



FSA Eligible Expenses

Your Health Care Reimbursement Account dollars can be used for a variety of out-of-pocket health care expenses. The following is based on a list of eligible expenses:

ELIGIBLE EXPENSES		
<p>BABY/CHILD TO AGE 13</p> <ul style="list-style-type: none"> • Adoption (medical expense) • Tuition: Special School/Teacher for Learning Disabled Child • Well Child Care <p>DENTAL</p> <ul style="list-style-type: none"> • Cleanings • Dental X-Rays • Dentures and Bridges • Denture Adhesives and Repair • Exams • Occlusal Guards • Orthodontia (excluding cosmetic) <p>EYES</p> <ul style="list-style-type: none"> • Braille Books and Magazines • Contact Lenses and Supplies • Eye Exams • Eye Surgery • Prescription Eyewear • Reading Glasses <p>HEARING</p> <ul style="list-style-type: none"> • Ear Care Supplies • Hearing Aids and Batteries • Hearing Exams • Lip Reading Lessons • Telephone (for the deaf) • Television Closed Caption Decoder (for the deaf) • Visual Alert <p>LAB EXAMS/TESTS</p> <ul style="list-style-type: none"> • Body Scans • Laboratory Fees • X-Rays 	<p>MEDICAL EQUIPMENT/SUPPLIES</p> <ul style="list-style-type: none"> • Arches and Orthotic Inserts • Artificial Limbs and Teeth • Birth Control • Braces • Crutches, Walkers, Wheelchairs • First Aid Dressings and Kits • Foot Care • Glucosamine/Chondroitin • Home Modifications to Accommodate Handicapped Persons • Hospital Beds • Incontinence • Medical Alert Bracelet/Necklace • Medical Monitoring/Testing Devices • Orthopedic Shoes • Oxygen and Equipment • Pregnancy/Fertility Test Kits • Shipping/Handling Fees (medical supplies) • Sunscreen (over 30 SPF) • Syringes and Containers <p>MEDICAL PROCEDURES/SERVICES</p> <ul style="list-style-type: none"> • Acupuncture • Ambulance • Hospice Care • Immunizations • Infertility Treatment • Lodging (necessary for medical care, not to exceed \$50 per night per person) • Mental Institution • Nursing Care (medical reasons) • Physical Examination (not employment-related) • Respite Care • Service Animals (purchase, care) • Sterilization/Sterilization Reversal • Telephone Consultation Fees • Transplants • Transportation (essential medical care) 	<p>MEDICATIONS</p> <ul style="list-style-type: none"> • Allergy Shots • Insulin • Prescription Drugs <p>OBSTETRICS</p> <ul style="list-style-type: none"> • Breast Pumps and Supplies • Childbirth Classes (mother) • Prenatal Vitamins <p>PRACTITIONERS</p> <ul style="list-style-type: none"> • Chiropractor • Christian Science (medical care) • Psychiatrist or Psychologist <p>THERAPY</p> <ul style="list-style-type: none"> • Alcoholism and Drug Addiction • Massage • Occupational • Physical • Rehabilitation • Smoking Cessation Programs • Speech • Weight Loss Programs (medical condition, fees only)

Note: These lists do not comprise the entire lists of eligible and ineligible expenses. If you have any questions concerning an expense, please contact BPA.



FSA Ineligible Expenses

Your Health Care Reimbursement Account dollars can be used for a variety of out-of-pocket health care expenses. The following is based on a list of ineligible expenses:

INELIGIBLE EXPENSES		
<ul style="list-style-type: none">• Cosmetic Procedures• Dancing/Swimming Lessons• Electric Cigarettes• Eyeglass or Other Vision-Related Warranties	<ul style="list-style-type: none">• Insurance Premiums• Late Fees or Finance Charges• Marijuana• Marriage/Career Counseling	<ul style="list-style-type: none">• Missed Appointments• Non-Prescription Sunglasses• Personal Hygiene• Person Trainers• Sunscreen (less than 30 SPF)

Under the Affordable Care Act, all over-the-counter medications must have a prescription to be eligible for reimbursement.

Note: These lists do not comprise the entire lists of eligible and ineligible expenses. If you have any questions concerning an expense, please contact BPA.