

Flexible Spending Accounts

Eligible Expenses

Health Care FSA

Items in this list are typically covered by an FSA

Refer to Internal Revenue Service Publication 502 for details (www.irs.gov/pub/irs-pdf/p502.pdf)

Acne treatments (over-the-counter)	Dental care (for non-cosmetic purposes)	Monitors & test kits (over-the-counter)
Acupuncture	Dental coinsurance	Motion & nausea
Adoption (medical expenses related to)	Dental copay	Nasal sprays & strips (over-the-counter)
Alcoholism treatment	Dental reconstruction	Non-prescription drugs and medicines (for non-cosmetic purposes)
Allergy & sinus medicine and products (over-the-counter)	Dentures, bridges, etc.	Norplant insertion or removal
Allergy medication (prescription)	Diabetic monitor	Nursing services (wages and taxes)
Allergy treatments	Diagnostic services	OB/GYN fees
Ambulance and emergency health services	Drug addiction treatment	Occlusal guards to prevent teeth grinding
Anesthesia (for non-cosmetic purposes)	Drugs (prescription)	Occupational therapy (related to a medical condition or disability)
Antacid (over-the-counter)	Dyslexia treatment	Office visits (chiropractic, dental, medical, psychological, therapy, vision)
Antibiotic ointment (over-the-counter)	Eye examinations	Operations (for non-cosmetic purposes)
Aspirin or other pain reliever (over-the-counter)	Eye-related equipment/materials	Optometrist/ophthalmologist fees
Asthma medicines or treatments (over-the-counter)	Eye surgery or treatment to correct vision	Organ transplants (recipient and donor)
Bandages and related items (over-the-counter)	Eyeglasses (over-the-counter)	Ortho keratotomy
Birth control (over-the-counter)	Eyeglasses (prescription)	Orthodontia (braces and retainers)
Birth control (prescription or other)	Fertility monitor (over-the-counter)	Over-the-counter acne treatments
Blood pressure monitor	Fertility treatment (for employee, spouse or dependent)	Over-the-counter allergy & sinus medicine
Body scans	First aid kit (over-the-counter)	Over-the-counter antacid
Canker & cold sore treatments (over-the-counter)	Flu shots	Over-the-counter antibiotic ointment
Chest rubs (over-the-counter)	Gastrointestinal medication (over-the-counter)	Over-the-counter aspirin or other pain reliever
Childbirth classes	Guide dog (dog, training, care)	Over-the-counter asthma medicines or treatments
Chiropractic office visit or treatment	Hearing aids and batteries	Over-the-counter bandages and related items
Christian Science practitioners	Hospital services	Over-the-counter canker & cold sore treatments
Coinsurance (dental)	Immunizations	Over-the-counter chest rubs
Coinsurance (medical)	Infertility treatment (for employee, spouse or dependent)	Over-the-counter cold & flu medicine
Coinsurance (prescription)	Insulin, testing materials and supplies	Over-the-counter cold & flu prevention
Coinsurance (vision)	Laboratory fees	Over-the-counter cough drops & sore throat lozenges
Cold & flu medicine (over-the-counter)	Lactose intolerance (over-the-counter)	Over-the-counter cough syrup
Compression or anti-embolism socks, stockings or hose	Lamaze classes	Over-the-counter medication
Condoms and spermicides	Laser eye surgery	Over-the-counter products for dental ailments
Contact lenses, cleaning solutions, etc.	Lasik	Over-the-counter vision products
Contraceptives (prescription or over-the-counter)	Laxatives (over-the-counter)	Ovulation monitor (over-the-counter)
Copay (dental, medical, vision, or other)	Learning disability treatments	Oxygen
Corn and callus remover (over-the-counter)	Lice treatment (over-the-counter)	Pain reliever (over-the-counter)
Corneal keratotomy	Listening therapy	Physical exams
Cough drops & sore throat lozenges (over-the-counter)	Mastectomy-related special bras	Physical therapy
Cough syrup (over-the-counter)	Medical abortion	Pregnancy tests (over-the-counter)
Counseling (for treatment of a medical condition)	Medical co-insurance	Prescription coinsurance
Crutches, canes or like equipment (purchase or rental)	Medical copayment	Prescription copay
Deductibles (dental, medical, or vision)	Medical equipment (for treatment of medical condition) and repairs	Prescription drugs (non-cosmetic)
	Medical monitoring and testing devices	
	Medical records charges	
	Medicines (over-the-counter)	
	Medicines (prescription)	
	Mileage (\$.20/documented mile for travel to/from eligible health care)	

Prosthesis	(over-the-counter)	Varicose vein removal surgery
Psychiatric care	Speech therapy	Vasectomy
Psychoanalysis	Sterilization	Viagra or similar prescription medication
Psychologist fees	Sunglasses (prescription)	Vision coinsurance
Radial keratotomy (RK)	Surgery (for non-cosmetic purposes)	Vision copayment
Reading glasses (over-the-counter)	Teeth grinding prevention devices	Vitamins (prescription)
Removal of benign mole, cyst or tumor	Therapy (for treatment of a medical condition)	Wart removal treatments
Smoking cessation (programs/counseling)	Toothache and teething pain relievers	Wheelchair and repairs
Smoking cessation drugs (prescription)	Tubal ligation	X-ray fees (dental)
Smoking cessation gum or patches	Vaccinations	X-ray fees (medical)

FSA “May Be” Eligible Health Care Expenses

Certain expenses require additional information in order to determine if they qualify. Products and services classified as “may be” require a written statement from your health provider indicating (1) the diagnosis and (2) the medical necessity of the expense. Specialized items also require proof of the difference in cost: (1) the cost of standard, unmodified item, and (2) the cost of special or modified item. If you incur an expense that is classified as “May be,” you will need to submit the above documentation with your claim.

Alternative dietary supplements (for treatment of a medical condition)	Fitness programs	Retin-A (for non-cosmetic purposes)
Alternative drugs and medicines (for treatment of a medical condition)	Health club dues	Rogaine or other hair regrowth medications (for treatment of a medical condition)
Alternative healers (for treatment of a medical condition)	Lodging (essential to receive medical care)	Special equipment
Braille books and magazines (difference in cost only)	Massage therapy (for treatment of a medical condition)	Special foods (gluten-free, salt-free or other for treatment of a medical condition)
Breast pump (to compensate for a medical condition)	Medical supplies (for treatment of a medical condition)	Special school (for mental and physical disabilities)
Cord blood storage (for future treatment of a birth defect or known medical condition)	Modified equipment (difference in cost only)	Supplies (for treatment of a medical condition)
Dancing lessons (for treatment of a medical condition)	Nutritional supplements (for treatment of a medical condition)	Swimming lessons (for treatment of a medical condition)
Dental products (for treatment of a dental condition, not general health)	Orthopedic shoes and inserts (only the excess cost of the specialized orthopedic shoe over the cost of a regular shoe qualifies)	Transgender treatments/surgery
Dental veneers	Propecia (for treatment of a medical condition)	Transportation, parking and related travel expenses (essential to receive medical care)
Dietary supplements (for treatment of a medical condition)	Reconstructive surgery (following accident or medical procedure or condition)	Weight loss counseling
Exercise equipment (for treatment of a medical condition)		Weight loss program or drugs (for treatment of a medical condition)

Dependent Care FSA

Refer to Internal Revenue Service Publication 503 for dependent care expenses and eligibility (www.irs.gov/pub/irs-pdf/p502.pdf)

Adult day care center	Educational services (for preschool, but no kindergarten or above)	Payroll taxes related to eligible care
After school program	Elder care (in your home or someone else's)	Preschool
Au pair	Extended care (supervised program before or after school)	Senior day care
Babysitting (work-related, in your home or someone else's, but not provided by your own dependent)	Nanny	Sick child care
Before- or after-school program	Nursery school	Summer day camp (but not overnight camp)
Child care		Transportation to and from eligible care (provided by your care provider)
Custodial elder care (work-related)		