

QUALIFYING MEDICAL EXPENSES

The Medical Reimbursement Plan Document contains the rules governing what expenses are or are not reimbursable. Below are some examples to give you a general idea. Please contact National Plan Administrators, Inc. (800) 880-2776, if you have any questions about whether a particular expense is reimbursable or not.

Examples of expenses for which you may be able to receive reimbursement include:

Deductibles and co-payments for medical, prescription drugs, vision and/or dental expenses.

Over the counter drugs and items that are used to alleviate or treat a personal injury or sickness.

Eye exams, eyeglasses, contact lenses and other vision expenses.

Hearing exams, hearing aids and batteries.

Individual psychotherapy. Chiropractic expenses.

Orthodontia monthly and down payments.

Acupuncture with letter of medical necessity.

Examples of expenses for which you cannot be reimbursed include:

Over the counter items or vitamins even if prescribed; toothpaste, toiletries, any item or drug that is for general good health.

Cosmetic surgery or other similar procedures or drug, which is directed at improving the patient's appearance and does not meaningfully, promote the proper function of the body to prevent or treat illness or disease.

Teeth bleaching.

Health club dues. Custodial care.

Weight reduction or management related expenses unless submitted with letter of medical necessity from physician.

Herbal remedies, drugs or supplements, even if prescribed

CLAIM SUBMISSION PROCEDURES

Claim forms are available online at www.natplan.com/forms.htm. In addition, you will receive a new claim form each time you are issued a reimbursement check or notice of direct deposit.

According to the Internal Revenue Code Section 125, the Unreimbursed Medical and Dependent Care Flexible Spending Accounts (FSAs) may reimburse an expense if the participant provides

- A written statement, receipt or bill from an independent third party stating the expense(s) has been incurred,
- The amount of such expenses(s)
- A signed statement that the expense has not been reimbursed or is not reimbursable under any other health plan coverage.

Procedures for submitting claims that will help to ensure prompt and efficient processing:

1. For ALL medical expenses, itemized billings must be submitted to NPA for reimbursement with the following information:
 - Date of service,
 - Description of services provided,
 - Prescription drug name,
 - Patient name,
 - Provider name/ address,
 - Total amount of payment for which you are seeking reimbursement,
 - An Explanation of Benefits (EOB) from an insurance company, if applicable, must also be submitted.
 - Over the counter drugs and items must have a receipt that contains the date purchased, name and cost of item. If the receipt does not provide a name, then the box top or box side must be submitted that contains the name and cost of item that corresponds to the receipt.
2. When filing orthodontic claims for the first time, NPA must have a *copy of the Orthodontic Contract* including the down/initial payment, schedule of payments, when banding will occur and the duration of the treatment. Thereafter, simply submit a claim form with receipts and indicate that it is an orthodontic treatment expense. Claims can only be reimbursed for payments made according to the orthodontic contract payment schedule.
3. **Please be sure to retain copies of all items submitted to NPA for reimbursement.**

