

What Expenses can be Reimbursed with HIP dollars?

There are certain legal restrictions governing the kind of expenses that can be covered by the Healthy Incentive Program. But generally, you can draw on your account to pay for any out-of-pocket medical, pharmacy or dental expenses that would normally be tax deductible. This includes any money you would otherwise have to spend out-of-pocket for deductibles, copays, or for health services beyond normal TeamstersCare limits.

To be eligible, the expenses must be for services that are medically necessary and that are not currently covered at 100% by your TeamstersCare benefits or by any other medical insurance you may have. Also, the expense has to be incurred during a time when you are an eligible TeamstersCare participant.

Important Note:

The HIP Account can only be used to reimburse health care expenses that qualify as federal income tax deductions under Section 213 of the federal tax code. If an expense is not reimbursable under Section 213, it **cannot** be reimbursed.

The expenses for which you receive reimbursement cannot be claimed on your income tax return.

Eligible Expenses

Your TeamstersCare Healthy Incentive Program (HIP) can be used to pay for co-payments, coinsurance, and deductibles. But that's not all. You can also use your HIP dollars to pay for many expenses in the categories listed below. Please note that the list is subject to change based on regulations, revenue rulings and case law. The list is intended only as a general guideline for covered expenses. All items on the list may be subject to further restriction.

Eligible Medical Care Expenses

You can use your HIP dollars on medical expenses for the diagnosis, cure, mitigation, treatment, or prevention of disease, and the costs for treatment affecting any part or function of the body. The medical care expenses must be primarily to alleviate or prevent a physical or mental defect or illness.

Acupuncture	Disabled Dependent Medical Care
Alcoholism Treatment	Drug Addiction Treatment
Ambulance	Drugs and Medicines (Prescription and OTC Eligible for HIP)
Artificial Limb	Fertility Treatment (to Overcome Infertility)
Autoette/Wheelchair	Guide Dog or Other Animal
Bandages	Hearing Aids
Breast Reconstruction Surgery ¹	Home Care
Birth Control Pills	Hospital Services
Braille Books and Magazines	Laboratory Fees
Chiropractor	Lead Based Paint Removal
Christian Science Practitioner ²	Lodging Essential to Medical Care ³
Crutches	
Diagnostic Services	

Maternity Care & Related Services
 Meals for Inpatients³
 Medical Information Plan
 Medical Services (e.g. Physician, Surgeon, Specialists)
 Mentally Retarded, Special Home for
 Nursing Home
 Nursing Services
 Operations
 Organ Donor's Medical Expenses and
 Transportation
 Osteopath
 Oxygen
 Prosthesis
 Psychiatric Care
 Psychoanalysis

Psychologist
 Special Education⁴
 Sterilization
 Stop-Smoking Programs
 Surgery
 Telephone/Television for Hearing-impaired, Specially Adapted
 Therapy
 Transplants
 Transportation Essential to Medical Care
 Vasectomy
 Weight-loss Program That Is Part of
 Specific Disease Treatment Program
 Wig to Replace Hair Lost to Disease
 X-ray

¹ You can include in medical expenses the amount you pay for breast reconstruction surgery following a mastectomy for cancer.

² You can include medical expense fees you pay to Christian Science practitioners for medical care

³ You can include in medical expenses the cost of meals and/or lodging at a hospital or similar institution if a principal reason for being there is to get medical care. You cannot include in medical expenses the cost of meals and/or lodging that are not part of inpatient care.

⁴ You can include in medical expenses fees you pay on a doctor's recommendation for a child's tutoring by a teacher who is specially trained and qualified to work with children who have learning disabilities caused by mental or physical impairments, including nervous system disorders.

Eligible Prescription Medication Expenses

You can use your HIP dollars to pay out-of-pocket expenses for prescription drug co-payments and co-insurance.

Eligible Dental Expenses

Preventative and basic procedures
 Tooth extractions
 Root canals

Crowns
 Dentures
 Orthodontics

Eligible Eye Care Expenses

Eyeglasses
 Contact lenses
 Prescription sunglasses

Eye examinations
 Eye Surgery (e.g. LASIK)

Eligible Over-the-Counter Medication Expenses

You can use your HIP dollars on over-the-counter (OTC) medications or products that alleviate or treat injuries or illness. These medicines or products are not cosmetic in nature, or merely beneficial to general health.

Type of Product	Example Product
Acne Treatments (Medically Necessary)	
Allergy Prevention and Treatment	Tylenol® Allergy Sinus
Analgesics/Antipyretics	
Antacids and Acid Reducers	Imodium® GasAid, Mylanta® Heartburn, Mylanta® Gas, Children's Mylanta® Chewable Tablets, Pepcid® AC
Anti-arthritis	Tylenol® Arthritis
Antibiotics	
Anticandidal (Yeast)	Monistat®
Antidiarrheal and Laxatives	
Antifungal	
Antihistamines	
Anti-itch Lotions and Creams	Aveeno® Anti-Itch, Cortaid
Antiseptics	
Asthma Medicines	
Bandages	
Blood Pressure Monitor	
Bug Bite Medication	
Carpal Tunnel Support	
Cold and Flu Remedies	Tylenol® Cold and Flu, Children's Motrin IB® Cold
Cold Sore/Fever Blister	
Contact Lens Solution	
Contraceptive Products (e.g., Condoms)	
Cough Suppressants or Expectorants	Tylenol® Cough & Sore Throat
Decongestants	Motrin IB® Cold and Sinus
Dehydration	
Denture Adhesives	
Diabetic Supplies	
Diaper Rash	Balmex, Johnson's Diaper Rash Cream, Aveeno
Diuretics and Water Pills	
Ear Care	
Eye Care	
Eye Drops	
First Aid Supplies	Band-Aid
Head Lice Treatment	
Hearing Aid Batteries	
Hemorrhoidal Preparations	
Lactose Intolerance	Lactaid® Dietary Supplements
Medicated Shampoo/Soaps (Medically Necessary)	
Migraine Relief	Motrin IB®
Motion Sickness	
Muscle/Joint Pain	Tylenol® Arthritis, Tylenol® 8 Hour
Nausea/Vomiting Remedies	
NSAIDS	
Ophthalmic Preparations	Acuvue®, Surevue®
Pain Relievers/Fever Reducers	Motrin IB®, Tylenol® Extra Strength
Pediculicide	

Type of Product	Example Product
Personal Test Kits	
Pinworm Treatment	
Poison Treatment	
Pregnancy Tests	
Prenatal Vitamins (Medically Necessary)	
Reading Glasses	
Respiratory Stimulant Ammonia	
Sinus Products	Tylenol® Sinus
Sleeping Aids (to Treat Insomnia)	
Smoking Cessation	
Teething/Toothaches/Mouth Pain	Children's Tylenol®, Tylenol® Extra Strength
Throat Pain Medications	
Topical Steroids	
Wart Removal	
Weight Loss Products (Medically Necessary)	
Wound Care (e.g., Gauze)	Band-Aid

Eligible Over-the-Counter Products that May Require a Doctor's Note for Reimbursement

Dental Fluoride Products ¹
Feminine Hygiene Products (Post surgery or childbirth)
Incontinence Products ²
Dietary/Fiber Supplements ³
Joint Supplements ⁴
Orthopedic Shoes and Inserts
OTC Hormone Therapy
Snoring Cessation Aids ⁵
Sunscreen

¹ If for routine use for general oral care, then not a HIP eligible expense.

² Eligible expense if post-surgery but not for infants/toddlers general use.

³ Not for general use.

⁴ Eligible expense for arthritis diagnosis but not for general use.

⁵ Eligible expense for sleep apnea but not for general use.

Ineligible expenses

The following products and services are **NOT** eligible under the TeamstersCare Healthy Incentive Program:

Baby Sitting, Childcare, and Nursing Services for a Normal, Health Baby

Controlled Substances - without prescription

Cosmetic Surgery¹
Dancing Lessons
Diaper Service
Electrolysis or Hair Removal
Funeral Expenses
Hair Transplant¹
Health Club Dues
Health Coverage Tax Credit
Household Help
Illegal Operations and Treatments
Insurance Premiums
Maternity Clothes
Medical Savings Account (MSA)/ Health
Saving Account (HSA) Contributions
Medicare B and D Premiums
Nutritional Supplements²
Personal Use Items³
Swimming Lessons
Teeth Whitening
Veterinary Fees

Dental Products (e.g., Toothbrush,
toothpaste, Dental Floss)
Dietary/Nutritional Supplements (e.g.,
Ensure, Glucerna, Slimfast)
Feminine Care (e.g., Tampons)
Herbal Supplements
Sun Tanning Products
Toiletries (e.g., Deodorant, Shampoo,
Chap Stick)
Vitamins (for general health/routine
use)

Weight-Loss Program not part of specific
disease treatment
Ineligible Over-the-Counter Expenses
Aromatherapy
Baby Products (e.g., bottles, wipes, baby
oil)
Breast Enhancements
Cosmetic Products (e.g., Makeup,
perfumes)

Ineligible Receipts

In addition, the following are not acceptable receipts:

Bankcard statements

Canceled checks

Charges submitted that are illegible

Estimates of expenses (A statement is required showing date of service and type of medical expense.)

Statement balances and/or balance forwards are never acceptable.

How to Receive Reimbursement

According to the IRS, you're entitled to reimbursement of eligible expenses incurred during your period of eligibility with TeamstersCare. The IRS defines "incurred" as when the service was provided, not when you were billed, charged or paid for the service.

Submit your claims in any amount and throughout the plan year. Our reimbursement system accumulates your reimbursable expenses. TeamstersCare will issue HIP checks to the member six times per year (January 31, March 31, May 3, July 31, September 30, and November 30).

What Happens if Member Lose Eligibility?

If you become ineligible for TeamstersCare benefits, you can file a HIP claim for any service you received while still eligible, but you must file by March 31 after the end of the year in which you become ineligible.

If you lose eligibility and are then reinstated by working 400 hours in three consecutive months, the status of your HIP account depends on the timing of your reinstatement. If you reinstate in the same plan year when you lost eligibility, you also "reinstate" the balance of your HIP dollars for that year. However, if you reinstate after the start of a new plan year, your account is established as though you were newly eligible.

How does the HIP Account Work for Newly Eligible Members?

In any given year, newly eligible members will qualify for HIP dollars available for that particular year. The account takes effect on the first day of eligibility.

Instructions for Submitting HIP Claims

- Complete *all* sections of the HIP claim form. [LINK TO 2010 CLAIM FORM](#) Be sure to **sign** and **date** the form.
- Check off any HIP activity that the **member** or spouse has completed in 2010.

- ***Beginning January 1, 2010:***
- Be sure that you first submit all expenses to any other benefit plan for which the patient is eligible. You may then apply for reimbursement of the expenses not covered in part or in full. You may not request reimbursement until you have received the service, regardless of when you pay for it.
- Attach legible **copies** of your bills or receipts (**cancelled checks, charge card or cash receipts are not valid**) for each of the expenses you list. You should accumulate your bills and then submit as a single claim.
- The attached itemized bills must include:
 - Name of person receiving the service/supplies
 - Name of person/organization providing the service/supplies
 - Date that service/supplies were provided
 - Description of service/supplies (if prescription drugs, bill should include prescription number, name of medication, date of purchase, and name of prescribing physician)
 - Total charge for the service/supplies (amount for which you are requesting reimbursement)
- Keep your **original** bills and proofs of payment for your records.
- If expenses were first submitted to another plan, attach the notice (EOB form) from the plan that explains the amount reimbursed.
- Send the completed HIP claim form and copies of your paid bills to TeamstersCare Member Services at 16 Sever Street, Charlestown, MA 02129-1309. You may want to keep a copy of the form for your records.

[Link to 2010 HIP CLAIM FORM](#)