



## HOW TO KEEP YOUR CLAIMS SAILING THROUGH THE REIMBURSEMENT PROCESS IF YOUR EMPLOYER SPONSORS BOTH HRA AND FSA PLANS

1. You **MUST** Complete and Sign the "[Section 105/125 Request for Reimbursement Form](#)", even if you do not participate in both the HRA and FSA plans. **(Correct Claim Forms can be obtained at our website: [www.bdgflex.com](http://www.bdgflex.com) under Forms and Instructions.) [Claims submitted with the wrong claim form will be returned, which will delay the processing of your payment.](#)**

**Note:** Any claims that are eligible for reimbursement under the HRA must first be submitted to the HRA before they can be considered in the FSA plan. By completing this version of the claim form, you are authorizing the automatic reprocessing of any FSA eligible portion of your claim. If you do not want your claim automatically reprocessed, please write "[Do Not Reprocess in the FSA Plan](#)" across the top of the claim form prior to submitting the claim to the HRA plan.

2. **Attach the appropriate required claims substantiation.**

Per IRS regulations, third party claims substantiation is required. The substantiation you submit must include enough detail to verify when the service was performed, who the service was for and a description of the service. These details are all used to determine whether or not the service was for an IRS approved expense according to the HRA plan.

In most cases, substantiation will be in the form of an Explanation of Benefits (EOB). The EOB is sent to you by the insurance company to provide detail of services that have been provided. It often has a heading that says "This is Not a Bill" and will identify a breakdown of how the claim has been applied to the deductible, co-insurance and/or co-pays expenses as set forth in your insurance contract. **IF, and only IF** your HRA allows the reimbursement of other IRS Section 213(d) expenses or expenses that do not involve insurance coverage your substantiation may include billing statements, co-pay receipts, cash register receipts, etc. as they may be applicable to your HRA plan design. **To determine what specific expenses are eligible in your HRA plan**, please review your plan details located in your Summary Plan Description.

### Keep in Mind...

Clinic and Hospital Bills (in most cases) **WILL NOT** provide enough detail to process your claims if your HRA is set up to reimburse a portion of the deductible. Include all of the detail pages from the EOB and not just the summary page, as Year-to-date totals do not provide enough of the details needed to determine when the services were provided and whether or not the expense will be eligible according to your HRA plan design. HRA reimbursements will help you pay the providers for eligible services, so it is to your advantage to submit your HRA claims as soon as you receive proof of services provided.

**Claims will be delayed if you fail to use the proper claim form, don't submit enough detail to Substantiate your request, or if you fail to sign the claim form. If your claim is denied, a letter will be sent to you explaining what is required to further process your request.**

3. **Forward by mail to:** **Benefits Design Group, Inc.**  
**PO Box 370**  
**Onalaska WI 54650**      or      **By Fax: (608) 781-4576**

**Completed claim forms and claims detail can be scanned and submitted to: [bdggeneral@bdgflex.com](mailto:bdggeneral@bdgflex.com)**