

Medical Care Expenses

You can use your health reimbursement arrangement (HRA) to pay or reimburse hundreds of eligible medical, dental, or vision expenses and premiums. Your HRA covers you, your spouse, and dependents. IRS-qualified “medical care” expenses and premiums are outlined in Section 213(d) of the Internal Revenue Code. Examples include, but are not limited to, those listed below.

When you’re ready to file a claim, log in at **HRAveba.org** and click **Claims**, or use our handy mobile app, **HRAgo®**. We’ll process your claim in about five to seven business days.

With our free **Benefits Card**, you don’t have to file claims and wait to get reimbursed. Just swipe your card and save the explanation of benefits (EOB) or detailed invoice from your provider. We’ll let you know when we need a copy.



General Expenses

Acupuncture	Gynecology/Obstetrics	Physicals (annual, DOL)
Alcoholism and drug treatment center costs	Hearing aids and batteries	Prescription medicines
Birth control (male and female)	Immunizations	Preventive care
Blood pressure monitor	Lactation aids, consultation	Psychiatric
Chiropractic	Laser eye surgery	Retirement home (medical care costs)
Christian Science office visits	Massages*	Stem cell therapy
Contact lenses	Medical supplies and equipment	Stop smoking programs
Copays	Naturopathic office visits	Transportation
Coinsurance	Organ transplants	Vaccines
Deductibles	Orthodontia	Vasectomy
Dental	Orthotics	Vision (exams, glasses, prescription sunglasses)
Flu shots	Osteopathy	Wheelchair
Fertility treatments	Physical therapy	

*Letter of medical necessity required.



Premiums

IRS-qualified premiums deducted from your paycheck after taxes are eligible, unless your employer offers a pre-tax option. Premiums deducted from your spouse’s paycheck after taxes may be eligible.

Medical*	Qualified long-term care	Medicare Supplement
Dental	Medicare Part B	
Vision	Medicare Part D	

*Includes marketplace exchange premiums that are not or will not be subsidized by the Premium Tax Credit.

The OneBridge Visa® Benefits Card is issued by The Bancorp Bank, Member FDIC, pursuant to a license from Visa U.S.A. Inc. and may be used for qualified expenses wherever Visa debit cards are accepted. See Cardholder Agreement for details.



Over-the-counter (OTC)

Prescription or Letter of Medical Necessity Required

Acne medications	Nasal sprays or drops
Allergy and sinus medicines	Nicotine gum/patches
Antacids	Pain relievers
Aspirin	Sinus medications
Cold medicines	Sleep aids
Cough syrup	St. John's Wort
Dietary supplements	Stomach remedies
Eye drops	Supplements
Herbal medicines	Weight loss drugs

No Prescription Required

Bandages
Birth control products and devices
Contact lens solution
Crutches
First aid creams
Insulin
Diagnostic devices (blood sugar kits)



Medicare

Copays	Hospice care	Medicare Supplement premiums
Coinsurance	Hospital stay	Outpatient hospital services
Deductibles	Medicare Part B premiums	Skilled nursing facility stay
Home health care	Medicare Part D premiums	



Military Retirees

Copays	Medicare Part D Premiums	TRICARE premiums (medical and dental plans)
Deductibles	Miscellaneous medical, dental, and vision expenses	
Medicare Part B Premiums		



Ineligible Expenses

Aromatherapy	Hair regrowth supplies and services	Massages*
Cosmetic products and procedures	Hair transplants	Protein drinks
Counseling (marriage, general wellbeing)	Health sharing premiums	Shampoo
Facelifts	Late fees	Tips
Food	Marijuana, marijuana-derived CBD products	Tooth brushes
Gym memberships*		Vitamins
		Warranties, protection plans

*May be reimbursed with a letter of medical necessity.

MORE INFO?

HRAveba.org

QUESTIONS?

1-888-659-8828

customercare@hraveba.org



Certain restrictions may apply. Read our **HRA VEBA Plan Summary** for details. To get a copy, log in online and click Resources. Expenses solely for cosmetic reasons are not qualified medical care expenses. Expenses for items or services intended to maintain good health and not treat a diagnosed medical condition are usually not eligible. Certain "dual-purpose" expenses, such as massages, may require a letter of medical necessity from your licensed healthcare provider. If you're covered by a healthcare flexible spending account (FSA), it must be used up before submitting claims to your HRA.