Health Care FSA Sample Eligible Expenses

Limited FSA ("L")
If you or your spouse contribute to a health savings account (HSA), you may sign-up for a limited purpose FSA.

Eligible expenses for a limited FSA include:
✓ Dental
✓ Vision
✓ Post-deductible medical

Post-deductible medical expenses include medical deductible expenses after you have incurred the first: $1,350/single or $2,700/family for 2018 and 2019.

Eligible Expenses
Acupuncture
Alcoholism / Drug treatment
Ambulance charges
Arch supports
Arthritis gloves
Bandages / Band-Aids
Bariatric surgery
Birthning classes
Blood pressure monitors
Blood sugar test kits/strips
Body scans (MRIs)
Brace for knees, wrists, back
Breast pumps and supplies
Chiropractic fees
Compression hosiery
Contact lenses & solutions ("L")
Contraceptives
Co-pays / Co-insurance
Costs for physical or mental illness confinement

CPAP devices
Crutches / cane
Deductible expenses
Dental implants ("L")
Dental treatment ("L")
Dentures ("L")
Diabetic supplies
Durable medical equipment
Eyeglasses & eye exam ("L")
First aid kits
Hearing aids & batteries
Incontinence supplies
Infertility treatment/IVF
Insulin supplies
Laboratory fees
Laser eye surgery ("L")
Liquid adhesive for small cuts
Mastectomy related bras
Medical alert bracelet
Medical records charges
Midwife
Mileage
Motion sickness wristband
Occlusal guards ("L")
Orthodontia/Invisalign ("L")
Orthopedic shoe insert
Ostomy, colostomy supplies
Ovulation monitor
Physical therapy
Prescriptions
Pregnancy test kits
Psychiatric care
Reading glasses ("L")
Rehydration solution
(Pedialyte for children)
Rubbing alcohol
Saline solution ("L")

Seeing eye dog & expenses
Shipping & handling for eligible medical expenses
Smoking cessation programs
Special communication equipment for the deaf
Speech therapy
Sterilization procedures
Sunscreen
Taxes on medical services & products
Telemedicine & online medical consultation
Telephone for hearing impaired
TENS machine
Thermometer
Transportation expenses primarily for medical care
Treatment for substance abuse
Vaccines
Walkers
Wheelchair & repairs
X-rays

Dual Purpose Expenses
Requires a doctor's note or Rx w/ a diagnosis stated

Over the Counter Medicines
Examples below, all require a valid prescription.
Acne medicine
Antacids
Antibiotic ointments
Anti-itch creams
Allergy medicines
Cold medicines
Diaper rash cream
Eye drops
Laxatives
Lice treatment
Motion sickness medicine
Pain relievers
Smoking cessation products
Wart remover treatments

Ineligible Expenses
"Concierge" annual fee
Cosmetic procedures
Court ordered DUI class
CPR class
Dental floss
Deodorant
Diet & weight loss foods
Electrolysis
Eyeglasses/contacts warranty
Face creams & moisturizers
Hearing aid warranty
Hand lotion
Imported drugs
Insect repellant
Insurance premiums
Late fees
Marital counseling
Maternity clothes
Mattresses
Medical marijuana
Missed appointment fee
Mouthwash
Non-prescription sunglasses
Prepayments
Sunglass clips
Teeth whitening
Toiletries & cosmetics
Toothbrushes & toothpaste
Vitamins for general health

FlexBank reimburses DAILY!
Within 24 business hours of receiving your claim form and itemized receipts, FlexBank will issue a check, or directly deposit your reimbursement into your personal bank account. It takes two business days for a direct deposit to appear in your bank account.

Review your account 24-7
You may view your account balance 24-7 at www.FlexBank.net.

Call FlexBank!
If you have questions and want to talk with someone in person vs. researching online, please call FlexBank’s office Monday – Friday from 8:00 am to 5:00 pm at 888.677.8373.

This is a partial listing of eligible expenses. For more information email Claims@FlexBank.net or call FlexBank at 888.677.8373.

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