

Sample eligible expenses - *Limited FSA

* If you have a FSA with HSA the FSA becomes limited to Preventive, Dental and Vision services only

The following are examples of IRS allowable and disallowed healthcare expenses for Limited Flexible Spending Accounts (FSA). **Note: This is a list of examples only. The IRS could allow or disallow items depending on facts or circumstances and your employer's plan restrictions may apply.**

Check with your employer for specifics that apply to your benefit plan. Your plan may have additional restrictions and entire categories of eligible items may not qualify for reimbursement. For further guidance, refer to IRS publications 969, 502 and code section 213(d). These publications are available at your public library, at an IRS office or at www.irs.gov.

Preventive care:

Allowable expenses

- **Periodic health evaluations**, including tests and diagnostic procedures ordered in connection with routine examinations, such as annual physicals
- **Routine prenatal and well-child care**
- **Child and adult immunizations**
- **Tobacco cessation programs**
- **Obesity weight-loss screening***
- **Cancer screenings**
 - Breast cancer (e.g., Mammogram)
 - Cervical cancer (e.g., Pap test)
 - Colorectal cancer
 - Prostate cancer (e.g., PSA test)
 - Skin cancer
 - Oral cancer
 - Ovarian cancer
 - Testicular cancer
 - Thyroid cancer
- **Heart and vascular diseases screening**
 - Abdominal aortic aneurysm
 - Carotid artery stenosis
 - Coronary heart disease
 - Hemoglobinopathies
 - Hypertension
 - Lipid disorders
- **Infectious diseases screening**
 - Bacteriuria Chlamydial infection
 - Gonorrhea
 - Hepatitis B virus infection
 - Hepatitis C
 - Human immunodeficiency virus (HIV) infection
 - Syphilis
 - Tuberculosis infection
- **Mental health conditions and substance abuse screening***
 - Dementia
 - Depression
 - Drug abuse
 - Problem drinking
 - Suicide risk
 - Family violence
- **Metabolic nutritional, and endocrine conditions screening**
 - Anemia, iron deficiency
 - Dental and periodontal disease
 - Diabetes mellitus
 - Obesity in adults
 - Thyroid disease
- **Musculoskeletal disorders screening**
 - Osteoporosis

*Only the initial screenings are eligible for reimbursement from the Limited FSA. Once a condition is diagnosed, treatment would be reimbursable from your HSA, but may require a Letter of Medical Necessity.

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Preventive care (continued):

- **Obstetric and gynecologic conditions screening**
 - Bacterial vaginosis in pregnancy
 - Gestational diabetes mellitus
 - Home uterine activity monitoring
 - Neural tube defects
 - Preeclampsia
 - Rh incompatibility
 - Rubella
 - Ultrasonography in pregnancy
- **Pediatric conditions screening**
 - Child developmental delay
 - Congenital hypothyroidism
 - Lead levels in childhood and pregnancy
 - Phenylketonuria
 - Scoliosis, adolescent idiopathic
- **Vision and hearing disorders screening**
 - Glaucoma
 - Hearing impairment in older adults
 - Newborn hearing
- **Specifically disallowed**
 - Any service or benefit intended to treat an existing illness, injury or condition

Vision care:

- **Allowed expenses**
 - Optometrist's or ophthalmologist's fee
 - Eyeglasses
 - Contact lenses and cleaning solutions
 - LASIK and other surgical procedures
- **Specifically disallowed**
 - Lens replacement insurance

Dental and Orthodontic care:

- **Allowed expenses**
 - Dental care
 - Artificial teeth/dentures
 - Cost of fluoridation of home water supply advised by dentist
 - Braces, orthodontic service
- **Specifically disallowed**
 - Teeth bleaching
 - Tooth bonding that is not medically necessary

Employers and employees should consult their own attorneys or tax professionals for advice on any tax implications.