Paying for medical, dental, and vision expenses using your PayFlex debit card is fast and easy, but there are special requirements when using the card to pay for dental or some other expenses. See below for tips on substantiating claims to avoid deactivation of your FSA debit card.

Jun of you is documentation required from your doctor's office or insurance that explains what was charged and how it was paid (such as the portion paid by insurance). This could be a full detailed bill from your doctor's office or explanation of benefits from the insurance carrier.

How can you be prepared? PayFlex recommends the following options when using your card for anything other than regular office-visits or prescription co-pays:

- First Choice The BEST practice is to pay nothing at the time of service and wait to pay your doctor using your PayFlex card after you receive an Explanation of Benefits (EOB) from your insurance showing the amount that is your responsibility. EOBs are not routinely provided for dental HMO claims, but you can call Cigna at (800) 244-6224 to request an EOB.
- Second Choice As your HMO provider may require payment at the at the time you receive treatment, you will need to provide substantiation when using your PayFlex debit card. Make sure you receive an itemized bill at the time of payment.

Although it's easy to think of FSA fundaments of the delivery eligible flexible spending account expenses. Your dental work may not be eligible if . . .

- It's cosmetic.
- Insurance is responsible for a portion of the cost.

 Another way to avoid problems is to use another form of payment at the provider's office and then submit your claim for reimbursement after your receive the EOB.

What about vision or other medical expenses?

You can use your FSA funds to pay for designer sunglasses — only with a prescription, of course - but you may be required to substantiate that type of expense as well. For example, if your expense doesn't match pre-loaded co-pay amounts or if the description of the charge is sure you obtain an itemized invoice from your vision provider at the time of your purchase. This

How can I provide substantiation to PayFlex?

- PayFlex will send you a notice if they need documentation for a debit card charge.
- To substantiate a charge, send an itemized statement from the service provider and a copy of the Explanation of Benefits (EOB) from the insurance carrier. The documentation will need to show:
 - Date of service
 - Dollar amount of service
 - Description of service (codes for procedures)
 - Name of service provider
 - Name of patient

Submit by mail, FA+, or online

documentation by mail

PayFlex Systems USA, Inc. P.O. Box 981158 El Paso, TX 79998-1158

or by FAX to: (855) 703-5305. If you register online at www.payflex.com, you may also upload the documentation for your claim.

My account is in "overpayment" status. What now?

If you do not provide documentation to PayFlex when it is requested or if your documentation is insufficient, PayFlex may place your FSA account in "overpayment" status. If the overpayment is not resolved, your debit card may be de-activated. To resolve the overpayment, you can do one of the following . . .

- Provide the documentation to substantiate your original payment amount.
- Submit claims for other eligible expenses to cover the overcharged amount.
- Mail a check to PayFlex to reimburse your account for the overpayment amount.
- If your provider overcharged you, have the office staff credit the amount of the overpayment back to your PayFlex account.

Still have questions? Need Assistance with Substantiation?

Contact Benefits Administration for assistance with getting the most from your benefit plans (909) 621-8151 or BENREPS@claremont.edu.

