

# SISC Flex Plan

## HEALTH CARE AND DEPENDENT CARE EXPENSES

\*Please note, all "potentially eligible expenses" require a Certification of Medical Necessity form completed by your medical practitioner in order to be considered eligible for reimbursement. The letter must include 1. Medical condition/diagnosis 2. Specific recommended treatment 3. Duration of treatment. This letter must be submitted with every claim.

**Reminder:** The SISC Flex Card will not work to purchase any Over-The Counter items.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
<b>A</b>					
ABORTION	HCFA	X			
ACNE TREATMENT	HCFA		X		Acne is considered a disease, the cost of acne treatment will generally qualify (including over-the counter (OTC) acne medications). However, the cost of routine skin care (face creams, moisturizers, etc.) does not qualify and when the expense has both medical and cosmetic purposes a Certification of Medical necessity is required.
ACUPUNCTURE	HCFA	X			
ADAPTIVE EQUIPMENT  <b>OTC</b>	HCFA		X		Adaptive equipment for a major disability, such as a spinal cord injury, may be reimbursed.  Adaptive equipment to assist you with activities of daily living (ADL) for persons with arthritis, lupus, fibromyalgia, etc., may be reimbursed.
ADOPTION: FEES	HCFA			X	Adoption fees and other non-medical expenses incurred in connection with adoption assistance may qualify for an adoption assistance credit (under Code 23) or for reimbursement under an adoption assistance program (under Code 137).
ADOPTION: PRE-ADOPTION MEDICAL EXPENSES	HCFA	X			Medical expenses incurred before an adoption is finalized may qualify, if the child qualifies as your tax dependent when the services/items are provided.
AIR CONDITIONERS  <b>OTC</b>	HCFA		X		<a href="#">See CAPITAL EXPENSES for important information and guidance.</a>
AIR PURIFIERS  <b>OTC</b>	HCFA		X		<a href="#">See ALLERGY PRODUCTS</a>
ALCOHOLISM/DRUG/SUBSTANCE ABUSE TREATMENT	HCFA	X			Inpatient treatment, including meals and lodging provided by a licensed addiction center.  Outpatient care  Transportation expenses associated with attending outpatient meetings, including AA groups, if attending on a doctor's advice.
ALLERGY MEDICINES  <b>OTC</b>	HCFA		X		Examples: Actifed, Alavert, Allerest, Benadryl, Chlor-Trimentron, Claritin, Sudafed
ALLERGY PRODUCTS  <b>OTC</b>	HCFA		X		Expenses generally won't qualify if the product would be owned even without allergies, such as a pillow or a vacuum cleaner. However, an air purifier or water filter necessary to treat a specific medical condition might qualify. The excess cost of a special version of an otherwise personal item (e.g., a vacuum cleaner with a HEPA filter) over the normal cost of the item might also qualify if the special version of the item is necessary to treat a specific medical condition.
ALTERNATIVE HEALERS	HCFA	X			Alternative healers who provide care for the treatment of a specific illness or disorder for you, your spouse or dependent may be reimbursed under a HCFA.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
ALTERNATIVE HEALER RECOMMENDED DIETARY SUBSTITUTES, MEDICINES	HCFSA		X		Non-traditional healing treatments provided by professionals may be eligible if provided to treat a specific medical condition. The treatments must be legal, and the expenses do not qualify if the remedy is a food or substitute for food that the person would normally consume. Drugs and medicines recommended by alternative healers to treat a specific medical condition may also qualify as medical care.
AMBULANCE	HCFSA	X			
ANALGESICS OTC	HCFSA		X		Examples: Aspirin, Advil, Alleve, Bayer, Ibuprofen, Naprosyn, Tylenol, Midol, Pamprin
ANTACIDS OTC	HCFSA		X		Examples: Gas-X, Maalox, Mylanta, Tums, PepcidAC, Prilosec OTC, TagamentHB, Zantac
ANTIBIOTIC OINTMENTS OTC	HCFSA		X		Examples: Bacitrain, Triple antibiotic ointment, Neosporin
ANTICANDIALS OTC	HCFSA		X		Examples: Femstat 3, Gyne-Lotrimin, Mycelex-7, Monistat3, Vagistat-1
ANTIDIARRHEA AND LAXATIVES OTC	HCFSA		X		Examples: Ex-Lax, Imodium AD, Kaopectate, Pepto-Bismol
ANTIFUNGALS OTC	HCFSA		X		Examples: Lamisil AT, Lotramin AF, Micatin
ANTI-HISTAMINES OTC	HCFSA		X		Examples: Actifed, Allerest, Benadryl, Claritin, Chlor-Trimetron, Sudafed
ANTI-ITCH CREAMS OTC	HCFSA		X		Examples: Bactine, Benadryl, Caldecort, Caladryl, Calamine, Cortaid, Hydrocortisone, Ivarest, Lanacort, Lamisil AT, Lotramin AF
ARTIFICIAL LIMBS	HCFSA	X			
ARTIFICIAL REPRODUCTIVE TECHNOLOGIES	HCFSA	X			Eligible medical expenses may include (but are not limited to):  Fertility exams;  Artificial insemination (intracervical, intrauterine, intravaginal);  In-vitro/In-vivo fertilization;  Gift;  Sperm bank storage/fees for artificial insemination;  Sperm implants;  Sperm washing;  Reverse vasectomy;  Embryo replacement and storage;  Egg donor charges for recipient;  Embryo transfer.  <b>NOTE: Storage fees should not exceed twelve months.</b>
ARTIFICIAL TEETH	HCFSA	X			
ASTHMA MEDICINES OTC	HCFSA		X		Examples: Bronitin Mist, Bronkaid, Bronkolixer, Primatene
AUTOMOBILE MODIFICATIONS	HCFSA		X		If for physically handicapped persons. Expenses of operating a specially equipped car do not qualify.  <a href="#">See ADAPTIVE EQUIPMENT</a> , <a href="#">See CAPITAL EXPENSE</a> , and <a href="#">See TRANSPORTATION</a>

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
<b>B</b>					
BAND-AIDS  OTC	HCFSA	X			Examples: Band-Aid or Curad without medication may be eligible. Medicated items would require a Certification of Medical Necessity form.
BANDAGES  OTC	HCFSA	X			Ace bandages, wraps
BEDSIDE COMMODES	HCFSA	X			
BEFORE AND AFTER-SCHOOL CARE	DCFSA	X			Child must be under age 13 or one who is incapable of self-care and can be claimed on your Federal Income Tax return.
BIRTH CONTROL  OTC	HCFSA HCFSA	X	X		Birth Control Pills, Norplant  Condoms with spermicide would require a Certification of Medical Necessity form. Condoms without spermicide may be eligible.
BLOOD PRESSURE MONITORS  OTC	HCFSA	X			They are diagnostic items.
BLOOD STORAGE	HCFSA		X		Blood storage is an eligible expense if you are storing blood for a scheduled surgery. Fees for indefinite storage, just in case the blood might be needed, would not be considered medical care.
BLOOD SUGAR TEST KIT AND TEST STRIPS  OTC	HCFSA	X			They are diagnostic items.
BODY SCANS	HCFSA	X			They are diagnostic services.
BOUTIQUE PRACTICE FEES	HCFSA			X	Monthly or annual fees that your provider may charge for improved access, 24/7 availability and more "personalized" care are not considered medical care and cannot be reimbursed under a health care FSA.
BRAILLE BOOKS AND MAGAZINES	HCFSA	X			The incremental cost of Braille books and magazines that exceeds the price for regular books and magazines is an eligible expense if for a visually impaired person.
BREAST PUMPS  OTC	HCFSA	X			Breast pumps and other supplies that assist lactation will qualify.
BREAST RECONSTRUCTION SURGERY FOLLOWING MASTECTOMY	HCFSA	X			Eligible to the extent that surgery was done following a mastectomy for cancer. This is an exception to the general rules regarding cosmetic procedures.
<b>C</b>					
CALAMINE LOTION  OTC	HCFSA		X		
CAMPS, summer or holiday (Day)	DCFSA	X			This includes children under age 13, or any individual who is incapable of self-care and can be claimed on your Federal Tax return.  Payment in advance is not covered. You can only be reimbursed for expenses that have been incurred.
CAMPS, summer or holiday (Overnight)	DCFSA			X	

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
CAPITAL EXPENSE	HCFSA		X		<p>A capital expense may be reimbursed if its purpose is to provide medical care for you, your spouse or dependent.</p> <p>Expenses for improvements or special equipment added to your home may be reimbursed if the primary purpose of the expenditure is medical care for you, your spouse, or dependent and the expenditure would not be incurred "but for this purpose". How much is reimbursed depends on the extent to which the expense permanently improves the property and whether others benefit.</p> <p>If the improvement is permanent and increases the value of the proper, the expense will qualify only to the extent that the improvement cost exceeds the increase in property value. If the improvement doesn't increase the property value at all, then the entire cost may qualify. Items that usually don't increase peroperty value include constructing entrance or exit ramps, widening or modifying doorways or hallways, installing railing or support bars to bathrooms, lowering or modifying kitchen cabinets or equipment, moving or modifying electrical outlets and fixtures, installing porch lifts, modifying electrical outlets and fixtures, installing porch lifts, modifying fire alarms or smoke detectors, modifying other warning systems, and modifying stairways.</p>
CARPAL TUNNEL WRIST SUPPORTS OTC	HCFSA	X			<a href="#">See Bandages</a>
CHILDBIRTH CLASSES	HCFSA	X			Expenses may qualify to the extent that instruction relates to birth and not childrearing. The fee should be apportioned to exclude instruction in topics such as newborn care. Expenses for the coach do not qualify.
CHIROPRACTIC	HCFSA	X			
CHONDROITIN OTC	HCFSA		X		If used primarily for medical care.
CHRISTIAN SCIENCE PRACTITIONERS	HCFSA	X			Payments for medical care may be reimbursed. Fees for other purposes do not qualify.
CIRCUMCISION	HCFSA	X			
COBRA PREMIUMS	HCFSA			X	Under IRS rules, insurance premiums cannot be reimbursed under a health care FSA.
CO-INSURANCE	HCFSA	X			Cannot be reimbursable by secondary insurance or any other source.
COLD, FLU, DECONGESTANT & SINUS REMEDIES OTC	HCFSA		X		Examples: Actifed, Advil Cold & Sinus, Afrin, Alka Seltzer Cold & Flu, Alleve Cold & Sinus, Contac, Dayquil, Dimetane, Dristan Long-Lasting, Neo-Syneprhine, Nyquil, Sudafed, Thera-Flu, Triaminic, Cough Drops, Nasal Sprays, Throat Lozenges
COLD SORE/FEVER BLISTER MEDICATIONS OTC	HCFSA		X		Example: Abreva Cream
COLD/HOT PACKS OTC	HCFSA	X			Must be used to alleviate a specific medical condition.
COMPANION ANIMALS	HCFSA				<a href="#">See SERVICE ANIMALS</a>
COMPRESSION HOSE	HCFSA		X		Won't qualify if used for personal or preventive reasons. If used to treat or alleviate a specific medical condition, only the excess cost of the specialized hose over the cost of regular hose may qualify.
CONTACT LENSES, MATERIALS, AND EQUIPMENT OTC	HCFSA	X			Lenses must be for medical purposes. Materials examples: Saline Solution and Enzyme Cleaner

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
CONTRACEPTIVES <b>OTC</b>	HCFSA		X		<a href="#">See BIRTH CONTROL</a>
CONTROLLED SUBSTANCES	HCFSA			X	
CO-PAYMENTS	HCFSA	X			Cannot be reimbursable by secondary insurance or any other source.
CORD BLOOD STORAGE	HCFSA		X		Can be reimbursed if there is a specific medical condition that the cord blood is intended to treat. Indefinite storage "just in case" is not an eligible expense.
<i>COSMETIC PROCEDURES</i>	HCFSA		X	X	Most cosmetic procedures do not qualify.  A cosmetic procedure or service necessary to improve a deformity arising from a congenital abnormality, personal injury from accident or trauma, or disfiguring disease may qualify.
COSMETIC PRODUCTS <b>OTC</b>	HCFSA			X	Examples: Body Sprays, Cologne, Creams, Deodorants, Hair Removal, Lipsticks, Lotion, Make-up, Perfumes, Shampoo, Shaving Cream, Skin Moisturizers, Soaps, Toothbrush, Toothpaste
COUGH SUPPRESSANTS <b>OTC</b>	HCFSA		X		Examples: Pediacare, Robitussin, cough drops, Vicks 44, Chloraseptic
CPAP (continuous positive airway pressure) devices	HCFSA	X			
COUNSELING	HCFSA		X		May be eligible if counseling is provided for medical care and not just for the general improvement of mental health, relief of stress, or personal enjoyment.  Eligible expenses may include: bereavement counseling, grief counseling, psychotherapy, psychologist, and sex counseling
				X	Life coaching, career counseling, marriage counseling, and parenting skill counseling do not qualify.
CRUTCHES <b>OTC</b>	HCFSA	X			
<b>D</b>					
DAYCARE	DCFSA	X			This includes daycare as well as in-home babysitters for children under age 13, or any individual who is incapable of self-care and can be claimed on your Federal Tax return.  Payment in advance is not covered. You can only be reimbursed for expenses that have been incurred.
DANCING LESSONS	HCFSA		X		Only for a short duration and if prescribed for a specific medical condition, such as part of a rehabilitation program after surgery, and the expense would not have been incurred but for the condition.
DECONGESTANTS <b>OTC</b>	HCFSA		X		Examples: Dimetapp, Sudafed
DEHYDRATION <b>OTC</b>	HCFSA		X		Examples: Pedialyte, Enfalyte
DEDUCTIBLES	HCFSA	X			Cannot be reimbursable by secondary insurance or any other source.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
<i>DENTAL CARE</i>	HCFSA	X			Covered services may include, but are not limited to:  Bridges; Cleanings; Crowns; Dental implants; Dentures & denture adhesives; Endodontic care (root canal); Extractions; Fillings; Orthodontia; Periodontal services; Routine prophylaxis; Sealants; X-rays.
<i>DENTAL CARE</i>	HCFSA			X	Expenses for cosmetic dentistry, such as teeth whitening or bleaching, veneers, or bonding are not eligible for reimbursement.
<i>DENTAL CARE</i> <b>OTC</b>	HCFSA		X		Anbesol, orajel
DENTAL PRODUCTS	HCFSA			X	Examples: Dental floss, Toothpaste, Toothbrushes, Teeth whitening kits
DIABETIC SUPPLIES <b>OTC</b>	HCFSA	X			Examples: Blood sugar test kits and strips, Glucose monitoring equipment, Insulin
DIAGNOSTIC ITEMS/SERVICES	HCFSA	X			Procedures to determine the presence of a disease or dysfunction of the body, such as tests to detect heart attack, stroke, diabetes, osteoporosis, thyroid conditions, and cancer. Medical monitoring and testing devices.
DIAPER RASH CREAMS <b>OTC</b>	HCFSA		X		Examples: Desitin, Balmax, Aveeno Baby
DIAPERS, DIAPER SERVICE	HCFSA			X	Routine care of healthy newborn.
	HCFSA	X			To relieve or ameliorate the effect of a particular illness or disease on you, your disabled child or dependent, who would not need this product "but for" the medical condition.
	<b>OTC</b>				
DIARRHEA MEDICINE <b>OTC</b>	HCFSA		X		Examples: Imodium, Kaopectate
DIETARY SUPPLEMENTS	HCFSA		X		Dietary supplements, nutritional supplements, vitamins, herbal supplements, and natural medicines may qualify if they are recommended by a medical practitioner to treat a specific medical condition.
	<b>OTC</b>				
DIET FOODS <b>OTC</b>	HCFSA			X	
DOCTOR FEES	HCFSA	X			In addition to all expenses for care not reimbursed by any other source, eligible expenses may include fees for:  Out-of-network providers;  Charges by your physician for letters of medical necessity to schools;  Physician tele-advice, including email communication.
DRUG ADDICTION, treatment of	HCFSA	X			Eligible expenses may include:  Inpatient treatment, including meals and lodging provided by a licensed addiction center;  Outpatient care;  Transportation expenses associated with attending outpatient meetings, including AA groups, if attending on a doctor's advice.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
DRUG OVERDOSE, treatment of	HCFA	X			
DRUGS AND MEDICINES THAT MAY BE PURCHASED ONLY BY PRESCRIPTION	HCFA	X			Must be used to treat a medical condition and not for personal, general health, or cosmetic purposes. Drugs that are illegally procured do not qualify. Note: Dual purpose items that include a medical and cosmetic purpose may require a certification of medical necessity form.
DRUGS AND MEDICINES THAT ARE AVAILABLE FOR PURCHASE WITHOUT A PRESCRIPTION (OVER-THE-COUNTER(OTC)DRUGS OR MEDICINES)	HCFA		X		Must be used to treat a specific medical condition.
DYSLEXIA	HCFA		X		<a href="#">See LANGUAGE TRAINING</a>
<b>E</b>					
EAR DROPS AND WAX REMOVAL PRODUCTS	HCFA		X		Examples: Debrox, Murine
EAR PLUGS	HCFA		X		Must be prescribed to treat a specific medical condition, such as the presence of middle/inner ear tubes.
EDUCATION	DCFA		X		Payments made to a special school for a mentally impaired or physically disabled person may qualify as reimbursable if the main reason for using the school is its resources for relieving the disability. This includes teaching Braille to a visually impaired person, teaching lip reading to a hearing impaired person, and giving remedial language training to correct a condition caused by a birth defect.
EGG DONOR FEES	HCFA	X			Amounts paid for the egg donor fee, an agency fee, an egg donor's medical and psychological testing, and the legal fees for preparation of the egg donor contract may qualify.
EGGS AND EMBRYOS, STORAGE FEES	HCFA		X		Fees for temporary storage may qualify, but only to the extent necessary for immediate conception. Storage fees for undefined future conception probably aren't considered medical care.
ELDER CARE	DCFA	X			Adult must live with you at least 8 hours a day and be claimed as a dependent on your Federal Tax return.
ELECTROLYSIS OR HAIR REMOVAL	HCFA			X	<a href="#">See COSMETIC PROCEDURES</a>
ELEVATOR	HCFA		X		Installing an elevator upon the advice of a physician so that a person with a heart disease won't have to climb stairs may be medical care to the extent of the amount in excess of value enhancement of the property.  <a href="#">See CAPITAL EXPENSES for important information and guidance.</a>
EXERCISE EQUIPMENT OR PROGRAMS	HCFA		X		Eligible only if required to treat an illness (such as obesity) diagnosed by a physician.  <a href="#">See FITNESS PROGRAMS</a>
EYE CARE	HCFA	X			Example: Contact lens supplies, Eye patches, and unmedicated eye drops may be eligible. Medicated items would require a Certification of Medical Necessity form.
EYE EXAMINATIONS, EYEGLASSES, EQUIPMENT AND MATERIALS	HCFA	X			Includes prescription sunglasses and reading glasses (even those purchased over-the-counter).

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
<b>F</b>					
FACE CREAMS AND MOISTURIZERS OTC	HCFSA			X	Generally no. Considered cosmetic. <a href="#">See COSMETIC PRODUCTS</a>
FAMILY PLANNING	HCFSA	X			Includes ovulation predictor kits and pregnancy tests.
FEMININE HYGIENE PRODUCTS OTC	HCFSA			X	Generally no, since these are ordinarily considered as being used to maintain general health. There may be exceptions (e.g. if a medical practitioner recommends the product to alleviate a specific condition).
FIBER SUPPLEMENTS OTC	HCFSA		X		Only if used to treat a diagnosed medical condition (such as irritable bowel syndrome) until the condition is alleviated. Examples: Benefiber, Metamucil
FINANCE CHARGES	HCFSA			X	
FIRST AID/MEDICAL SUPPLIES OTC	HCFSA	X			Unmedicated Bandages, First aid kits, Cold/hot packs for injuries, Joint supports, Ace wraps, Splints, Thermometers
FIRST AID/MEDICAL SUPPLIES OTC	HCFSA		X		First aid creams, Antiseptics, Medicated Bandages, Liquid adhesives
FITNESS PROGRAMS	HCFSA		X		Fees paid for a fitness program may be an eligible expense if prescribed by a physician and substantiated by his or her statement that treatment is necessary to alleviate a medical problem. The purpose of the expense must be to treat the disease rather than to promote general health. <a href="#">See EXERCISE EQUIPMENT or PROGRAMS</a>
FLU SHOTS	HCFSA	X			
FLUORIDATION DEVICE OR SERVICES OTC	HCFSA	X			Must be recommended by a dentist to prevent tooth decay. The amount that qualifies is limited to the cost allocable to the current year.
FOOD OTC	HCFSA		X		<a href="#">See SPECIAL FOODS</a>
FOOT CARE OTC	HCFSA	x			All products must be unmedicated: Callous removers, Athlete's foot products, Bunion, Blister & Corn treatments may be eligible. Medicated items would require a Certification of Medical Necessity form.
FUNERAL EXPENSES	HCFSA			X	
<b>G</b>					
GENETIC TESTING	HCFSA		X		To the extent that testing is done to diagnose a medical condition or determine possible defects.
GLUCOSAMINE OTC	HCFSA		X		If used primarily for medical care. Example: Chondroitin
GLUCOSE MONITORING EQUIPMENT OTC	HCFSA	X			They are diagnostic items.
GUIDE DOGS: OTHER SERVICE ANIMALS	HCFSA	X			Expenses for buying, training, and maintaining a service animal used by a physically disabled person may qualify. <a href="#">See VETERINARY FEES</a>
<b>H</b>					
HAIR REMOVAL AND TRANSPLANT	HCFSA			X	Generally cosmetic
HEADACHE MEDICATIONS OTC	HCFSA		X		Examples: Advil, Aspirin, Tylenol
HEALTH SCREENINGS	HCFSA	X			<a href="#">See PREVENTIVE CARE SCREENINGS</a>

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
HEARING AIDS <b>OTC</b>	HCFA	X			Includes batteries
HEMORRHOID PREPARATIONS <b>OTC</b>	HCFA		X		Examples: Preparation H, Tronolane, Tucks
HERBS <b>OTC</b>	HCFA		X		If they are recommended by a medical practitioner to treat a specific medical condition.
HOME DIAGNOSTIC TESTS OR KITS <b>OTC</b>	HCFA	X			Examples: Blood pressure monitor and related equipment, Cholesterol, Diabetic equipment and supplies, Colorectal screenings, HIV test, Colonoscopy prep kits
HOME IMPROVEMENTS (SUCH AS EXIT RAMPS, WIDENING DOORWAYS,	HCFA		X		Only if done to accommodate a disability. <a href="#">See CAPITAL EXPENSES for important information and guidance.</a>
HOME MEDICAL EQUIPMENT	HCFA	X			<a href="#">See CAPITAL EXPENSES for important information and guidance.</a>
HOMEOPATHIC CARE	HCFA	X			Homeopathic care rendered by a licensed health care professional who provides this care for the treatment of a specific illness or disorder for you, your spouse or dependent may be reimbursed under a HCFA.
HOMEOPATHIC MEDICINES	HCFA		X		Homeopathic medicines used for treatment of a specific illness or disorder may be reimbursed.
HORMONE REPLACEMENT THERAPY	HCFA		X		If used primarily for medical care (for example, to treat menopausal symptoms such as hot flashes, night sweats, etc.)
HOSPITAL SERVICES	HCFA	X			
HOUSEHOLD HELP	HCFA			X	
HOUSEHOLD HELP	DCFA	X			Duties must include caring for an eligible dependent.
HUMIDIFIERS <b>OTC</b>	HCFA		X		<a href="#">See ALLERGY PRODUCTS, See CAPITAL EXPENSES</a>
<b>I</b>					
IMMUNIZATIONS	HCFA	X			Includes those recommended for overseas travel.
INCONTINENCE SUPPLIES <b>OTC</b>	HCFA	X			If used to relieve the effects of a particular disease. Examples: Depends, Poise
INFERTILITY TREATMENTS	HCFA	X			
INSULIN	HCFA	X			Also, equipment needed to inject the insulin, such as syringes or insulin pumps, qualifies as a medical expense.
INSURANCE PREMIUMS MEDICAL/DENTAL/VISION	HCFA			X	Under IRS rules, insurance premiums cannot be reimbursed under a health care FSA.
<b>L</b>					
LAB FEES	HCFA	X			
LACTATION CONSULTANT	HCFA	X			Services rendered by a licensed health care provider may be reimbursed.
LAMAZE CLASSES	HCFA	X			Expenses may qualify to the extent that instruction relates to birth and not childrearing. The fee should be apportioned to exclude instruction in topics such as newborn care. Expenses for the coach do not qualify.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
LANGUAGE TRAINING	HCFSA		X		If for a child with dyslexia or a disabled child. But school fees for regular schooling normally don't qualify.
LASER EYE SURGERY: LASIK	HCFSA	X			Eligible because the procedure is done primarily to promote the correct function of the eye. <a href="#">See VISION CARE</a>
LATE PAYMENT FEES	DCFSA HCFSA			X X	
LATE PICK-UP FEES	DCFSA	X			
LAXATIVES <b>OTC</b>	HCFSA		X		Examples: Ex-Lax
LEAD-BASED PAINT REMOVAL	HCFSA		X		Expenses for removing lead-based paints from surfaces in your home to prevent a child who has, has had, or is in danger of lead poisoning from eating the paint may be reimbursed. These surfaces must be in poor repair and within a child's reach.
LEAD-BASED PAINT REMOVAL (CONTINUED FROM PREVIOUS PAGE)					The cost of repainting the affected area(s) is not an eligible expense. If you cover the area with wallboard or paneling instead of removing the lead paint, these items will be treated as capital expenses.
LEARNING DISABILITY, INSTRUCTIONAL FEES	HCFSA		X		The portion of tuition/tutoring fees covering services rendered specifically for your child's severe learning disabilities caused by mental or physical impairments (such as nervous system disorders, or closed head injuries) and paid to a special school or to a specially-trained teacher may be reimbursed under a HCFSA if prescribed by a physician. Examples of eligible expenses may include:  Remedial reading for your child or dependent with dyslexia  Testing to diagnose
LEGAL FEES	HCFSA		X		Legal fees paid to authorize treatment for mental illness may be eligible expenses.
LIFETIME CARE	HCFSA			X	Fees or advance payments made to a retirement home or continuing care facility are not eligible expenses.
LODGING AT A HOSPITAL OR SIMILAR INSTITUTION	HCFSA	X			Provided the main reason for being there is to receive medical care.
LODGING: NOT AT A HOSPITAL OR SIMILAR INSTITUTION	HCFSA	X			Up to \$50 per night may be eligible if the following conditions are met: The lodging is primarily for, and essential to, medical care; The medical care is provided by a doctor in a licensed hospital or medical care facility related to/equivalent to a licensed hospital; The lodging is not lavish or extravagant; There is no significant element of personal pleasure or leisure in the travel.
LODGING OF A COMPANION	HCFSA	X			Your companion's lodging may be reimbursed if he or she is accompanying the patient (you or your eligible dependents) for medical reasons and it meets the criteria listed above. Meals are not eligible for reimbursement.  Example: Parents traveling with a sick child, up to \$100 per night (\$50 per person) may be reimbursed.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
LODGING WHILE ATTENDING A MEDICAL CONFERENCE	HCFSA			X	
LONG-TERM CARE INSURANCE PREMIUMS	HCFSA			X	Under IRS rules, insurance premiums cannot be reimbursed under a HCFSA.
<b>M</b>					
MASSAGE THERAPY	HCFSA		X		The costs of a massage just to improve general health doesn't qualify. However, if the massage therapy was recommended by a physician to treat a specific injury or trauma, then it could qualify.
MATERNITY CLOTHES	HCFSA			X	
MEALS AT A HOSPITAL OR SIMILAR INSTITUTION	HCFSA	X			If the main reason for being there is to receive medical care.
MEALS NOT AT A HOSPITAL OR SIMILAR INSTITUTION	HCFSA			X	Meals that are not part of inpatient care do not qualify.
MEALS OF A COMPANION	HCFSA			X	Not eligible, even if accompanying a patient for medical reasons.
MEDICAL ALERT BRACELET OR NECKLACE	HCFSA		X		May qualify if recommended by a medical practitioner in connection with treating a medical condition.
MEDICAL INFORMATION	HCFSA	X			Amounts paid to a plan that maintains electronic medical information for you, your spouse or dependents may be eligible for reimbursement under an HCFSA.
MEDICAL MONITORING AND TESTING DEVICES OTC	HCFSA	X			Examples: blood pressure monitors, syringes, glucose kit, ovulation monitor pregnancy test kits
MEDICAL RECORDS CHARGES	HCFSA	X			Costs associated with copying or transferring medical records to a new provider may be eligible for reimbursement.
MINERAL SUPPLEMENTS OTC	HCFSA		X		Must be used to treat a specific medical condition. Examples: Calcium, Caltrate, Ferrous Sulfate, Folic Acid
MISSED APPOINTMENT FEES	HCFSA			X	
MOTION SICKNESS PILLS OTC	HCFSA		X		Examples: Dramamine, Marizine
MOUTHWASH OTC	HCFSA			X	Generally not eligible, however a special mouthwash recommended by a medical practitioner for the treatment of gingivitis might qualify.
<b>N</b>					
NASAL STRIPS OR SPRAYS OTC	HCFSA		X		Nasal spray or strips that are used to treat sinus problems or sleep apnea may qualify as medical care, but those used to treat snoring, or by athletes would not qualify.
NATUROPATHIC CARE	HCFSA	X			Naturopathic care rendered by a professional who provides this care for the treatment of a specific illness or disorder for you, your spouse or dependent may be reimbursed under a HCFSA.
NATUROPATHIC MEDICINES	HCFSA		X		Naturopathic medicines used for treatment of a specific illness or disorder may be reimbursed.
NEWBORN NURSING CARE	HCFSA			X	Nursing services for a normal, healthy newborn are not an eligible expense.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
NICOTINE GUM OR PATCHES OTC	HCFSA		X		Examples: Nicoderm, Nicorette
NORPLANT INSERTION OR REMOVAL	HCFSA	X			<a href="#">See Birth Control</a>
NSAIDS OTC	HCFSA		X		Examples: Advil, Alleve, Ibuprofen, Motrin, Naprosyn, Naproxen
NURSING SERVICES PROVIDED BY A NURSE OR OTHER ATTENDANT (private duty nursing)	HCFSA		X		<p>Wages, employment taxes, and other amounts you pay for nursing services (including extra costs for nurses' room and board) generally may qualify, whether provided in the participant's home or another facility. The attendant doesn't have to be a nurse, so long as the services are of a kind generally performed by a nurse. These include services directly related to caring for and monitoring your, your spouse's or dependent's condition, including:</p> <p>Preparing and giving medication;</p> <p>Changing dressings and providing wound care;</p> <p>Monitoring vital signs;</p> <p>Assessing responses to prescribed treatments, and documenting those assessments in written notes;</p> <p>If the individual providing nursing services also provides household and personal services, only those charges related to actual nursing care are eligible expenses.</p>
NUTRITIONAL SUPPLEMENTS OTC	HCFSA		X		Dietary, nutritional, and herbal supplements, vitamins, and natural medicines are not reimbursable if they are merely beneficial for general health. However, they may be reimbursable if recommended by a medical practitioner to treat a specific medical condition.
NUTRITIONIST	HCFSA		X		Nutritional services related to the treatment and guidance of a specific diagnosis or medical condition may be reimbursed.
<b>O</b>					
OBSTETRICAL EXPENSES	HCFSA	X			
OCCUSAL GUARDS TO PREVENT TEETH GRINDING	HCFSA	X			
ONLINE OR TELEPHONE CONSULTATION, MEDICAL PRACTITIONER'S FEE FOR	HCFSA	x			Will qualify, so long as the consultation's purpose is to obtain advice to treat or mitigate a medical condition.
OPTOMETRIST	HCFSA	X			
ORTHODONTIA	HCFSA	X			
ORTHOPEDIC SHOE INSERTS OTC	HCFSA	X			May qualify if used to treat injured or weakened body parts.
ORTHOPEDIC SHOES OTC	HCFSA		X		Won't qualify if used for personal or preventive reasons. If used to treat or alleviate a specific medical condition, only the excess cost of the specialized orthopedic shoe over the cost of a regular shoe will qualify.
OSTEOPATH	HCFSA	X			
OVER-THE-COUNTER MEDICINES AND DRUGS OTC	HCFSA		X		Must be used to treat a specific medical condition. Effective January 1, 2011 OTC drugs and medicines must be prescribed.

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
OVULATION MONITOR <b>OTC</b>	HCFSA	X			<a href="#">See PREGNANCY TESTS</a>
OXYGEN	HCFSA	X			This includes the expenses of oxygen and oxygen equipment for breathing problems caused by a medical condition.
<b>P</b>					
PAIN RELIEVERS <b>OTC</b>	HCFSA		X		Examples: Advil, Aspirin, Tylenol
PATTERNING EXERCISES	HCFSA	X			Expenses of hiring someone to give patterning exercises to a mentally retarded child qualify. These exercises consist mainly of coordinated physical manipulation of a child's arms and legs to imitate crawling and other normal movements.
PENILE IMPLANTS	HCFSA		X		Amounts paid for implants may be eligible if the diagnosis of impotence is due to organic causes, such as diabetes, post-prostatectomy complications, or spinal cord injury.
PERSONAL TRAINER FEES	HCFSA		X		Only if these are incurred for a limited duration and a medical practitioner has recommended a supervised exercise regimen in order to treat a disease or injury (for example, rehab after surgery or the treatment of obesity). The expense must not have been incurred "but for" the disease (e.g., if you were working with a personal trainer before being diagnosed, the expense would not qualify).
PHYSICAL EXAMS	HCFSA	X			
PLACEMENT SERVICES	DCFSA	X			The up-front fee may qualify if it is an expense that must be paid in order to obtain care. However, the fee can only be reimbursed proportionately over the duration of the agreement to employ the dependent care provider.
PREGNANCY TESTS <b>OTC</b>	HCFSA	X			Pregnancy tests, Ovulation kits
PRENATAL VITAMINS	HCFSA		X		If taken during pregnancy (a medical condition) prenatal vitamins may be considered primarily for medical care. Vitamins taken at other times generally do not qualify.
PRESCRIPTION DRUGS	HCFSA	X			Must be used to treat a medical condition and not for personal, general health, or cosmetic purposes. Drugs that are illegally procured do not qualify. Note: Dual purpose items that include a medical and cosmetic purpose may require a certification of medical necessity form.
PRESCRIPTION DRUGS - IMPORTED	HCFSA			X	IRS regulations state that any drug imported into the United States by a consumer is not eligible for reimbursement under an FSA.
PREVENTIVE CARE SCREENINGS	HCFSA	X			If the tests are designed to assess symptoms of a medical diagnosis, they may be eligible for reimbursement. Examples include clinic and home testing kits for blood pressure, glaucoma, cataracts, hearing, cholesterol, etc.
PROSTHETICS	HCFSA	X			
PSYCHIATRIC SERVICES AND CARE	HCFSA	X			
PSYCHOANALYSIS	HCFSA		X		If the expense is for medical care, and not just for the general improvement of mental health, relief of stress, or personal enjoyment. <a href="#">See COUNSELING</a>

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
PSYCHOLOGIST	HCFSA		X		If the expense is for medical care, and not just for the general improvement of mental health, relief of stress, etc.  <a href="#">See COUNSELING</a>
<b>R</b>					
RADIAL KERATOTOMY	HCFSA	X			
READING GLASSES  OTC	HCFSA	X			Includes prescription sunglasses (even those purchased over-the-counter).
RETIN-A  OTC	HCFSA		X		If recommended by a medical practitioner for a specific medical condition (e.g. acne vulgaris) and not for cosmetic purposes.
ROGAINE  OTC	HCFSA		X		If recommended by a medical practitioner for a specific medical condition. The expenses must be to ameliorate a deformity arising from congenital abnormality, personal injury from accident or trauma, or disfiguring disease.
<b>S</b>					
SCREENING TESTS	HCFSA	X			If the tests are used for medical diagnoses.
SERVICE ANIMALS	HCFSA	X			<a href="#">See GUIDE DOGS; OTHER SERVICE ANIMALS</a>
SHIPPING AND HANDLING	HCFSA	X			Shipping and handling fees to obtain an item that constitutes medical care (example: mail-order prescription delivery fee) would qualify.
SLEEPING AIDS  OTC	HCFSA		X		Examples: Unisom, Nytol, Sominex
SMOKING CESSATION PROGRAMS AND MEDICATIONS  OTC	HCFSA		X		Examples: Commit, Nicoderm CQ, Nicorette, Nicotrol  <a href="#">See NICOTINE GUM OR PATCHES</a>
SNORING CESSATION AIDS  OTC	HCFSA		X		If recommended by a medical practitioner for a specific medical condition (sleep apnea). Examples: Breathe Right, Snorezz
SPECIAL EDUCATION AND SCHOOLS	HCFSA		X		<a href="#">See LEARNING DISABILITIES</a>
SPECIAL FOODS	HCFSA		X		Special foods or beverages may qualify if prescribed by a medical practitioner to treat a specific illness or ailment and if the foods do not substitute for normal nutritional requirements. The special food or beverage must be <b>in addition to normal nutritional requirements</b> . The amount that may qualify is limited to the amount by which the cost of the special food exceeds the cost of commonly available versions of the same product.  Example # 1 – Not eligible Special infant formula would not be eligible because it is a substitute for food that is normally consumed by an individual to satisfy nutritional requirements and is considered personal expenses, not medical care expenses.  Example # 2 – May be eligible Ensure High Protein Complete may be covered if extra protein and extra nutrition is needed in your diet. Not to substitute for food that is normally consumed or to satisfy nutritional requirements.
SPEECH THERAPY	HCFSA	X			

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
SPERM STORAGE	HCFSA		X		Fees for temporary storage may be reimbursed, but only to the extent necessary for immediate conception.
STERILIZATION PROCEDURES	HCFSA	X			
STERILIZATION REVERSAL	HCFSA	X			
STUDENT HEALTH FEE	HCFSA			X	Only expenses for specific medical services would qualify.
SUBSTANCE ABUSE TREATMENT	HCFSA	X			<a href="#">See ALCOHOLISM</a>
SUNGLASSES	HCFSA	X			If they are prescription sunglasses. (Not clip on sunglasses)
SUNBURN CREAMS AND OINTMENTS OTC	HCFSA		X		Example: Solarcaine
SUNSCREEN OTC	HCFSA		X		Won't qualify if to maintain general health or for other personal reasons. May qualify if used to treat or alleviate a specific medical condition, and if the expense would not have been incurred "but for" the condition.
SURROGATE EXPENSES	HCFSA			X	
<b>T</b>					
TANNING SALON OR EQUIPMENT	HCFSA HCFSA		X	X	No, if just to improve general health or appearance.  May be reimbursed under a HCFSA for treatment of certain skin disorders, such as eczema and psoriasis. There must not be any personal element or use of the equipment by other family members.
TAXES ON MEDICAL SERVICES AND PRODUCTS	HCFSA	X			Taxes on medical services and products may be reimbursed under a HCFSA. This includes local, state, service and other taxes.
TEETHING/TOOTHACHES OTC	HCFSA		X		Examples: Orajel, Anbesol  <a href="#">See: DENTAL CARE</a>
TEETH WHITENING	HCFSA		X		Not eligible if tooth discoloration is simply the result of aging and the whitening is done for cosmetic purposes. But if tooth discoloration was caused by disease, birth defect, or injury, expenses for teeth whitening might qualify.
TELEPHONE FOR HEARING IMPAIRED PERSONS	HCFSA	X			Expenses associated with purchasing or repairing special telephone equipment for you, your spouse or dependent with a hearing impairment may be eligible for reimbursement under a HCFSA.
TELEVISION FOR HEARING-IMPAIRED PERSONS	HCFSA	X			Expenses for equipment that displays the audio of television programming as subtitles for hearing impaired persons are eligible for reimbursement under a HCFSA.  The eligible expense is limited to the cost that exceeds the cost of a non-adapted set.  <a href="#">See CAPITAL EXPENSES.</a>
THERMOMETERS OTC	HCFSA	X			
THROAT LOZENGES OTC	HCFSA		X		Examples: Cepacol, Chloraseptic  <a href="#">See COLD, FLU, DECONGESTANT &amp; SINUS REMEDIES</a>

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
TOILETRIES  <b>OTC</b>	HCFSA			X	Examples: Body Sprays, Cologne, Creams, Deodorants, Hair Removal, Lipsticks, Lotion, Make-up, Perfumes, Shampoo, Shaving Cream, Skin Moisturizers, Soaps, Toothbrush, Toothpaste  <a href="#">See COSMETIC PRODUCTS</a>
TOPICAL STEROIDS  <b>OTC</b>	HCFSA		X		Example: Hydrocortisone
TRANSPLANTS	HCFSA	X			Includes surgical, hospital, and laboratory services, and transportation expenses for organ donors.
TRANSPORTATION EXPENSES FOR PERSON TO RECEIVE MEDICAL CARE	HCFSA	X			If the expenses are primarily for and essential to medical care. These include car expenses, bus, taxi, train, plane, and ferry fares, and ambulance services. Parking fees and tolls may also qualify. Instead of actual car expenses, a standard mileage rate (19 cents per mile effective 1/1/16) for use of a car to obtain medical care is allowed.
TRANSPORTATION OF SOMEONE OTHER THAN THE PERSON RECEIVING MEDICAL CARE	HCFSA	X			In some cases, transportation expenses of the following persons may be reimbursed:  A parent who must go with a child who needs medical care;  A nurse or other person who can give injections, medications or other treatment required by a patient traveling to get medical care and who is unable to travel alone;  Visits to see your mentally ill dependent, if part of a treatment plan.
TRIPS	HCFSA			X	Excursions taken for a change in environment, general health improvement etc., even those taken on the advice of your health care provider are not an eligible expense.
TUITION EXPENSES OR FEES	DCFSA			X	
<b>U</b>					
ULTRASOUND, PRE-NATAL	HCFSA	X			May qualify if used as a diagnostic tool to determine fetal health and development. Won't qualify if for other purposes such as to obtain prenatal snapshots.
UMBILICAL CORD, FREEZING AND STORING OF	HCFSA		X		Might qualify if there is a specific medical condition that the umbilical cord is intended to treat.
USUAL AND CUSTOMARY CHARGES, EXCESS	HCFSA	X			Medical expenses in excess of your plan's usual, customary and reasonable charges may be reimbursed under a HCFSA if the underlying expense is eligible.
<b>V</b>					
VACCINES	HCFSA	X			
VARICOSE VEINS, TREATMENT OF	HCFSA		X		May qualify if the procedure promotes the proper function of the body or prevents or treats an illness or disease.
VASECTOMY	HCFSA	X			<a href="#">See STERILIZATION PROCEDURES</a>
VASECTOMY REVERSAL	HCFSA	X			<a href="#">See STERILIZATION REVERSAL</a>
VENEERS	HCFSA			X	Veneers are used primarily for cosmetic purposes.
VETERINARY FEES	HCFSA		X		Will qualify if the veterinary fees are incurred for the care of a guide dog or other animal used by a disabled person.
VIAGRA	HCFSA	X			Cialis and Levitra may also be reimbursed.
VISION CARE & CORRECTION PROCEDURES	HCFSA	X			Medical procedures that correct vision, including laser procedures such as Lasik and radial keratotomy.
VISION DISCOUNT PROGRAMS	HCFSA			X	Fees paid to gain access to a vision network, or to a reduced fee structure are not an eligible expense under a HCFSA.  <a href="#">See INSURANCE PREMIUMS</a>

Condition/Type of Service/Expense	Account Type	Eligible Expense	Potentially Eligible Expense*	Not Eligible	Additional Information
VITAMINS OTC	HCFSA		X		Only if recommended by a medical practitioner for a specific medical condition
<b>W</b>					
WALKERS OTC	HCFSA	X			
WART REMOVER TREATMENTS OTC	HCFSA		X		Example: Compound W
WEIGHT LOSS PROGRAMS AND/OR DRUGS PRESCRIBED TO INDUCE WEIGHT LOSS	HCFSA		X		If the weight loss program is recommended by a physician to treat an existing disease (such as obesity, heart disease, or diabetes) and is not simply to improve general health.
WELL-BABY/WELL-CHILD CARE	HCFSA	X			
WHEELCHAIRS OTC	HCFSA	X			
WIG OTC	HCFSA		X		The full cost of a wig purchased because the patient has lost all of his or her hair from disease or treatment.

### 2016 Plan Year

*The products listed are examples, and do NOT constitute an endorsement or an exhaustive listing of eligible medical expenses.*

*Eligible expenses listed here are subject to change without notice.*

**Medical care expenses include amounts paid for the diagnosis, cure, treatment, or prevention of disease, and for treatments affecting any part of or function of the body. The expenses must be to alleviate or prevent a physical defect or illness and must be considered a deductible medical expense pursuant to IRS regulations.**

#### SISC FLEX PLAN

P.O. Box 1808

Bakersfield, CA 93303-1808

(661) 636-4416 or 1-800-972-1727 ext. 4416

<http://sisc.kern.org/flex/>