

# Healthcare FSA Eligible Expenses List

This is a partial list and is subject to change at any time by IRS regulations. A complete list can be found after logging into your account at IUSupport@wexinc.com.

### **Qualified Medical Expenses** Equipment and Supplies

- Abdominal Supports
- Acid Controllers
- Acne Medications
- Allergy & Sinus Medicine
- Anti-Itch Cream
- Arch Supports
- Artificial Limbs
- Artificial Teeth and Adhesives
- Bandages
- Braces
- Contact Lenses and Solutions
- Cold Compresses
- Cold & Flu Medicine
- Crutches

#### **Medical Expenses**

- Acupuncture
- Air Conditioner\*
- Air Purifier\*
- Ambulance
- Braille books and magazines
- Breast Reduction Surgery
- Chiropractic Care
- Co-insurance
- Deductibles
- Dental Treatment- if not cosmetic
- Diagnostic Services
- Fertility Treatments
- Flu Shots

- Eye Drops
- Eyeglasses
- First Aid Supplies
- Gym Membership\*
- Hearing Aids and Batteries
- Heating Pads
- Incontinence Supplies\*
- Indigestion Medicine
- Insulin
- Laxatives
- Medical Monitoring/
- Testing Devices
- Menstrual Care Products
- Nasal Spray
- Hospital Services
- Hydrotherapy
- Laboratory Fees
- Lactation expenses
- Lead paint removal
- Lodging (away from home for outpatient care)
- Massage therapy\*
- Optometry
- Orthodontia
- Physical Therapy
  - Prescribed Weight Loss Programs/Medications\*

- Occlusal guards
- Over-the-counter COVID-19 tests
- Oxygen

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- Pain Relievers
  - Personal protective equipment (PPE) for the primary purpose of preventing the spread of COVID-19 (e.g. face masks, hand sanitizer, and sanitizing wipes)
- Prescription sunglasses
- Reading glasses
- Walkers
- Wheelchair
- X-Rays
- Prescription drugs
- Psychiatric Care
- Psychologist Fees\*
- Smoking Cessation Programs
  - Surgery- if not cosmetic
  - Vision Exams
- Speech Therapy
- Sterilization
- Transplants
- v Vaccine
- Vasectomy

\* Some products & services require a letter from a physician stating the condition which requires such expenses. These expenses will not qualify without a letter of medical necessity.

Expenses compensated or reimbursed by insurance are not eligible FSA expenses.

For those participating in both the Limited Healthcare Flexible Spending Account and the HDHP & HSA plan, only dental and vision services are eligible for reimbursement from the Limited Healthcare Flexible Spending Account until such time as the HDHP deductible has been met. Medical and prescription expenses incurred after the HDHP deductible for reimbursement from the Limited Healthcare Flexible Spending Account.

## Post deductible medical and prescription expenses can be paid using the IU Benefits card once proof has been provided that the deductible has been met.

Flexible Spending Account

### **Non-Qualified Medical Expenses**

FSA funds used towards non-qualified expenses will need to be repaid. Your debit card may be temporarily suspended until such expenses are repaid.

- Advance payment for services •
- Cosmetics .
- Diaper Service
- Domestic help
- Funeral expenses •

Illegally procured drugs Maternity clothes

Social activities

Swimming pool

- Teeth-whitening services and products
- Toothpaste and mouthwash

## **Receipts and the FSA**

DEBIT CARD TRANSACTIONS

Most debit card expenses can be validated through the card transaction; however, a request may be sent to see itemized bills for debit card transactions to ensure expenses are eligible under the FSA, so be sure to keep your itemized bills.

When required, receipts can be easily uploaded online or through the mobile app.

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#### CLAIM REIMBURSEMENTS

To request reimbursement for an expense paid out of pocket, you can file a claim form online at benefit-info.com/iu or send a completed paper claim form to IU HSA/FSA. To receive reimbursment, you will need to provide a copy of your itemized bill with the (1) Patient Name, (2) Provider Name, (3) Date of Service, (4) Description of Service/Item, and (5) Cost.