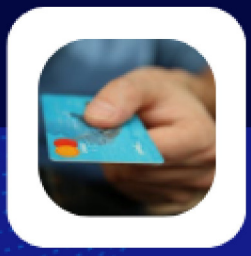
WRA Debit Card Clarity

Making your WRA debit card experience smoother, one Superbill at a time!



Use your card for eligible expenses. Just remember to save those Superbills!

Superbills are essential. They substantiate your expenses for quick claim approvals.

Quick reimbursements mean faster access to your hard-earned money!

1-800-826-9781

Register your account online www.umr.com

Attention Members: Important WRA Reminder

Using your WRA Debit Card? Don't Forget to Request Your **Superbill!**

When you use your WRA debit card, you may be required to provide proof of your medical expenses. The easiest way to do this is by requesting a **Superbill** from your provider.

What is a Superbill?

A detailed statement from your doctor, dentist, or other healthcare provider showing the type of service you recieved, the cost, and the diagnosis codes.

Why Do You Need It?

- Verifies your expenses for IRS and plan requirements
- Ensures your claim is approved quickly
- Protects your WRA account from suspension

When to Request a Superbill?

Every time you use your WRA debit card for a qualified medical expense. Simply ask your provider's office to print one for you.

Reminder: Save and submit your Superbills promptly if requested--this keeps your WRA running smoothly

Questions?
Contact the WRA Consumer Accounts Team 1-800-826-9781

IRS Section 213(d) Qualified Medical Expenses

The IBEW Local 150 Welfare Reimbursement Account (WRA) is qualified by the Internal Revenue Service (IRS) as a Health Reimbursement Arrangement (HRA). The IRS defines qualified medical care expenses within Section 213(d) of the Internal Revenue Code as "amounts paid for diagnosis, cure, mitigation or treatment of a disease, and for treatments affecting any part of function of the body. The expenses must be primarily to alleviate a physical or mental defect or illness."

The products and services listed below are **examples of medical expenses eligible for payment under a Health Reimbursement Arrangement. This is not all inclusive;** additional expenses may qualify, and the items listed below are subject to change in accordance with IRS regulations. For a complete list, refer to Section 213(d) of the Internal Revenue Code.

Eligible Expenses

Dental Services
Crowns/Bridges
Dental X-Rays
Dentures
Exams/Teeth Cleaning
Extractions
Fillings
Gum Treatment
Oral Surgery
Orthodontia/Braces

Insurance Related Items
Co-Pay and Co-Insurance Amounts
COBRA Premiums
Deductibles
Healthcare Insurance Premiums *(not paid by another source)*
Medical Expenses *(not covered by or in excess of benefits provided by another benefit plan, insurer or Medicare)*

Lab Exams/Tests
Blood Tests
Cardiographs
Diagnostic
Laboratory Fees
Urine/Stool Analysis
X-Rays

Prescribed Medication +
Allergy Medicine
Antihistamines
Analgesics
Antacids
Birth Control/Contraceptives
Calcium Supplement
Cold Medicines
First Aid Creams
Insulin
Laxatives
Motion Sickness Pills
Muscle/Joint Pain Relief
Nasal Sinus Spray
Pain Reliever
Pregnancy Tests
Sinus Medication
Sleeping Aids

Obstetric Services
Lacation Expenses
Mid-Wife Expenses
OB/GYN Exams
Pre/Post Natal Treatment

Practitioners
Allergist
Chiropractor
Christian Science
Osteopath
Physician
Psychiatrist
Psychologist

Other Medical Treatment/Procedures
Acupuncture
Alcoholism *(inpatient treatment)*
Reconstructive Surgery *(medical necessity)*
Drug Addiction
Hearing Exams
Hospital Services
Infertility
In-vitro Fertilization
Norplant Insertion or Removal
Physical Exams
Physical Therapy
Smoking Cessation Program*
Sterilization
Transplants *(including organ donor)*
Vaccinations/Immunizations
Vasectomy & Vasectomy Reversal
Weight Loss Program*

Other Medical Equipment, Supplies, & Services
Ambulance Services
Breast Pumps/Lactation Supplies
Convalescent Home

Crutches
Funeral Expenses
Guide Dog
Hearing Aid & Batteries
Home/Vehicle Modifications**
Hospital Bed
Nursing Services
Orthopedic Shoes
Special Education *(for mentally impaired or physically disabled)*
Telephone or Television equipment
Transportation Expenses *(essential to medical care)*
Wheelchair
Wigs *(hair loss due to disease)*

Vision Services
Artificial Eyes
Contact Lenses/Care Products
Eye Exam
Eyeglasses
Ophthalmologist
Optometrist
Prescription Sunglasses
Radial Keratotomy/LASIK

Ineligible Expenses

The IRS does not allow the following expenses to be reimbursed under the HRA. Expenses relating to promoting general health are not qualified medical expenses unless prescribed by a physician for a specific medical ailment. This list is not meant to be all inclusive.

General
Athletic Club Membership
Baby-Sitting & Child Care
Canceled Appointment Fees
Contact Lens Insurance
Cosmetic Surgery
Diaper Service
Electrolysis
Exercise Equipment
Eyeglass Insurance
Fitness Programs
Hair Loss Medication
Hair Transplant
Household *Help (other than qualified long-term care)*
Illegal Operation Treatment
Life Insurance Premiums
Marriage Counseling
Maternity Cloths
Moisturizers
Nutritional Supplements
Personal Use Items
Student Health Fees
Swimming Lessons
Teeth Whitening/Bleaching
Toothbrush/Toothpaste
Vitamins/Supplements *(for general health)*
Weight Loss Food

+ All listed medications, including over the counter medicines, must have a prescription to be eligible for reimbursement.
***** Eligible only with Physician's certification identifying the physical nature of the medical condition and length of treatment program.
****** Certain costs of modifying a home or vehicle to accommodate a disabled dependent.