

## FSA Eligible Expenses

This site, and the content herein, are designed specifically for clients of ASIFlex. This information is not deemed to function as a Summary Plan Description (SPD). If there is any conflict between this information and your SPD, your SPD will override this information.

### Eligible Expenses Services and Expenses Eligible for Reimbursement under the Flexible Spending Program:

For the **HCFSA**, services listed in this document are eligible for reimbursement, if the services are:

- rendered by a health care professional appropriately licensed or certified in the state in which he or she practices; and
- performed within the scope of the health care professional's license.

For the **DCFSA**, services listed in this document are eligible for reimbursement, if the services are:

- for an individual you claim as a dependent on your Federal Tax return who is under 13 or incapable of self-care; and
- necessary to allow you and your spouse, if married, to work, look for work or attend school full-time.

A					
Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
ABORTION	HCFSA	X			Expenses for operations that are not legal do not qualify.
ACUPUNCTURE	HCFSA	X			
ADAPTIVE EQUIPMENT	HCFSA		X		Adaptive equipment for a major disability, such as a spinal cord injury, can be reimbursed.  Adaptive equipment to assist you with activities of daily living (ADL) for persons with arthritis, lupus, fibromyalgia, etc., can be reimbursed.
ADOPTION FEES	HCFSA			X	Medical expenses incurred by your adopted child who is claimed as a dependent are eligible. Care must be for the adopted child and incurred while the child qualifies as your dependent. Your child's medical care expenses are eligible <b>only during</b> the adoption process as long as the child qualifies as your dependent.

AIR CONDITIONERS/AIR PURIFIERS	HCFSA		X		See ALLERGY PRODUCTS
ALCOHOLISM/DRUG /SUBSTANCE ABUSE TREATMENT	HCFSA	X			<p>Eligible expenses include:</p> <ul style="list-style-type: none"> <li>• Inpatient treatment, including meals and lodging provided by a licensed addiction center.</li> <li>• Outpatient care</li> <li>• Transportation expenses associated with attending outpatient meetings, including AA groups, if attending on a doctor’s advice.</li> </ul>
ALLERGY PRODUCTS	HCFSA		X		<p>Eligible expenses include products and home improvements to treat severe allergies. Examples include:</p> <ul style="list-style-type: none"> <li>• Electro-static air purifier</li> <li>• Humidifier</li> <li>• Home air conditioners</li> <li>• Pillows, mattress covers, etc. to alleviate an allergic condition</li> </ul> <p>Note: See CAPITAL EXPENSES for important information and guidance.</p>
ALTERNATIVE MEDICINE	HCFSA		X		Services must be prescribed and rendered by a licensed health care provider to treat a specific illness or disorder.
AMBULANCE	HCFSA	X			
ARTIFICIAL REPRODUCTIVE TECHNOLOGIES	HCFSA	X			<p>Eligible medical expenses include (but are not limited to):</p> <ul style="list-style-type: none"> <li>• Fertility exams</li> <li>• Artificial insemination (intracervical, intrauterine, intravaginal)</li> <li>• In-vitro/In-vivo fertilization</li> <li>• Gamete Intrafallopian Transfer (GIFT)</li> <li>• Sperm bank storage/fees for artificial insemination <ul style="list-style-type: none"> <li>○ NOTE: Storage fees can only be submitted for planned fertilizations during the current plan</li> </ul> </li> </ul>

					<p>year.</p> <ul style="list-style-type: none"> <li>• Sperm implants</li> <li>• Sperm washing</li> <li>• Reverse vasectomy</li> <li>• Embryo replacement and storage <ul style="list-style-type: none"> <li>○ NOTE: Storage fees can only be submitted for planned fertilizations during the current plan year.</li> </ul> </li> <li>• Egg donor charges for recipient</li> <li>• Embryo transfer</li> </ul>
AUTOMOBILE MODIFICATIONS	HCFSA				See ADAPTIVE EQUIPMENT

<b>B</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
BABY FORMULA	HCFSA		X		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.
BAND-AIDS/BANDAGES	HCFSA	X			See OTC
BEDBOARDS	HCFSA		X		
BEDSIDE COMMUNES	HCFSA	X			
BEFORE AND AFTER-SCHOOL CARE	DCFSA	X			Child must be under age 13 or one who is incapable of self-care and can be claimed on your Federal Income Tax return.
BIRTH CONTROL	HCFSA	X			<p>Birth Control Pills, including (but not limited to):</p> <ul style="list-style-type: none"> <li>• Demuelon</li> <li>• Ortho-Novum</li> <li>• Genora Ovcon</li> <li>• Levelen</li> <li>• Ovral</li> <li>• Loestrin Syntex</li> <li>• Lo-Ovral</li> <li>• Tri-Levelen Modicon</li> <li>• Tri-Norinyl</li> <li>• Nordette Triphasil</li> </ul>

					<ul style="list-style-type: none"> <li>• Norinyl</li> <li>• Also Included: <ul style="list-style-type: none"> <li>○ Condoms</li> <li>○ Norplant</li> <li>○ Ovulation Kits</li> <li>○ Spermicides</li> </ul> </li> </ul>
BLOOD PRESSURE MONITORS	HCFSA	X			See OTC
BLOOD STORAGE	HCFSA		X		Blood storage is an eligible expense if you are storing blood for use during scheduled elective surgery. Storage fees should not exceed six months.
BODY SCANS	HCFSA	X			
BOUTIQUE PRACTICE FEES	HCFSA			X	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	HCFSA	X			The incremental cost of Braille books and magazines that exceeds the price for regular books and magazines is an eligible expense.
BREAST PUMPS	HCFSA			X	Use of a breast pump is not an eligible expense.

<b>C</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
CAMPS, summer or holiday (Day)	DCFSA	X			<p>This includes children under age 13, or any individual who is incapable of self-care and can be claimed on your Federal Tax return.</p> <p>Payment in advance is <b>not</b> covered. You can only be reimbursed for expenses that have been incurred.</p>
CAMPS, summer or holiday (Overnight)	DCFSA		X		<p>This includes children under age 13, or any individual who is incapable of self-care and can be claimed on your Federal Tax return.</p> <p>Payment in advance is <b>not</b> covered. You can only be reimbursed for expenses that have been incurred.</p>

				Overnight camp is not eligible. However, if you are able to show separate billing for day services only, you may submit it as a child care claim.
CAPITAL EXPENSE	HCFSA		X	<p>A capital expense (permanent or portable) can be reimbursed if its purpose is to provide medical care for you, your spouse or dependent.</p> <p>Expenses for improvements or special equipment added to your home can be reimbursed if the main purpose of the item is medical care. How much is reimbursed depends on the extent to which the expense permanently improves the property and whether others benefit.</p> <p>The amount paid for the improvement is reduced by the increase in the value of your home or property. The difference between the cost of the improvement minus the increased value equals the eligible expense.</p> <p>If the value of your home or property is not increased by the improvement, the entire cost is an eligible expense. Use the Capital Expense Worksheet (found online) to determine if your expense is eligible.</p> <p>Examples of these expenses are:</p> <ul style="list-style-type: none"> <li>• Constructing entrance or exit ramps</li> <li>• Widening or otherwise modifying doorways, hallways and stairways</li> <li>• Installing railings, support bars, or other modifications to bathrooms</li> <li>• Kitchen modifications, including lowering cabinets and other equipment</li> <li>• Electrical and plumbing modifications</li> <li>• Exterior grading of the property to provide access to your home</li> </ul> <p>This list is not exhaustive. If expenses are similar to those listed above, and are incurred to adapt a personal residence to</p>

					<p>yours or your spouse's or dependent's condition, the expenses are eligible subject to the terms noted above. Expenses must be reasonable, and directly related to the medical condition. Costs that are incurred for architectural or aesthetic reasons are not eligible.</p> <p>Please refer to IRS Publication 502 for additional information, including operation and upkeep.</p>
CHILDBIRTH CLASSES	HCFSA	X			
CHIROPRACTIC	HCFSA	X			
CHRISTIAN SCIENCE PRACTITIONERS	HCFSA	X			Payments for medical care can be reimbursed.
CIALIS	HCFSA	X			
CIRCUMCISION	HCFSA	X			A bris performed in the home by a Rabbi is not an eligible expense.
COBRA PREMIUMS	HCFSA			X	Under IRS rules, insurance premiums cannot be reimbursed under a health care FSA.
CO-INSURANCE	HCFSA	X			Cannot be reimbursed by secondary insurance or any other source.
COMPANION ANIMALS	HCFSA		X		See SERVICE ANIMALS
CONTACT LENSES	HCFSA	X			
CONTROLLED SUBSTANCES	HCFSA			X	
CO-PAYMENTS	HCFSA	X			Cannot be reimbursed by secondary insurance or any other source.
CORD BLOOD STORAGE	HCFSA		X		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 an eligible expense.
CORNEAL RING SEGMENTS	HCFSA	X			
COSMETIC PROCEDURES	HCFSA		X		<p>Cosmetic procedures to improve or enhance appearance are not eligible.</p> <p>A cosmetic procedure or service necessary to improve a deformity arising from a congenital abnormality, personal injury from accident or trauma, or to restore</p>

					appearance related to treatment for another medical diagnosis or condition can be reimbursed.
COUNSELING	HCFSA	X			If counseling is provided to treat a medical or mental diagnosis and is rendered by a licensed provider.  Eligible expenses include psychotherapy, bereavement and grief counseling, sex counseling, etc.
	HCFSA			X	Life coaching, career counseling and marriage counseling do not qualify.
CROWNS	HCFSA	X			See DENTAL CARE
CRUTCHES	HCFSA	X			

<b>D</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
DAYCARE	DCFSA	X			This includes daycare as well as in-home babysitters for children under age 13, or any individual who is incapable of self-care and can be claimed on your Federal Tax return.  Payment in advance is <b>not</b> covered. You can only be reimbursed for expenses that have been incurred.
DANCING LESSONS	HCFSA		X		Only for a short duration and if prescribed for a specific medical condition, such as part of a rehabilitation program after surgery.
DEDUCTIBLES	HCFSA	X			Cannot be reimbursed by secondary insurance or any other source.
DENTAL MAINTENANCE ORGANIZATION (DMO)	HCFSA			X	See INSURANCE PREMIUMS
DENTAL CARE	HCFSA	X			Covered services include, but are not limited to: <ul style="list-style-type: none"> <li>• Bridges</li> <li>• Cleanings</li> <li>• Crowns</li> <li>• Dental implants</li> <li>• Dentures</li> </ul>

					<ul style="list-style-type: none"> <li>• Endodontic care (root canal)</li> <li>• Extractions</li> <li>• Fillings</li> <li>• Orthodontia</li> <li>• Periodontal services</li> <li>• Routine prophylaxis</li> <li>• Sealants</li> <li>• X-rays</li> </ul>
	HCFSA			X	Expenses for cosmetic dentistry, such as teeth whitening or bleaching, porcelain veneers, or bonding are not eligible for reimbursement.
DIABETIC SUPPLIES	HCFSA	X			
DIAPER RASH CREAMS	HCFSA	X			See OTC
DIAPERS, DIAPER SERVICE	HCFSA			X	Routine care of healthy newborn
	HCFSA	X			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.
DOCTOR FEES	HCFSA	X			<p>In addition to all expenses for care not reimbursed by any other source, eligible expenses include fees for:</p> <ul style="list-style-type: none"> <li>• Out-of-network providers</li> <li>• Charges by your physician for letters of medical necessity to schools, etc.</li> <li>• Physician tele-advice, including email communication</li> </ul>
DOULAS	HCFSA		X		If the doula is a licensed health care professional who renders medical care, his or her fees can be reimbursed.
DRUGS	HCFSA				See CONTROLLED SUBSTANCES, PRESCRIPTION DRUGS and OTC
DRUG ADDICTION, treatment of	HCFSA	X			<p>Eligible expenses include:</p> <ul style="list-style-type: none"> <li>• Inpatient treatment, including meals and lodging provided by a licensed addiction center.</li> <li>• Outpatient care</li> </ul>

					<ul style="list-style-type: none"> <li>Transportation expenses associated with attending outpatient meetings, including AA groups, if attending on a doctor's advice.</li> </ul>
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<b>E</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
EAR PLUGS	HCFSA		X		Must be prescribed to treat a specific medical condition, such as the presence of middle/inner ear tubes.
EDUCATION	DCFSA		X		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.
ELDER CARE	DCFSA	X			Adult must live with you at least 8 hours a day and be claimed as a dependent on your Federal Tax return.
ELECTROLYSIS	HCFSA			X	
EYEGLASSES	HCFSA	X			Includes prescription sunglasses and over-the-counter reading glasses.  Please note that product protection plans, or warranties, and clip-on sunglasses are not eligible for reimbursement.

<b>F</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
FERTILITY ENHANCEMENT	HCFSA	X			Includes ovulation predictor kits and pregnancy tests.
FINANCE CHARGES	HCFSA			X	
	DCFSA			X	
FIRST AID KIT	HCFSA		X		A letter of medical necessity is not required, but please see OTC.

FITNESS PROGRAMS	HCFSA		X		Fees paid for a fitness program may be an eligible expense if prescribed by a physician and substantiated by his or her statement that treatment is necessary to alleviate a medical problem.
FLU SHOTS	HCFSA	X			
FOOD	HCFSA		X		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 the food exceeds the cost of commonly available versions of the same product.
FUNERAL EXPENSES	HCFSA			X	

<b>G</b>					
<b>Condition/Type of Service/Expense</b>	<b>HCFSA</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
GUIDE DOGS	HCFSA		X		See SERVICE ANIMALS
GIFT CARDS	HCFSA			X	Gift cards are not an eligible expense, even if these cards are provided by a medical provider such as an eye glass store or a pharmacy.

<b>H</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
HAIR TRANSPLANT	HCFSA			X	
HEALTH CLUBS/GYM MEMBERSHIPS	HCFSA		X		Requires a Letter of Medical Necessity and a statement from the individual stating "but for" the medical condition listed in the letter of medical necessity, he or she would not have joined the health club/gym.  These memberships can only be reimbursed as services are provided, so services for an entire month (or year) cannot be reimbursed until the end of that month (or year).
HEALTH SCREENINGS	HCFSA	X			See PREVENTIVE CARE SCREENINGS

HEARING AIDS	HCFSA	X			Includes batteries
HOME MEDICAL EQUIPMENT	HCFSA	X			
HOMEOPATHIC CARE	HCFSA	X			Homeopathic care rendered by a licensed health care professional who provides this care for the treatment of a specific illness or disorder for you, your spouse or dependent can be reimbursed under a HCFSA.
HOMEOPATHIC MEDICINES	HCFSA		X		Homeopathic medicines used for treatment of a specific illness or disorder can be reimbursed.
HOUSEHOLD HELP	HCFSA			X	
HOUSEHOLD HELP	DCFSA		X		Duties must include caring for an eligible dependent.
HUMIDIFIERS	HCFSA		X		See ALLERGY RELIEF, CAPITAL EXPENSES
HYDROTHERAPY	HCFSA		X		
HYPNOSIS	HCFSA	X			

<b>I</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
IMMUNIZATIONS	HCFSA	X			Includes those recommended for overseas travel
INSURANCE PREMIUMS	HCFSA			X	Under IRS rules, insurance premiums cannot be reimbursed under a health care FSA.

<b>L</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
LAB FEES	HCFSA	X			
LACTATION CONSULTANT	HCFSA		X		Services rendered by a licensed health care provider can be reimbursed.
LAMAZE CLASSES	HCFSA	X			
LASER EYE SURGERY	HCFSA	X			See VISION CARE
LATE PAYMENT FEES	DCFSA			X	
LATE PICK-UP FEES	DCFSA	X			
LEAD-BASED PAINT	HCFSA	X			Expenses for removing lead-based paints

REMOVAL					<p>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.</p> <p>The cost of repainting the affected area(s) is 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 capital expenses.</p>
LEARNING DISABILITIES	HCFSA		X		<p>The portion of tuition/tutoring fees covering services rendered specifically for your child's severe learning disabilities caused by mental or physical impairments (such as nervous system disorders, or closed head injuries) and paid to a special school or to a specially-trained teacher may be reimbursed under a HCFSA if prescribed by a physician. Examples of eligible expenses include:</p> <ul style="list-style-type: none"> <li>• Remedial reading for your child or dependent with dyslexia</li> <li>• Testing to diagnose</li> </ul>
LEGAL FEES	HCFSA		X		Legal fees paid to authorize treatment for mental illness are eligible expenses.
LEVITRA	HCFSA	X			
LIFETIME CARE	HCFSA			X	Fees or advance payments made to a retirement home or continuing care facility are not eligible expenses.
LODGING	HCFSA		X		<p>Up to \$50 per night is eligible if the following conditions are met:</p> <ul style="list-style-type: none"> <li>• The lodging is primarily for, and essential to, medical care</li> <li>• The medical care is provided by a doctor in a licensed hospital or medical care facility related to/equivalent to a licensed hospital</li> <li>• The lodging is not lavish or extravagant</li> <li>• There is no significant element of personal pleasure or leisure in the travel.</li> </ul>

	HCFSA		X		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 for reimbursement.  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.
	HCFSA		X		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.
LONG-TERM CARE INSURANCE PREMIUMS	HCFSA			X	Under IRS rules, insurance premiums cannot be reimbursed under a HCFSA.
LONG-TERM CARE SERVICES	HCFSA			X	Refer to Section 106(c) of the IRS Code for more information.

<b>M</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
MASSAGE THERAPY	HCFSA	X			Therapeutic Massage treating a specific medical condition can be reimbursed under a HCFSA. The words "therapy" or "therapeutic" must be included in the description of the service. Gratuities are not reimburseable.
MATERNITY	HCFSA				See PREGNANCY AIDS
MATERNITY CLOTHES	HCFSA			X	
MEALS	HCFSA			X	
MEDICAL ALERT BRACELET	HCFSA	X			
MEDICAL INFORMATION	HCFSA	X			Amounts paid to a plan that maintains electronic medical information for you, your spouse or dependents are eligible for reimbursement under an HCFSA.

MEDICAL RECORDS	HCFSA	X			Costs associated with copying or transferring medical records to a new provider are eligible for reimbursement.
MEDICAL SAVINGS ACCOUNTS	HCFSA			X	
MEDICAL SERVICES	HCFSA	X			Expenses for medical services prescribed by physicians or other health care providers acting within their scope of licensure can be reimbursed under a HCFSA.
MEDICAL SUPPLIES	HCFSA	X			
MILEAGE EXPENSES	HCFSA	X			Mileage incurred traveling to and from your medical provider is reimburseable through the HCFSA at the rate of <b>\$.19/mile</b> for services provided on or before June 30, 2008 and <b>\$.27/mile</b> for services provided on or after July 1, 2008.  For services provided from <b>January 1st, 2009</b> , forward, the reimbursement rate has decreased to <b>\$.24/mile</b> .  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.
MISSED APPOINTMENT FEES	HCFSA			X	

<b>N</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
NATUROPATHIC CARE	HCFSA		X		Naturopathic care rendered by a licensed health care professional who provides this care for the treatment of a specific illness or disorder for you, your spouse or dependent can be reimbursed under a HCFSA.
NON-COVERED SERVICES	HCFSA	X			Medical care or services that are not covered under your major medical plan may be reimbursed under an HCFSA.
NEWBORN NURSING CARE	HCFSA			X	Nursing services for a normal, healthy newborn are not an eligible expense.
NURSING CARE AND SERVICES (private duty nursing)	HCFSA		X		Nursing services are an eligible expense, whether provided in your home or another facility. The nurse need not be an R.N. or

				<p>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, your spouse's or dependent's condition, including:</p> <ul style="list-style-type: none"> <li>• Preparing and giving medication</li> <li>• Changing dressings and providing wound care</li> <li>• Monitoring vital signs</li> <li>• Assessing responses to prescribed treatments, and documenting those assessments in written notes</li> </ul> <p>If the individual providing nursing services also provides household and personal services, only those charges related to actual nursing care are eligible expenses.</p>
NURSING HOME	HCFSA		X	<p>Expenses for medical care in a nursing home for you, your spouse and dependent(s), including meals and lodging may be reimbursed if the main purpose of the stay is to receive medical care.</p> <p>If the primary reason for confinement is personal (i.e., you or your spouse or dependent needs assistance with activities of daily living, safety issues, etc.), only the portion of the cost that is directly related to medical care or nursing services may be reimbursed.</p>
NUTRITIONAL SUPPLEMENTS	HCFSA		X	<p>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.</p>
NUTRITIONIST	HCFSA		X	<p>Nutritional services related to the treatment and guidance of a specific diagnosis or medical condition can be reimbursed.</p>

<b>O</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
OCCUPATIONAL THERAPY	HCFSA	X			
OPTOMETRIST	HCFSA	X			
ORTHODONTIA	HCFSA	X			See Orthodontia Quick Reference Guide (found online) for more information.
ORTHOTICS	HCFSA	X			
OSTEOPATH	HCFSA	X			
OVER-THE-COUNTER MEDICINES AND SUPPLIES	HCFSA	X			
	HCFSA	X			Eligible dental or vision over-the-counter expenses, such as denture care products, and contact lens cleaning and soaking solutions may be reimbursed.
OVULATION MONITOR	HCFSA	X			
OXYGEN	HCFSA		X		

<b>P</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
PARKING FEES AND TOLLS	HCFSA	X			See TRANSPORTATION
PATTERNING EXERCISES	HCFSA		X		While these exercises are often done by family members, the expense to hire someone to perform patterning exercises is an eligible expense.
PENILE IMPLANTS	HCFSA		X		Amounts paid for implants may be eligible if the diagnosis of impotence is due to organic causes, such as diabetes, post-prostatectomy complications, or spinal cord injury.
PERSONAL ITEMS	HCFSA			X	
PHYSICAL THERAPY	HCFSA	X			
PLACEMENT SERVICES	DCFSA	X			The up-front fee may qualify if it is an expense that must be paid in order to obtain care. However, the fee can only be reimbursed proportionately over the duration

					of the agreement to employ the dependent care provider, such as an au pair. The weekly stipend, as well as other work-related expenses, may also qualify as an expense for the care of a qualifying individual.
PREGNANCY AIDS	HCFSA	X			Items that relieve or reduce the discomfort of pregnancy may be reimbursed under a HCFSA. Examples include: <ul style="list-style-type: none"> <li>• Maternity girdles</li> <li>• Elastic hosiery</li> <li>• Maternity support belts</li> </ul>
PREGNANCY TESTS	HCFSA	X			See OTC
PRESCRIPTION DRUG DISCOUNT PROGRAM	HCFSA			X	Fees paid to get access to drugs at a reduced cost are not eligible for reimbursement under a HCFSA. Actual costs paid for prescription drugs are an eligible expense.
PRESCRIPTION DRUGS	HCFSA	X			Eligible expenses include deductibles, co-payments or co-insurance as well as the costs for prescription drugs that may not be covered under FEHB, such as drugs that treat erectile dysfunction.
PRESCRIPTION DRUGS - IMPORTED	HCFSA			X	IRS regulations state that any drug imported into the United States by a consumer is not eligible for reimbursement under an FSA.
PREVENTIVE CARE SCREENINGS	HCFSA	X			If the tests are designed to assess symptoms of a medical diagnosis, they are eligible for reimbursement. Examples include clinic and home testing kits for blood pressure, glaucoma, cataracts, hearing, cholesterol, etc.
PROPECIA	HCFSA			X	Hair growth treatments are considered to be cosmetic and are not eligible for reimbursement.
PROSTHETICS	HCFSA	X			
PSYCHIATRIC SERVICES AND CARE	HCFSA	X			
PSYCHOANALYSIS	HCFSA	X			
PSYCHOLOGIST	HCFSA	X			

<b>R</b>					
<b>Condition/Type of Service/Expense</b>	<b>HCFSA</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
RADON MITIGATION	HCFSA	X			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. Use the Capital Expense Worksheet (found online) to determine how much of the expense is eligible.
READING GLASSES	HCFSA	X			See EYEGLASSES
REFLEXOLOGY	HCFSA		X		
RETIN-A	HCFSA				
ROGAINE	HCFSA				

<b>S</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
SALES TAX	HCFSA				See TAXES
SERVICE ANIMALS	HCFSA		X		Expenses to train or procure any guide dog, signal dog, or other animal individually trained to provide assistance to you, your spouse or dependent with a disability can be reimbursed under a HCFSA.
SHIPPING AND HANDLING	HCFSA	X			Shipping and handling charges for medical needs, such as mail-order prescriptions.
SMOKING CESSATION PROGRAMS	HCFSA	X			
SONICARE TOOTHBRUSHES	HCFSA			X	
SPECIAL EDUCATION AND SCHOOLS	HCFSA		X		See LEARNING DISABILITIES
SPECIAL FOODS	HCFSA		X		If prescribed by a physician to treat a special illness or ailment, and not merely as a substitute for normal nutritional requirements.

					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.
SPECIALIZED EQUIPMENT OR SERVICES	HCFSA				See ADAPTIVE EQUIPMENT
SPEECH THERAPY	HCFSA	X			
SPERM STORAGE	HCFSA		X		Storage fees can be reimbursed if you, your spouse or dependent has a cancer or blood dyscrasia diagnosis that requires chemotherapy or whole body radiation which may affect future ability to conceive children.
STERILIZATION PROCEDURES	HCFSA	X			
STERILIZATION REVERSAL	HCFSA	X			
STUDENT HEALTH FEE	HCFSA			X	
SUBSTANCE ABUSE	HCFSA	X			See ALCOHOLISM
SUN-PROTECTIVE CLOTHING	HCFSA		X		Clothing that offers at least 30+ UVA and UVB sun protection for individuals with melanoma or other skin cancer, systemic lupus erythematosus (SLE), acute cutaneous lupus (ACLE) or other significant dermatologic conditions may be eligible with a letter of medical necessity from your doctor. 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 such as Solumbra® or Coolibar®.
SUNSCREEN	HCFSA		X		

<b>T</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
TANNING SALON OR EQUIPMENT	HCFSA			X	No, if just to improve general health or appearance.

	HCFSA		X		May be reimbursed under a HCFSA for treatment of certain skin disorders, such as eczema and psoriasis.
TAXES	HCFSA	X			Taxes on medical services and products may be reimbursed under a HCFSA. This includes local, state, service and other taxes.
TEETH WHITENING	HCFSA			X	Teeth whitening products or services to enhance the brightness of your teeth are cosmetic and cannot be reimbursed.
TELEPHONE FOR HEARING IMPAIRED	HCFSA	X			Expenses associated with purchasing or repairing special telephone equipment for you, your spouse or dependent with a hearing impairment are eligible for reimbursement under a HCFSA.
TELEVISION	HCFSA		X		Expenses for equipment that displays the audio of television programming as subtitles for hearing impaired persons are eligible for reimbursement under a HCFSA.  The eligible expense is limited to the cost that exceeds the cost of a non-adapted set.  See CAPITAL EXPENSES.
TEMPORARY CONTINUATION OF COVERAGE (TCC) PREMIUMS	HCFSA			X	Under IRS rules, insurance premiums cannot be reimbursed under a health care FSA.
TRANSPORTATION	HCFSA	X			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 reimburseable through the HCFSA at the rate of <b>\$.19/mile</b> for services provided on or before June 30, 2008 and <b>\$.27/mile</b> for services provided on or after July 1, 2008.  For services provided from <b>January 1st, 2009</b> , forward, the reimbursement rate has decreased to <b>\$.24/mile</b> .  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.
	HCFSA		X		Plane fare must not be merely for convenience.
	DCFSA		X		Transportation to and from the dependent care location provided by the daycare or service.
	HCFSA		X		In some cases, transportation expenses of the following persons may be reimbursed: <ul style="list-style-type: none"> <li>• A parent who must go with a child who needs medical care</li> <li>• A nurse or other person who can give injections, medications or other treatment required by a patient traveling to get medical care and who is unable to travel alone</li> <li>• Visits to see your mentally ill dependent, if part of a treatment plan</li> </ul>
TRICARE PREMIUMS	HCFSA			X	Under IRS rules, insurance premiums cannot be reimbursed under a health care FSA.
TRIPS	HCFSA			X	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	DCFSA		X		

<b>U</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
UCR, CHARGES ABOVE	HCFSA	X			Medical expenses in excess of your plan's usual, customary and reasonable (UCR) charges may be reimbursed under a HCFSA if the underlying expense is eligible.
ULTRASOUND, PRE-NATAL	HCFSA		X		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 under your HCFSAs, even if your health plan does not provide reimbursement. 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.
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<b>V</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
VASECTOMY	HCFSAs	X			
VASECTOMY REVERSAL	HCFSAs	X			See STERILIZATION REVERSAL
VIAGRA	HCFSAs	X			
VISION CARE	HCFSAs	X			
VISION DISCOUNT PROGRAMS	HCFSAs			X	Fees paid to gain access to a vision network, or to a reduced fee structure are not an eligible expense under a HCFSAs.  See INSURANCE PREMIUMS
VITAMINS	HCFSAs		X		See OTC

<b>W</b>					
<b>Condition/Type of Service/Expense</b>	<b>Account Type</b>	<b>Eligible Expense</b>	<b>Potentially Eligible Expense*</b>	<b>Not Eligible</b>	<b>Additional Information</b>
WALKERS	HCFSAs	X			
WATER FLUORIDATION	HCFSAs		X		
WEIGHT LOSS PROGRAMS	HCFSAs		X		
WELL-BABY/WELL-CHILD CARE	HCFSAs	X			
WHIRLPOOL BATHS	HCFSAs		X		
WHEELCHAIRS	HCFSAs	X			
WIG	HCFSAs		X		The full cost of a wig purchased because the patient has lost all of his or her hair from disease or treatment.