

SAMPLE ELIGIBLE EXPENSES FOR SPENDING ACCOUNT REIMBURSEMENTS

Medical, Dental & Vision Expenses

- Acupuncture
- Alcoholism treatment
- Ambulance hire
- Artificial teeth/dentures
- Birth control
- Braces
- Braille-books and magazines
- Breast pumps and lactation supplies
- Chiropractors
- Christian Science Practitioners' fees
- Co-insurance amount you pay
- Co-pay amount you pay
- Contact lenses and eyeglasses, PLUS eye examination
- Contact lens solutions
- Cosmetic surgery (due to illness or injury only)
- Cost of operations and related treatments
- Crutches
- Deductible medical coverage amounts you pay
- Dental fees
- Drug (by prescription) and medical supplies
- Fee for practical nurse
- Fees for healing services
- Handicapped persons' special schools
- Hearing devices and batteries
- Home improvements motivated by medical considerations
- Hospital bills
- Incontinence products
- Insulin
- Laboratory fees
- Lead-base paint removal (for children with lead poisoning)
- Medical information plan
- Mentally handicapped persons cost of special home care
- Nurses fees (including nurses' board and social security tax paid by you)
- Obstetrical expenses
- Operations
- Orthopedic shoes
- Oxygen
- Physical fees
- Physician recommended swimming pool or spa equipment costs

- (restricted by IRS regulations)
- Psychiatrists' and psychologists' fees
 - Radial keratotomy and Lasik eye surgery
 - Rolfing therapy
 - Routine physical & other non-diagnostic services or treatments
 - School tuition for the handicapped
 - Seeing-eye dog and maintenance
 - Smoking cessation programs
 - Special diets required by illness or allergy
 - Special education for the blind
 - Special plumbing for handicapped
 - Sterilization (i.e., tubal ligation, vasectomy)
 - Surgical fees
 - Telephone, special for hearing impaired
 - Television audio display equipment for hearing impaired
 - Therapeutic care for drug and alcohol addiction
 - Therapy treatments
 - Transportation expenses primarily in the rendering of medical services
 - Weight loss program (if prescribed by physician to treat existing disease)
 - Wheelchair
 - X-rays

Over-the-Counter Medications

Please note that all over-the-counter medications will require a prescription.

(Sample List)

- Cold medicines, tablets, syrups, cough drops & lozenges
- Analgesics, fever reducers, pain reducers like aspirin, ibuprofen, acetaminophen
- Antacids and heartburn relief
- Stomach & Digestive relief items
- Laxatives
- Eye drops and lubricants
- Motion sickness patches and pills
- First Aid creams
- Arthritis pain relieving creams
- Antibiotic ointments
- Anti-itch creams and hydrocortisone creams
- Allergy medication, nasal sprays
- Athlete's foot treatment, anti-fungal creams
- Wart removal medication

- Diabetes supplies, glucose monitoring
- Urinary pain relief medication
- Smoking cessation patches, gum
- Feminine care related to treatment of vaginal infections
- Tooth and mouth pain relief medication
- Shampoo for treatment of lice, psoriasis
- Pregnancy tests
- Diaper rash ointment

Dependent Care Expenses

- Babysitters
 - Daycare centers
 - Nursery schools
 - After-school programs
 - Day camp
 - Eldercare
- (Overnight camps are NOT eligible)*

Individual Health and/or Disability Expenses

- Individual dental/vision/accident coverage
- Individual disability premiums

Adoption Assistance Expenses

- Reasonable & necessary adoption fees
- Court costs
- Attorney's fees
- Travel expenses

Common Expenses NOT Eligible for Reimbursement:

- Cosmetic procedures**
- Hair products**
- Vitamins**
- Nutritional supplements**
- Gym equipment and membership**

***These items are only eligible if they are used to treat a medical condition. Proper physician documentation will be required.*

Expense eligibility is subject to change. If you are unsure if an expense is eligible for reimbursement, please call P&A Group at [800] 688-2611. Business hours are Monday through Friday 8:30 a.m. to 8:00 p.m. EST.

HEALTH CARE REFORM AND ITS IMPACT ON YOUR FSA

In March of 2010 President Obama signed the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010. This new law changes the way participants can use their Health Flexible Spending Account. Starting January 1, 2011, over-the-counter medicines will only be reimbursable if submitted with a doctor's prescription. Examples of medicines that would require a doctor's prescription for reimbursement would include pain medications (aspirin, acetaminophen, ibuprofen, etc), ant-acids and anti-fungal medications. Below is a brief list that outlines expenses that require a doctor's prescription.

SAMPLE ELIGIBLE EXPENSES WITH A DOCTOR'S PRESCRIPTION INCLUDE:

Cold medicines, tablets, syrups, cough drops and lozenges	Laxatives
Analgesics, such as aspirin, ibuprofen and acetaminophen	Eye drops and lubricants
Motion sickness patches and pills	Heartburn relief and antacids
First Aid creams	Stomach & digestive relief items
Arthritis pain relieving creams	Anti-itch creams and hydrocortisone creams
Antibiotic ointments	Athlete's foot treatment, anti-fungal creams
Allergy medication, nasal sprays	

This is not a complete list.

SAMPLE ELIGIBLE EXPENSES WITHOUT A DOCTOR'S PRESCRIPTION INCLUDE:

Band aids	Elastic bandages & wraps
Catheters	First aid supplies
Condoms	Insulin & diabetic supplies
Contact lens supplies & solutions	Ostomy products
Denture Adhesives	Reading glasses
Diagnostic tests & monitors	Wheelchairs, walkers, canes

This is not a complete list.

See how you can purchase these expenses with our online pharmacy!