HSA/HRA Qualified Medical Expenses

This is a quick reference list of expenses that can be reimbursed from a health savings account (HSA) or a health reimbursement arrangement (HRA).

Medical expenses allowed as deductions are determined by Section 213 (d) of the Internal Revenue Code. This list applies to reimbursement under an HSA as well. However, eligible medical expenses under an HRA draw from this list of deductible medical expenses, but will exclude some expenses in the plan design. For more detailed information, please refer to IRS Publication 502 titled, "Medical and Dental Expenses," Catalog Number 15002Q. You can order the publication by calling (800) TAX FORM or see it online at www.irs.gov/pub/irs-pdf/p502.pdf. For tax advice, please seek the services of a competent professional.

Eligible Medical Expenses			
Abdominal supports	Convalescent home (for medical treatment only)	Psychotherapy	
Acupuncture	Crutches	Radium therapy	
Air conditioner (when necessary for relief from	Dental treatment	Registered nurse	
difficulty in breathing)	Dental X-rays	Special school costs for the	
Alcoholism treatment	• Dentures	handicapped	
Ambulance	Dermatologist	Spinal fluid test	
Anesthetist	Diagnostic fees	• Splints	
Arch supports	Diathermy	Sterilization	
Artificial limbs	Drug addiction therapy	Surgeon	
Autoette (when used for relief of sickness or	Drugs (prescription)	Telephone or TV equipment to	
disability)	Elastic hosiery (prescription)	assist the hard-of-hearing	
Birth control pills (by prescription)	Eyeglasses	Therapy equipment	
Blood tests	Fees paid to health institute prescribed by a	Transportation expenses	
Blood transfusions	doctor	(relative to health care)	
Braces	FICA and FUTA tax paid for medical care service	Ultraviolet ray treatment	
Cardiographs	Fluoridation unit	Vaccines	
Chiropractor	Guide dog	Vasectomy	
Christian Science practitioner	Gum treatment	Vitamins (if prescribed)	
Contact lenses	Psychoanalyst	Wheelchair	
Contraceptive devices (by prescription)	Psychologist	• X-rays	
Eligible Over-the-Counter Drugs			
Antacids	Sinus medications and nasal sprays	Wart removal medication	
Allergy medications	Nicotine medications	Antibiotic ointments	
Pain relievers	Nasal sprays	 Suppositories and creams for 	
Cold medicine	Pedialyte®	hemorrhoids	
Anti-diarrhea medicine	First aid creams	Sleep aids	
Cough drops and throat lozenges	Calamine lotion	Motion sickness pills	

Ineligible Medical Expenses		
Advance payment for services to be rendered next year Athletic club membership Automobile insurance premium allocable to medical coverage Boarding school fees Bottled water Commuting expenses of a disabled person Cosmetic surgery and procedures Cosmetics, hygiene products and similar items Funeral, cremation or burial expenses	Health programs offered by resort hotels, health clubs and gyms Illegal operations and treatments Illegally procured drugs Maternity clothes Penalties for failure to precertify according to health plan rules Premiums for life insurance, income protection, disability, loss of limbs, sight or similar benefits Scientology counseling Social activities	Special foods and beverages Specially designed car for the handicapped other than an Autoette or special equipment Swimming pool Travel for general health improvement Tuition and travel expenses to send a problem child to a particular school
Ineligible Over-the-Counter Drugs		
 Toiletries (including toothpaste) Acne treatments Lip balm (including ChapStick® or Carmex®)	Cosmetics (including face cream and moisturizer) Medicated shampoos and soaps Vitamins (daily) Fiber supplements	Dietary supplements Weight-loss drugs for general well-being Herbs

In general, health insurance may not be purchased with HSA funds. There are four exceptions; HSA funds can be used to pay for:

- 1) A health plan during any period of continuation coverage required under any federal law
- 2) A qualified long-term care insurance contract
- 3) A health plan during a period in which the individual is receiving unemployment compensation under any federal or state law
- 4) For individuals over age 65, premiums for Medicare Part A, B, or D, a Medicare HMO and/or the employee share of premiums for employer-sponsored health insurance, including premiums for employer-sponsored retiree health insurance