Under Your Health Care Flexible Spending Account (HFSA)

General Information

Your employer offers a health care flexible spending account benefit to help offset your out of pocket health care costs. Ceridian provides administrative services for the HFSA, including claims processing and customer service.

Electing HFSA coverage

You determine an amount to be withheld from your annual pay before taxes, your employer deducts that amount in equal installments from your paychecks, and you may be reimbursed from the HFSA for what the IRS considers medical care expenses.

Use it or lose it

You and your employer share a small level of risk in electing and providing this benefit. If your annual eligible medical expenses are less than your annual election amount, you forfeit any unused balance. For this reason, it's important to accurately predict your medical expenditures.

Uniform coverage rule

On the other hand, your employer is required to fund your HFSA up to your annual election regardless of how much you have actually contributed as of the date you submit a claim for reimbursement. This means your full annual election amount is available to you for reimbursement as of the first day of coverage.

Definition of medical care

In the context of your HFSA, the IRS defines medical care as the diagnosis, cure, mitigation, treatment, or prevention of disease, or for the purpose of affecting any structure or function of the body, and transportation primarily for and essential to medical care. Neither Ceridian nor your employer has the discretion to reimburse expenses that don't meet this definition, or the tax benefits to all participating employees could be lost.

When are expenses incurred?

Under IRS rules, HFSA expenses are incurred when the medical services are provided, not when you pay or are billed for them.

Cosmetic surgery is not medical care

Medical care does not include cosmetic surgery or other similar procedures, unless the surgery or procedure is necessary to ameliorate a deformity arising from, or directly related to, a congenital abnormality, a personal injury resulting from an accident or trauma, or disfiguring disease. Cosmetic surgery means any procedure (including drug regimens) that is directed at improving the patient's appearance and does not meaningfully promote the proper function of the body or prevent or treat illness or disease.

Physician's statement

Some expenses, such as most drugs, crutches or surgery, are obviously incurred for medical reasons, while others, such as massage or cosmetic surgery, can be incurred for either medical or personal reasons. In order to be reimbursed from a HFSA, such dual purpose expenses must be supported with a physician's statement to demonstrate they are truly for medical care. Other expenses, such as expenses for learning disabilities, may require a statement from the teacher that he or she specializes in treating such conditions, in addition to a physician's statement. You must submit a physician's statement when requested. You are more likely to receive reimbursement if you properly complete and submit Ceridian's form than if you ask your physician to compose one — there are numerous technical requirements of which most physicians are not aware. Submitting a physician's statement, including Ceridian's form, does not quarantee you will be reimbursed.

Click here for Ceridian's physician's statement form.

Partially eligible expenses

Certain expenses are only partially eligible. Generally, the cost of a special item (such as a telephone for the hearing impaired) used for medical care is eligible to the extent it exceeds the cost of a regular such item. You may be asked to document the difference in price between special and normal items.

Orthodontia expenses

The IRS recognizes that orthodontia services are generally provided over an extended period of time, often with no direct relationship between the date of treatment and the payments. As a result, the rules for reimbursing orthodontia are slightly different than other health care expenses.

Click here for more information on orthodontia.

To help provide you with guidance on which expenses may be reimbursed through your HFSA, we have provided a table of of common expenses on the following pages. This table will aid in determining which expenses are eligible, ineligible or may be eligible when submitted with a physician's statement.



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Type of Expense	Ruling	Notes, examples
Abortion	Eligible	
Acne surgery	Eligible	
Acupuncture	Eligible	
Adoption (medical expenses only)	Eligible	
Air purification equipment	Ineligible unless you submit a physician's statement	Examples: humidifier, vaporizers, air filtration, replacement filter, allergy home air system
Alcoholism treatment	Eligible	Can include meals and lodging at inpatient facility
Allergy medical equipment	Ineligible unless you submit a physician's statement Eligible amount limited to the cost above regular items	Examples: bed pads, sheets, pillows, special vacuum, vacuum filter, home improvements
Ambulance	Eligible	
Anesthesiologist fees	Eligible	
Anesthesiologist fees for cosmetic or other ineligible procedures	Ineligible	
Appraisal for capital expenditure	Ineligible unless you submit a physician's statement Capital expenditure must also be eligible	See Capital expenses
Artificial insemination	Eligible	
Artificial limb	Eligible	
Artificial teeth	Eligible	
Autopsy of deceased participant, spouse or dependent	Ineligible	



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Type of Expense	Ruling	Notes, examples
Babysitting	Ineligible	
Bandages	Eligible	Examples: Ace, Tru-fit, Futuro, Band-Aid, Brace, Liquid Adhesive
Bath and shower aids	Eligible	Examples: Medline, Nova, tub grab bar, shower bench, chair, stool
Before/after surgery products	Eligible	Examples: Impact, Recover, Peptinex, Resource, Tolerex, Vivonex
Birth control pills	Eligible	
Blepharoplasty (eyelid surgery)	Ineligible unless you submit a physician's statement	
Blood pressure products		Can include monitor and kits
Body scans, health screening		
Botox	Ineligible unless you submit a physician's statement	
Braille books and magazines	Eligible Eligible amount limited to the cost above regular items	
Breast feeding cold/heat packs	Eligible	
Breast feeding supplies	Ineligible unless you submit a physician's statement	Examples: breast pump, breast pads, breast milk freezing bags, breast shells, cooler tote bags for pumped breast milk
Breast feeding, lactation consultation or classes	Ineligible unless you submit a physician's statement	
Breast reconstruction surgery following mastectomy	Eligible	
Breast milk supplement	Ineligible unless you submit a physician's statement	Must demonstrate treatment of medical condition, not simply choice or convenience
Bug repellent	Ineligible unless you submit a physician's statement	



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Type of Expense	Ruling	Notes, examples
COBRA premiums	Ineligible	
Cancellation fee for orthodontia contract	Ineligible	
Capital expenditures	Ineligible unless you submit a physician's statement Eligible amount limited to difference between home's value before and after the improvement	Special equipment and modifications to the home, generally for handicapped access or use See Publication 502 for a list of improvements that IRS says doesn't increase property value (ramps, railings, etc.) You must submit appraisals of the home's value before and after the improvement
Car modifications to accommodate disability	Ineligible unless you submit a physician's statement	
Car to accommodate a wheelchair	Ineligible unless you submit a physician's statement Eligible amount limited to the cost above a nonmedically accommodated car	
Chelation therapy	Eligible	
Childbirth classes	Eligible Eligible amount limited to half the cost	Eligible for the mother only
Childcare	Ineligible	
Chinese herbal doctor visit	Ineligible unless you submit a physician's statement	Must be legal in the state
Chiropractic care plans	Ineligible	
Chiropractor	Eligible	
Christian Science practitioner	Eligible	Must be for care that corresponds to medical care



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Type of Expense	Ruling	Notes, examples
Circumcision	Eligible	
Clip-ons for glasses	Ineligible	Reason: no corrective feature See Sunglasses, nonprescription
Coinsurance	Eligible	
Colon cleansing	Ineligible unless you submit a physician's statement	Examples: Colonix, Colonics, including prescription and OTC
Condoms	Eligible	Examples: Durex, Lifestyles, Trojar
Co-pays, co-payments	Eligible	
Corrective eye surgery	Eligible	Examples: radial keratotomy, Lasik
Cosmetic surgery	Ineligible unless you submit a physician's statement	
Cotton balls, swabs (Q-Tips)	Ineligible	
Cranial technology treatment, products to correct plagiocephaly	Eligible	
Crutches	Eligible	Rental or purchase
Dancing lessons	Ineligible unless you submit a physician's statement	
Deductibles	Eligible	
Dental treatment: general	Eligible	Examples: X-rays, fillings, extractions, dentures, implants, crowns, sealants
Dental treatment: veneers and bonding	Ineligible unless you submit a physician's statement	Usually cosmetic



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Type of Expense	Ruling	Notes, examples
Denture expenses	Eligible	Examples: Cushion Grip, Dentemp, Ezo, Fixodent, Polident, Sea-bond, Super Poli-grip Can include repair and supplies
Dental treatment: teeth whitening	Ineligible	
Dependent care expenses	Ineligible	
Dermatologist	Eligible	
Diabetes management class	Eligible	
Diabetic supplies	Eligible	Examples: Accu-chek, Ascensia, Freestyle, One Touch, Precision, BD Monitoring system, insulin pump, glucose kit, test strips, lancets, syringes, alcohol swabs
Diapers, diaper service for infants, children	Ineligible	See incontinence supplies
Diet and weight-loss program fees	Ineligible unless you submit a physician's statement	
Diet and weight-loss drugs	Ineligible unless you submit a physician's statement	Examples: membership and periodic meeting fees for programs such as Jenny Craig, Weight Watchers, etc.
Doula	Ineligible	Also known as doolah or abdula
Drug addiction treatment	Eligible	Can include: meals and lodging at inpatient facility
Drug tests, screenings	Eligible	Including OTC



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Type of Expense	Ruling	Notes, examples
Ear wax removal system	Ineligible unless you submit a physician's statement	Examples: Murine, Otix drops, Physician's Choice
Ear piercing	Ineligible	
Ear plugs	Ineligible unless you submit a physician's statement	
Egg donor expenses	Eligible	Can include surgery, agency fees, testing
Electro-dermal screening	Ineligible unless you submit a physician's statement	
Employment taxes for nursing services paid by participant	Eligible	Include as medical expense only the amount of taxes paid for eligible medical services Examples: Social Security tax, FUTA Medicare tax
Epsom salt	Ineligible unless you submit a physician's statement	
Exercise ball	Ineligible unless you submit a physician's statement	Labor, colic or Yoga ball
Exercise classes	Ineligible unless you submit a physician's statement	Yoga, pilates, tai chi
Exercise equipment	Ineligible unless you submit a physician's statement	
Eyewear: Coatings, tints	If the cost is itemized on the receipt or EOB separately from the lens costs, the expense is Ineligible unless you submit a physician's statement	Examples: anti-reflective (AR), scratch resistant (SR), ultra-violet (UV), Crizal tints, polarized, photo chromic, transition, mirror, double gradient
Eyewear: Clip-ons for glasses	Ineligible unless you submit a physician's statement	
Eyewear: Contact lenses, prescription	Eligible	



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Type of Expense	Ruling	Notes, examples
Eyewear: Contact lenses, non-prescription	Ineligible	
Eye exam	Eligible	
Eyewear: Eye patches	Eligible	Example: Coverlet
Eyewear: Frames (without lens)	Eligible	
Eyewear: Lens cleaning supplies, contact cleaning procedure	Eligible	
Eyewear: accessories	Ineligible	Examples: cases, sports wraps and chains
Eyewear: OTC reading glasses	Eligible	
Eyewear: Prescription lens	If the cost is itemized on the receipt or EOB separately from the lens costs, the expense is Ineligible unless you submit a physician's statement	Examples: Lenses (with and without frames), including progressive (bifocals, trifocals) and polycarbonate (plastic)
Eyewear: prescription swim, prescription sport and prescription safety goggles	If the cost is itemized on the receipt or EOB separately from the lens costs, the expense is Ineligible unless you submit a physician's statement	
Eyewear: breakage protection plans, warranties, etc.	Ineligible	
Eyewear: Sunglasses, non-prescription	Ineligible unless you submit a physician's statement	
Eyewear: Sunglasses, prescription	If the cost is itemized on the receipt or EOB separately from the lens costs, the expense is Ineligible unless you submit a physician's statement	



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Type of Expense	Ruling	Notes, examples
Face lift	Ineligible	See Cosmetic surgery
Face mask to prevent airborne diseases	Ineligible unless you submit a physician's statement	Example: Liberty
Fees for interim, short term storage of sperm, egg, embryo	Ineligible unless you submit a physician's statement	Physician's statement must demonstrate conception procedures are immediate or currently in process
Female contraceptives and spermicidal products	Eligible	Examples: Advantage-s, Encare, Gynoll, Ortho, VCF, including films, gels, inserts
Feminine hygiene products	Ineligible	Examples: FDS, Massengill, Summer's Eve
Feminine products	Ineligible	Examples: Kotex, o.b., Playtex, Tampax, Always, Stayfree, sanitary napkins, pads, tampons
Fertility treatments	Eligible	Examples: In vitro fertilization (IVF), GIFT, shots, treatment, surgery Expenses of a surrogate are not eligible; see Surrogate for in vitro embryo
Fiber supplements	Ineligible unless you submit a physician's statement	Examples: Citrucel, Metamucil, Fiber Con
First aid kits	Eligible	Johnson & Johnson First Aid Kit, American Medical Association All Purpose First Aid Kit
Fitness program	Ineligible unless you submit a physician's statement	
Fluoridation device	Ineligible unless you submit a physician's statement	
Foods-Diet and weight-loss foods	Ineligible	Examples: Jenny Craig, Nutrisystem, Weight Watchers
Foods, special	Ineligible unless you submit a physician's statement Eligible amount limited to the cost above regular foods	Examples: wheat-free food for individuals who are allergic to wheat, lactose intolerant foods See Foods- Diet and weight-loss foods
Funeral expenses	Ineligible	



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Type of Expense	Ruling	Notes, examples
Gauze pads, dressing, and tape	Eligible	3m, Nexcare, Curity, Dome, Johnson & Johnson
Genetic testing to determine possible defects	Eligible	
Genetic testing to determine sex	Ineligible	
Gloves	Ineligible unless you submit a physician's statement	Examples: Cara, Playtex, Safeskin
Guide dog or other animal for visually or hearing impaired	Ineligible unless you submit a physician's statement	Participant must indicate this is a working animal Can include purchase, training, care, food
Gym membership fees, health club dues	Ineligible unless you submit a physician's statement	
HMO premiums	Ineligible	
Hair transplant	Ineligible	
Hand-held showerhead	Ineligible unless you submit a physician's statement	
Health club medical screening tests	Ineligible unless you submit a physician's statement	EKG, cholesterol count
Hearing aid insurance	Ineligible	
Hearing aids and batteries	Eligible	
Home health care, at home nursing services		
Homeopathic provider treatment	Ineligible unless you submit a physician's statement	
Hospital services	Eligible	Can include treatment, lodging, meals
Household help	Ineligible	See Nursing services



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Type of Expense	Ruling	Notes, examples
Hypnosis	Ineligible unless you submit a physician's statement	
Hypnotherapy, hypnosis	Ineligible unless you submit a physician's statement	
Illegal drugs	Ineligible	Example: Marijuana
Illegal operations, treatment	Ineligible	
Incontinence supplies		Examples: Depends, Poise, Serenity, briefs, guards, pads, bed pads, shields, undergarments
Infant medicine dispenser	Eligible	Numi-med
Infertility treatments	Eligible	Examples: In vitro fertilization (IVF), GIFT, shots, treatment, surgery Expenses of a surrogate are not eligible; see Surrogate for in vitro embryo
Insurance premiums	Ineligible	
Interest on orthodontia loans	Ineligible	
Inversion table, inversion therapy	Ineligible unless you submit a physician's statement	
Invisiline (clear, removable aligners to straighten teeth (braces))	Eligible	
Laboratory fees	Eligible	
Lamaze classes	Eligible Eligible amount limited to half the cost	Eligible for the mother only
Language training	Ineligible unless you submit a physician's statement	For disabled or dyslexic child



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Type of Expense	Ruling	Notes, examples
Lead-based paint removal	Ineligible unless you submit a physician's statement	Medical condition must be lead poisoning or similar
Learning disability: school teacher, tutor	Ineligible unless you submit a physician's statement	You must also demonstrate that the school, teacher or tutor specializes in teaching learning-disabled children
Legal fees related to divorce		
Legal fees related to proceeding to authorize treatment for mental illness	Eligible	
Lodging during eligible trip for person receiving care and for person medically required to be present	Eligible	Limit of \$50.00 per night per person
Long term care expenses for room, board	Ineligible	
Lyme disease vaccination	Eligible	
Medical products ordered by mail	Eligible	
Maintenance, repair of eligible medical equipment	Eligible	Examples: eyeglasses, hearing aids, wheelchairs
Marijuana	Ineligible	Ineligible even if legal in your state
Marriage and family counseling	Ineligible unless you submit a physician's statement	Must demonstrate treatment of medical condition
Massage, massage therapy	Ineligible unless you submit a physician's statement	
Mastectomy bra	Eligible	



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Type of Expense	Ruling	Notes, examples
Maternity bra	Ineligible	
Maternity clothing	Ineligible	
Mattress and/or box springs: special support, hypoallergenic	Ineligible unless you submit a physician's statement Eligible amount limited to the cost above regular bed mattress and/or box spring	Generally for allergies or back problems
Meals in hospital while inpatient	Eligible	
Medicalert bracelet, necklace, service	Eligible	
Medical conference, classes relating to a chronic illness for a participant, spouse, or dependent	Ineligible unless you submit a physician's statement	The costs of the medical conference must be primarily for and necessary to the medical care of the participant, spouse, or dependent Include admission, lodging, and transportation See Lodging, Mileage, Transportation
Medical equipment, pre-surgery	Ineligible unless you submit a physician's statement	
Medical fees (FMLA paperwork, chart copies)	Eligible	
Medical records storage or transfer	Eligible	
Medical Savings Accounts (MSA)	Ineligible	Participant may not have both HFSA and MSA
Medical services, treatment	Eligible	
Mental health counseling	Eligible	
Midwife	Eligible	
Mileage expenses	Eligible with proof of medical services performed that day Eligible amount limited to either actual expenses or IRS mileage rate based on when the expense was incurred. IRS mileage rates: 2007: 20 cents 2006: 18 cents, 2005 (1/1 - 8/31): 15 cents 2005 (9/1 - 12/31): 22 cents	2007: Write the mileage for each expense on the receipt, EOB or other documentation



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Type of Expense	Ruling	Notes, examples
Nasal strips	Eligible	
Nebulizers, CPAP, BIPAP	Eligible	
Nicotine replacement for smoking cessation	Eligible	Examples: patches, candy, gum
Norplant insertion, removal	Eligible	
Nursing home expenses for medical treatment	Eligible	
Nursing home expenses for room, board	Ineligible unless you submit a physician's statement	Statement must show that primary reason for being in home is for medical treatment, not for Long-term care
Nursing services where mother had C-section	Ineligible unless you submit a physician's statement for care of mother	Not for care of healthy baby
Nutritional counseling	Ineligible unless you submit a physician's statement	
OTC acne medicines	Ineligible unless you submit a physician's statement	Examples: soaps, creams, pills, Stridex, Clean and Clear, Neutrogena, Lomalux, Clearasil
OTC alertness aid	Ineligible	Examples: Nodoz, caffeine pills
OTC allergy medicines	Eligible	Examples: Nodoz, caffeine pills
OTC allergy medicines	Eligible	Examples: pills, drops, sprays, Actifed, Advil, Afrin, Alavert, Benadryl, Chlor-Trimeton, Claritin, Tavist, Tylenol, Vicks, Diphedryl, Sudafed, Store Brands
OTC asthma remedies	Eligible	Examples: Bronkaid, inhaler, inhaler refills



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Type of Expense	Ruling	Notes, examples
OTC cold relief	Eligible	Examples: pills, sprays, lozenges, rubs, night time vapor plug, Actifed, Dimetapp, Drixoral, Robitussin, Sudafed, Triaminic, Advil, Comtrex, Theraflu, Tylenol Flu, Chloraseptic
OTC cold sore relief	Eligible	Examples: Novitra, Abreve, Store Brands
OTC cosmetics	Ineligible	Examples: face creams, lotions, make-up, nail care, teeth whiten- ing, Olay, Aveeno, Jergens, St. Ives, L'oreal, Examples: Neutrogena, Almay, Cover Girl, Maybelline, Cutex, Revlon, Sally Hansen
OTC diabetic treatments	Eligible	Examples: Insulin, glucose Tablets
OTC dietary supplements	Ineligible unless you submit a physician's statement	Examples: herbal, homeopathic or naturopathic remedies, minerals, nutrients, vitamins, amino acids, hormones, enzymes, Ensure, acidophilus, Coenzymes, Q-10, DHEA, Fish Oils, Glucosamine, Chondroitin, L-Carnitine, Lecithin, Melatonin, MSM, Omega-3, SAM-E shark cartilage, echinacea, flax seed oil, garlic, ginkgo biloba, herbs, Lutein, menopause supplements, calcium, chromium, picolinate, iron, Lysine, magnesium, potassium, selenium, zinc, A's, B's, D's, E's, Antioxidants C's, E's, folic acid, multi-vitamins, niacin, children's or senior vitamins
OTC eye and ear treatments	Eligible	Examples: Visine, Swim-Ear
OTC foot treatments	Eligible	Examples: athletes foot, anti funga solutions, bunions, spurs treatment, Micatin, Fungi Care, Lotrimin



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Type of Expense	Ruling	Notes, examples
OTC hair growth medicines	Ineligible unless you submit a physician's statement	Examples: Nu Hair, Rogaine
OTC hemorrhoid relief	Eligible	Examples: Hemorid, Anusol, Preparation H, Nupercainal, Tucks
OTC illegally procured	Ineligible	Example: Marijuana
OTC jock itch	Eligible	Examples: Tinactin, Micatin, Lotrimin Af, Lamisil At, Cruex
OTC lice treatment	Eligible	Examples: Licefree, Rid, Pronto
OTC lubricants	Ineligible unless you submit a physician's statement	Examples: K-Y, Lubrin, Replens, Vagisil
OTC ovulation tests and monitors	Eligible	Examples: Answer, First Response, Clearblue Easy
OTC pain relievers	Eligible	Examples: for relief of arthritis, back pain, headaches, menstrual, urinary pain, aspirin, Ibuprofen, Advil, Midol, Motrin, Bayer, Doan's Aleve, Excedrin, Pamprin, Premsyn Pms, Azo, Prodium, Tylenol
OTC pregnancy tests	Eligible	Examples: Accu-Clear, Answer, Clearblue Easy, E.P.T., Fact Plus Pro, Fact Plus Select, First Response
OTC sleeping aids	Eligible	Examples: Alluna, Natrol, Nytol, Unisom
OTC smoking cessation	Eligible	Examples: patches, gum, lozenges, Endit, Lite'n Up, Smoke Away, Venturi, Nicorette, Nicoderm CQ, Nicotrol
OTC stomach remedies	Eligible	Examples: antacids, acid reducers, anti diarrhea, laxatives, gas relief, lactose intolerant pills, motion sickness pills, Axid Ar, Pepcid, Prilosec, Tagamet, Zantac, Tums, Rolaids, Alka-Seltzer, Maalox, Mylanta, Pepto-Bismol, Phillips, Gaviscon, Gas-X, Lactaid Pills, Bonine, Dramamine, Emetrol



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Type of Expense	Ruling	Notes, examples
OTC sun block, sunscreen	Ineligible unless you submit a physician's statement	Examples: Coppertone, Hawaiian Tropics, Bull Frog
OTC toiletries	Ineligible	Examples: toothpaste, mouthwash, shampoo, conditioner, soap, deodorant/antiperspirant, shaving cream, powder, Colgate, Crest, Aquafresh, Sensodyne, Scope, Listerine, Dial, Caress, Coast, Dove L'Oreal, Pantene, Thermasilk, Denorex, Head & Shoulders, Baby Powder, Shower To Shower, Gillette Barbasol, Skintimate, Arrid, Ban, Degree, Mitchum
OTC toothache remedies	Eligible	Examples: Orajel, Zilactin, Red Cross, Orabase, Den Tek, Dents
OTC topical products (not cosmetics)	Eligible	Examples: ointments, creams, antiseptics, sprays for treatment of medical condition (not cosmetics), Bengay, Arth-Rx, Dr. Holt's, Flexal Icyhot, Jointflex, Joint-Ritis, PR5, Mentholatum, Stopain, Hydrogen Peroxide, Bactine, Neosporin, Polysporin, Iodine, Desitin Diaper Rash, Benadryl, Anti-Itch Cream, Dermarest, Itch-X
OTC wart treatment	Eligible	Examples: Compound W, Dr. Scholl's, Pedifix, Wart-Off
OTC weight-loss drugs	Ineligible unless you submit a physician's statement	Examples: Puralin, Cidermax, Patentlean, Dexatrim
OTC yeast infection remedies	Eligible	Examples: Monistat, Vagistate 3, Vaginex, Mycelex 3
Occlusal guard (prevents teeth grinding)	Eligible	
Opalescence (tooth whitening procedure)	Ineligible	
Operations	Eligible	See Cosmetic surgery
Optometrist	Eligible	



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Type of Expense	Ruling	Notes, examples
Organ donor	Eligible	Expenses may relate to either the person providing an organ (donor) or receiving an organ (donee) Can include surgery, agency fees, testing
Orthodontia	Eligible	Click here for additional information
Orthotic inserts billed by a physician or medical supply house	Eligible	
Orthotic inserts purchased OTC	Ineligible unless you submit a physician's statement	Example: Dr. Scholl's
Osteopath	Eligible	
Oxygen	Eligible	
Packs -Heating or cold wraps	Eligible	Thermacare, Cura-Heat: For backache, arthritis, menstrual pain, injuries, breast feeding pain etc.
Parking sticker for handicapped	Eligible	
Patterning exercise	Ineligible unless you submit a physician's statement	
Pedialyte	Eligible	
Physical therapy	Eligible	
Physicals, check-ups	Eligible	
Pill cutter	Eligible	
Pill organizers, boxes	Eligible	
Portable hot tub	Ineligible unless you submit a physician's statement	
Prepayments, deposits for surgery	Ineligible until treatment is incurred	
Premiums	Ineligible	
Prenatal vitamins	Eligible	Examples: OTC and prescribed



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Type of Expense	Ruling	Notes, examples
Prescription drugs	Eligible	If purchased overseas, see Prescription Drugs: Imported
Prescription drugs: discount program charges	Ineligible	
Prescription drugs: Experimental drugs available by prescription only	Eligible	
Prescription drugs: Imported	Ineligible	Exception: Drugs purchased and consumed outside the US, if the drug is legal in both the US and the other country
Private hospital room	Eligible	
Prosthesis	Eligible	
Psychiatric care	Eligible	
Psychoanalysis	Eligible	Exception: amount paid as part of training or licensing to become a psychoanalyst
Reflexology	Ineligible unless you submit a physician's statement	
Reiki massage therapy	Ineligible unless you submit a physician's statement	
Removal of skin tags	Ineligible unless you submit a physician's statement	
Retin A	Ineligible unless you submit a physician's statement	Generally eligible for acne treatment, ineligible for cosmetic purposes
Rogaine	Ineligible unless you submit a physician's statement	Examples: OTC and prescription strength
Rolfing massage therapy	Ineligible unless you submit a physician's statement	
Rubbing alcohol	Eligible	
Sales tax on any eligible expenses	Ineligible	You must write the amount next to each eligible item
Scales	Ineligible	
Seeing eye dog	Eligible	Participant must indicate this is a working animal Can include purchase, training, care, food



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Type of Expense	Ruling	Notes, examples
Shipping, handling, and delivery costs to obtain an eligible HFSA expense	Eligible	
Smoking cessation programs	Eligible	
Special schools, teachers, tutors for child with medical condition	Ineligible unless you submit a physician's statement	You must provide a statement from the school, teacher or tutor that they specialize in teaching learning disabled children
Special shoes for medical care.	Ineligible unless you submit a physician's statement Eligible amount limited to the cost above regular shoes	Examples: orthopedic shoes or inserts, diabetic shoes
Speech therapy	Eligible	
Speech training for child with dyslexia	Ineligible unless you submit a physician's statement	
Sterilization, reversal of sterilization	Eligible	
Student health fees, insurance fees	Ineligible	Premiums
Sun or light box	Ineligible unless you submit a physician's statement	
Surgery	Eligible	
Surrogate for in vitro embryo	Ineligible	
Surgical and Support Hosiery	Ineligible unless you submit a physician's statement	
Swimming lessons	Ineligible	
Syringes	Eligible	
Teeth cleaning supplies:	Ineligible	Examples: dental floss, manual toothbrush, Oral B, Reach See Electric toothbrush
Teeth whitening	Ineligible	



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Type of Expense	Ruling	Notes, examples
Telephone for hearing impaired	Eligible Eligible amount limited to the cost above regular telephone	
Television equipment that displays closed captioning for hearing impaired	Eligible Eligible amount limited to the cost above regular television	
Thermometers	Eligible	Examples: ear, oral, rectal
Toilet paper and tissues	Ineligible	
Transplants	Eligible	Expenses may relate to either the person providing an organ (donor) or receiving an organ (donee) Can include surgery, agency fees, testing
Transportation expenses for someone other than the participant, spouse or dependent who is traveling in order to receive medical care	Ineligible unless you submit a physician's statement showing need for a travel companion	Presence of companion must be necessary for participant, spouse o dependent to be able to travel Trip itself must be primarily for and essential to medical care Can include parking, tolls, airfare See: Mileage, Lodging
Transportation expenses for participant, spouse or dependent who is traveling in order to obtain medical care	Eligible with proof of medical services	Trip must be primarily for and essential to medical care Can include parking, tolls, airfare See: Mileage, Lodging
Transportation to visit participant, spouse or dependent in hospital	Ineligible	
Umbilical cord blood storage, stem cell storage	Ineligible	Exception: if storage is directly related to an existing medical condition of a newborn dependent. A physician's statement is required Not eligible for preventative purposes
Urinals, bed pans	Eligible	Example: Medline
Uvuloplasty, uvulopalatoplasty	Ineligible unless you submit a physician's statement	Must indicate medical condition, not merely snoring



Under Your Health Care Flexible Spending Account

Type of Expense	Ruling	Notes, examples
Vaccinations	Eligible	
Vaccines	Eligible	
Varicose vein removal, spider vein removal	Ineligible unless you submit a physician's statement	Must demonstrate removal will treat a medical condition such as pain, rather than cosmetic
Vasectomy, vasectomy reversal	Eligible	
Veneers, dental	Ineligible unless you submit a physician's statement	
Viagra	Eligible	
Vision therapy (provided by optometrist to treat dyslexia and other visual, neurological disorders)	Eligible	
Vision discount programs	Ineligible	
Walker, cane	Eligible	
Warranties, extended warranties, maintenance agreements	Ineligible	Usually for hearing aids or eyeglasses
Weight-loss program fees, drugs and foods	Ineligible unless you submit a physician's statement	See Diet and weight-loss program fees, Diet and weight-loss drugs and Foods-Diet and weight-loss foods
Wheelchairs and motorized wheelchairs	Eligible	Can include purchase, operating costs and upkeep Example: Autoette
Wrist support or stabilizer	Eligible	Ace, Tru-fit, Futuro
X-ray fees	Eligible	



Orthodontia Expenses

This reference guide will help you by answering questions you may have regarding the reimbursement of Orthodontia expenses through your Health Flexible Spending Account (HFSA).



To reimburse an expense from a Health Flexible Spending Account, IRS regulations require third party documentation that includes date and type of service provided as well as the amount the FSA participant is responsible for paying. The IRS recognizes that orthodontia services are generally provided over an extended period of time, often with no direct relationship between the date of treatment and the payments. As a result, the rules for reimbursing orthodontia are slightly different than other health care expenses.

Maximize Your Benefits

Generally, you will be reimbursed for orthodontia expenses from the HFSA plan year in which the payment is **due**. You may be reimbursed from the HFSA plan year in which payment is **made**, if you provide proof of payment, such as a canceled check or receipt.



Documentation Requirements

To be reimbursed for orthodontia expenses you must submit a signed claim form with third party documentation that includes **DAPT**:

- **D**ate of service
- · Amount you are responsible for
- **P**rovider
- Type of service

You may submit either your monthly payment coupons or statements from your orthodontist that show either:

- Date due and amount due.
- Date paid and amount paid.

helpful information

Frequently Asked Questions (FAQs)

See the following FAQs to assist you in submitting orthodontia claims against your HFSA.

How do I receive reimbursement from my HFSA for orthodontia expenses?

You may be reimbursed for orthodontia expenses by submitting a signed claim form with third party documentation, such as an orthodontia coupon or statement, that indicates either date due or date paid.

I paid the full amount for orthodontia treatment in one lump sum. Can I be reimbursed this full amount?

Yes, if payment was made in full within your HFSA plan year for the orthodontia treatment and proof of payment is submitted, you may be reimbursed up to your HFSA available balance.

I paid more than the amount due for this month. Can I be reimbursed for the full amount I paid?

Yes, if you paid more than the amount required on the coupon or statement and proof of payment is submitted with a signed claim form, you may be reimbursed the amount you paid up to your HFSA available balance.

My child is getting braces in January 2007; however I have to pay for them in full by the end of December 2006. When can I claim this expense?

Reimbursement for orthodontia expenses will be payable to you in the plan year in which payment is due or the plan year in which payment is made. The expense may be claimed in December 2006.

Can I submit the orthodontia contract for services for reimbursement of my orthodontia expenses?

No, orthodontia contracts generally do not include **specific** dates due, dates paid or **specific** amounts associated with dates of service and therefore do not meet the IRS requirements for claim adjudication.

Do I have to submit an explanation of benefits (EOB) to be reimbursed for orthodontia expenses?

No, an EOB is not required.

Ceridian FSA Services P.O. Box 534134 St. Petersburg, FL 33747



Physician's Statement

FAX To: 888-814-6780

	Employer:
	Group #:
	Evnonco
	Expense:
Please have your physician complete the appropriate section(s This information is required to determine whether the expense(s) su statement must be completed and signed by one of the following he Completion of this statement by any other health care professional will not be reimbursed.	ubmitted above are eligible under IRS Code Section 213. This ealthcare professionals: MD, DO, DPM, OD, DC, DDS, NP or PA.
COSMETIC PROCEDURES	Patient Name:
Medical Condition (please include ICD9 Code, if available):	Treatment Recommended:
Length of Treatment	Signature and credentials Date
prevent or treat illness or disease.	
GENERAL HEALTH EXPENSES	Patient Name:
Medical Condition (please include ICD9 Code, if available):	Treatment Recommended:
Length of Treatment:	Signature and credentials Date
Per IRS rules, this expense has been denied because it is often used care, a health Flexible Spending Account participant must demonstrate • Medical equipment • Certain drugs and medicine including prescription and over-tr • Dietary supplements including vitamins, herbal, naturopathic, • Treatments such as massage By your signature, please certify that the treatment indicated above will EDUCATION EXPENSES	that the following expenses treat an existing medical condition: ne-counter medications or homeopathic remedies
Patient Name:	Medical Condition (please include ICD9 Code, if available):
Treatment Recommended:	Length of Treatment:
The IRS does not consider most education expenses as expense reimbursement from a health Flexible Spending Account unless support	ted by BOTH a doctor certification and an educator certification, below.
DOCTOR CERTIFICATION: By my signature below, I confirm the diagnosis and treatment recommendation described above.	EDUCATOR CERTIFICATION: By my signature below, I certify that the institution or educator providing this treatment specializes in treating the medical condition listed above.
Signature and credentials Date	Signature and credentials Date
GYM MEMBERSHIPS/EXERCISE EQUIPMENT	
Patient Name:	Medical Condition (please include ICD9 Code, if available):
Treatment Recommended: Please be specific	Length of Treatment:
DOCTOR CERTIFICATION By my signature below, I certify that I recommend this patient exercise at a gym and/or exercise at home using the equipment specified above, as treatment for the medical condition listed above.	 the primary reason for this expense is to treat the medical condition listed above AND I would not incur this expense but for this medical condition AND The membership does not cover another person.
Signature and credentials Date	Signature Date