



Flexible Spending Account
Administration Services

Over-The-Counter (OTC) Purchases

The health care reform legislation signed into law in March, 2010, will change the eligibility requirements for certain over the counter (OTC) purchases beginning on January 1, 2011. Many OTC items that were previously eligible expenses for medical expense reimbursement through the flex benefit plan will now require a Letter of Medical Necessity from their health care provider. Essentially, OTC purchases that are considered drugs and medicines, except insulin, will require the Letter of Medical Necessity form, which may be found on the Region I website.

There are still OTC purchases that do not require the Letter of Medical Necessity. The following lists are examples of OTC purchases which may be reimbursed through the Medical Expense Reimbursement Account, those which require a Letter of Medical Necessity for reimbursement, and those which are not reimbursable. Please keep in mind that these are examples and not considered to be all inclusive.

Substantiation requirements

- For all OTC reimbursement requests, we will require a third party receipt with the name of the medicine or drug, the date purchased, and the amount paid. If your request for reimbursement also requires a Letter of Medical Necessity, please attach the form for each reimbursement request submission.

Examples of Reimbursable Over-The-Counter (OTC) Purchases Not Requiring a Letter of Necessity

Bandages & First Aid Dressings	Diabetes Testing Supplies	Nebulizers
Birth Control Products	Durable Medical Equipment	Orthopedic Aids
Blood Pressure Kits	Hearing Aid Batteries	Pregnancy & Fertility Kits
Canes & Walkers	Heating Pads	Splints, Supports & Braces
Contact Lenses	Hot, Cold & Steam Packs	Thermometers
Contact Lens Solution	Incontinence Products	Wheelchair & Accessories
Denture Adhesives	Insulin	

Examples of Reimbursable OTC Purchases that Require a Letter of Medical Necessity

Acid Controllars	Antiparasitic Treatments	Laxatives
Allergy & Sinus	Baby Rash Ointments/Creams	Motion Sickness
Antibiotic Products	Cold Sore Remedies	Pain Relief
Anti-Diarrheals	Cough, Cold & Flu Medicine	Respiratory Treatments
Anti-Gas	Digestive Aids	Sleep Aids & Sedatives
Anti-Itch & Insect Bite	Feminine Anti-Fungal/Anti-Itch	Stomach Remedies
	Hemorrhoidal Preps	

Examples of Non-Reimbursable Over-The-Counter Drugs and Supplies

Lip balm, such as Chapstick	Feminine hygiene products	Suntan lotion
Cosmetics	Medicated shampoos (for dry scalp or dandruff)	Teeth bleaching kits
Deodorants	Moisturizers	Toiletries, personal use items
Diet drinks or food, including doctor prescribed food and beverages	Shaving cream	Toothpaste or toothbrushes (electric or otherwise)
Facial cream	Soaps	Vitamins