

# FSA Eligible Health Care Expenses

Below is the list of items typically covered by a standard FSA. For a complete list visit [www.wageworks.com](http://www.wageworks.com).

## Prescription Requirement for OTC Drug Purchases

A doctor's prescription is required in order to be reimbursed for over-the-counter (OTC) drugs. OTC drugs requiring a prescription are indicated in the following list with the abbreviation "(Rx)". Please go to [www.wageworks.com/healthcarereform](http://www.wageworks.com/healthcarereform) for more information.

Acne treatments (over-the-counter) (Rx)	Dental co-insurance	Medical supplies (for treatment of a medical condition)
Acupuncture	Dental co-payment	Medicines (over-the-counter) (Rx)
Adoption (medical expenses related to)	Dental reconstruction (including implants)	Medicines (prescription)
Alcoholism treatment	Dentures, bridges, etc.	Midwife
Allergy & sinus medicine and products (over-the-counter) (Rx)	Diabetic monitor, test kits, strips and supplies	Mileage (for travel to/from eligible health care)
Allergy medication (prescription)	Diagnostic services	Monitors & test kits (over-the-counter)
Ambulance and emergency health services	Diaper rash ointments and creams (Rx)	Motion & nausea (over-the-counter) (Rx)
Anesthesia (for non-cosmetic purposes)	Drug addiction treatment	Nasal sprays & strips (over-the-counter) (Rx)
Antacid (over-the-counter) (Rx)	Drugs (prescription)	Non-prescription drugs and medicines (for non-cosmetic purposes) (Rx)
Antibiotic ointment (over-the-counter) (Rx)	Ear drops and wax removal (over-the-counter) (Rx)	Norplant insertion or removal
Aspirin or other pain reliever (over-the-counter) (Rx)	Eye drops and treatments (over-the-counter) (Rx)	Nursing services (wages and taxes)
Asthma medicines or treatments (over-the-counter) (Rx)	Eye examinations	OB/GYN fees
Athletic treatments / braces	Eye related equipment/materials	Occlusal guards to prevent teeth grinding
Bandages and related items (over-the-counter)	Eye surgery or treatment to correct vision	Occupational therapy (related to a medical condition or disability)
Birth control (over-the-counter) (Rx)	Eyeglasses (over-the-counter & prescription)	Office visits (chiro, dental, medical, psych/therapy, vision)
Birth control (prescription)	Fertility monitor (over-the-counter)	Operations (for non-cosmetic purposes)
Blood pressure monitor	Fertility treatment (for employee, spouse or dependent)	Operations (for vision and dental)
Body scans	First aid kit (over-the-counter)	Optometrist / ophthalmologist fees
Braille books & magazines (difference in cost only)	Flu shots	Organ transplants (recipient and donor)
Breastfeeding classes	Gastrointestinal medication (over-the-counter) (Rx)	Orthotics
Breast pumps (for a lactating woman)	Guide dog (dog, training, care)	Ortho keratotomy
Canker & cold sore treatments (over-the-counter) (Rx)	Hearing aids and batteries	Orthodontia (braces and retainers)
Chest rubs (over-the-counter) (Rx)	Hospital services and fees	Orthopedic & surgical supports
Childbirth classes (charges for mother only)	Immunizations	Over-the-counter bandages and related items
Chiropractic office visit or treatment	Incontinence supplies	Over-the-counter health care products (Rx)
Cholesterol test kits and supplies	Infertility treatment (for employee, spouse or dependent)	Over-the-counter drugs and medicines (including for motion sickness, sleep aids and sedatives) (Rx)
Christian Science practitioners	Insulin, testing materials and supplies	Over-the-counter products for dental, oral and teething pain (Rx)
Co-insurance (dental, medical, prescription, vision)	Laboratory fees	Over-the-counter vision products
Co-payment (dental, medical, vision)	Lactose intolerance (over-the-counter) (Rx)	Ovulation monitor (over-the-counter)
Cold & flu medicine (over-the-counter) (Rx)	Lamaze classes (charges for mother only)	Oxygen
Concierge medical fees (billed for actual services received)	Laser eye surgery	Pain reliever (over-the-counter) (Rx)
Condoms	Lasik	Parental fees (billed for actual services received for disabled children)
Contact lenses and solutions	Laxatives (over-the-counter) (Rx)	Physical exams
Contraceptives (over-the-counter) (Rx)	Learning disability treatments	Physical therapy
Corn and callus remover (over-the-counter) (Rx)	Lice treatment (over-the-counter) (Rx)	Pregnancy tests (over-the-counter)
Corneal keratotomy	Listening therapy	Prescription co-insurance
Cough drops, cough syrup, sore throat lozenges (over-the-counter) (Rx)	Mastectomy-related special bras	Prescription co-payment
Counseling (for treatment of a medical condition)	Medical abortion	Prescription drugs (for non-cosmetic purposes)
Crutches, canes, walkers or like equipment (purchase or rental)	Medical co-insurance	Propecia (for treatment of a medical condition)
Deductible for dental, medical, prescription and vision plans	Medical co-payment	Prosthesis
Dental care (for non-cosmetic purposes, including sealants)	Medical equipment (for treatment of medical condition) and repairs	
	Medical monitoring and testing devices	
	Medical records charges	

## FSA Eligible Health Care Expenses (Cont.)

Psychiatric care	Sterilization	Vaccinations
Psychoanalysis	Student health fees billed for actual services received (dental, medical, prescription, vision)	Varicose vein removal surgery (for medical care)
Psychologist fees	Sunglasses (prescription)	Vasectomy
Radial keratotomy (RK)	Sunscreen with SPF 15+ and "broad spectrum", sunburn creams & ointments (over-the-counter)	Viagra and similar prescription medications
Reading glasses (over-the-counter)	Surgery (for non-cosmetic purposes)	Vision co-insurance
Removal of benign mole, cyst or tumor	Teeth grinding prevention devices	Vision co-payment
Retin-A (for non-cosmetic purposes)	Therapy (for treatment of a medical condition)	Vitamins (prescription)
Sales tax, shipping and handling fees (for any eligible expenses)	Toothache and teething pain relievers (over-the-counter) (Rx)	Walking aids (canes, walkers, crutches and related supplies)
Smoking cessation (programs, counseling)	Transportation, parking & related travel expenses (essential to receive eligible care)	Wart removal treatments (over-the-counter) (Rx)
Smoking cessation drugs (prescription)	Tubal ligation	Weight loss drugs (for treatment of a medical condition) (Rx)
Smoking cessation gum or patches (over-the-counter) (Rx)	Urological products	Wheelchair and repairs
Speech therapy		Wound care (over-the-counter)
Spermicidals (Rx)		X-ray fees (dental, medical)

## FSA "Maybe" Eligible Health Care Expenses

Certain expenses require additional information in order to determine if they qualify. Products and services classified as "Maybe" require a written statement from your health care 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 "Maybe," you will need to submit the above documentation with your claim.

Allergy treatments and products	Dietary supplements*	Nutritional supplements*
Alternative dietary supplements*	Doula or birthing coach	Orthopedic shoes and inserts (difference in cost only of specialized orthopedic shoe over like non-specialized shoe)
Alternative drugs, medicines and treatment products*	Dyslexia treatment	Reconstructive surgery (following accident or medical procedure or condition)
Alternative healers*	Exercise equipment or program*	Special equipment
Breast reconstruction surgery (following mastectomy)	Fitness programs*	Special foods (gluten-free, salt-free or other for treatment of a medical condition; difference in cost only)
Car modifications*	Health club dues*	Special school (for mental and physical disabilities)
Cord blood storage (for future treatment of a birth defect or known medical condition)	Herbal or homeopathic medicines (over-the-counter)	Swimming lessons*
Cosmetic procedures or surgery for birth defects, accidents, and/or disease	Home improvements*	Transgender treatments / surgery
Dancing lessons*	Humidifier, air filter and supplies	Tuition or educational classes*
Dental veneers	Lodging (limited to \$50 per night for patient to receive medical care and \$50 per night for one caregiver)	Weight loss counseling
Dermatology treatments and products	Magnetic therapy (over-the-counter)	Weight loss program*
	Massage therapy*	
	Modified equipment (difference in cost only)	

\* As treatment or required for a medical condition diagnosed by a licensed health care professional.

## Eligible Dependent Care Expenses†

Adult day care center	Dependent care (while you work, to enable you to work or look for work)	Nursery school
After school program	Educational services (for preschool, but no kindergarten or above)	Payroll taxes related to eligible care
Au pair	Elder care (in your home or someone else's)	Preschool
Babysitting (work-related, in your home or someone else's, but not provided by your own dependent)	Extended care (supervised program before or after school)	Registration fees (required for eligible care, after actual services are received)
Before- or after-school program	Housekeeper who cares for child (only portion of payment attributable to work-related child care)	Senior day care
Child care	Nanny	Sick child care
Custodial elder care (work-related)		Summer day camp (but not overnight camp)
		Transportation to and from eligible care (provided by your care provider)

† For a child under the age of 13 or other dependents that are physically and mentally incapable of taking care of themselves.