

Health Reimbursement Arrangement

Eligible Expense Guide















Understanding Your HRA

Health Reimbursement Arrangement (HRA) eligible expenses can vary depending on your plan's unique design. To help you better understand what type of HRA you have and, most importantly, which expenses are eligible, we've created this eligible expense guide for you.



Identify Your HRA

Simply log into your plan at www.myMidAmericaJourney.com. If it's your first time logging in, select Create Your New Username and Password from the login screen. Once logged in, locate the **Accounts** section from your homepage. From here, you can identify the type of HRA you have. You can also contact our Participant Services team at healthaccountservices@myMidAmerica.com or (855) 329-0095.



Understanding the Account Types

Below is a description of each account type as well as the expenses eligible within each. Pages 2-4 provide additional details on common eligible and ineligible expenses.

Account Types in MidAmerica Journey

Depending on your unique plan design, one or more of the below account types will display in the Accounts section of your Journey homepage once you log in.

Available: Full Medical or Available: Medical and Post-Tax Premiums





Once logged into MidAmerica Journey, if your account is named Available: Full Medical or Available: Medical and Post-Tax Premiums, your eligible expenses include:

- Full 213(d) Expenses
- Post-Tax Premiums

Available: Premiums



Once logged into MidAmerica Journey, if your account is named Available: Premiums, your eligible expenses include:

Post-Tax Premiums

Available: Medical (No Premiums)



Once logged into MidAmerica Journey, if your account is named Available: Medical (No Premiums), your eligible expenses include:

Full 213(d) Expenses

Unavailable

An Unavailable account means that you currently do not have access to funds based on either your plan's vesting schedule, your employment status, or a combination of the two. For additional details on your plan design, contact our Participant Services team at (855) 329-0095 or email us at healthaccountservices@myMidAmerica.com.



Full 213(d) Eligible Medical Expenses A Partial Listing

Qualified HRA expenses and premiums are outlined in Internal Revenue Code Section 213(d). To help you, we have created a partial listing of the IRS Section 213(d) expenses inquired about most frequently. For a full listing of eligible expenses, go to www.irs.gov/pub/irs-pdf/p502.pdf. You can also access additional details on eligible expenses by visiting https://sig-is.org/eligible-product-list2/eligible-product-list-criteria. It's important to note that these links provide examples of possible eligible expenses—the expenses eligible under the plan established by your employer may vary. Please review the Plan Highlights included with your Welcome Kit for additional details.

Most Common Expenses

- Over-the-Counter Drugs, such as pain relievers, sleep aids, digestive aids, and cold medicines
- Office Visit Copays
- Physician Service Copays
- **Prescription Copays**
- Insurance Plan **Deductibles**
- Insurance Plan Co-Insurance
- Menstrual Care **Products**

Other Services & **Fees**

- Anesthetist
- Chiropractor
- Christian Science
- Dentist
- Exam, physical
- Eye Exam
- **Fertility Treatments**
- Gynecologist
- Healing Services
- Hospital
- Laboratory
- Osteopath
- Physician
- Physiotherapist
- **Psychiatrist**
- Sex Therapist
- Specialists
- Surgeons

Military Retiree Coverage (TRICARE formerly known as CHAMPUS)

- Copays
- Deductibles
- Office Visits
- Vision
- **EXTRA Premiums**
- Medicare Part B **Premiums**
- PRIME (HMO) **Premiums**
- **PRIME Supplement Premiums**
- Retiree Dental **Premiums**
- Standard Premiums

Misc. Expenses

- Adoption (medical expenses incurred before adoption is finalized)
- Air conditioning and air filters used for alleviating illness
- Alcoholism and Drug **Treatment Center Costs**
- Ambulance Hire
- Artificial Limbs and Teeth
- Automobile Modifications (hand controls, special equipment, mechanical lifts)
- Birth Control Pills
- Braille Books &

- Magazines
- **Breast Pumps**
- Childbirth Classes (birth preparation, not child rearing)
- Contact Lenses
- **Dental Treatments**
- Eve Exam
- Eyeglasses
- Fertility Treatments
- Food & Beverages for specific diseases
- Genetic Testing (to determine possible defects)
- Hearing Aids & Batteries
- **Immunizations**
- Infertility Treatment
- Laser Eye Surgery
- Lead-Based Paint Removal
- Learning Disability (school or educator for learning disabled children recommended by doctor)
- Lifetime Care at Medical Facility
- Lodging for Medical Care or Treatment (subject to \$50/day per person)
- Medical Supplies & Equipment
- Norplant Insertion or Removal
- Obstetrical Expense
- **Operations**
- Optometrist
- Oral Surgery

- Organ Transplants
- Orthodontia
- Physical Therapy
- **Prescription Medicines**
- Private Hospital Room
- Retirement Home Fees, costs allocable to medical care
- Seeing-Eye Dog
- Speech Training for Child with Dyslexia or other Learning Disability
- Sterilization
- Stop-Smoking **Programs**
- Student Health Fees
- Support for Corrective **Devices**
- Telephone for Deaf
- Therapy Treatments ***
- Transportation Expense Relative to Illness (subject to IRS limits)
- Vaccines
- Vasectomy
- Viagra
- Vitamins (subject to doctor's verification)
- Weight Loss Program (to treat an existing disease)
- Wheelchair
- X-Rays

^{*}Subject to annual maximum limits

^{***} IRS Section 213(d) has indicated that therapy provided for the general improvement of mental health, relief of stress, or personal enjoyment, is not an eligible expense reimbursable from your HRA or Flexible Spending Account. Therapy used to treat a specific medical need remains eligible. Therefore, this type of expense will require a doctor's note, with a diagnosis, to state the medical need for eligibility to be determined.

The following is a partial listing of eligible reimbursable expenses. A Health Reimbursement Arrangement (HRA) participant may request a reimbursement by properly submitting their claim online or by completing, signing, and returning a MidAmerica Claim Form along with proof of their claim. Qualified premiums are outlined in Internal Revenue Code Section 213(d).

Insurance premiums paid by an employer or through a pre-tax Section 125 cafeteria plan are not eligible for reimbursement. If you are a current participant in a Section 125 Health Care Flexible Spending Account (FSA), you must exhaust the FSA benefits before you may file an eligible HRA claim.

Common Qualified Claims

- Premiums paid by the former employee to a subsequent employer's group health plan.
- Premiums on an individual health insurance policy purchased by the former employee, including those purchased from the health care exchange.*
- Premiums on a Medicare supplemental health insurance policy purchased by the former employee.
- Reimbursement for Medicare Part B premiums paid by the former employee.
- Once Medicare Part D is implemented, Medicare Part D premiums paid by the former employee.
- Additional contributions the former employee's spouse pays to enroll the former employee as a dependent in the spouse's employer's group health plan (as long as these additional premiums were not paid by the spouse with pre-tax payroll deductions).
- Premiums for separate dental, vision, or prescription drug insurance policies.
- Premiums paid by the former employee for long-term care coverage. Long-term care premium reimbursements are subject to the following Internal Revenue Service limitations for the year 2022. Any premium amounts for the year above these limits are not considered to be an eligible medical expense.

Long-Term Care Premium Reimbursements: IRS 2022 Limitations

Attained age before the close of the taxable year	Maximum Deduction for 2022
40 or less	\$450
More than 40 but not more than 50	\$850
More than 50 but not more than 60	\$1,690
More than 60 but not more than 70	\$4,510
More than 70	

^{*}If you are otherwise eligible for a Premium Tax Credit (subsidy), you may suspend your HRA balance to qualify. Your suspension will be in effect for the entire plan year and is irrevocable. To obtain a suspension form, please contact us at (855) 329-0095.

The IRS does not allow the following to be reimbursed under your Health Reimbursement Arrangement as expenses to promote general health are not eligible. This is not an inclusive listing.

- Babysitting and Child Care
- Calcium Supplements
- Cancer, Indemnity, and Long-Term Disability Insurance
- Canceled Appointment Fees
- Contact Lens Insurance
- Cosmetic Surgery/Procedures
- Custom Fit-overs (clip-ons)
- Dancing Lessons
- Dental Discount Programs
- Diaper Service
- Discounted Fees/Write-offs
- Electrolysis
- Exercise Equipment*
- Eyeglass Insurance
- Fitness Programs*
- Hair Loss Medication

- Hair Transplant
- Health Club Dues
- Treatment Program (at a Health
- Herbs & Herbal Medicines
- Homeopathic Drugs
- Illegal Operation or Treatment
- Insurance Premium Interest Charge
- Lamaze Class***
- Marriage Counseling
- Massage Therapy**
- Maternity Clothes
- Personal Trainer
- Prescription Drug Discount
- Pre-Tax Insurance Premiums
- Retin-A*

- Rogaine*
- Special Foods* (cost difference of common product)
- Student Health Fee
- Swimming Lessons
- Tattoo Removal
- Teeth Whitening/Bleaching
- Toiletries, Toothpaste, etc.
- Toothbrush (Electric or Manual)
- Varicose Vein Treatment*
- Vision Discount Programs
- Vitamins*
- Weight Loss Programs and/or Drugs*

Please be aware that the Internal Revenue Service looks to the reasonableness of the cost of the treatment.

Questions?

If you have questions on eligible medical expenses, please call us at (855) 329-0095 or email us at healthaccountservices@myMidAmerica.com.

^{*}Eligible only with Doctor's certification identifying the medical condition and length of treatment program.

^{**}IRS Section 213(d) has indicated that therapy provided for the general improvement of mental health, relief of stress, or personal enjoyment, is not an eligible expense reimbursable from your HRA or FSA account. Therapy used to treat a specific medical need remains eligible. Therefore, this type of expense will require a doctor's note, with a diagnosis, to state the medical need for eligibility to be determined.

^{***}Eligible expenses are limited to the mother's instruction related to birth.