



## SUBSTANTIATION OF MANUAL CLAIMS

### For Health Care Spending and Dependent Care Spending Cafeteria Plans

The IRS regulations require that an employee furnish a written statement stating that the expense they are requesting reimbursement on has been incurred and that the expense has not been reimbursed, or is not reimbursable under any other Health plan, HRA plan or FSA plan.

The participant must provide supporting documentation from an independent third party, which includes the following:

- A bill or receipt (**including date of service, name of patient, provider name-address, amount, and type of service**) from a doctor, dentist, or other supplier;
- A prescription receipt (**including the date prescription was filled, name of patient, pharmacy name-address, amount, and prescription name**) from a pharmacy;
- Explanation of benefits (EOB) statement(s) indicating the deductible, co-insurance and amounts not covered by the medical/dental/vision plan(s) under which the employee or any eligible dependents are covered;
- A bill or receipt (**including date(s) services were provided, name of dependent, child care provider name-address-phone number, amount, Tax ID number or Social Security number**) from a childcare provider;
- Store receipts are acceptable **ONLY** for hearing aid batteries, contact solution and over the counter medications. The receipt **MUST HAVE** the following information printed on the receipt: **Store name, date of purchase, Product name and amount of product.**

Employees may not submit proof of payment in the form of a cancelled check or credit/debit card receipt unless it is accompanied by the other required documentation.

If you have any questions in regards to the required substantiation of claims, please feel free to contact this office.

Sincerely,

MedBen  
Specialty Services Unit  
FSA Division