



Know Your Health Care FSA Eligible and Ineligible Expenses

Maximize the Value of Your Reimbursement Account - Your Health Care Flexible Spending Account (FSA) dollars can be used for a variety of out-of-pocket health care expenses that qualify as federal income tax deductions under Section 213(d) of the Internal Revenue Code ("IRC"). [More info.](#)

- Health Care FSA dollars can be used to reimburse you for medical and dental expenses incurred by you, your spouse or eligible dependents (children, siblings, parents and other dependents which are defined in your Plan Documents).

IMPORTANT: The IRS defines which medical expenses are eligible under a tax-deferred account. Not all expenses are eligible under all plans. An employer may limit which expenses are allowable under their Health Care FSA plan. If you are unsure of what your Health Care FSA dollars may be used for, please contact your Plan Administrator.

Here is a sample list of expenses currently eligible and not eligible by the Internal Revenue Service ("IRS") as deductible medical expenses. This list is not necessarily inclusive or exclusive, and may be subject to change based on regulations, IRS revenue rulings and case law. It is solely based on our current interpretation of IRC Section 213(d) and is not intended to be legal advice.

For a complete up-to-date list of FSA Eligible Products & Services please reference [IRS site](#).

Sample List of Eligible Expenses		
<p>BABY/CHILD TO AGE 13</p> <ul style="list-style-type: none"> ■ Lactation Consultant* ■ Lead-Based Paint Removal ■ Special Formula* ■ Tuition: Special School/Teacher for Disability or Learning Disability* ■ Well Baby /Well Child Care <p>DENTAL</p> <ul style="list-style-type: none"> ■ Dental X-Rays ■ Dentures and Bridges ■ Exams and Teeth Cleaning ■ Extractions and Fillings ■ Oral Surgery ■ Orthodontia ■ Periodontal Services <p>EYES</p> <ul style="list-style-type: none"> ■ Eye Exams ■ Eyeglasses and Contact Lenses ■ Laser Eye Surgeries ■ Prescription Sunglasses ■ Radial Keratotomy 	<p>MEDICAL EQUIPMENT/SUPPLIES</p> <ul style="list-style-type: none"> ■ Air Purification Equipment* ■ Arches and Orthotic Inserts ■ Contraceptive Devices ■ Crutches, Walkers, Wheel Chairs ■ Exercise Equipment* ■ Hospital Beds* ■ Mattresses* ■ Medic Alert Bracelet or Necklace ■ Nebulizers ■ Orthopedic Shoes* ■ Oxygen* ■ Post-Mastectomy Clothing ■ Prosthetics ■ Syringes ■ Wigs* 	<p>MEDICATIONS</p> <ul style="list-style-type: none"> ■ Insulin ■ Prescription Drugs <p>OBSTETRICS</p> <ul style="list-style-type: none"> ■ Breast Pumps and Lactation Supplies ■ Doulas* ■ Lamaze Class ■ OB/GYN Exams ■ OB/GYN Prepaid Maternity Fees (reimbursable after date of birth) ■ Pre- and Postnatal Treatments <p>PRACTITIONERS</p> <ul style="list-style-type: none"> ■ Allergist ■ Chiropractor ■ Christian Science Practitioner ■ Dermatologist ■ Homeopath ■ Naturopath* ■ Optometrist ■ Osteopath ■ Physician ■ Psychiatrist or Psychologist

Sample List of Eligible Expenses

HEARING

- Hearing Aids and Batteries
- Hearing Exams

LAB EXAMS/TESTS

- Blood Tests and Metabolism Tests
- Body Scans
- Cardiograms
- Laboratory Fees
- X-Rays

MEDICAL PROCEDURES/SERVICES

- Acupuncture
- Alcohol and Drug/Substance Abuse (inpatient treatment and outpatient care)
- Ambulance
- Fertility Enhancement and Treatment
- Hair Loss Treatment*
- Hospital Services
- Immunization
- In Vitro Fertilization
- Physical Examination (not employment-related)
- Reconstructive Surgery (due to a congenital defect, accident, or medical treatment)
- Service Animals
- Sterilization/Sterilization Reversal
- Transplants (including organ donor)
- Transportation*

THERAPY

- Alcohol and Drug Addiction
- Counseling (not marital or career)
- Exercise Programs*
- Hypnosis
- Massage*
- Occupational
- Physical
- Smoking Cessation Programs*
- Speech
- Weight Loss Programs*

Note: This list is not meant to be all-inclusive, as other expenses not specifically mentioned may also qualify. Also, expenses marked with an asterisk (*) are "potentially eligible expenses" that require a Note of Medical Necessity from your health care provider to qualify for reimbursement. For additional information, check your Summary Plan Document or contact your Plan Administrator.

Please Note: Currently, the IRS does NOT allow the following expenses to be reimbursed under Health Care FSAs as they are not prescribed by a physician for a specific ailment.

Sample List of Ineligible Expenses

- Contact Lens or Eyeglass Insurance
- Cosmetic Surgery/Procedures
- Electrolysis
- Marriage or Career Counseling
- Swimming Lessons
- Personal Trainers
- Sunscreen (spf less than 30)

Note: This list is not meant to be all-inclusive.

Please Note: Currently, the IRS allows Over-the-Counter (OTC) medicines or drugs to be purchased with Health Care FSA funds.

Sample List of Eligible Over-the-Counter Medicines and Drugs

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| ■ Acid controllers | ■ Cough, cold & flu | ■ Laxatives (non-fiber) |
| ■ Acne medications | ■ Denture pain relief | ■ Medicated nasal sprays, drops, & inhalers |
| ■ Allergy & sinus | ■ Digestive aids | ■ Medicated respiratory treatments & vapor products |
| ■ Antibiotic products | ■ Ear care | ■ Menstrual products |
| ■ Antifungal (Foot) | ■ Eye care | ■ Motion sickness |
| ■ Antiphlastic treatments | ■ Feminine antifungal & anti-itch | ■ Oral remedies or treatments |
| ■ Antiseptics & wound cleansers | ■ Fiber laxatives (bulk forming) | ■ Pain relief (includes aspirin) |
| ■ Anti-diarrhea's | ■ First aid burn remedies | ■ Skin treatments |
| ■ Anti-gas | ■ Foot care treatment | ■ Sleep aids & sedatives |
| ■ Anti-itch & insect bite | ■ Hemorrhoidal preps | ■ Smoking deterrents |
| ■ Baby rash ointments & creams | ■ Homeopathic remedies | ■ Stomach remedies |
| ■ Baby teething pain | ■ Incontinence protection & treatment products | ■ Unmedicated vapor products |
| ■ Cold sore remedies | | |
| ■ Contraceptives | | |

Other OTC items that are not medicines or drugs are also eligible for purchase with FSAs. You can use your benefits card for these items.

Sample List of Eligible Over-the-Counter Items (Product categories are listed in bold face; common examples are listed in regular face.)

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| ■ Baby Electrolytes and Dehydration
Pedialyte, Enfalyte | ■ Elastics/Athletic Treatments
ACE, Futuro, elastic bandages, braces, hot/cold therapy, orthopedic supports, rib belts | ■ Home Health Care (limited segments)
Ostomy, walking aids, decubitis/pressure relief, enteral/parenteral feeding supplies, patient lifting aids, orthopedic braces/supports, splints & casts, hydrocollators, nebulizers, electrotherapy products, catheters, unmedicated wound care, wheel chairs |
| ■ Contraceptives
Unmedicated condoms | ■ Eye Care
Contact lens care | ■ Incontinence Products
Attends, Depend, GoodNites for juvenile incontinence, Prevail |
| ■ Denture Adhesives, Repair, and Cleansers
PoliGrip, Benzodent, Plate Weld, Efferdent | ■ Family Planning
Pregnancy and ovulation kits | ■ Nasal Care
Saline Nasal Spray |
| ■ Diabetes Testing and Aids
Ascencia, One Touch, Diabetic Tussin, insulin syringes; glucose products | ■ First Aid Dressings and Supplies
Band Aid, 3M Nexcare, non-sport tapes | ■ Prenatal Vitamins
Stuart Prenatal, Nature's Bounty Prenatal Vitamins |
| ■ Diagnostic Products
Thermometers, blood pressure monitors, cholesterol testing | ■ Foot Care Treatment
Unmedicated corn and callus treatments (e.g., callus cushions), devices, therapeutic insoles | ■ Reading Glasses and Maintenance Accessories |
| ■ Ear Care
Unmedicated ear drops, syringes, ear wax removal | ■ Glucosamine &/or Chondroitin
Osteo-Bi-Flex, Cosamin D, Flex-a-min Nutritional Supplements | |
| | ■ Hearing Aid/Medical Batteries | |