Filing Claims

Do I have to submit a claim on line?

Yes, due to the system which processes the claims, it is mandatory that you submit your request online. User ID and Password for Employee Self Service is required to begin.

I have never submitted an online reimbursement request, how do I get started.

If you have never submitted an online request for reimbursement, you will need to complete a few preliminary steps. This will only be required for the initial set up for on line reimbursements requests.

1. Begin at VSU homepage www.Valdosta.edu
2. Go to Faculty and Staff/Employee Self Service.
3. Scroll to bottom of page and click on **HRMS Login.**
4. Enter User ID and Password. If you have forgotten your password, contact the VSU Information Technology Helpdesk for assistance.
5. Select "Set Up Expense Reimbursement Options". Verify information is correct and save.
6. Sign out of Exit Employee Self Service.
7. From the Human Resources homepage, go to employee self service again but click on FINANCIALS located at the bottom of this page. Enter the same User ID and Password. Click on Employee Self Service
8. Click on T and E Center. In the T and E Center, click the "Review/Edit Profile' link under Profiles and Preferences and select the 'Organizational Data" Tab. Complete Chart Field values.
9. *****See Budget Manager if you have questions regarding the completion of the chart field values. For example: FUND 10000, PROGRAM 16300, CLASS 11000, Bud Ref 2009 (current fiscal year). Save. Click "T&E Expense Report" through Menu (left).
10. You are ready to "File a Claim". To file a FSA claim from this point: see number 7 on next question, **"How do I file a Flexible Spending Account (FSA) claim?"**

How do I file a Flexible Spending Account (FSA) claim?

1. Begin at VSU homepage www.Valdosta.edu

2. Go to Faculty and Staff/ Employee Self Service

3. Scroll to bottom of page and click on **Financials**.

4. Enter User ID and Password. (If you fail to log-on properly, you will have to return to Employee Self Service and login again

5. Once logged on, click on **Employee Self-Service**.

6. ***Click on **Employee T&E (Travel and Expense) Center**.

7. Click on '**Create'** below **Expense Report.**

8. Next to Quick Start use "**A Blank Report**"

9. Click on box next to **Description** (Type in a brief description, i.e. Medical, Dental, Glasses, RX, over the counter drugs (OTC), Daycare, etc.)

10. Next to **Business Purposes**, click on drop down button and always select **FSA Expense**.

11. You may type in comments in the comment box, however comments are optional.

12. Locate **Details Box** (a dark blue line). Place cursor on drop down button in the field labeled **Expense Type.** Select **appropriate year** and select **Medical Care** or **Dependent Care**. Please note that Dependent Care expenses only refers to employees that are utilizing daycare services; this does not include medical expenses for dependent spouse and/or children).

13. Wait a moment for fields to populate. You do not need to attempt to complete these fields at this time. Go to number 14.

14. Click on **Details** (located on right side of page); complete requested fields.

15. Enter Expense Date, Payment Type, a Description of the services, and the amount you paid, i.e. co-pay, deductible, coinsurance, etc. This information/amount(s) must match the receipts or explanation of benefits which you will submit to Human Resources with printed claim form.

16. Click on **Check for Errors** and correct/complete any RED highlighted fields. After the RED fields are corrected, click on Check for Errors to clear the red error indicators.

17. Scroll to bottom of page and click on "**Return to Expense Report**". Continue to enter each expense type, date, payment type, description of the services, and the amount you paid, i.e. co-pay, deductible, coinsurance, etc.

    Time Saving Tip: If you do not wish to submit your claim for reimbursement at this time, click on "Save for Later". At a later date, you can access this information through the "Modify" option below "Expense Report". This will allow you to accumulate expenses and avoid the laborious task of extensive data entry at one time. Each time that you enter a new line, the system will keep a total. *Remember:* keep your receipts and/or Explanation of Benefits in a file to submit to Human Resources once the claim is submitted.

    Time Saving Tip: If you have several amounts that are the same, Mark the "Select" box on the left and Copy Selected. A screen will appear for you to select a different date and will copy the information.

18. Once all expenses are entered, and you are ready to submit your claim for reimbursement, click the **Submit** button one time, this will take you to the "Confirmation Page".

19. Once you confirm the information is correct, click the **OK** button again. A "**Report ID"** number will appear.

    NOTE: Print the claim form and attach supporting documentation in addition to your online request. All claims require a signature. Your claim will be sent back to you if you forgot to sign the claim form.

20. To print claim form: Locate "**More Options"** (Located above the Blue Details Box) and select **"Printable View" and GO.** Print this page, sign, attach proper documentation and submit to Human Resources. Keep copies for your records.

You will be notified via email once your claim is processed. Sign out of Employee Self Service.

What type of documentation is acceptable to submit for reimbursement of healthcare claim(s)?

Acceptable documentation consists of the following:

- An Explanation of Benefits (EOB) is the preferred supporting documentation, provided to you by your insurance provider.
- An itemized receipt is also acceptable, but it must show the date of purchase or service , amount of purchase or service, description of item or service, name of merchant or service provider, and name of patient if a medical claim. An example of such a receipt is the purchase of eyeglasses.
- Prescription drug receipt containing the necessary information.
- Over the counter (OTC) items must be clearly described on the receipt.

What happens if I forget to sign the paper claim form?

All claims require a signature. Your claim will be sent back to you if you forgot to sign the claim form. IRS regulations require that you provide a statement saying the expenses have not been reimbursed, and you will not seek reimbursement elsewhere. This statement is included on the paper claim form.

Can I submit my cancelled check as documentation of my claim?

Cancelled checks do not meet the IRS guidelines as documentation of eligible healthcare or dependent day care expenses. For healthcare expenses, if you have insurance coverage, you should first send the claim to your medical or dental insurance carrier. Your insurance carrier will process the claim and provide you with an explanation of benefits (EOB) showing the amount they paid and what you owe the provider. The EOB can be submitted as documentation of your expenses along with your flexible spending healthcare claim.

If you do not have insurance, ask the provider for an itemized statement that includes their name/address, patient name, and date of service, a description of the service or supply, and the dollar amount. For purchases of over-the-counter medicines and drugs, the receipt must clearly identify the merchant name, name of the item purchased, and the date and amount.

For dependent day care expenses, a completed claim form with an itemized statement from your day care provider is acceptable documentation. The itemized statement must have the dates of service, name of dependent, cost of care and name of day care provider. If you day care provider does not furnish an itemized statement, the claim form can be used as an itemized statement as long as your day care provider signs the form where indicated.

What type of documentation should I submit for a prescription?

The pharmacy receipt (not the cash register receipt), often times called a "script", that includes the pharmacy name, patient name, date the prescription was filled, the name of the drug, and dollar amount should be submitted with your claim. Another easy way to submit prescription expenses is to ask your pharmacy to print a listing of all your prescription purchases for a given time period for each family member and submit with a claim form. Many pharmacies now allow customers to set up accounts online on their website and you can print a list of your filled prescriptions.

What does the term "expense incurred" mean?

IRS regulations say the expense must be incurred before it can be reimbursed. The IRS specifically defines expense incurred as follows:

Expenses are treated as having been incurred when you are provided with the healthcare or dependent day care that gives rise to the expense, and not when your are formally billed or charged for , or pay for the expense.

For example: if the dependent day care bills on 10/1 for servicers 10/1 – 10/31, these would not be considered incurred expenses until 11/1.

My coverage was effective beginning August 1 for the flexible benefit plan. Can I submit healthcare expenses incurred in July?

No. Expenses need to be incurred (service provided) during your period of coverage. Therefore, in this situation, only expenses incurred on or after August 1 could be submitted for reimbursement.

I have a calendar year plan. If I have services provided in December, but wait and pay for those services in January, will this be a December claim or a January claim?

Claims are processed based on the date the service is provided, regardless of when you pay for the service, therefore, this would be considered a December claim.

When can I submit a claim for my dependent day care expenses?

Dependent day care claims may be submitted when the service is provided. If the expense has been incurred and proper documentation has been provided (legible receipts with all necessary fields), the claim is ready to be processed against the participant's accounts. Claims should be submitted following the completed dates of service.

Your account balance is checked to determine how much is available for reimbursement. If the amount of the claim is less than your available balance, then the entire claim can be reimbursed. If the amount of the claim is greater than your available balance, you will only be reimbursed the amount that is available in your dependent day care account.

What type of documentation is acceptable to submit for reimbursement of dependent day care expenses?

For dependent day care expenses, a completed claim form with an itemized statement from your day care provider is acceptable documentation. The itemized statement must have the dates of service, name of dependent, cost of care and name of day care provider. If your day care provider does not furnish an itemized statement, the claim form can be used as an itemized statement as long as your day care provider signs the form where indicated.

If I terminate employment, can I file dependent day care claims?

Generally, upon termination of employment, you may continue to submit dependent day care claims up to the amount of the balance in your account.

How long after the end of the plan year can I file claims?

Claims will be processed until the end of the first quarter (March 31) in the new calendar year. Any money remaining in your health or dependent care account will be forfeited after March 31.