



The following is a list of expenses that potentially qualify under a Section 223-Health Savings Account

This list is not all inclusive

- | | | | |
|--|--|--|---|
| <ul style="list-style-type: none"> • Abdominal, arch, and back supports • Acupuncture • Alcoholism treatment • Allergy medications • Ambulance expenses • Artificial limbs • Bandages • Birth control pills and other contraceptive devices • Blood tests and transfusions • Braces/orthodontia expenses • Braille books & magazines • Breast pump and supplies • Breast Reconstruction Surgery (following mastectomy for cancer) • Cardiographs • Chiropractor fees • Christian Science Practitioner • Co-insurance expenses • Cold medications • Contact lenses, contact lens solutions and enzyme cleaners • Co-pays (for office visits, urgent care, prescription drugs, etc.) • Crutches • Deductible expenses under a medical plan • Dental fees such as x-rays, cleanings, exams, crowns • Dentures • Diagnostic fees • Diabetic supplies and insulin treatments • Drug addiction treatments (medical expense amounts you pay for inpatient treatment) | <ul style="list-style-type: none"> • Elastic hosiery (with letter of medical necessity) • Eyeglasses & eye surgeries • Fees paid to health institute prescribed by doctor • Flu medications • Guide dog and maintenance of guide dog • Gum treatment • Gynecologist services • Hearing aids and batteries • Heating devices (medically necessary) • Hospital services • Hydrotherapy (medically necessary) • Inclinator • Invalid chair • Lab tests and fees • Legal fees (required to authorize health treatment) • Lodging (away from home for outpatient care) • Long-term care services • Mammograms • Menstrual care products • Metabolism tests • Neurologist fees • Nursing home and services (including board and meals) • Obstetrician services • Operating room costs • Ophthalmologist services • Optician services • Optometrist fees • Oral surgery • Organ transplant (including donor's expenses) • Orthopedist fees and orthopedic shoes | <ul style="list-style-type: none"> • Osteopath fees • Over-the-counter (OTC) drugs • Oxygen and oxygen equipment • Pain relievers • Pediatrician services • Physician services • Physiotherapist services • Podiatrist services • Postnatal treatments • Practical nurse for medical services • Premiums for continuation coverage (COBRA or USERRA) • Premiums for Medicare Part A, B, C, & D (if 65 or older) • Prenatal care • Prescription medicines • Prosthesis • Psychiatrist fees • Psychoanalyst, Psychologist, Psychotherapy services • Qualified Long-Term Care contract • Radium therapy • Saline solution for contact lenses • Sickroom supplies • Smoking cessation programs • Special auto equipment for the handicapped • Spinal fluid tests • Splints • Sterilization • Surgeon and surgery fees • Telephone/TV for hearing impaired • Therapy equipment • Transplants • Transportation expenses (relative to health care) | <ul style="list-style-type: none"> • Tuition for child with learning disability • Ultra-violet ray treatment • Vaccines • Vasectomy services • Weight loss programs fee (with approved letter of medical necessity from physician) • Wheelchair • Whirlpool bath (byprescription) • X-ray <p>Special Circumstance Expenses</p> <ul style="list-style-type: none"> • Capitol Expenses (for special equipment installed in a home, or for improvements, if for medical purposes) • Lead paint removal • Air conditioner (when medically necessary for breathing) • Registered nurses fees • Exercise equipment (by prescription) • Fluoridation unit • Long-term care insurance premiums <p>Examples of Non-Qualifying Medical Expenses</p> <ul style="list-style-type: none"> • Advance payment for services rendered in the next year • Athletic club memberships • Cosmetic surgery • Diaper service • Funeral, cremation or burial expenses • Marriage counseling • Maternity clothes • Medicare supplement premiums • Swimming pool • Vitamins and dietary supplements for general health |
|--|--|--|---|

Note: Expenses cannot be reimbursed or paid for by any other source that includes but is not limited to: Insurance Contracts, Health Reimbursement Arrangements, Flexible Spending Accounts, other Health Savings Accounts, Employers and Governmental Agencies. This list is a guide of Section 213d qualified expenses and is not all inclusive. If further verification is needed regarding whether an expense qualifies, please contact our office at (800) 234-1229. Consult your tax advisor for maximum benefit. Certain expenses may require special circumstances in order to qualify for a tax-free withdrawal from the HSA. Please consult with your tax advisor. It is understood Diversified Benefit Services, Inc. is not engaged in the practice of law or giving tax advice. The information presented here is not intended to serve as a substitute for tax advice from a qualified professional.