

FLEXIBLE SPENDING ACCOUNT – HEALTH CARE FSA

The health care FSA pays medical, dental, vision and prescription drug expenses with pre-tax income. Significant tax savings are available to help pay for out-of-pocket health care expenses when:

- The product or service is primarily for health care to diagnose, alleviate or treat injuries, illness or sickness
- You receive the service or purchase the product for use during your Coverage Period
- The cost will not be waived, paid by another source or claimed as a medical tax deduction on your income tax return
- The service/product is not received or purchased for cosmetic or general well-being

Eligible Health Care Expenses

Acne treatments*	Hearing aid/batteries/exams/treatment	Ostomy pouches & products
Acupuncture	Home health care products (grab bars/commode/bath bench, etc.)	Over-the-counter medicine/drug*
Alcoholism/Drug treatment	Hospital services	Oxygen
Allergy treatments	Hot/cold therapy products	Periodontal fees
Alternative providers (must be legal & qualify as medical care)	Incontinence products for adult/juvenile	Physical examinations
Ambulance	Insulin & diabetic supplies	Pill counter/dispenser/cutter
Artificial limbs	Joint care products (liquid & tabs)	Pregnancy aids (support hosiery/support belts)
Band aids/bandages/tape	Lab fees	Prenatal vitamins
Birth control spermicides*	Lamaze (for mother only)	Prescription drugs – FDA approved
Braille books/magazines (cost exceeding regular editions)	Language training for a child with dyslexia or disability**	Psychiatric/Psychoanalysis
Breast pump & lactation supplies	Learning disability tuition**	Reading glasses (OTC)
CPAP kit & supplies	Mammograms	Rental of medical equipment
Car modifications for handicapped	Massage therapy for medical condition**	Respiratory therapy (mask/nebulizer)
Chiropractic care	Medical alert ID bracelet/necklace	Sales tax for eligible expense
Coinsurance	Medical conference admission & transportation to/from	Saline products for sinus/nasal
Condoms (non-spermicidal)	Medical records	Scooter (disability aid)
Contact lenses & supplies	Midwife/Doula	Shoe inserts/supports
Copays & deductibles	Mileage to/from medical services (primary purpose must be medical)	Special schools/education for relieving a disability**
Dental care/bridges/crowns/implants	Monitoring devices (blood pressure, stethoscope, etc.)	Sleep deprivation testing & treatment
Dentures & denture care products	Motion sickness bands	Smoking cessation programs
Dermatologist fees	Nursing services	Smoking cessation patch, gum, etc.*
Diagnostic/screening test products	Occlusal guards to prevent teeth grinding	Surgery
Doctor's fees	Optometrist fee	Telephone for hearing- impaired
Emergency equipment	Organ transplant	Therapy for health/mental disorders
Eye exams	Orthopedic braces/supports/aids	Thermometer
Eyeglasses/sunglasses (prescription)	Orthodontia expenses for on-going services (treatment plan required)	Vaccinations/flu shots
Experimental treatments (must be legal & qualify as medical care)	Orthopedic custom/prescription made shoes (cost difference)	Vasectomy
Fertility/infertility treatment	Orthotics	Vision surgeries
First aid kits		Walking aids (cane/walker/crutches)
Foot care (corn/callus/bunion removal)		Wheelchairs/ramps
Guide & service dogs		Wigs for hair loss due to medical condition**
Handling & Shipping		X-rays
Head lice supplies (combs)		
Head lice treatments (shampoos, etc.)*		

*Requires a valid prescription (*electronic or written order for a medicine or drug that meets the legal requirements of a prescription in the state in which the medical expense is incurred and that is issued by an individual authorized to issue a prescription in that state*). A medicine or drug can be ingested, intravenous, in suppository form, or through absorption into the skin (topical).

**Expenses may be eligible if accompanied by a doctor's written statement indicating the medical disorder and that this is the treatment needed to cure, mitigate, treat or prevent a specific medical condition. A doctor's recommendation does not automatically make the expense eligible. In some cases, additional documentation may also be required to validate the expense for reimbursement.

Important note: These lists are not all-inclusive. Call a TASC Customer Care at 800-236-3539 about specific expenses.