

Over-the-Counter EXPENSES

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This list is not intended to be a guarantee of reimbursement or eligibility. All claims are reviewed when they are received and the determination of eligibility or reimbursement is made based upon the information received from the plan participant.

ELIGIBLE EXPENSES

Antiseptics: Alcohol Wipes/Swabs, Boric Acid, Hydrogen Peroxide, Iodine, Isopropyl Rubbing Alcohol

Asthma Medication: Bronchial Asthma Inhalers such as Primatene Mist, Expectorant Tablets

Cold, Flu, Sinus, and Allergy Medications: Cough Drops, Sore Throat, Cold & Flu Products such as Nyquil or PediaCare, Decongestants, Medicated Chest Rubs, Allergy Medication such as Claritin, Benadryl & Loratadine, Sinus Medication such as Sudafed and Zyrtec

Contraception: Condoms and Contraceptive Jelly such as Gynol II

Diabetes: Lancets, Test Strips, Monitors and Supplies such as EZY Dose Wallet

Ear/Eye Care: Lubricants, Drops, Contact Lens Solutions, Hearing Aid Batteries

First Aid: Gauze, Tape, First Aid Creams/Ointments, Topical Antibiotics, Spray/Adhesive Bandages

Health Aid: Braces for Tennis Elbow, Carpal Tunnel, etc., Hemorrhoid Relief, Sleep Aids such as Somnex, Smoking Cessation Aids, Yeast and Fungal Infection Medications, Motion Sickness, Homeopathic Remedies such as Arnica Montana and Calendula

Pain Relief: Arthritis Pain Relievers such as BenGay and Tiger Balm, Aspirin, Non-Aspirin, Back Relief, PMS, Menstrual, Tooth/Mouth Relief such as Orabase and Anbesol, Muscle/Joint Relief, Hot/Cold Compresses, Children's Pain Relievers

Personal Test Kits: Blood Pressure Monitors, Pregnancy Test, Ovulation Indicators, Cholesterol, Home Drug Test

Prenatal: Vitamins

Skin Care: Topical Steroids such as Hydrocortisone Cream, Acne Treatment, Psoriasis Gels, Diaper Rash, Blisters, Cold Sore, Athlete's Foot

Stomach Care: Indigestion, Heartburn, and Antacids such as Tagamet, Zantac, Pepcid AC and Prilosec OTC, Laxatives such as Phillips Milk of Magnesia, Ipecac, Anti-Diarrhea Medications

DUAL PURPOSE EXPENSES

Nutritional supplements (such as vitamins, herbal supplements, and natural medicines) are not eligible unless you have been directed to use them by a licensed practitioner to treat a specific medical condition and the item is not consumed to maintain general health.

A written directive from the practitioner is required for reimbursement.

In addition, you must be able to certify that except for the particular medical condition, you would not be taking the supplement or using the product.

Examples:

Herbal Supplements and Natural Medicines such as Glucosamine, St. John's Wort, Gingko Biloba, and Echinacea

Vitamins and Mineral Supplements such as Iron and B Complex

INELIGIBLE EXPENSES

Baby Wipes
Chapstick
Deodorants
Feminine Hygiene Products
Hair Re-growth Products
Insect Repellent
Personal Hygiene Products

Shampoo/Conditioner
Skin Care Products
Sunscreen (under SPF 30)
Teeth Cleaning Products
Teeth Whitening Products/Services
Toothpaste/Floss
Toothbrush/Electric Toothbrush



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