

HELPFUL HINTS TO AVOID DENIED CLAIMS

To process a request for reimbursement, IRS regulations require that **all** of following information is supplied on a receipt or statement from the provider for each transaction:

- 1. The date of service
- 2. The description of the service provided
- 3. The amount charged for the service
- 4. The provider's credentials

The most common reasons for delayed/denied reimbursement requests along with hints to help you avoid these pitfalls are as follows:

1. Insufficient date of service and/or description of service.

You do not have to provide proof of payment; and often participants submit register receipts or statements that state: "Balance Forward". Your receipts and statements must include **all** 4 pieces of information listed above or your reimbursement request cannot be completed.

Hint: Before leaving a provider's office, check your receipt. If any of the 4 pieces of information listed above is missing, request a statement from the provider that includes a history, or have them simply write the required information on the receipt. If you are requesting reimbursement for dental services, please be sure that the information you provide indicates the specific procedure. Writing "Dental" or "Various" on the receipt is not sufficient information to process a reimbursement.

2. Dates of service not within the plan year.

Please be aware of the dates of your employer's "Plan Year" as well as the runoff period (and grace period if applicable) at the end of the plan year. Reimbursements requested outside of your employer's plan cannot be reimbursed. If you go on a leave of absence or terminate with your employer, you should speak with your HR/Benefits administrator to determine how that will affect your standing in the FSA plan.

Hint: The IRS bases the reimbursement of a service, on the **date of service** - not the payment date. If you have not received a statement or receipt from a provider and your employer's plan year is coming to a close, you will need to request this documentation from the provider. If you **submit** a claim for reimbursement outside of your employer's plan year, you cannot be reimbursed (even if the date of service was provided within the plan year).

3. Reimbursement Request Form not properly completed.

GDI often receives incomplete and blank Reimbursement Request forms.

Hint: The Reimbursement Request form <u>must be completed in its entirety</u>. If you have several dates of service from one provider, you may write down the earliest date to the latest date and a total amount. For example, it is not necessary to list several prescriptions separately; rather, simply write the date range for all of the prescriptions and the total amount paid on one line. You may also make copies of the claim form or attach additional pages. (*Please be sure to bring your total amount requested to the front of the original claim form.*)



4. Reimbursement Request Form not signed

Even if everything is filled out correctly on your claim form, we are unable to process your claim without your signature.

Hint: Prior to faxing or mailing your claim, double check to be sure you have signed your claim form. The signature must be that of the accountholder or the claim will not be processed.

5. Ineligible Expenses and over-the-counter items

Cosmetic procedures (e.g., teeth bleaching, skin tag removal, hair loss treatments, etc.) are not eligible for reimbursement. In addition, supplements and/or vitamins purchased at a provider's office are not eligible for reimbursement without a note of medical necessity from a licensed medical provider that includes a specific diagnosis. Our website, <u>www.gdynamic.com</u>, includes a list of expenses eligible for reimbursement from a Medical Flexible Spending Account.

Hint: Check your receipts or statements for any items that are questionable before requesting reimbursement. If you are not sure if an item/service is reimbursable, please feel free to give us a call at 1-800-626-3539 prior to submitting your claim.

6. Cancelled checks and credit card statements

Cancelled checks and credit card statements are **not** acceptable forms of receipt because they do not list the information required under IRS regulations. Proof of payment is not required and you need a receipt or statement from the provider to submit the request for reimbursement.

Hint: Always be sure to include a receipt or statement from the provider for each transaction that contains the following information:

- 1. The date of service
- 2. The description of the service provided
- 3. The amount charged for the service
- 4. The provider's credentials

Have questions? The most detailed information about your employer's FSA plan is your Summary Plan Description. If you do not have a copy, please see your HR administrator.

Our Receptionist answers all calls Monday through Friday, 8am to 5pm Eastern Time. Ask to be directed to our Customer Service Team and you will reach a live person. For non-business hours, please leave a message and your call will be returned the next business day.

Please note: Due to HIPAA and privacy regulations, our Customer Service Team cannot correspond with you electronically.