EMPLOYEE GROUP SOLUTIONS

FSA HSA

Health Care FSA/HSA Eligible and Ineligible Expenses

Your Health Care Flexible Spending Account (FSA) and/or Health Savings Account (HSA) dollars can be used for out-of-pocket health care expenses that qualify as federal income tax deductions under Section 213(d) of the Internal Revenue Code ("IRC"). 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: An employer may limit which expenses are allowable under their Health Care FSA Plan. For questions please contact your Plan Administrator. The following is a list may be subject to change based on regulations, IRS revenue rulings and case law. It is solely based on a current interpretation of IRC Section 213(d) and is not intended to be legal advice. This list is not meant to be all-inclusive, as other expenses not specifically mentioned may also qualify.

NOTE: Expenses marked with an asterisk (*) are "potentially eligible expenses" that **require a Letter of Medical Necessity** from your health care provider to qualify for reimbursement.

Eligible Expenses

BABY/CHILD TO AGE 13

- Lactation Consultant
- Lead-Based Paint Removal*
- Special Formula*
- Tuition: Special School/Teacher for Disability or Learning Disability*
- Well Baby/ Well Child Care

DENTAL

- Exams/Cleanings
- Major Restorative services
- Basic Restorative services
- Orthodontia

VISION

- Eye Exams
- Lenses/Contact Lenses
- Frames/Prescription Sunglasses
- Laser Eye Surgeries
- Cataract surgery

HEARING

- Hearing Aids/Batteries
- Hearing Exams

LAB EXAMS/TESTS

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

MEDICAL EQUIPMENT/SUPPLIES

- Air Purification Equipment
- Arches/Orthotic Inserts

MEDICAL EQUIPMENT/SUPPLIES

- Contraceptive Devices
- Crutches/Walkers/Wheelchairs
- Exercise Equipment*
- Hospital Beds
- Mattresses*
- Massagers/Massage Table*
- Medic Alert Bracelet/Necklace
- Nebulizers
- Orthopedic Shoes*
- Oxygen
- Post-Mastectomy Clothing
- Prosthetics
- Syringes
- Wigs

MEDICAL PROCEDURES/SERVICES

- Acupuncture
- Ambulance services
- Fertility Enhancement/Treatment
- Hair Loss Treatment*
- Hospital Services
- Immunizations
- Physical Examination (not employment related)
- Reconstructive Surgery (due to a congenital defect, accident, or medical treatment)
- Guide Dog (for visually impaired)
- Service Animals

MEDICAL PROCEDURES/SERVICES

- Transplants (including organ donor)
- Transportation*

MEDICATIONS

- Prescription Drugs

OBSETRICS

- Breast Pumps/supplies
- Doulas
- Lamaze Class
- OB/GYN Exams, Obstetrical Care
- Pre/Postnatal Treatments

PRACTICIONERS

- Allergist
- Chiropractor
- Christian Science Practitioner
- Dermatologist
- Homeopath
- Naturopath*
- Optometrist
- Osteopath
- Physician
- Psychiatrist

THERAPY

- Alcohol/Drug Addiction (inpatient/outpatient care)
- Counseling (not marital or career)
- Hypnosis*
- Massage*
- Occupational/Physical/Speech
- Smoking Cessation Programs

Eligible Over the Counter Expenses

- Baby Electrolytes
- Contraceptives
- Denture and Adhesive Repair Products/Cleansers
- Diabetes Testing Aids/Supplies
- Diagnostic Products (Thermometers, blood pressure monitors, cholesterol testing devices)
- Ear Care (unmedicated ear drops, syringes, ear wax removal tools)
- Acid Controllers
- Acne Medications
- Allergy/Sinus
- Antiboiotic Products
- Antifungal (Foot)
- Antiparasitic / Wound Cleansers
- Antidiarrheals & Anti-Gas
- Anti-Itch/Insect Bite Ointments
- Baby Rash Creams/Ointments
- Baby Teething Gels
- Cold Sore Creams/Ointments
- Athletic Treatments/Braces (elastic bandages, braces, hot/cold therapy, orthopedic supports, rib belts)
- Eye Care (contact lens solution, eye drops)
- Pregnancy/Ovulation Test Kits
- First Aid Dressings/Supplies
- Foot Care (unmedicated corn/callus treatments, devices, therapeutic insoles)
- Glucosamine
- Hearing Aid/Medical Batteries
- Cough/Cold & Flu Tablets/Syrup
- Denture Pain Relief
- Digestive Aids
- Feminine Antifungal/Anti-Itch Ointments
- Feminine Products
- Fiber Laxatives (bulk Forming)
- Non-Fiber Laxatives
- Burn Creams/Ointments
- Foot care treatment
- Hemorrhoidal Preps
- Homeopathic Remedies
- Pain Relief
- Non-Prescribed Respiratory Treatments/Vapor Products
- Motion Sickness Aid
- Sleep Aids/Sedatives
- Smoking Deterrents
- Stomach Tablets/Syrup
- Home Health Care (limited segments Ostomy, walking aids, decubitus/pressure relief, enteral/parenteral feeding supplies, patient lifting aids, orthopedic braces/supports, splints/casts, hydrocollators, nebulizers, electrotherapy products, catheters, unmedicated wound care, wheelchairs)
- Incontinence Products
- Nasal Care Saline Nasal Spray
- Prenatal Vitamins
- Reading Glasses/Maintenance Accessories

Ineligible Expenses

- Contact Lens or Eyeglass Insurance
- Electrolysis
- Marriage/Career Counseling
- Caffeine Pills

Note this list is not meant to be all inclusive

Common Expenses with Letter of Medical Necessity Required

- Cosmetic Surgery/ Procedures
- Swimming Lessons
- Personal Trainers/Fitness Programs/Fees
- Weight Loss Programs and/or drugs prescribed to induce weight loss
- Fitness Activity tracer (ex: Fitbit, smartwatches)/Subscription
- Telephone Equipment (for people with hearing/speech disabilities)
- Hearing Aids – Apple AirPods 2
- Acne Treatment/Services

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For additional information, please contact your Plan Administrator and/or tax advisor.

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