

The Federal FSA Program

Quick Reference Guide



Paperless Reimbursement Overview

FSAFEDS has partnered with a number of FEHB plans to implement Paperless Reimbursement to automatically reimburse you for eligible health care expenses under your Health Care Flexible Spending Account (HCFSA). Paperless Reimbursement eliminates the need for you to manually prepare and submit many of your out-of-pocket health care costs to FSAFEDS. Now, FSAFEDS can save you money and valuable time as well!

Currently Participating FEHB Plans:

- [Association Benefit Plan](#)
- [Blue Cross/Blue Shield Service Benefit Plan](#)
- [GEHA](#)
- [Mail Handlers/First Health](#)
- [M.D. IPA](#)

Below is a list of plans that will begin participating for the 2005 Plan Year. Note: Each Plan listed below will forward claims only for services rendered on or after January 1, 2005.

- Humana
- National Association of Letter Carriers (NALC)
- Preferred Care
- SAMBA (Special Agents Mutual Benefit Association)

FSAFEDS continues to work with other FEHB plans to implement this exciting feature. You have the option to [sign up](#) to be notified when your FEHB plan begins participating in Paperless Reimbursement.

Important Information

- In order to participate in Paperless Reimbursement, the FEHB contract holder's Social Security Number must be on file with your FEHB plan. This information is only used to validate your FSAFEDS account and to ensure proper reimbursement. If you are not the FEHB contract holder, you must provide FSAFEDS with information about the contract holder, including name, Social Security Number and date of birth.
- Paperless Reimbursement does not change, in any way, your relationship and obligations to your physician or other health care providers. You are expected to meet your deductible, co-payment and co-insurance obligations as specified in your FEHB brochure.
- Paperless Reimbursement works best with self and family coverage. If you and your spouse each carry a self only FEHB enrollment, only claims for the FSAFEDS participant who is also the FEHB contract holder can be forwarded under Paperless Reimbursement. Your spouse's health care expenses are still eligible for reimbursement from your HCFSA, but you must submit them with a [FSAFEDS claim form](#) by fax or mail.
- Claims that are submitted and processed by your FEHB plan, including all covered family members under your self and family enrollment, will be forwarded to SHPS for Paperless Reimbursement under your FSAFEDS HCFSA.

Remember, you do not need to complete and submit an FSAFEDS claim form for services/claims processed via Paperless Reimbursement.

Plan Name	Services/Claims Covered
Association Benefit Plan	Medical, Pharmacy
Blue Cross/Blue Shield	Medical, Dental, Pharmacy
GEHA	Medical, Dental
Mail Handlers/First Health	Medical, Dental, Pharmacy
M.D. IPA	Medical, Dental, Pharmacy

- The timeline for your FEHB plan to process your claim has not changed. Once your claim has been processed, your participating FEHB plan will automatically forward your claim information to FSAFEDS for processing and reimbursement from your HCFSA.
- For complete details regarding the Paperless Reimbursement program, or to enroll, visit www.FSAFEDS.com and click on [My Account](#), then Paperless Reimbursement. You may also contact us toll-free at 1-877-FSAFEDS (372-3337). Benefits Counselors are available to assist you Monday through Friday, 9:00 A.M. until 9:00 P.M., Eastern Time. TTY: 1-800-952-0450.
- You have the right to [appeal a claim](#) for health care expenses that we have denied in whole or in part by writing to FSAFEDS and requesting reconsideration. You can submit written appeals with supporting documentation via fax or mail.

Mail: FSAFEDS Program, PO Box 36880, Louisville, KY 40233-6880

Fax: 1-502-267-2233

Email: fsafeds@shps.net (to follow up on an appeal that has already been submitted or does not require supporting documentation)

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