

## Irving Independent School District

### Reimbursable Medical Expenses for Health Flexible Spending Accounts

- Air Conditioner to Treat Illness\*
- Acupuncture Treatments\*
- Alcoholism
- Ambulance Fees
- Anesthesiology
- Artificial Limbs
- Automobile Modifications
- Birth Control (Rx and non-Rx)
- Blood Donor Expenses
- Braille Books/Magazines
- Chiropractor
- Christian Science Practitioners
- Clinic Fees
- Contact Lenses & Solutions
- Co-payments
- Deductibles
- Dental Exams & Procedures (cosmetic procedures excluded)
- Diagnostic Tests
- Diathermy
- Drugs (prescription)
- Drug Treatment Programs
- Eye Exams
- Eye Glasses (reading glasses included)
- Fertility Treatments
- Gynecologists
- Hearing Devices & Batteries
- Insulin
- Lamaze Classes
- Lasik Eye Surgery
- Mammograms
- Massage Therapy\*
- Mental Health Treatments (inpatient & outpatient)
- Midwife
- Nurse (practical)

- Obstetrician
- Oculist
- Operations (cosmetic operations excluded)
- Ophthalmologists
- Optometrist
- Oral Surgery
- Orthodontia (children and adults)
- Osteopath
- **Over the Counter Drugs & Items\***
- Oxygen Equipment
- Pediatricians
- Physicians
- Physiotherapists
- Physical Therapy
- Psychiatrist/Psychologist
- Reconstructive Surgery (must be medically necessary)
- Rental of Medical Equipment
- Retirement Home Medical Fees
- Seeing Eye Dog Costs
- Sex Therapist
- Smoking Cessation Programs
- Special Education Fees
- Syringes (diabetic supplies)
- Support or Corrective Devices
- Surgeons
- Vasectomy
- Weight Loss Programs\*
- X-rays

- Cosmetic prescriptions, over the counter items & procedures are not eligible for reimbursement
- All expenses must be for the treatment or mitigation of a specific medical condition or disease
- A letter may be requested from your physician to substantiate the medical necessity of an expense (especially where you see a \*)

This list does not intend to be all-encompassing, but should be used as a general guideline to determine eligible expenses.

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### Eligible Over The Counter Medical Expenses

The list of expenses below do NOT require a doctor's letter. An itemized receipt stating the name of the drug purchased and the date purchased is required. Copies of labels and box tops are not acceptable forms of receipts. Mass quantities purchased will not be reimbursed. You may purchase up to the quantity of five (5) of the same drug or item.

<b>Over The Counter Eligible for Reimbursement</b>
Analgesics, such as Fever and Pain Reducers like Aspirin, Tylenol, Ibuprofen
Antacids and Heartburn Relief, such as Alka-Seltzer, Mylanta, and Milk of Magnesia
Stomach & Digestive Relief, such as Pepto-Bismol, Imodium, Colace, Lactaid
Laxatives
Cold Medicine, Cough drops, throat lozenges
Eye care, such as contacts, saline solution, and lubricant eye drops (Visine, etc)
Motion Sickness, such as Dramamine, patches, bracelets
First Aid, such as heat wraps, compresses, bandages, tape, gauze dressing, adhesive pads, band aids, first aid kits , crutches
Joint Support Bandages and Hosiery, such as knee & elbow supports
Arthritis and Joint Pain Relieving Creams
Special ointment or cream for sunburned skin (not regular skin moisturizers)
Antibiotic ointments
Anti-itch and hydrocortisone creams
Allergy Relief, such as oral medications, nasal sprays, and patches
Athlete's Foot treatment, such as nail and foot anti-fungal creams
Suppositories and creams for hemorrhoids
Wart removal medication
Diabetes, such as glucose monitor and related equipment
Blood pressure monitor and related equipment
Cholesterol, HIV, Hormone test equipment
Vaporizers and humidifiers
Urinary Pain Relief
Smoking Cessation Relief, such as patches, gum
Feminine care relating to treatment of vaginal infections and menstrual pain and cramp relievers
Tooth & Mouth Pain Relief, such as Orajel, Anbesol
Pregnancy Test Kits, Ovulation Kits, condoms, spermicidal foams
Eye patches
Incontinence Products, such as Depends and Serenity pads
Thermometers