

WageWorks Pay Me Back Dependent Care Claim Form Instructions**PLEASE READ THIS BEFORE SUBMITTING YOUR CLAIM FORM**

Your claim is important to us. To ensure we are able to approve your claim, please fully complete the WageWorks Dependent Care Pay Me Back Claim Form. Submit your claim form along with your complete documentation of the expense. Please review the guidelines listed below to ensure all necessary information is included when filing your claim.

**** An electronic claim may be submitted at www.wageworks.com.****

Tips for Filling out the Pay Me Back Claim Form

- Read every box and provide all requested information pertaining to you and your claim.
- Provide the legal name your employer has for you in their official records, not your nickname.
- Provide your ID Code which is usually the last four digits of your SSN.
- Make sure you sign the form. If the **account holder's signature** is not present, we cannot process your claim.
- Dependent Care Provider's signature can be substituted for a receipt from the provider; however, the provider must sign the form where indicated. Either the provider's signature on the claim form **or** an itemized receipt from the provider is required, not both.
- At the end of the tax year, you are required to provide IRS with the provider name, address and Tax ID # on Tax Form 2441 in order to obtain the tax advantage for these expenses.

Things to Remember When Submitting Receipts

- The receipt or documentation must contain:
 - **Provider Name** – Facility name or person who provided the service.
 - **Dates of Service** – Service start and end date for services provided.
 - **Service Description** – Detailed description for services provided.
 - **Amount** – The amount incurred for the services.
 - **Dependent Name** – Person who received the service.
- Cancelled or carbon copies of checks are not acceptable forms of receipt documents. Please do not submit.
- Overnight Camps are not eligible expenses.
- Include a receipt for every expense.
- Handwritten receipts must have stamped provider information.
- Send copies of your receipts; keep the originals for your records.
- If you attach multiple receipt pages, circle or check the dollar amount that is being claimed for each receipt.
- Do not use a highlighter to highlight the dollar amount on the receipt.

Tips for Submitting the Pay Me Back Claim Form

- Do not use a cover page when faxing.
- Please allow 2 business days from receipt of your claim for processing.
- You can verify the claim status online at www.wageworks.com after processing.
- You will be notified via email of the status of your claim if we have a valid email address on file.
- Make a copy of the form and all attachments for your records if submitting via postal mail.
- Do not combine and submit a co-workers claim with yours.

FAX: (855) 291-0625, or Mail to: Claims Administrator-FBWW, PO Box 14326, Lexington, KY 40512

