

ELIGIBLE AND INELIGIBLE EXPENSES HEALTHY INCENTIVES ACCOUNT



Due to Health Care Reform, effective 1/1/2011, over-the-counter (OTC) medicines and drugs (except for insulin) will require a prescription from your physician to be reimbursed from your Healthy Incentives Account (HIA). Certain health-related supplies purchased over-the-counter continue to be eligible without additional documentation. Below is a sample list of permissible expenses.

Please note: This list and substantiation requirements are subject to change per revised or clarified IRS regulations at any time. You may always contact our Customer Service department to verify the most current requirements and guidelines.

All Reimbursement Request Forms submitted must include the **required documentation** noted below.

Standard Documentation Includes <u>One of the Following:</u>	Documentation for Over-the-Counter Health Supplies Require:
<ol style="list-style-type: none"> 1. An itemized receipt or statement, or 2. The insurance company's explanation of benefits (EOB), or 3. A provider's signature on the Reimbursement Request Form along with the provider's Tax I.D. Number. <p>A canceled check does not meet IRS regulations for proper documentation of an eligible expense</p>	<ol style="list-style-type: none"> 1. Pre-printed cash register receipt that includes the date of the service, provider name, amount of purchase, and the name/description of the product purchased. 2. If any of the requirements noted in item 1 above are missing from the receipt, an additional handwritten receipt from the provider is required that contains all information and includes the provider's signature. The provider may add the missing information to the original receipt and sign the receipt for provider verification in lieu of creating a new receipt. Provider signatures must be legible.

Eligible Expenses for HIA – Healthcare

MEDICAL

- Acupuncture
- Artificial limbs
- Bandages, gauze pads, and liquid adhesive for minor cuts
- Birth control, contraceptive devices
- Birthing classes/Lamaze – only the mother's portion (not the coach/spouse) and the class must be only for birthing instruction, not child rearing
- Blood pressure monitor
- Chiropractic therapy/exams/adjustments
- Contact lens and contact lens solutions
- Co-payments
- Crutches (purchased or rented)
- Deductibles and co-insurance
- Denture adhesive
- Diabetic supplies
- Eye exams
- Eyeglasses, contacts, or safety glasses, prescription only (warranties are not reimbursable)
- Flu shots
- Hearing aids and hearing aid batteries (warranties are not reimbursable)
- Heating pad
- Incontinence supplies
- Infertility treatments
- Laser eye surgery; Lasik
- Legal sterilization
- Mileage to and from doctor appointments \$.24 for services incurred in 2009.
- Nasal strips
- Optometrist's or ophthalmologist's fees
- Physicals
- Physical therapy (as medical treatment)
- Physician's fee and hospital services
- Pregnancy test
- Prescribed drugs and medications
- Psychotherapy, psychiatric and psychological services
- Reading glasses
- Sales tax on eligible expenses
- Services connected with donating an organ
- Sleep apnea services/products (as prescribed by physicians)
- Smoking cessation programs, nicotine patch
- Thermometer
- Treatment for alcoholism or drug dependency
- Vaccinations
- Wrist supports, elastic wraps
- X-ray fees

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DENTAL

- Braces and orthodontic services
(special rules apply, see Orthodontic Worksheet available online)
- Cleanings
- Crowns
- Deductibles, co-insurance
- Dental implants
- Dentures, adhesives
- Fillings

For the DISABLED

- Automobile equipment and installation costs for a disabled person in excess of the cost of an ordinary automobile; device for lifting a mobility impaired person into an automobile
- Braille books and magazines in excess of cost of regular editions
- Note-taker, cost of, for a hearing impaired child in school
- Service dog (buying, training and maintaining)
- Special devices, such as a tape recorder or typewriter for a visually impaired person
- Visual alert system in the home or other items such as a special phone required for a hearing impaired person
- Wheelchair or autoette (cost of operating/maintaining)

Eligible Expenses Requiring a Letter of Medical Necessity

The submission of a Letter of Medical Necessity form in addition to the standard documentation is required. This form must be signed by a physician and must include the diagnosis and medical necessity of the treatment. A new Letter of Medical Necessity must be obtained each plan year in which you request reimbursement of items or services or at anytime the treatment plan changes. Submit the completed form with each request for reimbursement. The Letter of Medical Necessity form is available on our web site at www.acclaimbenefits.com.

- Do not send labels and packaging from the product as they do not qualify as third-party documentation.
- **Stockpiling** of products is not allowed by the Plan. Acclaim Benefits defines stockpiling as 5 or more products (or similar products) purchased on the same date.
- Breast pump
- Ear plugs
- Eye drops/Visine
- Massage treatments
- Nursing services for care of a special medical ailment
- Orthopedic inserts or shoes (excess cost of ordinary shoes)
- Oxygen equipment and oxygen
- Speech therapy
- Sunscreen or suntan lotion
- Support hose
- Varicose vein treatment
- Veneers
- Wigs (for mental health condition of individual who loses hair because of a disease)

Eligible Expenses Requiring a Prescription

Effective 1/1/2011 all over-the-counter medicines and drugs (with the exception of insulin) will require submission of a prescription in order to be considered eligible for reimbursement. IRS Notice 2010-59 defines "prescription" as (a) a written or electronic order for a medicine or drug that meets the legal requirements of a prescription in the state in which the medical expense is incurred and (b) that is issued by an individual who is legally authorized to issue a prescription in that state.

- Acne treatments
- Anti-fungal & anti-bacterial creams/ointments
- Bengay, Flexall, pain relieving creams or gels
- Calamine lotion
- Canker/cold sore relievers
- Cold medicines
- Corn removal
- Diaper rash ointment
- Estroven
- Glucosamine
- Hemorrhoid creams and treatments
- Indigestion or anti-acid relievers
- Laxatives
- Pain relievers (Tylenol, Advil, Aspirin etc)
- Prenatal vitamins
- Propecia/Rogaine (only eligible for a medical condition)
- Sinus medicines
- Suppositories

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The following expenses are **not** eligible for reimbursement:

Ineligible Expenses for HIA – Healthcare

- Athletic mouth guards
- Auto insurance providing medical coverage
- Breast feeding supplies
- Chapstick/lip balm
- Contributions to state disability funds
- Cosmetic surgery, cosmetic dentistry or other cosmetic procedures
- Cosmetic supplies (make up, facial soaps/creams and moisturizers, etc)
- Deodorant
- Dental floss
- Diaper service
- Diet: special diets and/or cost of special foods taken as substitute for regular diet
- Dietary and fiber supplements
- Divorce: expenses of divorce when doctor or psychiatrist recommends divorce
- Distilled water purchased to avoid drinking fluoridated city water or for use in medical equipment
- Domestic help: payments to domestic help, companion, babysitter, chauffeur, etc. who primarily render services of a non-medical nature
- Electrolysis/hair removal
- Exercise equipment and fees
- Eye drops for general comfort
- Eyeglass cases
- Hand sanitizer
- Health club or athletic club membership fees
- Herbal supplements
- Illegal treatment or medication
- Insurance premiums, all types
- Lanyards
- Lotions or skin moisturizers
- Marriage counseling
- Maternity clothes
- Mattress
- Medicare premiums
- Medicated shampoos, conditioners, and soaps
- Mobile telephone used for personal calls as well as calls to physician
- Nursemaids or practical nurses who render general care for healthy infants
- Pajamas/slippers purchased to wear in hospital
- Personal use items (toothbrush, vacuum, pillow, shampoo, mattress, etc)
- Physical treatment unrelated to specific health problems (massage for general well-being, stress, depression, or chiropractic wellness program)
- Premiums for coverage through other medical plans (i.e., spouse's employer-sponsored plan or individual plan), including TEFRA and COBRA
- Private hospital rooms
- Safety glasses (non-prescription)
- Special foods purchased to replace nutrition or for general health needs, such as diet foods.
- Sun glasses (non prescription) and Sun Clips
- Teeth whitening
- Toiletries
- Toothbrush, (includes prescribed electric ones)
- Toothpaste
- Vacuum cleaner purchased by an individual with dust allergy
- Vitamins and/or supplements
- Warranties
- Weight loss drugs/programs for general well being