

FSA SUBSTANTIATION FORM

Use this form **only** if your FSA debit card was used to pay for an expense and you received a request from QualChoice to verify (substantiate) the expense. Itemized bills, statements, receipts or other proof of the expense must be attached. Cancelled checks and credit card receipts are **not** sufficient proof of expenses. **THIS IS NOT AN FSA CLAIM FORM.**

SECTION I. EMPLOYEE INFORMATION. Please print legibly.					
Full Name as it appears on your FSA debit card			Social Security No.		Email Address
Street Address		City		State	Zip
					Phone No.

SECTION II. FSA DEBIT CARD PURCHASE INFORMATION			
1	Purchase Date (MM/DD/YYYY) <small>Should match date on your receipt or Explanation of Benefits</small>	Total Amount of Purchase	Merchant or Service Provider Name
		\$	
	<input type="checkbox"/> I DO NOT have a receipt for this purchase. Please read Instructions carefully (see pg. 2).		
2	Purchase Date (MM/DD/YYYY) <small>Should match date on your receipt or Explanation of Benefits</small>	Total Amount of Purchase	Merchant or Service Provider Name
		\$	
	<input type="checkbox"/> I DO NOT have a receipt for this purchase. Please read Instructions carefully (see pg. 2).		
3	Purchase Date (MM/DD/YYYY) <small>Should match date on your receipt or Explanation of Benefits</small>	Total Amount of Purchase	Merchant or Service Provider Name
		\$	
	<input type="checkbox"/> I DO NOT have a receipt for this purchase. Please read Instructions carefully (see pg. 2).		

SECTION III. CERTIFICATION AND SIGNATURE	
I certify that the expenses listed above qualify for reimbursement under the applicable IRS regulations and guidance and have been incurred by me or by my eligible dependents. These expenses have not been reimbursed and I will not seek reimbursement under any other source. I understand that where an expense is determined to be ineligible, I am responsible for reimbursing the plan for any such expense. Additionally, these expenses are not being claimed as tax deductions under the IRS code. Itemized bills, statements, receipts or other proof of the expense are attached.	
Signature of Employee X	Date Signed

SECTION IV. DIRECTIONS. Please fax (fastest process) or mail your documents, but DO NOT do both. Do not return page 2 with your submission. Be sure to keep a copy of your submission.	
<p>SUBMIT DOCUMENTS IN THIS ORDER: Completed and signed FSA Substantiation Form Your Itemized Receipts (<i>taped to 8 1/2 x 11 piece of paper</i>)</p>	<p>FAX (fastest process) or MAIL: QualChoice ATTN: FSA Department PO Box 25610 Little Rock, AR 72221 Fax: 501.707.6845</p>

INSTRUCTIONS

The IRS has provided strict requirements stating that FSA debit card purchases must be substantiated using itemized receipts when they cannot be otherwise verified. Use of an FSA debit card does not remove or reduce the requirements for proof of eligibility under IRS regulations. Some purchases will still need to be substantiated with detailed receipts or Explanation of Benefits (EOB). For this reason, you must always save your purchase receipts for items and services purchased with your FSA debit card. To substantiate a debit card purchase, **you will need to supply an itemized receipt that clearly proves the eligibility of a purchase made using your FSA debit card. Cancelled checks and credit card receipts are not adequate receipts.**

ITEMIZED RECEIPTS

Itemized receipt(s) **must** state the following:

- vendor name
- vendor contact information
- purchase date
- description of the expense(s)
- expense amount

Cancelled checks and/or credit card receipts are not adequate documentation as they do not list the individual items purchased along with a description of the item. This is why you **must** save your purchase receipts when using your FSA debit card.

INELIGIBLE EXPENSES OR LOST RECEIPTS

If you receive a substantiation request indicating you have made an ineligible purchase or a receipt is required and you do not have a receipt for the purchase, you will need to complete an *FSA Substantiation Form*. If you do not have a receipt for the purchase, you will need to check the appropriate box on the form. If the entire purchase is ineligible, or only a portion of the expense is ineligible, then indicate the total amount of the ineligible items. When substantiation is submitted without a receipt or you do not respond to a substantiation request, the expense will be considered ineligible and an overpayment will be created on your account. You must repay your account for ineligible purchases by submitting new paper claims for other eligible expenses. These new paper claims will be used to offset the amount of the reimbursement you have already received for an ineligible card purchase. Be sure to use the *FSA Substantiation Form* and do not submit paper claim forms for purchases made with your card.

To submit a paper claim to resolve an overpayment, please follow the instructions on the QualChoice *FSA Claim Form*. An *FSA Claim Form* with instructions is available at www.qualchoice.com. Click *Members* tab, then click *Forms*.

For each FSA debit card purchase that you have been asked to substantiate:

- 1 Complete an *FSA Substantiation Form*. You may substantiate up to three (3) purchases on a single form.
- 2 Attach itemized receipt(s). *Tape receipts on an 8 ½ x 11 piece of paper for easier transmittal.*
- 3 Make a copy for your records.
- 4 Submit the form + itemized receipt(s):
QualChoice
ATTN: FSA Dept
PO Box 25610
Little Rock, AR 72221

NOTE: Overpayments may result in your account being placed on hold. You will be notified before this happens.

MINIMIZE RECEIPT SUBMISSION

An Inventory Information Approval System (IIAS) has been implemented by merchants nationwide to reduce the number of receipts required for FSA debit card purchases. This technology enables real-time, automatic approval for eligible items purchased with an FSA debit card at participating retailers. It also enables the member to continue using the debit card at non-healthcare retailers, such as supermarkets, grocery stores, drug stores, retail pharmacies and mail-order merchants that sell eligible items and services. You **must** still retain your itemized purchase receipts for these vendors in the event you need to provide them later.

A list of IIAS authorized debit card merchants is available at www.qualchoice.com. Click *Members* tab, then click *Forms*.

**PLEASE DO NOT RETURN THIS PAGE
WITH YOUR FSA SUBSTANTIATION FORM**