitioners if payments are for health care.

## CONTACT LENSES

You can include in health care expenses amounts you

pay for contact lenses needed for health care reasons. You can also include the cost of equipment and materials required for using contact lenses, such as saline solution and enzyme cleaner. See also *Eyeglasses* and *Laser Eye Surgery* on this page.

## COSMETIC SURGERY and PROCEDURES

You may include in health care expenses the amounts you pay for cosmetic surgery **ONLY IF** the surgery or procedure is necessary to correct a deformity arising from (or directly related to) (1) a congenital abnormality (2) personal injury resulting from an accident or trauma, or (3) a disfiguring disease. Procedures such as face lifts, hair transplants, hair removal (electrolysis) and liposuction generally are **NOT** qualifying health care expenses.

## CRUTCHES

You may include in health care expenses the amount you pay to buy or rent crutches.

## DENTAL TREATMENT

You may include in health care expenses the amounts you pay for dental treatment. This includes fees paid to dentists, X-rays, fillings, braces, extractions and dentures. **Note:** All substantiation for dental services must include the date of service, the name of the provider and a description of the service.

## DIAGNOSTIC SERVICES

You may include in health care expenses the cost of body scans, pregnancy kits, ovulation monitors, and on-site health fairs that check blood pressure, cholesterol and bone density tests.

## DOCTOR'S FEES

You may include in health care expenses amounts you pay for legal health care services provided by:

- obstetricians
- gynecologists
- anesthesiologists
- surgeons
- pediatricians
- dermatologists
- psychiatrists
- podiatrists
- osteopaths
- ophthalmologists
- neurologists

**Psychiatric care.** You may also include amounts you pay for psychiatric care. This includes the cost of supporting a mentally ill dependent at a specially equipped health care center where the dependent receives health care. See *Psychoanalysis* and *Transportation* on back.

Services provided by an independent social worker (LISW) must be accompanied by a note from an attending physician stating that a medical condition exists.

## DRUG ADDICTION

You can include in health care expenses amounts you pay for an inpatient's treatment at a therapeutic center for drug addiction. This includes meals and lodging at the center during treatment.

## EYEGLASSES

You may include amounts you pay for eyeglasses and contact lenses you need for health care reasons. You may also include fees paid for eye examinations.

## FERTILITY ENHANCEMENT

You can include the cost of the following procedures to overcome your inability to have children:

- Procedures such as *in vitro* fertilization (including temporary storage of eggs or sperm).
- Surgery, including an operation to reverse prior surgery that prevents you from having children.

## FOOD, SPECIAL

You may include in health care expenses foods that are prescribed by a medical practitioner to treat a specific illness or ailment and if the foods do not substitute for normal nutritional requirements. The amount that may qualify is limited to the amount by which the cost of the special food exceeds the cost of commonly available versions of the same product. A note from an attending physician recommending it to treat a specific medical condition is required.

## GUIDE DOG

You may include in health care expenses the cost of a guide dog for the visually-impaired or hearing-impaired. Amounts you pay for the care of the dog are also health care expenses.

## HEALTH INSTITUTE

You can include in health care expenses fees you pay for treatment at a health institute only if the treatment is prescribed by a physician and the physician issues a statement that the treatment is necessary to alleviate a physical or mental defect or illness in the individual receiving the treatment.

## HEARING AIDS

You may include in health care expenses the cost of a hearing aid and the batteries you buy to operate it.

## HOSPITAL SERVICES

You may include in health care expenses amounts you pay for inpatient care if the main reason for being there is to receive health care.

## LACTATION CONSULTANT

You may include the cost of a lactation consultant if you are having lactation problems and cannot breast-feed your child. A note from an attending physician stating that a medical condition exists must be submitted.

## LAMAZE CLASSES

You may include expenses that relate to childbirth and not child rearing. Expenses for a coach or significant other are **NOT** includable.

## LASER EYE SURGERY

You can include in health care expenses the amount you pay for surgery to improve vision, such as radial keratotomy or other laser eye surgery, if it is done primarily to promote the correct function of the eye.

## LABORATORY FEES

You may include in health care expenses the amounts you pay for laboratory fees that are part of your health care.

## LEARNING DISABILITY

You may include in health care expenses tuition fees you pay to a special school for a child who has severe learning disabilities caused by mental or physical impairments, including nervous system disorders. Your doctor must recommend that the child attend the school. See *Schools, Special*, on back.

You may also include tutoring fees you pay on your doctor's recommendation for the child's tutoring by a teacher who is specially trained and qualified to work with children who have severe learning disabilities.

## LEGAL FEES

You may include in health care expenses legal fees paid to authorize treatment for mental illness. However, if

part of the legal fees include, for example, guardianship or estate management fees, you may not include that part in health care expenses.

### **LODGING** (See *Nursing Home*, this page)

You may include in health care expenses the cost of meals and lodging at a hospital or similar institution if your main reason for being there is to receive health care.

You may be able to include the cost of lodging not provided in a hospital or similar institution. You can include the cost of such lodging while away from home if you meet all of the following requirements:

- The lodging is primarily for and essential to health care.
- The health care is provided by a doctor in a licensed hospital or in a health care facility related to, or the equivalent of, a licensed hospital.
- The lodging is not lavish or extravagant under the circumstances.
- There is no significant element of personal pleasure, recreation, or vacation in the travel away from home.

The amount you include in health care expenses for lodging cannot be more than \$50 for each night for each person. Lodging is included for a person for whom transportation expenses are a health care expense because that person is traveling with the person receiving the health care. For example, if a parent is traveling with a sick child, up to \$100 per night can be included as a health care expense for lodging. Meals are not included.

**Do not include** the cost of your lodging while you are away from home for health care treatment if you do not receive that treatment from a doctor in a licensed hospital or in a medical care facility related to, or the equivalent of, a licensed hospital or if that lodging is not primarily for or essential to the medical care you are receiving.

### **MEDICAL CONFERENCES**

You may include in health care expenses amounts paid for admission and transportation to a medical conference if the medical conference concerns the chronic illness of you, your spouse, or your dependent. The costs of the medical conference must be primarily for and necessary to the medical care of you, your spouse, or your dependent. You must spend the majority of your time at the conference attending sessions on medical information. The cost of meals and lodging while attending the conference is not a health care expense.

### **MEDIC ALERT BRACELET or NECKLACE**

You may include the cost of a medic alert bracelet or necklace if it is prescribed by a physician for treatment of a medical condition. Renewal fees are **not** reimbursable.

### **MEDICAL INFORMATION PLAN**

You may include in health care expenses amounts paid to a plan that keeps your health care information by computer and that can give you the information when you need it.

### **MEDICAL MONITORING and TESTING DEVICES**

You may include the costs of such devices as blood pressure monitors, syringes and glucose kits.

### **MEDICINES or DRUGS**

Both prescribed and over-the-counter medicines or drugs are reimbursable if they are primarily for medical care. A medicine or drug is not reimbursable if it is merely beneficial to general health or a toiletry or a cosmetic. Medicines or drugs whether prescribed or over-the-counter **if imported** into the United States are **NOT** reimbursable. Medicines or drugs that are legal at the state or local level, but illegal at the federal level are also not reimbursable.

### **Prescribed**

You may include in health care expenses amounts you pay for medicines and drugs that require a prescription, or for insulin. A prescribed drug is one that requires a prescription by a physician and is filled by a licensed pharmacist.

### **Over-the-Counter**

You may include in health care expenses amounts you pay for over-the-counter medicines or drugs. Examples of over-the-counter medicines or drugs that are reimbursable are:

- Antacids
  - Allergy medicines
  - Pain relievers
  - Cold medicines
  - Anti-diarrhea medicine
  - Laxatives
  - Menstrual cycle products for pain and cramp relief
  - Cough drops and throat lozenges
  - Nasal sinus sprays
  - Sinus medications
  - Nicotine gum or patches for stop smoking purposes
  - Special ointment or cream for sunburn
  - Products for muscle pain or joint pain
  - Pedialyte for child's dehydration
  - First aid cream
  - Diaper rash ointments
  - Calamine lotion
  - Bug bite medication
  - Wart remover treatments
  - Visine
  - Suppositories and creams for hemorrhoids
  - Motion sickness pills
  - Band-Aids
  - Bandages
  - Gauze pads
  - First aid kits
  - Cold or hot packs for injuries
  - Rubbing alcohol
  - Liquid adhesive for small cuts
  - Reading glasses
  - Contact lens solutions
  - Carpal tunnel wrist supports
  - Pregnancy test kits
  - Condoms
  - Spermicidal foam
  - Thermometers (ear and mouth)
  - Incontinence supplies
  - Nasal Strips
  - Acne Treatments
  - Sunscreen with an SPF of 30 or higher
  - Pills for persons who are lactose intolerant
  - Nasal sprays for snoring
- The following are examples of over-the-counter medicines or drugs that must be accompanied by a physician's diagnosis and recommendation:
- Weight loss drugs to treat a specific disease (including obesity)
  - Orthopedic shoes and inserts (the cost of orthopedic shoes may be reimbursed for the extra cost over non-orthopedic shoes)
  - Glucosamine/Chondroitin for an arthritic condition
  - St. John's Wort – for depression
  - OTC Hormone Therapy for treatment of menopause symptoms such as hot flashes and night sweats
  - Dietary supplements or herbal medicines to treat a specific medical condition under narrow circumstances.

**Example:** A medical practitioner tells an individual to take 1000 mg of vitamin B-12 to treat a specific medical condition or to take vitamin B for scurvy.

- Fiber supplements under narrow circumstances – not reimbursable if taken daily as a supplement to a normal diet, but reimbursable if taken to treat a specific medical condition for a limited time.

The following are examples of over-the-counter medicines or drugs that are **NOT** reimbursable:

- Toothpaste
- **Toothbrushes** (electric or otherwise) even if a dentist recommends a special one
- Chapstick
- Face cream, moisteners and suntan lotion
- Medicated shampoos and soaps
- One-a-day vitamins
- Mouthwashes, rinses
- Feminine products

The list of excluded items is for illustrative purposes only and is not all inclusive. There may be other over-the-counter medicines or drugs in addition to these that are not reimbursable.

Over-the-counter drugs must be substantiated by a receipt from a third party with the date, name of the medicine or drug and the amount **imprinted (not handwritten)** on the receipt. If a receipt for an over-the-counter drug does not contain the name of the drug, Benefit Concepts will require additional third-party substantiation (e.g. a box top that includes the name of the drug and a price tag matching the price on the receipt).

Advance purchases of over-the-counter drugs may be reimbursable; however, advance purchases are limited to a quantity of six of each item, e.g. six bottles of aspirin or six tubes of ointment, etc.

### **MENTALLY RETARDED, SPECIAL HOME FOR**

You may include in health care expenses the cost of keeping a mentally retarded person in a special home, not the home of a relative, on the recommendation of a psychiatrist to help the person adjust from living in a mental hospital to community living.

### **NORPLANT INSERTION and REMOVAL**

#### **NURSING HOME**

You may include in health care expenses the cost of health care, including meals and lodging, for yourself, your spouse, or your dependents in a nursing home or home for the aged, if the main reason for being there is to get health care.

**Do not include** the cost of meals and lodging if the reason for being in the home is personal or family. You may include in health care expenses only the part of the cost that is for health care or nursing care.

#### **NURSING SERVICES**

You may include in health care expenses wages and other amounts you pay for nursing services. Services need not be performed by a nurse as long as the services are of a kind generally performed by a nurse. This includes services connected with caring for the patient's condition, such as giving medication or changing dressings, as well as bathing and grooming the patient. These services can be provided in your home or another care facility.

Generally, only the amount spent for nursing services is a health care expense. If the attendant also provides personal and household services, these amounts must be divided between the time spent performing household and personal services and the time spent for nursing services. Additionally, certain expenses for household services or for the care of a qualifying individual incurred

## Examples of qualifying health care expenses, continued

### NURSING SERVICES (continued)

to allow you to work may qualify for the child and dependent care credit. See IRS Publication 503, *Child and Dependent Care Expenses*.

You may also include in health care expenses part of the amount you pay for that attendant's meals. Divide the food expense among the household members to find the cost of the attendant's food. Then apportion that cost in the same manner, as in the preceding paragraph. If you had to pay additional amounts for household upkeep because of the attendant, you can include the extra amounts. This includes extra rent or utilities you pay because you moved to a larger apartment to provide space for the attendant.

**Employment Taxes.** You may include social security tax, FUTA, Medicare tax and state employment taxes you pay for a nurse, attendant, or other person who provides health care as a health care expense. For further information on employment tax responsibilities of household employers, see IRS publication 926, *Household Employer's Tax Guide*.

**Healthy Baby.** You cannot include the cost of nursing services for a normal healthy baby. But you may be able to take a credit for child care expenses. See IRS Publication 503 for more information. You also may be able to take the child tax credit.

### OCCUSAL GUARDS to prevent teeth grinding

### OPERATIONS or SURGERY

You may include in health care expenses amounts you pay for legal operations that are not for unnecessary cosmetic surgery.

### OXYGEN

You may include in health care expenses amounts you pay for oxygen or oxygen equipment to relieve breathing problems caused by a medical condition.

### PSYCHOANALYSIS

You may include in health care expenses payments for psychoanalysis. You may not include payments for psychoanalysis that you must get as part of your training to be a psychoanalyst.

### PSYCHOLOGIST

You may include in health care expenses amounts you pay to a psychologist for health care.

Counseling for marital or relationship issues is **NOT** reimbursable.

### SCHOOLS, SPECIAL

You may include in health care expenses payments to a special school for a mentally impaired or physically disabled person if the main reason for using the school is its resources for relieving the disability. You may include, for example, the cost of a school that:

- teaches Braille to a visually-impaired child.
- teaches lip reading to a hearing-impaired child.
- gives remedial language training to correct a condition caused by a birth defect.

The cost of meals, lodging, and ordinary education supplied by a special school may be included only if the main reason for the child's being there is the resources the school has for relieving the mental or physical disability.

**You may not include** the cost of sending a problem child to a special school for benefits the child may get from the course of study and the disciplinary methods.

### SMOKING CESSATION PROGRAMS

You may include in health care expenses the cost of a program to stop smoking.

### STERILIZATION

You may include in health care expenses the cost of a legal sterilization (a legally performed operation to make a person unable to have children).

### TELEPHONE

You may include in health care expenses the cost and repair of special telephone equipment that lets a hearing impaired person communicate over a regular telephone.

### TELEVISION

You may include the cost of equipment that displays the audio part of television programs as subtitles for hearing impaired persons. This may be the cost of an adapter that attaches to a regular set. It also may be the excess cost of a specially equipped television over the cost of the same model regular television set.

### THERAPY or COUNSELING

You may include in health care expenses amounts you pay for therapy or counseling you receive as medical treatment. It must be necessary to treat a specific medical condition. **If you do not submit an EOB as**

**substantiation, then a note from an attending physician stating that a medical condition exists and the length of the treatment plan must be submitted.**

Counseling for marital or relationship issues is **NOT** reimbursable.

**"Patterning" exercises.** Payments you make to someone for giving "patterning" exercises to a mentally retarded child are deductible. These exercises consist mainly of coordinated physical manipulation of the child's arms and legs to imitate crawling and other normal movements.

### TRANSPLANTS

You may include in health care expenses payments you make for surgical, hospital laboratory, and transportation expenses for a donor or a possible donor of a kidney or other organ.

### TRANSPORTATION

Amounts paid for transportation primarily for and essential to health care qualify as health care expenses.

#### You May Include

- bus, taxi, train, or plane fare, or ambulance service.
- actual car expense, such as gas and oil. Do not include expenses for general repair, maintenance, depreciation, and insurance.
- parking fees and tolls.
- parent's transportation expenses if a parent must go with a child who needs health care.
- transportation expenses of a nurse or other person who can give injections, medications, or other treatment required by a patient who is traveling to get health care and is unable to travel alone.
- transportation expenses for regular visits to see a mentally ill dependent, if these visits are recommended as a part of treatment.

**Note:** For ALL of the items listed above, a legible copy of the substantiation from the health care provider **MUST** be attached to the claim form.

#### Do Not Include

- transportation expenses to and from work, even if your condition requires an unusual means of transportation.
- transportation expenses if, for non medical reasons only, you choose to travel to another city, (such as a resort area), for an operation or other health care prescribed by your doctor.

**Tax Tip.** Instead of deducting actual car expenses, you may take 19 cents per mile for each mile you use your car for health care reasons. Add the cost of tolls and parking to this amount.

### VASECTOMY

You can include in health care expenses the amount you pay for a vasectomy.

### WEIGHT LOSS PROGRAM

The program must be prescribed by a physician. The physician must substantiate that a medical condition exists. You cannot include the cost of a weight loss program for your general health, even if your doctor prescribes the program.

### WHEELCHAIR

You may include in health care expenses amounts you pay for an autoette or a manual or motorized wheelchair used mainly for the rehab of sickness or disability, and not just to provide transportation to and from work. The cost of operating and keeping up the autoette or wheelchair is also a health care expense.

### X-RAY FEES

You may include in health care expenses amounts you pay for x-rays you get for health care reasons.

## Non-qualifying health care expenses

The following expenses are **NOT** qualifying health care expenses and may **NOT** be reimbursed through the Health Care FSA:

#### HEALTH CLUB DUES

#### INSURANCE PREMIUMS

#### EXPENSES INCURRED AS A SURROGATE MOTHER

#### PERSONAL TRAINER

#### VACATIONS and TRIPS

#### TEETH WHITENING or BLEACHING

#### VACUUM CLEANERS, PILLOWS, or FILTERS, in the case of allergies

#### DANCING or SWIMMING LESSONS

#### MEDICINES or DRUGS PURCHASED OUTSIDE of the UNITED STATES

#### MATERNITY CLOTHES

#### DIAPER SERVICES

#### FUNERAL EXPENSES

#### ILLEGAL OPERATIONS and TREATMENTS

#### PERSONAL USE ITEMS

#### HOUSEHOLD HELP

#### TREATMENT FOR VARICOSE VEINS

#### CHEMICAL PEELS

#### COUNSELING FOR MARITAL or RELATIONSHIP ISSUES

#### MINOXIDIL or ROGAINE

#### EXERCISE PROGRAMS and HEALTH SPA MEMBERSHIPS

#### CONTACT LENS INSURANCE CONTRACTS

#### PURCHASE OF A TANNING BED for a skin condition

#### SAFETY EYEGLASSES

#### ITEMS and SERVICES THAT ARE MERELY BENEFICIAL TO GENERAL HEALTH

#### BREAST IMPLANT REPAIR

#### TATTOO REMOVAL