

# ELIGIBLE AND INELIGIBLE EXPENSES

## FSA HEALTHCARE



The following expenses are permissible for reimbursement through a Flexible Spending Account, however the permissible expenses may vary by plan. Please refer to your FSA Summary Plan Description (SPD).

All Reimbursement Request Forms submitted must include the **required documentation** noted below.

<b>Standard Documentation Includes</b> <b>One of the Following:</b>	<b>Documentation for Over-the-Counter</b> <b>Products Require:</b>
<ol style="list-style-type: none"> <li>1. An itemized receipt or statement, or</li> <li>2. The insurance company's explanation of benefits (EOB), or</li> <li>3. A provider's signature on the Reimbursement Request Form along with the provider's Tax I.D. Number.</li> </ol> <p>A canceled check does <b>not</b> meet IRS regulations for proper documentation of an eligible expense</p>	<ol style="list-style-type: none"> <li>1. Pre-printed cash register receipt that includes the date of the service, provider name, amount of purchase, and the name/description of the product purchased.</li> <li>2. If any of the requirements noted in item 1 above are missing from the receipt, an additional handwritten receipt from the provider is required that contains all information and includes the provider's signature. The provider may add the missing information to the original receipt and sign the receipt for provider verification in lieu of creating a new receipt. Provider signatures must be legible.</li> </ol>

### Eligible Expenses for FSA – Healthcare

#### MEDICAL

- Acupuncture
- Anti-fungal & anti-bacterial creams/ointments
- Artificial limbs
- Bandages, gauze pads, and liquid adhesive for minor cuts
- Bengay, Flexall, pain relieving creams or gels
- Birth control, contraceptive devices
- Birthing classes/Lamaze – only the mother's portion (not the coach/spouse) and the class must be only for birthing instruction, not child rearing
- Blood pressure monitor
- Calamine lotion
- Canker/cold sore relievers
- Chiropractic therapy/exams/adjustments
- Contact lens and contact lens solutions
- Cold medicines
- Co-payments
- Corn removal
- Crutches (purchased or rented)
- Deductibles and co-insurance
- Denture adhesive
- Diabetic supplies
- Diaper rash ointment
- Eye exams
- Eyeglasses, contacts, or safety glasses, prescription only (warranties are not reimbursable)
- First aid kits (thermometer, hot & cold packs)
- Flu shots
- GasX, baby gas drops
- Hearing aids and hearing aid batteries (warranties are not reimbursable)
- Heating pad
- Hemorrhoid creams and treatments
- Hot and cold packs
- Incontinence supplies
- Indigestion or anti-acid relievers
- Infertility treatments
- Laser eye surgery; Lasik
- Laxatives
- Legal sterilization
- Mileage to and from doctor appointments \$.19 for services incurred 1/1/08 - 6/30/08; \$.27 for services incurred 7/1/08 - 12/31/2008; and \$.24 for services incurred in 2009.
- Nasal strips
- Optometrist's or ophthalmologist's fees
- Pain relievers (Tylenol, Advil, Aspirin etc)
- Peroxide
- Physicals
- Physical therapy (as medical treatment)
- Physician's fee and hospital services
- Pregnancy test
- Prenatal vitamins
- Prescribed drugs and medications
- Psychotherapy, psychiatric and psychological services
- Reading glasses
- Rubbing alcohol
- Sales tax on eligible expenses
- Services connected with donating an organ
- Sinus medicines
- Sleep apnea services/products (as prescribed by physicians)
- Smoking cessation programs, nicotine patch
- Suppositories
- Teething gel
- Thermometer
- Treatment for alcoholism or drug dependency
- Vaccinations
- Wart removal medication
- Wrist supports, elastic wraps
- X-ray fees

# ELIGIBLE AND INELIGIBLE EXPENSES FSA HEALTHCARE



## Eligible Expenses for FSA – Healthcare (continued)

### **DENTAL**

- Braces and orthodontic services (special rules apply, see Orthodontic Worksheet available online)
- Cleanings
- Crowns
- Deductibles, co-insurance
- Dental implants
- Dentures, adhesives
- Fillings

### **For the DISABLED**

- Automobile equipment and installation costs for a disabled person in excess of the cost of an ordinary automobile; device for lifting a mobility impaired person into an automobile
- Braille books and magazines in excess of cost of regular editions
- Note-taker, cost of, for a hearing impaired child in school
- Seeing eye dog (buying, training and maintaining)
- Special devices, such as a tape recorder or typewriter for a visually impaired person
- Visual alert system in the home or other items such as a special phone required for a hearing impaired person
- Wheelchair or autoette (cost of operating/maintaining)

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### ***Over-the-Counter Healthcare Expenses***

- Over-the-counter medications and drugs may be reimbursed by the FSA plan. Please refer to your Summary Plan Description for expense eligibility.
- Refer to Documentation Requirements for over-the-counter products on page 1.
- Do not send labels and packaging from the product as they do not qualify as third-party documentation.
- **Stockpiling** of over-the-counter products is not allowed by the Plan. Acclaim Benefits defines stockpiling as 5 or more products (or similar products) purchased on the same date.

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### ***Healthcare Expenses Requiring Additional Documentation***

The following expenses must be incurred to treat a diagnosed medical condition. The submission of a Letter of Medical Necessity form in addition to the standard documentation is required. This form must be signed by a physician and must include the diagnosis and medical necessity of the treatment. The Letter of Medical Necessity form is available on our web site at [www.acclaimbenefits.com](http://www.acclaimbenefits.com).

- Acne treatments and medications
- Breast pump
- Ear plugs
- Estrovin
- Eye drops/Visine
- Glucosamine
- Massage treatments
- Nursing services for care of a special medical ailment
- Orthopedic inserts or shoes (excess cost of ordinary shoes)
- Oxygen equipment and oxygen
- Propecia/Rogaine (only eligible for a medical condition)
- Speech therapy
- Sunscreen or suntan lotion
- Support hose
- Varicose vein treatment
- Veneers
- Wigs (for mental health condition of individual who loses hair because of a disease)

# ELIGIBLE AND INELIGIBLE EXPENSES FSA HEALTHCARE



The following expenses are not eligible for reimbursement:

## Ineligible Expenses for FSA – Healthcare

- Athletic mouth guards
- Auto insurance providing medical coverage
- Breast feeding supplies
- Chapstick/lip balm
- Contributions to state disability funds
- Cosmetic surgery, cosmetic dentistry or other cosmetic procedures
- Cosmetic supplies (make up, facial soaps/creams and moisturizers, etc)
- Deodorant
- Dental floss
- Diaper service
- Diet: special diets and/or cost of special foods taken as substitute for regular diet
- Dietary and fiber supplements
- Divorce: expenses of divorce when doctor or psychiatrist recommends divorce
- Distilled water purchased to avoid drinking fluoridated city water or for use in medical equipment
- Domestic help: payments to domestic help, companion, babysitter, chauffeur, etc. who primarily render services of a non-medical nature
- Electrolysis/hair removal
- Exercise equipment and fees
- Eye drops for general comfort
- Eyeglass cases
- Hand sanitizer
- Health club or athletic club membership fees
- Herbal supplements
- Illegal treatment or medication
- Insurance premiums, all types
- Lanyards
- Lotions or skin moisturizers
- Marriage counseling
- Maternity clothes
- Mattress
- Medicare premiums
- Medicated shampoos, conditioners, and soaps
- Mobile telephone used for personal calls as well as calls to physician
- Nursemaids or practical nurses who render general care for healthy infants
- Pajamas/slippers purchased to wear in hospital
- Personal use items (toothbrush, vacuum, pillow, shampoo, mattress, etc)
- Physical treatment unrelated to specific health problems (massage for general well-being, stress, depression, or chiropractic wellness program)
- Premiums for coverage through other medical plans (i.e., spouse's employer-sponsored plan or individual plan), including TEFRA and COBRA
- Private hospital rooms
- Safety glasses (non-prescription)
- Special foods purchased to replace nutrition or for general health needs, such as diet foods.
- Sun Glasses (non prescription) and Sun Clips
- Teeth whitening
- Toiletries
- Toothbrush, (includes prescribed electric ones)
- Toothpaste
- Vacuum cleaner purchased by an individual with dust allergy
- Vitamins and/or supplements
- Warranties
- Weight loss drugs/programs for general well being