

# Flexible Spending Account eligible expenses

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**Flexible Spending Account (FSA) funds can be used for hundreds of eligible expenses including some health insurance deductibles and coinsurance for you, your spouse, and your tax dependents. These expenses include the following:**

## Medical expenses

Doctor visits, laboratory tests, medical equipment, and hospital services.

Examples include:

### Provider Visits and Care

- Acupuncture
- Chiropractic care
- Christian Science practitioner
- Fertility treatment
- Nursing services

### Diagnostic and Preventive Care

- Flu shot and vaccinations
- Laboratory fees
- Medical testing device
- Obstetrical expenses
- Physical exam

### Programs and Treatments

- Alcoholism treatment
- Drug addiction treatment
- Insulin
- Oxygen
- Physical therapy
- Psychiatric care
- Smoking cessation program
- Surgery
- Weight loss program for obesity treatment (if prescribed by a physician)

## Medical Equipment, Support, and Transportation

- Artificial limb
- Automobile modifications for a person with a disability
- Blood pressure monitoring device
- Braille books and magazines (above the cost of regular printed material)
- Crutches
- Guide dog or other animal aid
- Hearing aids
- Transportation for medical care
- Wheelchair

### Hospital Services and Visits

- Ambulance
- Anesthesia
- Hospital room and board
- Organ transplant

## Dental expenses

Non-cosmetic dental treatments.

Examples include:

- Crowns
- Dentures
- Diagnostic services
- Fillings
- Orthodontia (not for cosmetic reasons)
- Teeth cleaning
- Tooth extraction

## Vision expenses

Eye doctor appointments and vision correction materials.

Examples include:

- Contact lenses, eye glasses, and related materials
- Eye drops
- Eye examinations
- Laser eye surgery

## Prescription expenses

All legally obtained prescriptions, including any prescribed over-the-counter (OTC) medications.

Examples include:

- Allergy preventions and treatments
- Antacids and acid reducers
- Birth control pills
- Cold and flu medicines
- Cold sore remedies
- Decongestants
- Oral pain relievers
- Orthopedic shoe inserts
- Pain and fever relievers
- Sinus medications
- Snoring cessation aids
- Vitamins, herbal and fiber supplements
- Weight loss and dietary supplements

**NOTE:** You can only use funds up to the current balance in your account. If you have both a health savings account (HSA) and an FSA, your FSA is limited to only vision and dental expenses.

## OTC medications and treatments

You may use your healthcare payment card to purchase OTC medications\* and medical supplies that meet IRS standards. Such expenses may include:

Antiseptics and wound cleansers  
Bandages and dressings  
Contact lens solution and eye care related drops  
Contraceptives  
Denture adhesives, repair, pain relief, and cleansers  
Diagnostic products (thermometer, blood pressure monitor, cholesterol testing)  
Ear care  
First aid burn remedies, dressings, and supplies  
Foot care antifungal and treatments  
Hearing aid and medical batteries  
Home health care (limited segments)  
Incontinence protection and treatment products  
Insulin  
Reading glasses and maintenance accessories

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\* Some OTC medications may require a prescription.

## Limited Purpose FSA

The Limited Purpose FSA lets you set aside pre-tax money to pay for eligible out-of-pocket vision and dental expenses. You must be enrolled in the HSA preferred provider organization (PPO) plan option to use the Limited Purpose FSA.

## Dependent Care FSA

The Dependent Day Care FSA reimburses for dependent day care expenses incurred so you can work. Eligible expenses include day care for your children and any necessary care for adults who are your tax dependents. You can contribute up to \$5,000 per plan year to your Dependent Day Care FSA.

## Eligible Dependent Care FSA expenses

Eligible Dependent Day Care FSA expenses may include:

Before school and after school care (other than tuition)  
Custodial care for qualified dependent adults  
Licensed day care centers  
Nursery schools or preschools so you can work  
Care of an incapacitated adult who lives with you at least eight hours a day  
Child care at a day camp, nursery school, or by a private sitter

## Ineligible FSA expenses

Insurance expenses and any expenses merely beneficial to general health or for cosmetic reasons are not eligible. Examples include:

COBRA premiums  
Cosmetic surgery  
Cosmetics  
Deodorant  
Exercise equipment  
Fitness programs  
Funeral expenses  
Hair transplants  
Household help  
Illegal operations and treatments  
Insurance premiums  
Long-term care insurance premiums  
Maternity clothes  
Moisturizers and wrinkle creams  
Retiree medical insurance premiums  
Suntan lotions  
Teeth whitening services and products  
Toothpaste, toothbrushes, and mouthwash  
Vitamins taken to improve overall health

### FIND OUT MORE ABOUT YOUR FSA

Go to [premera.com](https://premera.com) or call 800-941-6121 for more information about your FSA and eligible expenses.