



Flexible Spending Account **ELIGIBLE** Medical Expenses

Your IPG Medical Flexible Spending Account (FSA) allows you pay for medical care expense not covered by your insurance plan with pre-tax dollars. The Internal Revenue Service defines medical care expenses as amounts paid for the diagnosis, cure, mitigation, treatment or prevention of a disease, and/or for treatments affecting any part or function of the body.

The products and services listed below are examples of medical expenses eligible for payment under your Medical FSA, to the extent that such services are not covered by your medical and dental insurance plan. This list is not all-inclusive and is subject to change in accordance with IRS regulations.

A

Acupuncture
Air purifier*
Alcoholism and drug abuse treatment
Ambulance
Artificial limbs and teeth
Automobile modification for physically handicapped

B

Bandages & first aid dressings
Birth control products
Blood pressure monitoring devices
Blood sugar test kit/strips
Body scan
Breast pumps & supplies that assist lactation
Breast reconstruction surgery following mastectomy

C

Cane
Carpal tunnel wrist supports
Chelation therapy
Chiropractor
Condoms
Contact lenses, material, supplies
Contraceptives
Co-pays
Counseling-related to medical condition
Cosmetic surgery – only if medically necessary
Crown/Bridges
Crutches

D

Deductibles
Dental sealants
Dental services
Dentures & adhesives
Diabetic supplies
Durable medical equipment

E

Egg donor fees
Eye glasses – prescription
Eye surgery
Exams – medical, dental, vision
Extraction

F

First Aid Kits
Flu shot
Fillings

G

Guide dog
Gynecologist fees

H

Hearing aids and batteries
Heating pads
Hormone replacement therapy
Hospital bed
Hospital services

I

Immunizations
Incontinence products
Insulin
In-vitro fertilization

L

Laboratory fees
Lamaze classes
Laser eye surgery; Lasik
Lodging, while away from home primarily for medical care; \$50/night per individual

M

Massage therapy, related to a medical condition*
Medical alert bracelet
Medical records charge
Mileage to/from physician visit (indexed annually)
Midwife expenses

*Denotes service and/or product that requires additional information for processing. Contact IPG FLEX for further details.

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O

Oral surgery
Orthodontia*
Orthopedic shoes
Osteopath fees
Oxygen

P

Physical exams
Physical therapy
Pregnancy & fertility kits
Prenatal vitamins - prescription
Prescriptions
Prosthesis
Psychiatric care

R

Radial keratotomy
Reading glasses
Retin-A*
Rogain*
Rolfing

S

Screening tests
Seeing-eye dog
Shipping fees associated with obtaining medical item
Sleep deprivation treatment
Speech therapy
Splints

Sunglasses - prescription
Sterilization
Supplements*
Support braces
Support hose
Syringes

T

Telephone for hearing impaired
Thermometer
Transplants
Transportation expenses for medical care (indexed annually)

U

Ultra sound
Umbilical cord freezing & storage*

V

Vaccine
Vasectomy
Vasectomy reversal
Vision correction procedure

W

Walker
Weight loss program*
Well baby care
Wheelchair
Wig

Flexible Spending Account **Ineligible** Items

Babysitting, Childcare
Cosmetic Procedures
Dental floss, Dental Rinse
Electrolysis
Electronic Toothbrush
Hair Removal, Hair Transplant
Illegal operations
Insurance premiums
Late Fees, Missed, Cancelled appointment fees
Marriage counseling
Personal Hygiene products, shampoo deodorant
Prepayment for any service
Prescription drug discount program premiums
Teeth whitening, bleaching
Toothpaste
Vitamins

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