

## Eligible Expenses

This page outlines which items are approved expenses that can be paid from a health savings account (HSA) or medical flexible spending account (FSA). This list of items indicates whether a purchase is eligible, potentially eligible (under specific conditions), or ineligible.

You can use your Further debit card to purchase eligible products on [Amazon](#) with your FSA/HSA (see [Legal Terms & Conditions](#)).

## Definitions

- **Eligible:** Medical expenses that can be reimbursed through your medical spending account include services and supplies incurred by you or your eligible dependents for the diagnosis, treatment or prevention of disease or for the amounts you pay for transportation to get medical care. In general, deductions allowed for medical expenses on your federal income tax according to Internal Revenue Code Section 213 (d) may be reimbursed through your HSA. You cannot deduct medical expenses on your federal income tax that have been reimbursed through your HSA. It is possible that changes in the IRS rules can affect the eligible, potentially eligible, and/or ineligible expense categories.
- **Potentially Eligible:** In order to determine eligibility for potentially eligible items, Further requires a Letter of Medical Necessity (linked below) from your health care provider.
- **Ineligible:** Products and services that are not HSA eligible. In most cases toiletries, cosmetics or products/ services that are likely to be primarily for general health and well being are ineligible.
- **OTC:** Over the counter. Medicines or drugs except insulin (for example, aspirin, cold remedies, or allergy medicines) are not eligible for reimbursement under an HSA (or medical FSA) unless the medicine or drug is "prescribed" (regardless of whether a prescription is required to obtain the item). Other OTC medical items noted with "OTC" (such as bandages or contact lens solution) are eligible without a prescription.

[Download the Letter of Medical Necessity](#)

## Item List

**Note:** *This list does not apply for HRAs. For an HRA, the eligible products and services are determined by your group or employer. If you have eligibility questions about your HRA, check with your benefits administrator.*



## Eligible Expenses

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Abdominal supports

Abortion

Acid Controllers/Antacids \*

Acne Treatment \*

Acupuncture

Alcoholism treatment

Allergy medicine \*†

Analgesics (e.g., vaporizing rub) \*†

Anti-Arthritics\*

Antibiotics\*

Anti-diarrhea medicine \*†

Anti-gas, Antacid\*†

Antihistamines\*†

Anti-inflammatory\*†

\* Valid prescription required

† Over the counter item



Arch supports

Artificial limbs

Aspirin\*†

Asthma treatments (e.g., inhaler, nebulizer)

Band-aids/bandages†

Bariatric surgery

Blood pressure monitoring devices

Body scans (e.g., MRI, CAT Scan)

Brace (e.g., knee, back, wrist)

Breast pumps and supplies for pump only

Burn treatments\*†

Calamine lotion\*†

Childbirth/lamaze classes (related to birth)

Chiropractic treatments (e.g., adjustments)

Chondroitin†

Circumcision

Coinsurance amounts (health, dental or vision)

Cold and flu medicine\*†

\* Valid prescription required

† Over the counter item



Cold Sore Remedies\*†

Cold/hot packs†

Condoms†

Contact lens solutions/cleaners†

Contact lenses (corrective)

Convalescent home (for medical treatment only)

Copayments (health, dental or vision)

Corn and callus removers (medicated)\*†

Corn and callus removers (non-medicated)†

Cotton balls (sterile)†

Cough drops, cough suppressants\*†

C-PAP machine and supplies

Crutches (purchase or rental)

Decongestants\*†

Deductibles (health, dental or vision)

Dental procedures, non-cosmetic (e.g., X-rays, fillings, extractions, crowns, implants)

\* Valid prescription required

† Over the counter item



Denture adhesive<sup>†</sup>

Denture care cleaning products<sup>†</sup>

Dentures

Diabetic supplies (e.g., insulin, syringe, monitor, insulin pump)<sup>†</sup>

Diaper rash treatment<sup>\*†</sup>

Drug addiction/substance abuse treatment

Ear wax removal kits<sup>†</sup>

Elastic wraps<sup>†</sup>

Embryo, egg and sperm storage fees

Expectorants<sup>\*†</sup>

Eye drops (non-medicated)<sup>†</sup>

Eye exams

Eye surgery (laser or radial keratotomy)

Eyeglasses – prescription sunglasses/safety glasses

Eyeglasses – reading

Feminine Anti-fungal / Anti-itch<sup>\*†</sup>

OTC, over the counter

\* Valid prescription required

† Over the counter item



Fertility treatments (e.g., artificial insemination, egg donor fees, in vitro)

Fiber laxatives\*†

First aid kits†

Flu shots

Fluoridation treatment at a dental office

Fluoride rinses\*†

Gambling addiction treatment

Glucosamine†

Group therapy (for patient)

Head lice treatment\*

Hearing tests and aids

Heating pad†

Hemorrhoid treatments\*†

Home health care

Hormone replacement therapy (HRT)

Immunizations

Incontinence supplies†

Individual counseling

\* Valid prescription required

† Over the counter item



Counseling must be performed to alleviate or prevent a physical or mental defect or illness

Insect bite/sting medicine\*†

Lab tests

Laxatives\*†

Mastectomy-related special bras

Medical records charges

Medicated lip balm/cream\*†

Menstrual pain relievers\*†

Nicotine patches, gum, lozenges\*†

Occlusal guards to prevent teeth grinding

Orajel pain relief\*†

Oral surgery

Oral wound treatments (cold sores)\*†

Organ transplant (including donor's expenses)

Orthodontics

Orthopedic Inserts†

\* Valid prescription required

† Over the counter item



Oxygen and oxygen equipment

Oxygen equipment<sup>†</sup>

Pain relievers\*<sup>†</sup>

Patient responsibilities

Patient responsibilities under the medical, dental or vision plan solely because of the plan's deductible, copay (coinsurance), reasonable and customary charge limit or benefit limit

Physical exams (routine, medical, well-child)

Physical therapy

Pregnancy test kits<sup>†</sup>

Prenatal vitamins<sup>†</sup>

Prenatal/postnatal exams

Prescription drugs

Prescription drugs imported from other countries are not covered

Preventive care screenings (e.g., mammogram, colonoscopy)

Prosthesis

Psoriasis treatment\*<sup>†</sup>

Psychiatric care

\* Valid prescription required

† Over the counter item





Reading glasses<sup>†</sup>

Respiratory Treatments\*<sup>†</sup>

Rubbing alcohol\*<sup>†</sup>

Shipping and handling fees for eligible expenses

Skin irritation treatment\*

Sleep aids and Sedatives\*

Sleep study

Smoking cessation medications/programs

Speech therapy

Stomach Remedies\*<sup>†</sup>

Sunburn treatments\*<sup>†</sup>

Sunscreen

Must be broad spectrum and at least SPF 15

Taxes paid for eligible expenses

Thermometers<sup>†</sup>

Throat lozenges/cough drops\*<sup>†</sup>

Transportation expenses relative to health care

\* Valid prescription required

† Over the counter item



Corresponding medical documentation requested

Tubal ligation/tubal ligation reversal

Vaccinations

Varicose veins, treatment of

Vasectomy/vasectomy reversal

Walkers/canes (purchase or rental)

Wart remover products\*†

Wheelchair (purchase or rental)

Wrist/joint supports†

X-rays

Yeast infection medication\*†

\* Valid prescription required

† Over the counter item

Potentially Eligible Expenses

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Air conditioner‡

Air purifier‡

Athletic club membership

\* Valid prescription required

† Over the counter item

‡ Capital Expense



Automobile modifications<sup>‡</sup>

Behavioral modification programs

Birth Control Pills\*

Breast reconstructive surgery

Breast reduction surgery that is medically necessary

Cosmetic surgery

For repair or reconstruction after accident or surgery or for correction of birth defect

Dietary supplements

Digestive aids

DNA collection and storage

Dyslexia testing and instruction

Ear plugs

Elevator<sup>‡</sup>

Exercise equipment or programs

Fluoridation device

Food thickeners

Genetic testing

Group therapy for family member

Guide dog/service animal (purchase, care for, training)

\* Valid prescription required

† Over the counter item

‡ Capital Expense



Hair growth/removal products

Hand sanitizer – antibacterial

Herbal treatment

Holistic or natural healers consult

Holistic remedies/medicines

Home improvements (e.g., exit ramps, widening doorways)<sup>‡</sup>

Hormone therapy

Household products/improvements to treat allergies

Lactation consultant

Lactose intolerance pills

Lead-based paint removal

Learning disability treatment

Lodging (away from home for outpatient care)

Special rules may apply

Manual therapy

Massage therapy

Medical conference admission and transportation

Excludes meals and lodging

Medical grade face mask

\* Valid prescription required

† Over the counter item

‡ Capital Expense



Mentally handicapped residential or group home

Nasal sprays/strips for snoring<sup>†</sup>

Nutritional Counseling

Orthopedic shoes

Personal trainer fees

Petroleum jelly

Prescription drugs that also have a cosmetic purpose (e.g., Retin-A, Rogaine, Botox, Propecia)

Probiotics

Special education costs for dependents with disabilities

St. John's Wort

Stem cell, harvesting and/or storage of

Support stockings (e.g., Jobst stockings)

Telephone/television equipment for hearing impaired persons

Umbilical cord, freezing and storing of

Vitamins and minerals

Weight loss program, medications and treatments

Must be prescribed by a physician for a specific medical condition - excludes food

Wigs

\* Valid prescription required

† Over the counter item

‡ Capital Expense

Ineligible Expenses

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Antiperspirant



Birthing tubs

Blemish concealer

Bottled water

Braille books/magazines

Chapsticks/lip balm

Cleaning service

Cosmetic surgery and procedures

Cosmetics, hygiene products and similar items

Dancing lessons

Dental floss

Deodorant

Diapers or diaper service

Diet foods

Drugs imported from other countries

Dust masks

Ear or body piercing

Electrolysis or hair removal

Ensure

Face creams

Feminine hygiene products (e.g., tampons)

Funeral, cremation or burial expenses

Hair colorants

Hair transplants

Hand/skin lotion

Household help

Illegal operations and treatments



Illegally obtained drugs

Insurance premiums

Certain health insurance premiums are eligible to be paid out of an HSA.

Late fees (e.g., for late payment of bills for medical services)

Lodging while attending a medical conference

Make-up

Marijuana or other controlled substances in violation of federal law

Marriage counseling

Maternity clothes

Meals

Medical newsletter

Missed appointment fees

Moisturizers

Mouthwash

New parent/newborn child care classes

Non-prescription eyeglasses, sunglasses, safety glasses or contacts

Orajel toothpaste

Prepayments

Prescription drug discount program fees

Prescription drugs and medicines imported from other countries

Shampoo

Shaving cream

Special foods/beverages

Sports training and activities

Surrogate expenses



Swimming lessons

Swimming pool and maintenance

Tanning salons and equipment

Teeth whitening

Transportation costs of disabled individual commuting to and from work

Travel for general health improvement

Veneers

