

Over-the-Counter (OTC) Medical Expense Reimbursements

The list below is not intended to be all-inclusive, but is rather to answer frequently asked questions regarding OTC expenses for a Limited Spending Account. With a Limited account, only vision, dental and preventive care expenses are reimbursable while meeting your health plan deductible. Once you have met your deductible, your account may reimburse for all eligible expenses. Check your plan documents for any plan-specific limitations.

This list is subject to change per IRS rulings or interpretation changes. If you have questions about a claim, call Aetna toll free at the number on the front of this form.

I. Eligible for Reimbursement While Meeting Your Deductible (i.e., Pre-Deductible Phase)
Dental care (toothache relief, temporary filling, denture adhesive, etc.)
Eye care (contact lens solution, lubricant eye drops, eye patches, reading glasses, etc.)
Home diagnostic tests or kits (blood pressure, cholesterol screening, diabetes, colorectal cancer, HIV, urine test, thermometers, etc.)
Pre-natal vitamins – with doctor's note of medical necessity
Smoking-cessation relief (patches, gum, etc.)
Weight-loss products – with doctor's note of medical necessity

II. Post Deductible Phase - Eligible Medical Expenses reimbursable without prescription.
Bandages
Eye Care (contact lens solution, lubricant drops, patches)
Family planning (condoms, contraceptive creams, pregnancy test, ovulation predictor kits, etc.)
Home diagnostic tests or kits (blood pressure, cholesterol, diabetes, colorectal cancer, HIV, urine test, thermometers, etc.)
Incontinence products (Depends, Serenity pads, etc)
Joint-support bandages and hosiery, e.g., knee or elbow supports
Vaporizers and humidifiers

III. Post Deductible Phase- Eligible Medical Expenses for Reimbursement when prescribed by a licensed health care professional. <i><u>A Prescription is required with each request for reimbursement. The prescription must include the patient's name and be written, signed and dated by the licensed health care professional.</u></i>
Acid Controllers
Allergy & Sinus
Antibiotic Products
Anti-Diarrheals
Anti-Gas
Anti-Itch & Insect Bite
Antiparasitic Treatments
Baby Rash Ointments/Creams
Cold Sore Remedies
Cough, Cold & Flu
Digestive Aids
Feminine Anti-Fungal/Anti-Itch
Hemorrhoidal Preps
Laxatives
Motion Sickness
Pain Relief
Respiratory Treatments
Sleep Aids & Sedatives
Smoking Cessation Products
Stomach Remedies

IV. Not Reimbursable (merely beneficial to good health)
Cosmetics (makeup, lipstick, cotton swabs, cotton balls, baby oil, etc.)
Denture care (e.g., cleansers)
Hair care (color, shampoo, conditioner, brushes, hair-loss products e.g., Rogaine)
Nail care and personal grooming items (scissors, nail files, etc.)
Personal hygiene products (deodorant, soap, body powder, shaving cream, razors, feminine care, etc.)
Routine dental care (toothpaste, toothbrush, electric toothbrush, floss, mouthwash including antibacterial mouthwash and fluoride rinse, breath strips, teeth-whitening, etc.)
Vitamins and Supplements or other homeopathic medicines (may be eligible with evidence of medical necessity)
Skin care (facial cleanser, skin and body moisturizing lotion, etc.)