





## **Reimbursement Request Instructions**

### **For All Account Types (FSA, LPFSA, HRA, Parking/Transit, RRA)**

- For faster reimbursement processing, submit your claims online at [www.ebsrmsco.com](http://www.ebsrmsco.com).
- Complete the top section, including Social Security Number or Employee ID.
- Submit one expense (either a product or service) per row, even if items are contained on the same receipt.
- Label the receipts to correspond to the "Claim Ref #".
- If you have more items than the form can accept, use additional forms.
- Do not "lump" or group items together or write "See Attached".
- All claims are subject to deadlines and minimum check amounts, as defined in your Summary Plan Description (SPD).
- The expenses you submit must qualify as valid expenses under the terms of the Plan, and the claimant receiving the services must be a qualifying individual as defined in the Plan.
- EBS-RMSCO can only process claims that are properly submitted. Claims that are not properly submitted may be delayed or denied.
- Call EBS-RMSCO Customer Service with questions at (800) 327-7130 during standard week-day business hours.
- Mail OR fax (but not both!) completed form with required documentation to:  
EBS-RMSCO, Inc.  
Claims Department  
PO Box 2330  
Blasdell, NY 14219  
Fax # (877) 256-7228

### **Reporting Medical Mileage**

- Medical mileage rates are set by the IRS and can be applied to transportation primarily for and essentially to medical care.
- Indicate the total number of miles incurred with each service provided (i.e. round trip miles to visit the doctor).
- EBS-RMSCO will apply the current mileage rate and include the mileage amount in your total reimbursement.
- You may be required to produce additional documentation for each mileage expense you claim.

### **Medical Claims for FSA, LPFSA, HRA and RRA**

- For each medical claim covered by your insurance carrier, submit an Explanation of Benefits (EOB). If your claims are not submitted to your insurance carrier, provide an itemized bill showing: date of service, provider name, patient name, charged amount, and description of services rendered.
- Do not send credit card receipts, original receipts or cancelled checks.
- The IRS states that Over-the-Counter (OTC) items classified as drugs and medicine are only eligible if they are accompanied by a doctor's prescription.
- Use Plan Code "M" to report medical mileage associated with an EBS One Card transaction. For example, if you drove 20 miles to a doctor's appointment, and paid your copayment amount with the EBS One Card, you should use Plan Code "M" to be reimbursed for the 20 miles you drove. You should still complete the full line of information, but you will only be reimbursed for the mileage, not the copayment amount.

### **Dependent Care Claims**

- Please use the separate form titled Dependent Care Account Reimbursement Request Form.

### **Parking/Transit Claims**

- For each claim, attach copies of receipts the showing date, merchant name, amount paid and description.
- Balance bills and cancelled checks are acceptable for Parking and Transit accounts.
- The only type of parking that is eligible for tax-free reimbursement is qualified parking on (or near) the employer's facility, or on (or near) a location from which the employee commutes to work by public transportation. If the parking is on (or near) the employee's residence, it is not eligible for tax-free reimbursement.