

# **ELIGIBLE MEDICAL EXPENSES**

## **WHAT CAN I SPEND MY DOLLARS ON?**

It sure is easy.

Use money set aside in your account for eligible medical expenses incurred by you, your spouse or your children. Remember to keep your receipts in case they are needed to verify the medical expense. Use the lists below for reference, but keep in mind these lists do not include all eligible/ineligible expenses.

Visit FSAStore.com/Surency or HSAStore.com/Surency to access the largest selection of FSA or HSA eligible expenses online and use your Surency Benefits Card to purchase items!

Ouestions? Call 866-818-8805 or visit Surency.com to view a complete list of eligible expenses.

#### **ELIGIBLE EXPENSES**

Over-the-counter medications, without a prescription, and menstrual products can now be purchased with your account dollars.

- + Acid Controllers
- Allergy & Sinus Medications
- + Antibiotic Products (Neosporin, etc.)
- **Anti-Gas Treatments**
- Anti-Itch & Insect Bite Treatments
- Baby Rash Ointments/Creams
- + Cold Sore Remedies
- + Corn & Callus Treatments (Foot Care) + Menstrual Liners
- + Cough, Cold & Flu Medications
- + Digestive Aids

- + Feminine Anti-Fungal & Anti-Itch
- + First Aid Supplies
- + Hemorrhoidal Preparations
- + Insoles
- + Laxatives
- + Menstrual Pain Relievers
- + Menstrual Cups
- + Menstrual Pads
- + Menstrual Sponge

- + Motion Sickness Treatments
- + Nasal Sprays, Drops & Inhalers
- + Oral Treatments (Orajel, Mouth Sore Treatment, etc.)
- + Pain Relievers (Aspirin, Tylenol, Advil)
- + Respiratory Treatments & Vapor **Products**
- + Tampons
- + Sleep Aids & Sedatives
- + Wart Removers

#### OTHER ELIGIBLE EXPENSES

- + Adult Diapers
- Ambulance
- Athletic Care (ACE Bandages, Braces, etc.)
- + Blood Pressure Monitors
- + Catheters
- Certain Insurance Premiums - HSA Only
- + Cholesterol Testing
- + Chiropractic Manipulations
- Contact Lenses, Solutions & Cleaners
- Contraceptives

- + Dental Treatment
- + Denture Adhesives & Repair + Immunizations
- + Denture Pain Relief & Cleansers
- + Diabetes Testing, Diabetes **Supplies**
- + Doctor's Office Visits
- Eyeglasses (Prescription & Reading)
- + Glucosamine and/or Chondroitin
- Hand Sanitizer\*
- + Hearing Aids (& Batteries)

- + Hospital Services
- + Hot/Cold Therapy Packs
- + Infertility Treatments
- + Insulin
- + Masks\*
- + Orthodontia
- + Orthopedic Supports
- + Ovulation Kits
- + Pap Smears
- + Physical Therapy
- + Prescription Drugs
- + Prenatal Care (Vitamins)
- + Psychiatric/Psychologist Care

- + Sanitizing Wipes\*
- + Smoking Deterrents (Nicorette, etc.)
- + Splints & Casts
- + Thermometers
- + Transplants
- + Vision Exams
- + Wheel Chairs
- + X-ray Fees

\*Only eligible for the primary purpose of preventing the spread of COVID-19

### **INELIGIBLE EXPENSES**

- + Burial Expenses
- + Cosmetic Procedures
- + Dance Lessons
- + Diapers
- + Exercise Equipment\*
- + Facelifts
- + Fitness Programs
- + Funeral Expenses

- + Health Club Fees
- + Household Help
- + Illegal Treatments
- + Items Covered by Insurance + Tanning
- + Marriage Counseling
- + Maternity Clothes
- + Nutritional Supplements\*
- + Piercings

- + Special Education Costs\*
- + Swimming Lessons
- + Teeth Whitening or Bleaching
- + Toiletries (Toothbrush, Toothpaste, etc.)
- + Vacations

- + Vitamins\*
- + Sunglasses (non-prescription) + Warranties (for Eyeglasses or Hearing Aids)
  - + Weight Loss Programs\*

\*requires a letter of necessity or valid prescription to be eligible