



Eligible Expenses for Your WageWorks Healthcare Flexible Spending Account

You can use your WageWorks® Healthcare Flexible Spending Account (FSA) to pay for a wide variety of medical, dental, and vision care products and services for you, your spouse, and your dependents.

The IRS determines which expenses are eligible for reimbursement. This list identifies the eligibility of some of the most common expenses. A comprehensive list of eligible expenses is available in your WageWorks account.

EXPENSE	ELIGIBLE	EXPENSE	ELIGIBLE
Acne treatments (over-the-counter)	✓ (Rx)	Breast reconstruction surgery (following mastectomy)	✓ (Letter)
Acupuncture	✓	Breastfeeding classes	✓
Adoption (medical expenses related to)	✓	Cancer (fixed indemnity) insurance premiums	NO
Adoption fees	NO	Canker and cold sore treatments (over-the-counter)	✓ (Rx)
Alcoholism treatment	✓	Car modifications (as required for a medical condition diagnosed by a licensed healthcare professional)	✓ (Letter)
Allergy and sinus medicine and products (over-the-counter)	✓ (Rx)	Chest rubs (over-the-counter)	✓ (Rx)
Allergy medication	✓ (Rx)	Child or newborn care instruction	NO
Allergy treatments and products	✓ (Letter)	Childbirth classes (charges for mother only)	✓
Alternative dietary supplements (for treatment of a medical condition)	✓ (Letter)	Chiropractic care	✓
Alternative drugs, medicines and treatment products (for treatment of a medical condition)	✓ (Letter)	Chiropractic office visit or treatment	✓
Alternative healers (for treatment of a medical condition)	✓ (Letter)	Cholesterol test kits and supplies	✓
Ambulance and emergency health services	✓	Christian Science practitioners	✓
Anesthesia (for noncosmetic purposes)	✓ (Rx)	COBRA premiums (dental; paid with after-tax dollars only)	NO
Antacid (over-the-counter)	✓ (Rx)	COBRA premiums (medical; paid with after-tax dollars only)	NO
Antibiotic ointment (over-the-counter)	✓ (Rx)	COBRA premiums (other; paid with after-tax dollars only)	NO
Aspirin or other pain reliever (over-the-counter)	✓ (Rx)	COBRA premiums (prescription; paid with after-tax dollars only)	NO
Asthma medicines or treatments (over-the-counter)	✓ (Rx)	COBRA premiums (vision; paid with after-tax dollars only)	NO
Athletic treatments/braces	✓	Co-insurance (dental)	✓
Bandages and related items (over-the-counter)	✓	Co-insurance (medical)	✓
Birth control (over-the-counter)	✓ (Rx)	Co-insurance (prescription)	✓
Birth control (prescription or other)	✓	Co-insurance (vision)	✓
Blood pressure monitor	✓	Cold and flu medicine (over-the-counter)	✓ (Rx)
Body scans	✓	Cold and flu prevention (over-the-counter)	✓ (Rx)
Braille books and magazines (difference in cost only)	✓	Cold cream (over-the-counter)	NO
Breast pump (for a lactating woman)	✓	Compression or anti-embolism socks, stockings or hose	✓ (Letter)
		Concierge medical fees (billed for actual services received)	✓
		Concierge medical fees (billed for future availability of services, with no services actually received)	NO
		Contact lenses and solutions	✓
		Contraceptives (over-the-counter)	✓

(Letter)	In addition to the required detailed receipt, you need to submit a Letter of Medical Necessity, signed by your doctor, to verify this expense is a medically-necessary treatment for a known medical condition.
(Rx)	The Affordable Care Act (ACA) requires you submit an actual prescription from your doctor, in addition to the required detailed receipt. The prescription must be written by your doctor (on a prescription pad or form) and dated on or before the date you incurred the expense to verify this over-the-counter medicine is prescribed for a known medical condition.

EXPENSE	ELIGIBLE	EXPENSE	ELIGIBLE
Contraceptives (prescription)	✓	Dyslexia treatment	✓ (Letter)
Copayment (dental)	✓	Ear drops and wax removal (over-the-counter)	✓ (Rx)
Copayment (medical)	✓	Electrolysis	NO
Copayment (prescription)	✓	Emergency kits (over-the-counter)	NO
Copayment (vision)	✓	Exercise equipment or program (as treatment for a medical condition diagnosed by a licensed healthcare professional)	✓ (Letter)
Cord blood storage (for future treatment of a birth defect or known medical condition)	✓ (Letter)	Eye drops and treatments (over-the-counter)	✓ (Rx)
Cord blood storage (for unidentified future use)	NO	Eye examinations	✓
Corn and callus remover (over-the-counter)	✓ (Rx)	Eye related equipment/materials	✓
Corneal keratotomy	✓	Eye surgery or treatment to correct vision	✓
Cosmetic procedures or surgery	NO	Eyeglasses (prescription)	✓
Cosmetic procedures or surgery for birth defects, accidents, and/or disease	✓ (Letter)	Face lifts	NO
Cough drops and sore throat lozenges (over-the-counter)	✓ (Rx)	Feminine hygiene products	NO
Cough syrup (over-the-counter)	✓ (Rx)	Fertility monitor (over-the-counter)	✓
Counseling (for treatment of a medical condition)	✓	Fertility treatment (for employee, spouse or dependent)	✓
Counseling (marriage)	NO	Fertility treatment (for non-dependent surrogate)	NO
CPR classes (adult or child)	NO	First aid kits (over-the-counter)	✓
Crutches, canes, walkers or like equipment (purchase or rental)	✓	Fitness programs (as treatment for a medical condition diagnosed by a licensed healthcare professional)	✓ (Letter)
Dancing lessons (for treatment of a medical condition)	✓ (Letter)	Flu shots	✓
Deductible for dental plan	✓	Funeral expenses	NO
Deductible for prescription plan	✓	Gastrointestinal medication (over-the-counter)	✓ (Rx)
Deductible for vision plan	✓	Guide dog (dog, training, care)	✓
Dental care (for non-cosmetic purposes, including sealants)	✓	Hair regrowth products	NO
Dental co-insurance	✓	Hair removal	NO
Dental insurance/plan premiums (paid with after-tax dollars only)	NO	Hair transplant	NO
Dental products for general health	NO	Hair treatments	NO
Dental reconstruction (including implants)	✓	Hand lotion (over-the-counter)	NO
Dental veneers	✓ (Letter)	Health club dues (as treatment for a medical condition diagnosed by a licensed healthcare professional)	✓ (Letter)
Dental, oral, and teething pain products (over-the-counter)	✓ (Rx)	Health insurance/plan premiums (paid with after-tax dollars only)	NO
Dentures, bridges, etc.	✓	Health Savings Account (HSA) contributions	NO
Dermatology treatments and products	✓ (Letter)	Hearing aids and batteries	✓
Diabetic monitors, test kits, strips and supplies	✓	Herbal or homeopathic medicines (over-the-counter)	✓ (Letter)
Diagnostic services (dental or vision)	✓	Home improvements (as required for a medical condition diagnosed by a licensed healthcare professional)	✓ (Letter)
Diagnostic services (other than dental or vision)	✓	Hospital (fixed indemnity, \$x per day) insurance premiums	NO
Diaper rash ointments and creams (over-the-counter)	✓ (Rx)	Hospital services and fees	✓
Diapers and diaper services	NO	Household help	NO
Dietary supplements (for treatment of a medical condition)	✓ (Letter)	Humidifier, air filter and supplies	✓ (Letter)
Doula or birthing coach	✓ (Letter)	Illegal surgeries or substances	NO
Drug addiction treatment	✓	Immunizations	✓
Drugs (imported)	NO	Incontinence supplies	✓
Drugs and medicines (over-the-counter)	✓ (Rx)	Individual dental insurance/plan premiums (paid with after-tax dollars only)	NO
		Individual medical insurance/plan premiums (paid with after-tax dollars only)	NO
		Individual prescription insurance/plan premiums (paid with after-tax dollars only)	NO

EXPENSE	ELIGIBLE	EXPENSE	ELIGIBLE
Individual vision insurance/plan premiums (paid with after-tax dollars only)	NO	Mileage (for travel to/from eligible healthcare)	✓
Infertility treatment (for employee, spouse or dependent)	✓	Modified equipment (difference in cost only)	✓ (Letter)
Insulin, testing materials and supplies	✓	Monitors and test kits (over-the-counter)	✓
Insurance/plan premiums (paid with pre-tax dollars)	NO	Motion sickness medication (over-the-counter)	✓ (Rx)
Lab (medical)	✓	Nasal sprays	✓ (Rx)
Laboratory fees	✓	Nasal strips (over-the-counter)	✓ (Rx)
Lactose intolerance medication (over-the-counter)	✓ (Rx)	No show fees charged by healthcare provider	NO
Lamaze classes (charges for mother only)	✓	Nonprescription drugs and medicines (for non-cosmetic purposes)	✓ (Rx)
Laser eye surgery	✓	Norplant insertion or removal	✓
Lasik	✓	Nursing services (wages and taxes)	✓
Late payment fees charged by healthcare provider	NO	Nutritional supplements (for treatment of a medical condition)	✓ (Letter)
Laxatives (over-the-counter)	✓ (Rx)	OB/GYN fees	✓
Learning disability treatments	#	Occlusal guards to prevent teeth grinding	✓
Lice treatment (over-the-counter)	✓ (Rx)	Occupational therapy (related to a medical condition or disability)	✓
Listening therapy	✓	Office visits (chiro)	✓
Lodging (limited to \$50 per night for patient to receive medical care and \$50 per night for one caregiver)	✓ (Letter)	Office visits (dental)	✓
Long-term care premiums (up to IRS tax-free limit, see IRS Publication 502)	NO	Office visits (medical)	✓
Long-term care services	NO	Office visits (psych/therapy)	✓
Long-term disability insurance premiums	NO	Office visits (vision)	✓
Magnetic therapy (over-the-counter)	✓ (Letter)	Operations (for non-cosmetic purposes)	✓
Massage therapy (for treatment of a medical condition)	✓ (Letter)	Operations (for vision and dental only)	✓
Mastectomy-related special bras	#	Optometrist/ophthalmologist fees	✓
Maternity clothes	NO	Organ transplants (recipient and donor)	✓
Medical abortion	✓	Ortho keratotomy	✓
Medical co-insurance	✓	Orthodontia (braces and retainers)	✓
Medical equipment (for treatment of medical condition) and repairs	✓	Orthopedic and surgical supports	✓
Medical insurance/plan premiums (paid with after-tax dollars only)	NO	Orthopedic shoes and inserts (difference in cost only of specialized orthopedic shoe over like non-specialized shoe)	✓ (Letter)
Medical literature, books, pamphlets or audio	NO	Orthotics	✓
Medical monitoring and testing devices	✓	Ovulation monitor (over-the-counter)	✓
Medical records charges	✓	Oxygen	✓
Medical savings account (MSA) contributions	NO	Parental fees (billed for actual services received; for disabled children)	✓
Medical supplies (for treatment of a medical condition)	✓	Parental fees (billed for future availability of services, with no services actually received; for disabled children)	NO
Medicare alternative insurance/plan premiums (paid with after-tax dollars only)	NO	Physical exams	✓
Medicare alternative insurance/plan premiums (vs. Part A & Part B, paid with after-tax dollars only)	✓	Physical therapy	✓
Medicare Part B insurance	NO	Physician retainer fee (for on-call or concierge services)	NO
Medicare supplement policy premiums	✓	Pregnancy tests (over-the-counter)	✓
Midwife	✓	Prescription co-insurance	✓
Mileage (for travel to/from anything other than eligible care)	NO	Prescription drugs (for non-cosmetic purposes)	✓
		Prescription drugs for cosmetic purposes	NO
		Psych/therapy	✓

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(Rx)	The Affordable Care Act (ACA) requires you submit an actual prescription from your doctor, in addition to the required detailed receipt. The prescription must be written by your doctor (on a prescription pad or form) and dated on or before the date you incurred the expense to verify this over-the-counter medicine is prescribed for a known medical condition.

EXPENSE	ELIGIBLE	EXPENSE	ELIGIBLE
Radial keratotomy (RK)	✓	Teeth bleaching or whitening	NO
Reading glasses (over-the-counter)	✓	Toothpaste, medicated (difference in cost only of medicated toothpaste over the standard toothpaste)	✓ (Rx)
Sales tax, shipping and handling fees (for any eligible expense)	✓	Toothpaste, toothbrush, floss, etc.	NO
Sleep aids and sedatives (over-the-counter)	NO	Transgender treatments/surgery	✓ (Letter)
Smoking cessation (programs/counseling)	✓	Transportation, parking and related travel expenses (essential to receive eligible care)	✓
Smoking cessation drugs (prescription)	✓	Transportation, parking and related travel expenses, for non-eligible expenses	NO
Smoking cessation gum or patches (over-the-counter)	✓ (Rx)	Tubal ligation	✓
Special equipment	✓ (Letter)	Tuition or educational classes (for a specific medical condition)	✓ (Letter)
Special foods (gluten-free, salt-free or other for treatment of a medical condition; difference in cost only)	✓ (Letter)	Urological products	✓
Special school (for mental and physical disabilities)	✓ (Letter)	UV protection clothing	NO
Speech therapy	✓	Vaccinations	✓
Spermicidals	✓ (Rx)	Varicose vein removal surgery (for medical care)	✓
Sterilization	✓ (Rx)	Vasectomy	✓
Student health fees for dental services (billed for actual services received)	✓	Viagra and similar prescription medications	✓
Student health fees for dental services (no services actually received; billed for future availability of services)	NO	Vision care	✓
Student health fees for medical services (billed for actual services received)	✓	Vision co-insurance	✓
Student health fees for medical services (no services actually received; billed for future availability of services)	NO	Vision insurance/plan premiums (paid with after-tax dollars only)	NO
Student health fees for prescription services (no services actually received; billed for future availability of services)	NO	Vision products (over-the-counter)	✓
Student health fees for prescriptions (billed for actual services received)	✓	Vitamins (prescription)	✓
Student health fees for vision services (billed for actual services received)	✓	Vitamins for general health purposes (over-the-counter)	NO
Student health fees for vision services (no services actually received; billed for future availability of services)	NO	Walking aids (canes, walkers, crutches and related supplies)	✓
Sunglasses (over-the-counter)	NO	Warranties or other charges for future anticipated services (with none actually received)	NO
Sunglasses (prescription)	✓	Wart removal treatments (over-the-counter)	✓ (Rx)
Sunscreen with SPF <15 or suntan lotion (over-the-counter)	NO	Weight loss counseling	✓ (Letter)
Sunscreen with SPF 15+ and "broad spectrum", sunburn creams and ointments (over-the-counter)	✓	Weight loss drugs (for treatment of a medical condition)	✓ (Rx)
Supplies (for treatment of a medical condition)	✓	Weight loss foods	NO
Surgery (for non-cosmetic purposes)	✓	Weight loss program (for treatment of a medical condition)	✓ (Letter)
Swimming lessons (for treatment of a medical condition)	✓ (Letter)	Weight loss program (to improve or maintain general health)	NO
		Wheelchair and repairs	✓
		Wound care (over-the-counter)	✓
		X-ray fees (dental)	✓
		X-ray fees (medical)	✓

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