

# Health Care FSA Qualified Medical Expenses



This is a list of common qualified medical expenses for Health Care Flexible Spending Accounts (HCFSAs). The products and services are subject to change by the IRS. Please refer to IRS Publication 502, Medical and Dental Expenses, found online at [IRS.gov](https://www.irs.gov).

## General health

- Acupuncture
- Ambulance
- Blood sugar test kits for diabetics
- Chiropractor
- Cold and flu medicine
- Common over-the-counter (OTC) medicines. Examples include, but are not limited to:
  - Acne medicine
  - Aids for indigestion
  - Allergy and sinus medicine
  - Ointments for cuts, burns, or rashes
- COVID-19 diagnostic testing and treatment
- Crutches
- Doctor's office visits and co-pays
- Drug prescriptions
- Feminine hygiene products
- Flu shots
- Insulin
- Laboratory fees
- Motion sickness medicines
- Nasal sprays or drops
- Pain relievers, such as aspirin or ibuprofen
- Personal protective equipment (PPE), such as masks and/or hand sanitizer

- Physical therapy
- Sleep aids
- Stomach remedies
- Vaccines
- Walkers and canes
- Wheelchairs

## Dental

- Artificial teeth
- Dental care
- Dental treatments (including X-rays, cleanings, fillings, sealants, braces, and tooth removals)
- Fluoride treatments
- Occlusal guards to prevent teeth grinding
- Orthodontics

## Hearing

- Hearing aids and batteries

## Family planning/pregnancy

- Birth control treatment
- Breast pumps and lactation supplies
- Fertility enhancement (including in-vitro fertilization)
- Infertility treatment
- Midwife

## Psychological support

- Psychiatric care
- Psychoanalysis
- Psychologist

## Surgical

- Surgery, excluding cosmetic surgery

## Vision

- Contact lenses and solutions
- Eye drops
- Eyeglasses (Rx and reading)
- Guide dogs
- Laser eye surgery
- Vision exam
- Smart Frame (Rx only)

## Other

- Artificial limbs
- Inpatient treatment at a therapeutic center for alcoholism or drug addiction
- Special education expenses that include tutoring for a child with learning disabilities caused by mental impairments (recommended by doctor)
- Speech therapy

## Services that may be eligible with a letter of medical necessity

This list is not exhaustive:

- Compression hosiery/socks, antiembolism socks or hose
- CPR classes for adults or children
- Improvements or special equipment added to a home or other capital expenditures for a physically handicapped person
- Massage treatment for a specific ailment or diagnosis
- Weight-loss program, only if it is a treatment for a specific disease diagnosed by a physician (such as obesity, hypertension, or heart disease)



## Ineligible expenses

Listed below are some services and expenses that are not eligible for reimbursement.

This list is not exhaustive:

- Aromatherapy
- Baby bottles and cups
- Baby oil
- Baby wipes
- Breast enhancement
- Cosmetics and skin care
- Cotton swabs
- Dental floss
- Deodorants
- Hair regrowth supplies and/or services
- Health club membership dues
- Humidifiers
- Lotions
- Low-calorie foods
- Mouthwash
- Petroleum jelly
- Shampoo and conditioner
- Spa salts

