

List of Eligible & Ineligible Healthcare Expenses

The following list represents expenses that are frequently submitted for reimbursement under Health Flexible Spending Accounts (FSA). This list is not intended to be exhaustive and is intended only to be used as a general guide. Consequently, expenses contained in this general list may be denied if the supporting claims documentation is insufficient or shows that the expense was incurred for services not considered medical care, such as cosmetic procedures. If an item falls under the "potentially eligible" category it will require a [Letter of Medical Necessity \(LOMN\)](#) from your health care provider to be considered eligible for reimbursement. Payment of claims will be based on the rules set out in the applicable regulations, your employer's plan design and on the information on the claim form and in the required substantiation documentation submitted for reimbursement; which must include the following:

- ✓ Date services were incurred (Not necessarily the date of payment)
- ✓ The type of service performed (Or name of Over-The-Counter product)
- ✓ The name of the provider (Or the name of store that Over-The-Counter products were purchased)

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Abortion	✓			Expenses for operations that are illegal do not qualify.
Acne Treatment	✓			Over-the-counter acne treatment products are eligible for reimbursement as long as the product's primary purpose is for the treatment of acne. Cosmetics or other items that merely contain acne-fighting ingredients are not eligible. Note: Generic and store brand equivalents are also eligible. If you are unsure whether an expense is reimbursable, look for the FSA indicator on your merchant receipt.
Acupuncture	✓			
Adaptive Equipment		✓		If used for major disability such as spinal cord injury, this can be reimbursed. Adaptive equipment to assist you with activities of daily living can also be reimbursed. A Letter of Medical Necessity will be needed from your doctor to show that this purchase is primarily for medical care.
Adoption Fees			✗	
Adoption, Pre Adoption Medical Expenses	✓			Medical expenses incurred before an adoption is finalized will qualify, if the child qualifies as your tax dependent when services are provided.
Airborne			✗	This will only be reimbursed if purchased with a Benefits Card at Walgreens.
Air Conditioners/ Air Purifiers		✓		A Letter of Medical Necessity will be needed from your doctor to show that this purchase is primarily for medical care. It must be used primarily for the individual with the medical condition. If the unit is attached to the home (such as central air), only the amount spent that is more than the value added to the property will qualify.
Alcoholism/Drugs/ Substance Abuse Treatment	✓			This includes inpatient treatment along with meals, and lodging. Also, outpatient care and transportation expenses associated with attending meetings, including AA groups if under doctor's advice.
Allergy Medicines	✓			

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Allergy Products		✓		Expenses generally will not qualify if the product would be owned even without allergies, such as a pillow or a vacuum cleaner. Eligible expenses include products and home improvements to treat severe allergies. To show this is primarily for medical care, a Letter of Medical Necessity is required. Only the difference in price between a regular product and one that meet specific medical needs, will be reimbursed.
Alternative Medicine		✓		Services must be prescribed by a licensed health care provider to treat a specific illness or disorder. A Letter of Medical Necessity is required.
Ambulance	✓			
Analgesics/ Antipyretics	✓			Examples include, but are not limited to; Advil, Aleve, Aspirin, Ibuprofen, Midol, Naprosyn, Pamprin and Tylenol.
Antacids/ Acid Reducers	✓			Examples include, but are not limited to; AXID AR, Gas-X, Maalox, Mylanta, Pepcid AC, Prilosec OTC, Tums, and Zantac.
Anti-Arthritics	✓			Examples include, but are not limited to; Glucosamine, and Chondroitin.
Antibiotics, topical	✓			Examples include, but are not limited to; Bacitracin, Neosporin, and Triple Antibiotic Ointment.
Antibiotics, yeast infection	✓			Examples include, but are not limited to; Femstat 3, Gyne-Lotrimin, Monistat, Mycelex 7, and Vagistat-1.
Anti-Diarrheal	✓			Examples include, but are not limited to; Imodium AD, Kaopectate, and Pepto-Bismol.
Antifungal	✓			Examples include, but are not limited to; Lamisil AT, Lotramin AF, and Micatin.
Antihistamines	✓			
Anti-itch products	✓			Examples include, but are not limited to; Bactine, Benadryl, Caldecort, Caladryl, Calamine, Cortaid, Hydrocortisone, and Lanacort.
Arthritis Gloves	✓			
Artificial Limbs	✓			
Artificial Teeth	✓			
Aspirin	✓			
Artificial Reproductive Technologies	✓			Eligible medical expenses include, but are not limited to; Artificial insemination, Egg donor charges for recipient, Embryo replacement storage, Embryo transfer, Fertility exams, Gamete Intrafallopian Transfer, In vitro/In vivo fertilization, Sperm bank storage, Sperm implants, Sperm washing, and Reverse vasectomy.
Asthma Medicines	✓			Examples include, but are not limited to; Bronitin Mist, Bronkaid, Bronkolixer, and Primatene.
Automobile Modifications		✓		See Adaptive Equipment

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Baby Formula		✓		If your baby requires a special formula to treat an illness or disorder, the difference in cost between the special formula and routine baby formula can be reimbursed. A Letter of Medical Necessity is required
Babysitting and Child Care			✗	Babysitting, child care, and nursing services for a normal, healthy baby do not qualify as medical care.
Bactine	✓			
Band-Aids/ Bandages	✓			
Bed boards		✓		A Letter of Medical Necessity is required. Only the difference in price between a regular bed board, and one that meets specific medical needs will be reimbursed.
Beds, box spring/ foundations			✗	
Beds, mattresses		✓		Only unique mattresses specifically prescribed by a physician to treat a medical condition will be considered and require a Letter of Medical Necessity . Any types of support for the mattress, like box springs or special foundations, are not eligible. Only the difference in price between a regular mattress and one that meets specific medical needs, will be reimbursed.
Bedside Commodes	✓			
Birth Control	✓			Examples include, but are not limited to; Demulen, Depo-Provera, Loestrin, Lo-Ovral, Mircette, Ortho Novum, Ortho Tri Cyclen, Ovcon, Ovral, Tri-Norinyl, Triphasil, and Yasmin. Also included: Condoms, Intrauterine Device (IUD), Norplant, Ovulation kits, and Spermicides.
Blood Pressure Monitors	✓			
Blood Storage		✓		Eligible if you are storing blood for use during scheduled elective surgery. Storage fees should not exceed 6 months. A Letter of Medical Necessity is required.
Blood Sugar Test Kits and Test Strips	✓			
Body Scans	✓			
Boutique Practice Fees			✗	Monthly or annual fees that your provider may charge for improved access, 24/7 availability and more "personalized" care are not considered medical care and cannot be reimbursed under a Health Care FSA.
Braille Books and Magazines	✓			The incremental cost of Braille books and magazines that exceeds the price for regular books and magazines is eligible.
Breast Pumps		✓		Routine use of a breast pump is not an eligible expense. However, if the nursing mother or the baby have a medical condition that can be relieved through use of a breast pump, the expense of the breast pump can be reimbursed. A Letter of Medical Necessity is required.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Breast Reconstruction surgery following Mastectomy				Will qualify to the extent that surgery was done following a mastectomy for cancer. This is an exception to the general rules regarding cosmetic procedures.
Bus Fare				See Transportation
Calamine Lotion				
Calcium Supplements				Examples include, but are not limited to; Calcium Carbonate, Calcium Citrate, Calcium Gluconate, Calcium Lactate, Caltrate, Citrical, Tricalcium Phosphate. Note: a Letter of Medical Necessity is required.
Capital Expense				A capital expense can be reimbursed if its purpose is to provide medical care for you, your spouse or dependent. Examples include, but are not limited to: Constructing entrance or exit ramps, Widening or otherwise modifying doorways, hallways and stairways, Installing railings, or support bars, Kitchen modifications including lowering cabinets, Electrical and plumbing modifications, Exterior grading of the property to provide access to your home, and Removal of carpeting, wall and/or window coverings (this does not include cost of replacement). IRS regulations require that the cost comparison between a standard item and an item prescribed by a health care provider be submitted from an independent third party. A Letter of Medical Necessity is required.
Carpal Tunnel Wrist Supports				
Cayenne Pepper				May qualify if used to treat a specific medical condition. To show that the expense is primarily for medical care, a Letter of Medical Necessity will be required.
Chairs, ergonomic				Only the difference in price between regular chairs and the chair that meets specific medical needs, will be approved. A Letter of Medical Necessity is required.
Chairs, reclining				Reclining chairs that both elevate the legs and tilt the torso may be considered for reimbursement. Also convalescent and lift chairs will be reimbursed. Only the difference in price between a regular chair and a chair that meet specific medical needs will be reimbursed. A Letter of Medical Necessity is required. No other types of chairs are eligible.
Chelation Therapy				Will qualify if used to treat a medical condition such as lead poisoning.
Childbirth Class				Does not include: Breastfeeding Classes, Newborn or New Infant Care Classes, or Parenting Classes.
Chinese Herbal Practitioner & Herbal Treatments				See Alternative Medicine
Chiropractic				

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Chondroitin		✓		Will qualify if used primarily for medical care (for example to treat arthritis). Won't qualify if used to maintain general health. A Letter of Medical Necessity is required.
Christian Science Practitioners	✓			Payments for medical care can be reimbursed.
Cialis	✓			
Circumcision	✓			A bris performed in the home by a Rabbi is not an eligible expense.
Claritin (loratadine)	✓			
COBRA Premiums			✗	
Co-Insurance	✓			Cannot be reimbursed by secondary insurance or any other source.
Cold/Hot Packs	✓			Only cold/hot packs sold as medical supplies will qualify; those sold for other purposes (e.g., to keep beverages cold or hot) won't qualify.
Cold Medicines	✓			Examples include, but are not limited to; Actifed, Advil Cold & Sinus, Alka Seltzer Cold & Flu, Children's Advil Cold, Dayquil, Nyquil, Pediacare, Sudafed, Cough Drops, Nasal Sprays, Throat Lozenges.
Cold Sore Medicines	✓			Examples include, but are not limited to; Abreva and Herpecin.
Cologne			✗	
Companion Animals	✓			See Service Animals
Contact Lenses	✓			Contact lenses, cleaning and soaking solutions and lens storage cases are all eligible.
Controlled Substances			✗	
Co-payments	✓			Cannot be reimbursed by secondary insurance or any other source.
Cord Blood Storage		✓		Can be reimbursed if there is a specific medical condition that the cord blood is intended to treat. Indefinite storage "just in case" is not eligible. A Letter of Medical Necessity is required.
Corneal Ring Segments	✓			
Cosmetics			✗	Cosmetics are used primarily for personal purposes, and are intended to be rubbed on, poured on, sprinkled on, sprayed on, introduced into, or otherwise applied to the human body for cleansing, beautifying, promoting attractiveness, or altering the appearance. Examples include but are not limited to; skin moisturizers, perfumes, lipsticks, fingernail polishes, eye and facial makeup, shampoos, hair colors, toothpastes, and deodorants.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Cosmetic Procedures			✗	A cosmetic procedure or service necessary to improve a deformity arising from a congenital abnormality, personal injury from accident or trauma, or to restore appearance related to treatment for another medical diagnosis or condition can be reimbursed.
Cough Medicine	✓			Examples include, but are not limited to; Chloraseptic, Cough drops, Mucinex, Robitussin, Throat lozenges, and Vicks 44.
Counseling	✓			If counseling is provided to treat a medical condition or mental diagnosis and is rendered by a licensed provider. Expenses will be reimbursed so long as medical documentation is provided. Without medical documentation, a Letter of Medical Necessity will be required. Eligible expenses include; psychotherapy, bereavement and grief counseling, sex counseling, etc. Note: Life coaching, career counseling and marriage counseling will not qualify.
Crowns	✓			
Crutches	✓			
Dancing Lessons		✓		Only for a short duration and if prescribed for a specific medical condition, such as part of a rehabilitation program after surgery. A Letter of Medical Necessity if required.
Decongestants	✓			Examples include but are not limited to; Dimetapp, and Sudafed.
Deductibles	✓			Cannot be reimbursed by secondary insurance or any other source.
Dental Maintenance Organization (DMO)			✗	See Insurance Premiums
Dental Care	✓			Covered services include, but are not limited to; Bridges, Cleanings, Crowns, Dental Implants, Dentures, Endodontic care, Extractions, Fillings, Orthodontia (Ortho contract is required), Periodontal services, Routine prophylaxis, Sealants and X-rays.
Dental Care (Cosmetic)			✗	Expenses for cosmetic dentistry, such as teeth whitening or bleaching, porcelain veneers, or bonding are not eligible for reimbursement.
Dental Floss			✗	
Deodorant			✗	
Dependent Care Expenses			✗	Such expenses won't qualify, even if you are paying for dependent care so that you may receive medical care.
Diabetic Supplies	✓			
Diagnostic Items/Services	✓			Includes a wide variety of procedures to determine the presence of a disease or dysfunction of the body; such as tests to detect heart attack, stroke, diabetes, osteoporosis, thyroid conditions, and cancer.
Diaper Rash Creams	✓			Examples include, but are not limited to; Balmex, and Desitin.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Diapers, diaper service		✓		If used merely for the routine care of healthy newborns, this is not an eligible expense. However, if used to relieve or ameliorate the effect of a particular illness or disease on you, your disabled child or dependent, who would not need this product "but for" the medical condition then this may be eligible. A Letter of Medical Necessity is required.
Diarrhea Medicine	✓			
Diet Food			✗	Costs of special foods to treat a specific disease (such as obesity) do not qualify to the extent that they satisfy ordinary nutritional requirements. Thus the costs of food associated with weight loss programs would not qualify.
Dietary Supplements		✓		Examples include, but are not limited to; Ensure, Glucerna, Power drinks, and Protein Bars. A Letter of Medical Necessity is required.
Disabled Dependent Care Expenses		✓		Expenses will only qualify if they are for medical care of the disabled dependent. Note: Some disabled dependent care expenses that qualify as medical expenses may also qualify as work-related expenses for purposes of the Dependent Care Tax Credit under Code Section 21 or for reimbursement under a Dependent Care Assistance Program under Code Section 129. You must not use the same expenses for more than one purpose. A Letter of Medical Necessity is required.
DNA Collection and Storage		✓		Generally will not qualify. However temporary storage may qualify, if DNA is collected as part of the diagnosis, treatment, or prevention of an existing or imminent medical condition.
Doctor Fees	✓			In addition to all expenses for care not reimbursed by any other source, eligible expenses include, but are not limited to; Out-of-network providers, Charges by your physician for letters of medical necessity to schools, etc.
Doulas		✓		If the doula is a licensed health care professional who renders medical care, his or her fees are reimbursable.
Drug Addiction, treatment of	✓			Eligible expenses include, but are not limited to; Inpatient treatment, including meals and lodging by a licensed addiction center, Outpatient care, and Transportation expenses associated with attending outpatient meetings, including AA groups, if attending on a doctor's referral.
Drug Overdose Treatment	✓			
Drugs and Medicines		✓		Will qualify if primarily for medical care, legally procured, and generally accepted as medicines and drugs.
Dyslexia		✓		A Letter of Medical Necessity is required for any dyslexia treatment or programs.
Ear Care	✓			Examples include, but are not limited to; Ear drops and Ear wax removal.
Ear Piercing			✗	See Cosmetic Procedures
Ear Plugs		✓		Must be prescribed to treat a specific medical condition, such as the presence of middle/inner ear tubes. A Letter of Medical Necessity is required.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Ear Wax Removal Products	✓			
Education		✓		Payments made to a special school for a mentally impaired or physically disabled person qualify as reimbursable if the main reason for using the school is its resources for relieving the disability. This includes teaching Braille to a visually impaired person, teaching lip reading to a hearing impaired person, and giving remedial language training to correct a condition caused by a birth defect. A Letter of Medical Necessity is required.
Egg Donor Fees		✓		Amounts paid for the egg donor fee, an agency fee, an egg donor's medical and psychological testing, and legal fees for preparation of the egg donor contract will qualify.
Eggs and Embryo Storage Fees		✓		Fees for temporary storage qualify, but only to the extent necessary for immediate conception. A Letter of Medical Necessity is required.
Electrolysis			✗	
Electrolyte Replacements	✓			Examples include, but are not limited to; Pedialyte.
Elevator		✓		Installing an elevator upon the advice of a physician so that a person with heart disease won't have to climb stairs, may be medical care to the extent of the amount in excess of value enhancement to the property. A Letter of Medical Necessity is required.
Eye Care	✓			Examples include, but are not limited to; Eye drops, Eye patches, and Reading glasses.
Eye Drops	✓			
Eyeglasses / Eye Exams	✓			Includes prescription sunglasses and reading glasses (even those purchased over-the-counter)
Exercise Equipment		✓		A Letter of Medical Necessity is required.
Exercise Programs		✓		See also Fitness Programs; Weight Loss Programs
Expectorants	✓			Examples include but are not limited to; Comtrex and Robitussin.
Face Creams			✗	
Face Lifts			✗	
Feminine Hygiene Products		✓		Products used post-surgery or after childbirth may be reimbursed. A Letter of Medical Necessity is required.
Fertility Enhancement	✓			Includes ovulation predictor kits and pregnancy tests.
Fever Reducing Medications	✓			
Fiber Supplements	✓			Examples include, but are not limited to; Benefiber, and Metamucil.












Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Finance Charges			✗	
First Aid Kit / Supplies	✓			Examples include, but are not limited to; Antiseptics, Bandages, Cold/Hot packs, Joint supports, Liquid bandages, Peroxide, Rubbing alcohol, and Splints.
Fitness Programs		✓		Fees paid for a fitness program may be eligible if prescribed by a physician stating that treatment is necessary to alleviate a medical condition such as obesity. The expense must not have been incurred "but for" the disease. Membership expenses will not qualify if they are merely beneficial for general health or if they would have been incurred even in the absence of a particular medical condition. For example, if you belonged to the health club before being diagnosed, then the fees would not qualify. A Letter of Medical Necessity is required.
Fluoride Rinse / Pills	✓			Examples include, but are not limited to; Act and Colgate Phos-flur.
Flu Shots	✓			
Food		✓		Food may be eligible if prescribed by a medical practitioner to treat a specific illness or ailment and if the food does not substitute for normal nutritional requirements. However, the amount that may qualify for reimbursement is limited to the amount by which the cost of food exceeds the cost of commonly available versions of the same product. A Letter of Medical Necessity is required.
Foot Care	✓			Examples include, but are not limited to; Arch and insole supports, Antifungal products, Bunion, blister or corn treatments, and Callous removers.
Founder's Fee			✗	This is an amount you pay under an agreement with a retirement home. Even if a portion is allocable to medical care, these expenses will not qualify.
Funeral Expenses			✗	
Gambling Problem Treatment		✓		A Letter of Medical Necessity is required.
Gauze Pads	✓			
Genetic Testing		✓		Testing done just to determine the sex of the fetus does not qualify. A Letter of Medical Necessity is required.
Glucosamine		✓		A Letter of Medical Necessity is required.
Glucose Monitoring Equipment	✓			Items such as blood glucose meters and glucose test strips are reimbursable.
Guide Dogs	✓			See Service Animals
Hair Colorants			✗	See Cosmetic Procedures
Hair Loss Treatment		✓		May be eligible when used to treat hair loss due to a specific medical condition. A Letter of Medical Necessity is required.
Hair Transplant			✗	See Cosmetic Procedures
Hand Lotion			✗	See Cosmetic Procedures

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Hand Sanitizer	✓			Examples include, but are not limited to; Germ-X, Nexcare, and Purell. This does not include soaps, lotions, or other personal hygiene items that include sanitizing ingredients; they are <i>not</i> eligible.
Headache Medications	✓			Examples include but are not limited to; Advil, Aspirin, and Tylenol.
Healing Ointments		✓		Examples include, but are not limited to; Aquaphor and Eucerin. A Letter of Medical Necessity is required.
Health Institute Fees		✓		Qualifies only if the treatment at the health institute is prescribed by a physician. A Letter of Medical Necessity is required.
Health Screenings	✓			See Preventive Care Screenings
Hearing Aids	✓			Also includes batteries
Hemorrhoidal Treatments	✓			Examples include, but are not limited to; Preparation H and Tronolane.
Herbs		✓		A Letter of Medical Necessity is required.
Holistic or Natural Healers, dietary substitutes, and drugs and medicines		✓		See Alternative Medicine
Home Diagnostic Kits / Tests	✓			Examples include, but are not limited to; Blood pressure monitors, Cholesterol tests, Colorectal screenings, Diabetic equipment and supplies, HIV tests, and Pregnancy Tests.
Home Medical Equipment	✓			This may require a Letter of Medical Necessity for reimbursement.
Homeopathic Care	✓			If rendered by a licensed health care professional who provides this care for the treatment of a specific illness or disorder.
Homeopathic Medicines		✓		If used for treatment of a specific illness or disorder, this may be reimbursed. A Letter of Medical Necessity is required.
Hormone Supplements, OTC		✓		Supplements used for relief of peri-menopausal or menopausal symptoms may be reimbursed. A Letter of Medical Necessity is required.
Hospital Services	✓			Expenses of inpatient care (plus meals and lodging) at a hospital or similar institution qualify if the primary reason is for medical care.
Household Help			✗	
Humidifiers		✓		See Allergy Relief; Capital Expenses . A Letter of Medical Necessity is required.
Hydrotherapy		✓		A Letter of Medical Necessity is required.
Hypnosis		✓		A Letter of Medical Necessity is required.
Illegal Operations and Treatments			✗	Will not qualify even if they are rendered or prescribed by a licensed medical practitioner.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Immunizations	✓			Includes those recommended for overseas travel.
Inclinor		✓		Would qualify if it otherwise qualifies as medical care, is detachable from the property, and is purchased for use only by the person with the medical condition. A Letter of Medical Necessity is required.
Incontinence Products		✓		May be reimbursed if used for a diagnosed medical condition. Examples include, but are not limited to; Attends and Poise. A Letter of Medical Necessity is required.
Insulin	✓			Equipment needed to inject the insulin, such as syringes or pumps also qualify as medical expenses.
Insurance Premiums			✗	Under IRS rules, insurance premiums cannot be reimbursed under a Health Care FSA.
In-Vitro Fertilization	✓			See Artificial Reproductive Technologies
Lab Fees	✓			
Lactation Consultant		✓		Services rendered by a licensed provider can be reimbursed. A Letter of Medical Necessity is required.
Lactose Intolerance Supplements	✓			Examples include, but are not limited to; DairyCare, Digestive Advantage, and Lactaid.
Lamaze Classes	✓			
Language Training		✓		Such expenses will qualify for a child with dyslexia or an otherwise disabled child. However, school fees for normal schooling do not qualify. A Letter of Medical Necessity is required.
Laser Eye Surgery	✓			See Vision Care
Late Payment Fees			✗	
Laxatives	✓			
Lead-based Paint Removal	✓			The expenses for removing lead-based paints from surfaces in your home to prevent a child who has, has had, or is in danger of lead poisoning from eating the paint can be reimbursed. These surfaces must be in poor repair and within a child's reach. The cost of repainting the affected areas are not an eligible expense. If you cover the area with wallboard or paneling instead of removing the lead paint, these items will be treated as a capital expense.
Learning Disabilities		✓		The portion of tuition/tutoring fees covering services rendered specifically for your child's severe learning disabilities caused by mental or physical impairments and paid to a special school or to a specifically-trained teacher may be reimbursed if prescribed by a physician. A Letter of Medical Necessity is required. Examples include, but are not limited to; Remedial reading for your child or dependent with dyslexia, or Testing to diagnose.
Legal Fees		✓		Legal fees paid to authorize treatment for mental illness are eligible expenses. A Letter of Medical Necessity is required.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Levitra	✓			
Lifetime Care			✗	Fees or advance payments made to a retirement home or continuing care facility are not reimbursable.
Lipsticks			✗	
Liquid Adhesive for small cuts	✓			
Lodging		✓		Up to \$50 per night is eligible if the following conditions are met: The lodging is primarily for and essential to medical care; The medical care is provided by a doctor in a licensed hospital or medical care facility related to a licensed hospital; the lodging is not lavish or extravagant; and there is no significant element of personal pleasure or leisure in the travel. A Letter of Medical Necessity is required.
Lodging, for companion		✓		Your companion's lodging can be reimbursed if he or she is accompanying the patient (you or your eligible dependents) for medical reasons and it meets the criteria listed above. Meals are not eligible. Example: Parents traveling with a sick child, up to \$100 per night (\$50 per person) may be reimbursed, as well as lodging and pre and post-hospitalization for bone marrow transplants. A Letter of Medical Necessity is required.
Lodging, special		✓		The cost of a special home or step-down facility for your mentally handicapped dependent, recommended by a psychiatrist to help your dependent adjust after inpatient mental health care to community living, can be reimbursed. A Letter of Medical Necessity is required.
Long-Term Care Insurance Premiums			✗	Under IRS rules, insurance premiums cannot be reimbursed under a Health Flexible Spending Account.
Long-Term Care Services			✗	Refer to Section 106(c) of the IRS Code for more information.
Makeup			✗	See Cosmetics
Marijuana or other controlled substance in violation of Federal Law			✗	See Controlled Substances
Massage Therapy		✓		If used to reduce stress or improve general health, this is not reimbursable. However, if prescribed by a physician for a specific illness, injury, trauma or condition, this may be reimbursed. A Letter of Medical Necessity is required.
Mastectomy-related Special Bras	✓			See Breast Reconstructive Surgery following a Mastectomy
Maternity Aids				See Pregnancy Aids
Maternity Clothes			✗	

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Medical Alert Bracelet	✓			
Medical Conference Admission, Transportation, Meals, etc..		✓		Expenses for admission and transportation to a medical conference qualify, if they relate to a chronic disease suffered by you, your spouse, or your dependents and if the conference is primarily for and essential to the person in need of medical care. The expenses for meal and lodging while attending the conference do not qualify. A Letter of Medical Necessity will be required.
Medical Information Plan Changes	✓			Amounts paid to a plan that maintains electronic medical information for you, your spouse or dependents are eligible for reimbursement.
Medical Records	✓			Costs associated with copying or transferring medical records to a new provider are eligible for reimbursement.
Medical Savings Accounts			✗	
Medical Services	✓			Expenses for medical services by a physician or other health care provider can be reimbursed.
Medical Supplies	✓			
Medicated Lip Products	✓			If used to treat severely dry, chapped lips or cold sores, this is eligible. Examples include, but are not limited to; Blistex Medicated Lip Ointment, Carmex Medicated Lip Balm, and Neosporin Lip Treatment.
Menstrual Relief	✓			Examples include, but are not limited to; Midol, Pamprin, and Premsym PMS.
Mentally Handicapped Special Home		✓		The cost of keeping a mentally handicapped person in a special home (not a relative's home) on a psychiatrist's recommendation to help that person adjust to life in a mental hospital to community living may qualify. A Letter of Medical Necessity is required.
Migraine Relief	✓			Examples include, but are not limited to; Advil Migraine, Excedrin, and Motrin Migraine.
Mileage	✓			See Transportation
Minerals		✓		Examples include, but are not limited to; Calcium, Caltrate, Feosol, Ferrous Sulfate, and Folic Acid. A Letter of Medical Necessity is required.
Missed Appointment Fees			✗	
Moisturizers			✗	See Cosmetics
"Morning-After" Contraceptive Pills	✓			See Birth Control
Motion Sickness Medicines	✓			Examples include, but are not limited to; Bonine, Dramamine, and Marizine.
Mouthwash			✗	
Nail Polish			✗	

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Nasal Strips				If used to alleviate snoring or reduce nasal congestion, this is eligible for reimbursement. Examples include, but are not limited to; Breath Right, and Snoreze.
Naturopathic Care				If rendered by a licensed health care professional who provides this care for the treatment of a specific illness or disorder for you, or your dependent, it can be reimbursed. A Letter of Medical Necessity is required.
Non-Covered Services				Medical care or services that are not covered under your plan may be reimbursed.
Newborn Nursing Care				
Norplant Insertion or Removal				See Birth Control
Nursing Care and Services (Private duty nursing)				This is eligible, whether provided in your home or another facility. The nurse needs not be an R.N. or L.P.N., so long as the services rendered are of a kind generally performed by a nurse. These include services directly related to caring for and monitoring your, or your dependent's condition including, but not limited to; Preparing and giving medication, Changing dressings and providing wound care, Monitoring vital signs, and assessing responses to prescribed treatments, and documenting those assessments in written notes. Please note that if the providing nurse also provides household and personal services, those are not reimbursable. A Letter of Medical Necessity is required.
Nursing Home				Expenses for medical care in a nursing home, including meals and lodging may be reimbursed if the main purpose of the stay is to receive medical care. Please note that if the primary reason for confinement is personal (you or your spouse or dependent needs assistance with activities of daily living, and safety issues), only the portion of the cost that is related to medical care or nursing services may be reimbursed. A Letter of Medical Necessity is required.
Nursing Services for a Newborn Baby				Will not qualify if the baby is normal and healthy.
Nutritional Supplements				Dietary, nutritional, and herbal supplements, vitamins, and natural medicines are not reimbursable if they are merely beneficial for general health. However, they may be reimbursable if recommended by a medical practitioner to treat a specific medical condition. A Letter of Medical Necessity is required.
Nutritionist				Nutritional services related to the treatment and guidance of a specific diagnosis or medical condition can be reimbursed. A Letter of Medical Necessity is required.
Obstetrical Expenses				

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Occlusal Guards to Prevent Teeth Grinding	✓			
Occupational Therapy	✓			
One-A-Day Vitamins			✗	See Vitamins
Operations		✓		Will qualify if the operations are legal (and aren't cosmetic procedures).
Optometrist	✓			
Oral Care	✓			Examples include, but are not limited to; Anbesol, and Orajel.
Organ Donors	✓			
Orthodontia	✓			Requires an Orthodontia contract which lists length of treatment, and amount responsible to pay. You can be reimbursed the initial fees, plus any monthly payments. If paid in full, the amount reimbursable will be split between the months remaining in the contract.
Orthopedic Shoes		✓		Only shoes custom-fitted to the wearer's feet are eligible. Furthermore, only the cost difference between the custom-made shoe and a regular comparable shoe is reimbursable, Mass produced shoes are not eligible. A Letter of Medical Necessity is required.
Orthotics	✓			Custom-made and over-the-counter inserts are eligible.
Osteopath Fees	✓			
Over-the-counter medicines and supplies	✓			Eligible dental or vision over-the-counter expenses, such as denture care products, and contact lens cleaning solution and lens cases may also be reimbursed. Your claim substantiation should include the name of the OTC product, the date of service, and where they were purchased.
Ovulation Monitor	✓			
Oxygen		✓		A Letter of Medical Necessity is required.
Pain Relievers	✓			Examples include, but are not limited to; Advil, Aleve, Aspirin, Ibuprofen, Midol, Naprosyn, Pamprin, and Tylenol.
Parental Fees			✗	
Parking Fees and Tolls	✓			See Transportation
Patterning Exercises		✓		While these exercises are often done by family members, the expense to hire someone to perform patterning exercises is eligible. A Letter of Medical Necessity is required.
Pediculicide	✓			Examples include, but are not limited to; Nix, and Rid.
Penile Implants		✓		Amounts paid for implants may be eligible if the diagnosis of impotence is due to causes, such as diabetes, post-prostatectomy complications, or spinal cord injury. A Letter of Medical Necessity is required.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Perfume			✗	
Personal Items			✗	Items use for personal grooming and not to treat a specific medical condition are not eligible for reimbursement.
Personal Trainer Fees		✓		Will qualify if a medical practitioner has recommended a supervised exercise regimen in order to treat a disease or injury, and if incurred for a limited duration of time. A Letter of Medical Necessity is required.
Physical Therapy	✓			
Physical Exams	✓			
Physician Fees; pre paid			✗	
Pillows; lumbar support		✓		Pillows or cushions that provide lumbar support may be eligible if prescribed by a health care provider to alleviate a specific medical condition. A Letter of Medical Necessity is required. Only the difference in price between a regular pillow and one that meets specific medical needs, will be reimbursed.
Post-Mastectomy Clothing	✓			Prosthetic bras and related clothing purchased after any surgical procedure related to breast cancer are eligible. Prosthetic bras and inserts are reimbursable at 100%. Tank tops and swimwear with built in prosthetic bras are reimbursed up to 50% of the total cost not to exceed \$75.
Pregnancy Aids	✓			Items that relieve or reduce the discomfort of pregnancy may be reimbursed. Examples include, but are not limited to; Maternity girdles, Elastic Hosiery, and Maternity support belts.
Pregnancy Tests	✓			
Prenatal Vitamins	✓			Prenatal vitamins taken during pregnancy would qualify. Vitamins taken at other times will require a Letter of Medical Necessity .
Pre-Payments			✗	Since pre-payments are generally for services/items that have not yet been incurred/obtained they are not reimbursable.
Prescription Drug Discount Program			✗	Fees paid to get access to drugs at a reduced cost are <i>not</i> eligible for reimbursement. Actual costs paid for prescription drugs <i>are</i> an eligible expense.
Prescription Drugs	✓			Eligible expenses including deductibles, co-pays, or co-insurance, as well as the costs for the drugs that may not be covered under your plan, may be reimbursed. Your claim substantiation should include the name of the drug, the provider's name, and the date of service.
Prescription Drugs; Imported		✓		With rare exception, a prescription drug purchased outside the U.S. is not eligible for reimbursement from an FSA. However, if the FDA has approved importing a prescription drug into the U.S. under the "Compassionate Use Act"; it may be an eligible expense. This includes drugs recommended for treatment of a serious condition for which effective treatment of a serious condition that was begun in a foreign country. A Letter of Medical Necessity is required.










Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Preventative Care Screenings	✓			Eligible if the tests are designed to assess symptoms of a medical diagnosis. Examples include, but are not limited to; Clinic and home testing kits for blood pressure, glaucoma, cataracts, hearing, cholesterol, etc.
Propecia		✓		Will only qualify if purchased for cosmetic purposes. May qualify if it is to ameliorate a deformity arising from congenital abnormality, personal injury, or a disfiguring disease. See Cosmetics . A Letter of Medical Necessity is required.
Prosthetics	✓			
Psychiatric Services and Care	✓			
Psychoanalysis	✓			
Psychologist	✓			
Radon Mitigation		✓		If a physician requires radon mitigation in your home due to a medical condition caused or aggravated by an unacceptable level of radon, some expenses may be eligible. However, if the home's value is increased due to the mitigation, some or all of the expenses may not be reimbursable. A Letter of Medical Necessity is required.
Reading Glasses	✓			
Retin-A	✓			
Rogaine		✓		A Letter of Medical Necessity is required. Not reimbursable if merely to treat baldness associated with normal aging.
Rubbing Alcohol	✓			Will qualify if purchased for first aid purposes.
Rubdowns		✓		Will not qualify unless medically necessary. A Letter of Medical Necessity is required.
Safety Glasses			✗	
Sales Tax	✓			See Taxes
Schools and Education, Residential		✓		Certain payments made to a residential school or program to treat individuals for behavioral, emotional, and/or addictive conditions qualify if the primary purpose of the program is medical care. A Letter of Medical Necessity is required.
Schools and Education, Special		✓		Payments made to a special school for mentally impaired or physically disabled persons, qualify if the main reason for using the school is its resources for relieving the disability. This includes but is not limited to; Braille to the visually impaired, teaching lip reading to a hearing impaired person, and giving remedial language training to correct a condition caused by a birth defect. If the child is attending the school simply to benefit from the courses and disciplinary methods, the expenses will not be reimbursed. A Letter of Medical Necessity is required.
Screening Tests		✓		Will qualify if the tests are used for medical diagnosis. Examples include but are not limited to; hearing, vision, and cholesterol screenings.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Service Animals	✓			Expenses to train or procure any guide dog, signal dog, or other animal individually trained to provide assistance to you, or tax dependent with a disability, can be reimbursed. Expenses such as food, medications, vet visits, and dental care products needed for the care and maintenance of service of the animals are also eligible.
Shampoos			✗	See Cosmetics
Shaving Cream or Lotion			✗	See Cosmetics
Shipping and Handling	✓			Shipping and handling charges for medical needs, such as mail-order prescriptions and eligible over-the-counter items are reimbursable.
Sinus Medications	✓			
Sleep Aids	✓			Examples include, but are not limited to; Nytol, Sominex, Tylenol PM, and Unisom.
Smoking Cessation Medicines	✓			Examples include, but are not limited to; Commit, Nicoderm CQ, Nicorette, and Nicotrol. Please note that store brand items are also reimbursable.
Smoking Cessation Programs	✓			
Special Education and Schools		✓		See Learning Disabilities
Special Foods		✓		Only reimbursable if prescribed by a physician to treat a special illness or ailment, and not merely as a substitute for normal nutritional requirements. Please note: the amount that can be reimbursed is limited to the amount that the special food exceeds the cost of commonly available versions of the same product. A Letter of Medical Necessity is required.
Specialized Equipment or Services		✓		See Adaptive Equipment
Speech Therapy	✓			
Sperm Storage		✓		Eligible if you or your tax dependents have a cancer or blood dyscrasia diagnosis that requires chemotherapy or whole body radiation which may affect future ability to conceive children. Please note: Fees should not exceed 12 months. A Letter of Medical Necessity is required.
Stem Cell Harvesting and/or Storage		✓		Might qualify if there is a specific and imminent medical condition that the stem cells are intended to treat. For example, the cost of harvesting and storing stem cells because a newborn has a birth defect and the stem cells would be needed in the near future. However, collection and storage indefinitely, just in case, does not qualify. A Letter of Medical Necessity is required.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Sterilization Procedures	✓			
Sterilization Reversal	✓			
St. Johns Wort		✓		Qualifies if used primarily for medical care. Will not qualify if used to maintain general health. A Letter of Medical Necessity is required.
Student Health Fee			✗	
Substance Abuse	✓			See Alcoholism
Subway Fare	✓			See Transportation
Sunburn / Burn Relief	✓			Examples include, but are not limited to; Aloe Vera, and Solarcaine.
Sunglasses		✓		Prescription sunglasses would qualify.
Sun Protective Clothing		✓		Clothing that offers at least 30+ UVB sun protection for individuals with melanoma or other skin cancer, systemic lupus erythematosus, acute cutaneous lupus or other significant dermatological conditions may be eligible with a Letter of Medical Necessity from your doctor. Please note: The clothing is reimbursed for the difference between "normal" apparel and this specially-constructed clothing up to 33% of the total cost. The receipt must show the purchase was from an accredited sun-protective company.
Sunscreen	✓			Sunscreen products with an SPF of 30 or higher are eligible. Lotions or cosmetics that contain ingredients to protect you from the sun and/or list SPF are not eligible.
Surgery	✓			
Swimming Lessons		✓		Will only qualify if prescribed to treat a medical condition. A Letter of Medical Necessity will be required.
Surrogate or Gestational Carrier Expenses			✗	Will not qualify even if for medical care of surrogate/gestational carrier or her unborn child.
Tanning Salon or Equipment		✓		Not eligible if just to improve general health or appearance. However, this may be reimbursed for treatment of certain skin disorders, such as eczema and psoriasis. A Letter of Medical Necessity is required.
Taxes	✓			Taxes on medical services and products may be reimbursed. This includes local, state, service or other taxes.
Taxi Fare	✓			See Transportation
Teeth Whitening		✓		Teeth whitening products or services to enhance the brightness of your teeth are cosmetic and <i>cannot</i> be reimbursed. However, teeth whitening performed to restore function after an injury or trauma or to correct a congenital disease can be reimbursed. A Letter of Medical Necessity is required.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Telephone For Hearing Impaired	✓			Eligible expenses include the purchasing or repairing of special telephone equipment for you or your dependents, with a hearing impairment.
Television for Hearing Impaired		✓		Expenses for equipment that displays the audio of television programming as subtitles for hearing impaired persons are eligible for reimbursement. Please note: The eligible expense is limited to the cost that exceeds the cost of a non-adapted set. A Letter of Medical Necessity is required.
Temporary Continuation of Coverage Premiums			✗	Under IRS rules and regulations, insurance premiums cannot be reimbursed through a Health Care FSA.
Therapy		✓		Will qualify if provided for medical care (not just for general improvement of mental health, relief of stress, or personal enjoyment). A Letter of Medical Necessity is required.
Thermometers	✓			
Throat Lozenges	✓			
Toiletries			✗	A toiletry is an article or preparation that is used in the process of dressing and grooming oneself. Examples include but are not limited to; toothpaste, shaving cream, and cologne. Also see Cosmetics .
Toothache and Teething Pan Relievers	✓			
Toothbrushes			✗	Toothbrushes, including electric or battery-powered; for example a Sonicare toothbrush, are personal care items and are not eligible for reimbursement. They are still <i>not</i> eligible even if recommended by a dentist or other licensed professional.
Train Fare	✓			See Transportation
Transplants	✓			
Transportation		✓		Car mileage, bus, taxi, and subway or train fare for travel to and from receiving medical care, including health care providers, hospitals and pharmacies can be reimbursed. Mileage incurred traveling to and from your medical provider is reimbursable through the HCFSA at the rate of 24 cents/mile for services incurred in 2009. For 2010 transportation services the rate has decreased to 16.5 cents/mile. To submit a claim for mileage expenses, please list the number of miles, the date of service and the expected reimbursement amount. No other documentation is required. To ensure your transportation claim is approved, be sure to submit your receipt(s) or an itemization of your travel with the claim that coincides with the service(s) rendered.
Treadmill		✓		See Exercise Equipment; Capital Expenses
Tricare Premiums			✗	Under IRS rules and regulations, insurance premiums cannot be reimbursed through a Health Care FSA.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Trips			✗	Excursions taken for a change in environment, general health improvement etc., even those taken on the advice of your health care provider are not an eligible expense.
Tuition Expenses or Fees		✓		A Letter of Medical Necessity is required.
UCR, Charges Above	✓			Medical expenses in excess of your plan's usual, customary and reasonable (UCR) charges may be reimbursed if the underlying expense is eligible.
Ultrasound, pre-natal		✓		An ultrasound ordered by your physician to monitor fetal growth, and/or to diagnose, treat or monitor a pregnancy-related condition is a covered expense even if your health plan does not provide coverage. An ultrasound not ordered or performed by a physician or other licensed professional, and/or not intended to diagnose, treat or monitor a pregnancy-related condition is not an eligible expense. A Letter of Medical Necessity is required.
Umbilical Cord Freezing and Storing		✓		Might qualify if there is a specific medical condition it is intended to treat. Storing just in case, is not reimbursable. A Letter of Medical Necessity is required.
Vaccines	✓			
Varicose Vein Treatment		✓		Will not qualify if merely to improve appearance. May qualify if procedure promotes the proper function of the body or prevents or treats illness or disease. A Letter of Medical Necessity is required.
Vasectomy	✓			See Sterilization Reversal
Vasectomy Reversal	✓			
Veneers			✗	Will not qualify if used primarily for cosmetic purposes.
Veterinary Services		✓		Will qualify if fees are incurred for the care of a guide dog or other animal used by a disabled person.
Viagra	✓			
Vision Care	✓			
Vision Discount Programs			✗	Fees paid to gain access to a vision network, or to a reduced fee structure are not an eligible expense under a Health Care FSA.
Vitamin B-12 Injections	✓			
Vitamins		✓		A Letter of Medical Necessity is required. Only reimbursable if prescribed by a licensed professional to treat a specific medical condition.
Walkers	✓			
Wart Removal	✓			Examples include, but are not limited to; Compound W, Dr. Scholls Clear Away, and Wart-off.
Water Fluoridation		✓		A Letter of Medical Necessity is required.

Condition / Type of Service	Eligible Expense	Potentially Eligible Expenses	Not Eligible	Additional Information
Weight Loss Drugs				Drugs prescribed by a health care provider for weight loss are eligible. However, OTC drugs, such as Alli, are only potentially eligible. A Letter of Medical Necessity is required.
Weight Loss Programs				Food is not eligible, even if part of the weight loss program. Weight loss programs themselves are only reimbursable if prescribed by a licensed provider to help treat a specific medical condition. A Letter of Medical Necessity is required.
Well-Baby/Well-Child Care				
Whirlpool Baths				See Capital Expense
Wheelchair				
Wig				The full cost of a wig purchased because the patient has lost all of his or her hair from disease or treatment is reimbursable. A Letter of Medical Necessity is required.
X-Ray Fees				
Yeast Infection Medications				
YMCA Day Camp				Will not qualify. However, if a camp is a special program that is therapeutic and treats a specific disability, then the expenses might qualify. A Letter of Medical Necessity is required.