



What You Need to Submit for Health Care Expenses



This one page guide gives you all the information you need to know in order for **Benefit Coordinators Corporation (BCC)** to process your health care claim.

BCC NEEDS THE FOLLOWING TO PROCESS YOUR CLAIM:

1. A completed Request for Reimbursement Form, including the total amount you're claiming, your signature and the date.
2. Supporting documents (below are the guidelines for acceptable documentation)

CLAIMS SUBMITTED WITHOUT THE REQUIRED DOCUMENTATION WILL BE DENIED

A) Required for most health care services

- For all PPO services: An explanation of benefits (EOB) from the insurance company
- For other than PPO services: An itemized bill or receipt from the service provider that includes all of the following:
 1. Name of service provider
 2. Name of patient
 3. Date of service
 4. Details of the service or product
 5. Cost of service or product

A. Do NOT submit:

- Cash register receipts
- Balance forward statements
- Cancelled checks
- Credit card receipts and/or statements
- Received-on-account statements
- Estimates for services to be performed

B. Required for an office co-pay

- A receipt or invoice, which includes all of the following:
 1. Name and address of service provider (must be pre-printed or stamped on receipt or invoice)
 2. Name of patient
 3. Date of service
 4. Wording indicating that this is a "co-pay" or "office visit"
 5. Cost of co-pay

B. Do NOT submit:

- Cash register receipts
- Balance forward statements
- Cancelled checks
- Credit card receipts and/or statements
- Received-on-account statements

C. Required for prescriptions

- A copy of the itemized prescription label (often attached to the outside of the bag upon purchase) or mail-order prescription invoice, which includes all of the following:
 1. Name of pharmacy
 2. Name of patient
 3. Date of purchase
 4. Name of drug (if not subject to co-pay)
 5. Cost of prescription

C. Do NOT submit:

- Cash register receipts
- Balance forward statements

NOTE: If you do not retain a copy of your prescription label, please contact your pharmacy.

D. Required for prescribed over-the-counter (OTC) medications and medical supplies

- A cash register receipt, which includes all of the following:
 1. Name of the store or pharmacy
 2. Date of purchase
 3. Name of the item
 4. Cost of the item (may include tax)
 5. Copy of prescription for OTC item

NOTE: The name of the patient is not required on a cash register receipt (for OTC items only).

E. Special Circumstances

- Orthodontia: Requires an Orthodontia Financial Agreement each Plan Year (*Call us!*)
- Some expenses require a letter from your doctor each Plan Year (*Call us!*)
 - Hypnotherapy
 - Massage Therapy
 - Support Hose
 - Viagra
 - Weight Loss