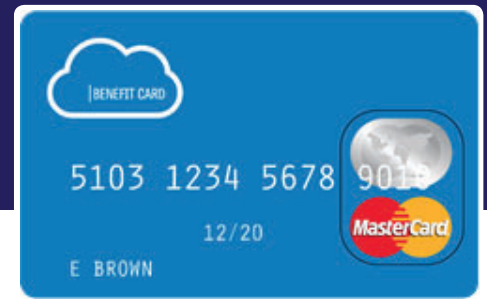


Benefit Spending Account

Substantiation Details



IRS Rules Govern Substantiation Requirements

Every transaction from a Flexible Spending Account (FSA) or Health Reimbursement Arrangement (HRA) needs to be substantiated (verified that the purchase was an eligible medical expense) – even transactions conducted with a benefits card.

Substantiation Processes

Auto-Substantiation—Daily process run to auto-substantiate Benny debit card claims using the specific methods setup for the employer group.

- **Copay Matching:** charges exactly matching the dollar amount for a copay under the plan, or multiples of the copay (up to five times).
- **Recurring Auto-Substantiation:** charges that exactly match the provider and dollar amount for 3 previously approved and substantiated transactions. For example, a fixed monthly orthodontia payment.
- **Carrier Substantiation:** charges matching a claim filed by the carrier files in the last 60 days.

Manual Substantiation—All purchases which do not qualify for auto-substantiation.

- Doctor, dentist and other provider visits where the amount paid is not equal to the copay.
- Prescription and over-the-counter transactions where the amount paid is not equal to the copay at a store that is not IIAS compliant.

Myths about Receipt Requirements

Myth: Any claim at a doctor, dentist, or vision provider will not require receipts.

FALSE. Not all services from a medical, dental, vision or a non-IIAS pharmacy provider are eligible expenses.

Myth: No receipts or documents are needed when paying for an eligible service on the Benny Prepaid Benefits Card.

FALSE. Itemized receipts may be required to verify which charges are eligible

Myth: Cancelled checks or credit card receipts are acceptable for validating expenses.

FALSE. Documentation must include:

- Name of person who incurred the expense
- Name/address of provider
- Date of service for the amount charged
- Detailed description of the service
- Amount due for the service

IIAS and Auto Substantiation

Inventory Information Approval System (IIAS) is a system mandated by the Federal Government and used by pharmacy merchants to identify eligible prescription and over-the-counter (OTC) items, and to limit payments from FSA and HRA healthcare payment cards to only eligible items.

All supermarkets, grocery stores, department stores, and wholesale clubs are required to implement the IIAS merchant program in order to be able to accept healthcare payment cards. A list of IIAS certified retailers is available on our consumer portal.

Requests for substantiation

If substantiation of a debit card transaction is required, employees will be notified by email or an alert on the consumer portal home page. Employees may also see if a claim requires substantiation by logging into their online account or mobile app to check the status of the claim.

Expect more.
Benefit more.