

CLAIM FILING INSTRUCTIONS

Who Can File a Claim Form

- Only employees participating in the FSA Plan can file a reimbursement claim form.
- Employees can file a claim form during the plan year and for a certain period after the plan year as described in the Summary Plan Description.
- Terminated employees can file a claim form for a certain period after the date of termination if allowed by the plan. Please see your Summary Plan Description.

What Expense Can be Claimed

- Certain expenses incurred during the plan year can be claimed for reimbursement. Each year is treated separately and the year of claim is the year the expense was actually incurred by the participant. It is imperative to send separate claim forms for each year.
- Terminated employees can request reimbursement for expenses incurred during the time period for which contributions were received. Please see your Summary Plan Description.
- Allowable expenses are the same as those allowed for tax purposes with some exceptions. A summary list is provided here for your convenience.

Qualifying Unreimbursed Medical Expenses

- Certain expenses not reimbursed by insurance can be claimed. The following is not a complete list, but contains most common qualified expenses.

Most Common Expenses	Services & Fees	Other Expenses
Co-Pays Coinsurance Deductibles OTC medicines & drugs	Acupuncture Anesthetist Chiropractor Dentist Eye Exams Gynecologist Hospital Laboratory Nursing Obstetrician Oral Surgery Ophthalmologist Optometrist Orthodontist Osteopath	Physicals Physicians Physiotherapist Psychiatrist Psychologist Specialists Therapists
		Alcoholism & drug treatment center costs Ambulance hire Birth control pills Contact Lenses & solution Eyeglasses Fertility treatments Hearing aids & batteries Immunizations Laser eye surgery Learning disability (special school or specially trained educator, recommended by doctor for "severe learning disabilities caused by mental or physical impairments") Lodging (for medical care or treatment – limit of \$50) Medical supplies & equipment Prescriptions X rays

Over-the-Counter Items Effective 1/1/2011

Employees with an FSA, HRA, or HSA can no longer use their account funds to purchase OTC drugs and medicines (e.g. Advil, ibuprofen, cough syrup) unless they have a Note of Medical Necessity (NMN) or a prescription from their doctor.

If an employee has an NMN or a prescription for an OTC drug or medicine, they must pay at the point of service and submit a manual claim for reimbursement.

Employees can continue to use their FSA, HRA and HSA funds to purchase OTC items that are not considered a drug or a medicine (e.g. bandages, wound care, contact lens solution). Benefits cards can continue to be used for these purchases.

Completion of the Claim Form

- Complete all information on the claim form for each amount claimed for reimbursement.
- When filing your claim, you must attach copies of the receipts on a 8.5" X 11". The receipt must show patients name (when applicable), the dollar amount and the date and type of service for the expense. Canceled checks, credit slips, cash register receipts, or statements showing only a balance due on your account are not allowable.
- Make sure the claim does not include items for more than one plan year. Use different claim forms for different years.
- You must sign and date the claim form.

How to Request Changes in Plan Participation

- Revocation of participation in the Plan can only occur if you have a change in family status. "Change of family status" includes birth, death, marriage, divorce, change of employment by the spouse, or certain other situations as determined by the Plan Administrator.