

## **WageWorks Pay Me Back Claim Form Instructions**

### **PLEASE READ THIS BEFORE SUBMITTING YOUR CLAIM FORM**

Your claim is important. To ensure we are able to process your reimbursement, please fully complete the WageWorks 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](http://www.wageworks.com). Log in to your account to verify access to this functionality.\*\***

### **Tips to Complete the Pay Me Back Claim Form**

- Read every box and provide all requested information.
- Type or write legibly.
- Provide the legal name your employer has provided in their official records, not your nickname.
- Include your ID Code which is usually the last four digits of your SSN or employee identification number.
- Remember to sign the form. If the **account holder's signature** is not included, the claim will not be approved.

### **Things to Remember When Including Receipts**

- The itemized receipt or documentation must contain:
  - **Provider Name** – Facility name or person who provided the service or, if a purchase, where item was purchased (i.e. hospital, doctor, pharmacy).
  - **Date of Service** – Date services occurred or date item was purchased.
  - **Service Description** – Detailed description of the service provided or item purchased.
  - **Amount** – The amount charged for the services or product and/or the portion not reimbursed through your insurance carrier.
  - **Patient Name** – Person who received the service or whom the item is for. This may be excluded for retail store purchases.
- Include an itemized and legible receipt for every expense.
- Explanation of Benefits (EOB's) are recommended especially if your insurance carrier covered a portion of the expense.
- Cancelled or Carbon copies of checks are not acceptable forms of receipt documents.
- Handwritten receipts must have stamped provider information.
- 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 by Fax**

- Do not use a cover page when faxing the claim form.
- Please allow 2 business days from receipt of your claim for processing.
- You can verify the claim status online at [www.wageworks.com](http://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. To add or change the default email address, log on to [www.wageworks.com](http://www.wageworks.com) and select "Edit My Profile" from the welcome screen.
- Make a copy of the form and all attachments; send only copies, keep originals 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**

