SUPERIORUSA BENEFITS Product/Service List

Note: In March of 2020, legislation was passed that made two changes to eligible expenses for FSA and HSA accounts. 1) removal of the prescription (letter of medical necessity) requirement for over-thecounter (OTC) Drugs and Medicine (those products with **an active drug ingredient**)* and 2) the inclusion of menstrual care products on the eligible expense list. * this means that items such as vitamins and supplements, typically used for general health maintenance still require a statement from a physician indicating that they needed to treat a medical condition. Pre-natal vitamins and glucosamine are allowed without a prescription/letter of medical necessity.

| ACCEPTED – NO RX REQUIRED. This is not an exhaustive list. As a general rule only | |
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| OTC products with an active drug ingredient are eligible without a Rx or letter of medical | |
| necessity. | |
| Acid Controllers | Health support (bandages, braces etc for |
| Acne Medications | medical reasons) |
| Allergy&Sinus Medications | Hearing aid batteries |
| Antibiotic products | Hot/Cold packs |
| Anti-Diarrheal products | Homeopathic Remedies |
| Anti-fungal (foot) | Incontinence supplies (including juvenile |
| Anti-itch & Insect bite remedies | and adult diapers) |
| Antiparasitic Treatments (e.g. lice | Laxatives |
| treatment) | Lip Balms (when used to prevent cancer) |
| Antiseptics & wound cleaners | Motion Sickness treatments |
| Baby Electrolytes/dehydration treatment | Medicated Nasal sprays |
| Baby rash ointments and creams | Menstrual Care products |
| Baby teething pain relief gels | Mouth Guards (not sports related) |
| Cold Sore remedies (medicated) | Nasal Moisturizers and Washes |
| Compression Socks | Nasal Strips/Snore Relief |
| Contraceptives | Prenatal Vitamins |
| Cough, Cold and Flu medications | Reading Glasses |
| Denture pain relief treatments | Rogaine |
| Denture care products (adhesives, | Sleep Aids |
| cleaners) | Smoking Cessation products |
| Denture repair products/services | Sunscreen |
| Diabetes care | TENS |
| Diagnostic products (test kits, thermometers) | Wart remover/treatment |
| Ear care (medicated ear drops) | |
| Eye drops | |
| Feminine antifungal (e.g. Monistat) | |
| Fiber Laxatives (does not include fiber bars | |
| and drinks to promote digestion and | |
| regularity) | |
| First Aid Creams (medicated) | |
| Foot Care treatments | |
| Hemorrhoid creams/treatments | |
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Dual Purpose: requires Rx or letter of medical necessity. This is not an exhaustive list. As a general rule, OTC items that are medicated will not require additional support from a health care professional. OTC treatments and products/services that have more than one use will require a letter of medical necessity.

Allergy Pillows, Mattress, etc Antibacterial hand sanitizer Baby Diapers (when used for juvenile incontinence) Baby Formula (only specialty) Cold/Flu dietary supplements (when primary purpose is to boost or support immune system they are not medically necessary) **Diabetes Nutritionals** Diabetic Personal Care items Ear Plugs Exercise equipment Face/Respiratory mask Dietary supplements (used to treat disease) Massage Medicated soaps Nutritional support **Probiotics** Therapeutic hand/body lotions Therapeutic shampoo/scalp treatment Vitamins and Minerals Weight loss/control supplements

Ineligible product/services.

Baby toiletries (oil, lotion, powder) Beauty Shampoo/ conditioner Cosmetics Deodorant Facial cleaner Feminine Cleansing products Foot grooming tools/equipment Food Hand/body soap and lotion Hair removal products Oral Care products including toothpaste, toothbrush, mouthwash Shaving products Skin care products Sports drinks Sugar/salt substitutes Tanning lotion