

HSA Eligible Medical

Medical Services	<ul style="list-style-type: none"> • Acupuncture • Alcohol/drug treatment • Ambulance services • Chiropractic care • Deductibles and co-pays • Emergency room co-pays • Fertility treatment/drugs • Flu shots • Hearing exams • Hospital services • Injections and vaccinations • Legal abortion – <i>some plans exclude this service</i> • Office visit co-pays • Pediatric services • Podiatry services • Physical therapy • Psychological counseling • Routine physicals • Smoking cessation program • Speech therapy • Vasectomy • Weight loss programs (prescribed) • Well baby care
Lab & Diagnostic Fees	<ul style="list-style-type: none"> • Blood tests • Diagnostic body scans • Laboratory fees • Stool analysis • Urine analysis • X-Rays
Medication	<ul style="list-style-type: none"> • Insulin/supplies • Prescription drugs • Over-the-counter drugs & medicines (<i>see OTC list below</i>)
Medical Supplies & Other Services	<ul style="list-style-type: none"> • Band-aids/gauze pads • Blood pressure monitors • Brace/Splint • Breast pumps and supplies • Contact lens solution • Crutches • Diabetic supplies • First aid kits • Guide dog/service animals & their care • Hearing aids/batteries • Hot packs/Cold packs • Medical Alert bracelet/necklace • Menstrual care products (pads, tampons, etc.) • Orthopedic Shoes • Pregnancy tests and Ovulation monitors • Thermometers • Walker/Wheelchair
Dental Services	<ul style="list-style-type: none"> • Crowns/Bridges (cosmetic veneers not covered) • Dentures • Dental X-rays • Exams • Extractions • Fillings • Gum Treatment/Periodontal Maintenance • Occlusal/ Bite Guards and Retainers • Oral surgery • Root Canals • Teeth cleaning (not bleaching) • Orthodontia/Braces
Vision	<ul style="list-style-type: none"> • Eye exams • Glasses/contacts/lens solution (includes non prescription reading glasses) • Lasik eye surgery • Prescription sunglasses

Over-The-Counter (OTC) Drugs, Medicines & Treatments	<p>Effective January 1, 2020, expenses for Over-The-Counter (OTC) drugs and medicine are eligible for reimbursement from a Health Savings Account <i>without</i> a prescription from a physician.</p> <ul style="list-style-type: none"> • Acne Treatments/Medications • Allergy medicines • Analgesics – Fever reducers • Anti-diarrhea medication • Anti-itch medication • Anti-nausea medication • Antihistamines • Antacids • Asthma treatments • Athletes foot medication • Birth control – <i>Some plans exclude this</i> • Cold and flu medications • Cold sore remedies • Cough syrups • Diaper rash ointments • First aid cream • Hemorrhoid medication • Laxatives • Lice treatment • Medicated Chapstick • Motion sickness pills • Muscle & joint pain relievers • Nicotine patches/gum • Pain relievers • Pedialyte • Sinus medicine/nasal sprays • Sleeping aids • Sore throat sprays/lozenges • Toothache/Teething Pain relievers • Wart remover treatments • Vapor rubs • Visine/eye drops • Yeast infection treatments
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Ineligible Expenses

The following expenses cannot be reimbursed under an HSA	<ul style="list-style-type: none"> • Cosmetic procedures • Hair transplants • Hand lotions • Health club/Fitness dues • Household help • Illegal treatments/operations • Prescriptions imported from outside the U.S. • Items & services merely beneficial to general health (i.e., Multivitamins, probiotics, etc.) • Kleenex • Marriage counseling • Medical concierge/estimates/prepayments • Missed appointment/late fees • Pediasure • Personal care items (i.e. soap, toothbrush, toothpaste, floss, shampoo, conditioner, deodorant, creams) • Rogaine/Minoxidil/Propecia • Teeth whitening/bleaching • Treatment for varicose veins (may be eligible if medically necessary) • Veneers • Vitamins/nutritional supplements (may be eligible with physician's note) • Insurance Premiums - Insurance premiums are generally not covered. They are eligible if they are for... <ul style="list-style-type: none"> ○ Long-term care insurance, subject to limit based on age, adjusted annually. ○ Health care continuation coverage, such as coverage under COBRA. ○ Health care coverage while receiving unemployment compensation under federal or state law. ○ Medicare and other health care coverage if you were 65 or older, excluding premiums for Medicare supplemental policy, such as Medigap.
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***** For a detailed list of HSA Eligible Products & Services visit <http://www.BasicOnline.com/NEO> and select the **FSA Store** link at the bottom of the page. Scroll down to the bottom to Tools to access the **Eligibility Checker**. *****