



## Section 213(d) ELIGIBLE EXPENSES

If you have any questions on what constitutes a Section 213(d) eligible expense, please contact our Customer Relations Team: Call 1-888-401-FLEX (3539), chat online at [www.benstrat.com](http://www.benstrat.com) or email to [info@benstrat.com](mailto:info@benstrat.com).

### DENTAL

- Dental X-Rays
- Dentures and Bridges
- Exams and Teeth Cleaning
- Extractions and Fillings
- Oral Surgery
- Orthodontia
- Periodontal Services

### EYES

- Eye Exams
- Eyeglasses and Contact Lenses
- Laser Eye Surgeries
- Prescription Sunglasses
- Radial Keratotomy

### HEARING

- Hearing Aids and Batteries
- Hearing Exams

### LAB EXAMS/TESTS

- Blood Tests and Metabolism Tests
- Body Scans
- Cardiograms
- Laboratory Fees
- X-Rays

### MEDICATIONS

- Insulin
- Prescription Drugs

### MEDICAL EQUIPMENT/SUPPLIES

- Air Purification Equipment\*
- Arches and Orthotic Inserts
- Contraceptive Devices
- Crutches, Walkers, Wheel Chairs
- Exercise Equipment\*
- Hospital Beds\*
- Mattresses\*
- Medic Alert Bracelet or Necklace
- Nebulizers
- Orthopedic Shoes\*
- Oxygen\*
- Post-Mastectomy Clothing
- Prosthetics
- Syringes
- Wigs\*

### MEDICAL PROCEDURES/SERVICES

- Acupuncture
- Alcohol and Drug/Substance Abuse (inpatient treatment and outpatient care)
- Ambulance
- Fertility Enhancement and Treatment
- Hair Loss Treatment\*
- Hospital Services
- Immunization
- In Vitro Fertilization
- Physical Examination (not employment-related)
- Reconstructive Surgery (due to a congenital defect, accident, or medical treatment)
- Service Animals
- Sterilization/Sterilization Reversal
- Transplants (including organ donor)
- Transportation\*

### OBSTETRICS

- Breast Pumps and Lactation Supplies
- Doulas\*
- Lamaze Class
- OB/GYN Exams
- OB/GYN Prepaid Maternity Fees (reimbursable after date of birth)
- Pre- and Postnatal Treatments

### PRACTITIONERS

- Allergist
- Chiropractor
- Christian Science Practitioner
- Dermatologist
- Homeopath
- Naturopath\*
- Optometrist
- Osteopath
- Physician
- Psychiatrist or Psychologist

### THERAPY

- Alcohol and Drug Addiction
- Counseling (not marital or career)
- Exercise Programs\*
- Hypnosis
- Massage\*
- Occupational
- Physical
- Smoking Cessation Programs\*
- Speech
- Weight Loss Programs\*

\*This is a dual use item/service, meaning it can be used for general health as well as to treat a illness or physical defect. If the item/service is prescribed to treat a diagnosed illness or physical defect, a Physician Statement form needs to be submitted to Benefit Strategies for it to be eligible. (Items/services for general health are not eligible.) The Physician Statement form can be found on [www.benstrat.com](http://www.benstrat.com), or contact our Customer Service team to have one mailed to you. **The debit card will not work for dual use items.** You must submit for reimbursement. Remember to include the receipt and Physician Statement when you submit.



## ELIGIBLE Section 213(d) OVER-THE COUNTER SUPPLIES

(Product categories are listed in bold face; common examples are listed in regular face.)

<ul style="list-style-type: none"> <li>■ <b>Baby Electrolytes and Dehydration</b> Pedialyte, Enfalyte</li> <li>■ <b>Contraceptives</b> Unmedicated condoms</li> <li>■ <b>Denture Adhesives, Repair, and Cleansers</b> PoliGrip, Benzodent, Plate Weld, Efferdent</li> <li>■ <b>Diabetes Testing and Aids</b> Ascencia, One Touch, Diabetic Tussin, insulin syringes; glucose products</li> <li>■ <b>Diagnostic Products</b> Thermometers, blood pressure monitors, cholesterol testing</li> <li>■ <b>Ear Care</b> Unmedicated ear drops, syringes, ear wax removal</li> </ul>	<ul style="list-style-type: none"> <li>■ <b>Elastics/Athletic Treatments</b> ACE, Futuro, elastic bandages, braces, hot/cold therapy, orthopedic supports, rib belts</li> <li>■ <b>Eye Care</b> Contact lens care</li> <li>■ <b>Family Planning</b> Pregnancy and ovulation kits</li> <li>■ <b>First Aid Dressings and Supplies</b> Band Aid, 3M Nexcare, non-sport tapes</li> <li>■ <b>Foot Care Treatment</b> Unmedicated corn and callus treatments (e.g., callus cushions), devices, therapeutic insoles</li> <li>■ <b>Glucosamine &amp;/or Chondroitin</b> Osteo-Bi-Flex, Cosamin D, Flex-a-min Nutritional Supplements</li> </ul>	<ul style="list-style-type: none"> <li>■ <b>Hearing Aid/Medical Batteries</b></li> <li>■ <b>Home Health Care (limited segments)</b> Ostomy, walking aids, decubitis/pressure relief, enteral/parenteral feeding supplies, patient lifting aids, orthopedic braces/supports, splints &amp; casts, hydrocollators, nebulizers, electrotherapy products, catheters, unmedicated wound care, wheel chairs</li> <li>■ <b>Incontinence Products</b> Attends, Depend, GoodNites for juvenile incontinence, Prevail</li> <li>■ <b>Prenatal Vitamins</b> Stuart Prenatal, Nature's Bounty Prenatal Vitamins</li> <li>■ <b>Reading Glasses and Maintenance Accessories</b></li> </ul>
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## POTENTIALLY ELIGIBLE OVER-THE COUNTER MEDICINES AND DRUGS

**IMPORTANT:** Over-The-Counter Medicines and Drugs are only eligible if a prescription is obtained and the medicine/drug is prescribed in accordance with state laws. Although you don't need the prescription for the purchase, the prescription makes it eligible under Section 213(d). If the prescription is provided to the pharmacist and thus the item processes as a prescription transaction, the debit card will work. If the item is not run as a prescription, the debit card will not work and you will need to pay with your own funds and submit for reimbursement and include both the receipt and prescription when you submit.

<ul style="list-style-type: none"> <li>■ Acid controllers</li> <li>■ Acne medications</li> <li>■ Allergy &amp; sinus</li> <li>■ Antibiotic products</li> <li>■ Antifungal (Foot)</li> <li>■ Antiparasitic treatments</li> <li>■ Antiseptics &amp; wound cleansers</li> <li>■ Anti-diarrheals</li> <li>■ Anti-gas</li> <li>■ Anti-itch &amp; insect bite</li> <li>■ Baby rash ointments &amp; creams</li> <li>■ Baby teething pain</li> <li>■ Cold sore remedies</li> </ul>	<ul style="list-style-type: none"> <li>■ Cough, cold &amp; flu Denture pain relief</li> <li>■ Digestive aids</li> <li>■ Ear care</li> <li>■ Eye care</li> <li>■ Feminine antifungal &amp; anti-itch</li> <li>■ Fiber laxatives (bulk forming)</li> <li>■ First aid burn remedies</li> <li>■ Foot care treatment</li> <li>■ Hemorrhoidal preps</li> <li>■ Homeopathic remedies</li> <li>■ Incontinence protection &amp; treatment products</li> <li>■ Laxatives (non-fiber)</li> </ul>	<ul style="list-style-type: none"> <li>■ Medicated nasal sprays, drops, &amp; inhalers</li> <li>■ Medicated respiratory treatments &amp; vapor products</li> <li>■ Motion sickness</li> <li>■ Oral remedies or treatments</li> <li>■ Pain relief (includes aspirin)</li> <li>■ Skin treatments</li> <li>■ Sleep aids &amp; sedatives</li> <li>■ Smoking deterrents</li> <li>■ Stomach remedies</li> <li>■ Unmedicated nasal sprays, drops &amp; inhalers</li> <li>■ Unmedicated vapor products</li> </ul>
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