

Flexible Spending Account –

Over-the-Counter Expenses



Allowable Over-the-Counter Expenses

The list of OTC items that remain eligible without a prescription include, but are not limited to band aids, braces & supports, contact lens solution, elastic bandages & wraps, first aid supplies and reading glasses. The following is a condensed list of eligible over-the-counter expenses.

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|---|--|---|
| <input type="checkbox"/> Bandages | <input type="checkbox"/> Crutches | <input type="checkbox"/> Incontinence supplies |
| <input type="checkbox"/> Band-aids | <input type="checkbox"/> Denture adhesives | <input type="checkbox"/> Insulin |
| <input type="checkbox"/> Blood pressure monitors and kits | <input type="checkbox"/> Diabetic supplies | <input type="checkbox"/> Liquid adhesive for small cuts |
| <input type="checkbox"/> Braces and supports | <input type="checkbox"/> Diagnostic tests & monitors | <input type="checkbox"/> Medicine dropper/spoon |
| <input type="checkbox"/> Carpal tunnel wrist supports | <input type="checkbox"/> Elastic bandages & wraps | <input type="checkbox"/> Ostomy products |
| <input type="checkbox"/> Catheters | <input type="checkbox"/> Ear plugs | <input type="checkbox"/> Reading glasses |
| <input type="checkbox"/> Cold/hot pack for injuries | <input type="checkbox"/> First aid kits | <input type="checkbox"/> Sitz bath |
| <input type="checkbox"/> Condoms | <input type="checkbox"/> Gauze pads | <input type="checkbox"/> Thermometers |
| <input type="checkbox"/> Contact lens solution | <input type="checkbox"/> Heating pads | <input type="checkbox"/> Wheelchairs, walkers, canes |
| | <input type="checkbox"/> Hot water bottles | |

OTC drugs and medicines, with the exception of insulin are now considered ineligible unless you have a prescription from your physician. To submit these expenses, please provide (1) a copy of the prescription; (2) an itemized receipt or valid documentation for the OTC item(s) purchased; and (3) a properly completed FSA Claim Form.

OTC Items for medical care that are not medicines or drugs continue to be eligible.

Over-the-Counter Expenses Requiring a Prescription

The list of OTC items that will require a prescription include, but are not limited to acne medicine, allergy medicine, cough, cold and flu medicine, eye drops, indigestion medicine, laxatives, nasal sprays/drops, ointment for cuts/burns/rashes, and pain relievers.

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|---|--|---|
| <input type="checkbox"/> Acne medicine | <input type="checkbox"/> Cough & cold medicine | <input type="checkbox"/> Nasal sinus sprays |
| <input type="checkbox"/> Allergy & sinus medication | <input type="checkbox"/> Diaper rash ointments | <input type="checkbox"/> Nicotine gum or patches |
| <input type="checkbox"/> Antacids | <input type="checkbox"/> Digestive/Stomach medications | <input type="checkbox"/> Pain relievers |
| <input type="checkbox"/> Antibiotic products | <input type="checkbox"/> Ear drops | <input type="checkbox"/> Sinus medications |
| <input type="checkbox"/> Anti-diarrhea medicine | <input type="checkbox"/> Eye drops | <input type="checkbox"/> Sleep aids & sedatives |
| <input type="checkbox"/> Asthma medications | <input type="checkbox"/> First aid cream | <input type="checkbox"/> Spermicidal foams/gel |
| <input type="checkbox"/> Bactine | <input type="checkbox"/> Hemorrhoidal cream | <input type="checkbox"/> Sun block & Sun screen |
| <input type="checkbox"/> Ben Gay or products for muscle or joint pain | <input type="checkbox"/> Lactose intolerance medicine | <input type="checkbox"/> Throat lozenges |
| <input type="checkbox"/> Bug bite medications | <input type="checkbox"/> Laxatives | <input type="checkbox"/> Wart remover treatments |
| <input type="checkbox"/> Calamine lotion | <input type="checkbox"/> Motion sickness pills | <input type="checkbox"/> Yeast infection treatments |
| <input type="checkbox"/> Cold sore relief | | |