

Getting Reimbursed

You can use the funds in your account to reimburse yourself for out-of-pocket health care expenses. This page examines your reimbursement options, gives an example of how you might be reimbursed, and answers some common questions.

What can I be reimbursed for?

If you have an HSA or an FSA, [see this list of eligible expenses](#) that can be reimbursed from your account.

If you have a VEBA, [see this list of eligible expenses](#) that can be reimbursed from your account.

If you have an HRA, eligible expenses are determined by your group. Talk to your employer or benefits administrator for more information.

Requesting reimbursement

Depending on your group settings, you have a few options for getting reimbursed for health care expenses from your account.

Online reimbursement claims

When you want to be reimbursed for an out-of-pocket health care expense, you can do so easily by signing in to www.hellofurther.com. Further will process the request and reimburse you as long as there are sufficient funds in your account. Reimbursements can be sent to you as a check, but a more convenient option is [setting up direct deposit](#) with your checking or savings account so the money is automatically sent there. We recommend setting this up and saving a trip to the bank.

Note: If a reimbursement request is greater than the account balance, the difference will pend for up to one year and be reimbursed as funds become available. When you submit a claim, you're responsible for verifying that the expense is an eligible medical expense as determined by Section 213(d). You should keep appropriate receipts for all medical payments (provider name, date, reason, and amount). However, you do not need to submit this information with your withdrawal request.

To submit an online reimbursement claim:

1. Sign in at www.hellofurther.com.
2. Choose Get Reimbursed from the *I Want To...* menu.



3. If you have more than one account, select **HSA account**, then click **Next**
4. Enter the amount you would like to request, then click **Next**
5. Add or select a bank
6. Add notes
7. Select **Distribution Reason**
8. Review and accept the terms by checking the **I certify** box
9. Click **Submit**

You'll need documentation for the following items:

- Date of service or purchase
- Name of the person who received service or supplies
- Name of the service or supply provider
- Type of service or supplies you purchased
- The amount you were charged for service or supplies, or the amount that was not reimbursed by your insurance provider

Attachments must be less than 15MB in size and in one of the following file formats: JPG, PDF, TIFF, PNG, or BMP.

Mobile reimbursement claims

To submit a mobile reimbursement claim:

1. Open the Further mobile app. If you have not yet downloaded the app, you can find it in both the Apple App Store and Google Play Store.
2. Sign in to the app.
3. Tap **Get Reimbursed**.
4. Follow the prompts on your screen.

Automated Claim Payment

Note: *This option must be allowed by your group.*

Automated claim payments are another reimbursement option offered by Further. This option is called Automated Claim Payment. It allows your health plan to automatically send your medical claims from a provider to Further for reimbursement. This means you don't have to seek reimbursement for your provider costs--Further will reimburse you automatically.

[Read our article on Automated Claim Payment](#) to determine if it is right for you.

If you currently have a debit card, enabling Automated Claim Payment will cancel the card.

1. Sign in at www.hellofurther.com.



2. In the main navigation menu, click **My Profile**.
3. Choose **Payment & Banking** from the menu.
4. Click Switch to Automatic Claim Payment

Note: This button will only appear if you have an active account and your employer allows Automated Claim Payment.

5. Choose from the available options.
6. Click **Save Selections**.

We also recommend [setting up direct deposit of reimbursements](#) to your personal bank account.

Mail-In Reimbursement Claims

You can also request reimbursement by mailing in a paper form. This method will take longer. Use the link found later in this page.

Keeping a good record of expenses

When you request a reimbursement, you may be asked to provide proof that the purchase is an eligible medical expense. This might be a prescription, doctor's order, and/or receipt.

Any documentation you upload is stored in our My Records and Receipts electronic document storage tool.

If you are not required to upload documentation for a reimbursement, it is still a good idea to store supporting documentation in My Records and Receipts. This helps you prepare for a future IRS audit.

For more information about storing and maintaining your documentation, see [Maintaining Documentation for Eligible Expenses](#).

Frequently asked questions

Q: Are claims incurred prior to setting up my HSA eligible to be reimbursed?

A: No. Only claims incurred on or after the date that your HSA was activated are eligible regardless of the effective date of the HDHP. Your account is considered active when funded.

Q: What if I have another account paired with my HSA?

A: When actively contributing to an HSA, the following limitations may apply (please see your Summary Plan Description for details):

HSA + FSA: The FSA is limited to vision and dental expenses until you have met your deductible with your insurance.

HSA + HRA: The HRA is limited to vision and dental expenses until you have met your deductible with your insurance OR the HRA is suspended completely.



HSA + VEBA: The VEBA is suspended, post-retirement or limited to vision and dental until you meet your insurance deductible.

Q: My claim or reimbursement request was denied. What can I do?

A: After receiving a complete or partial denial of a claim, we recommend you contact our Customer Service department for help in understanding what can be done to get your claim reimbursed. If the claim is still being denied after working with us, you can appeal the decision by filling out an Appeal Form. We recommend you work with your employer or benefits administrator to make sure you have complete and accurate information when making your appeal. Further will perform a full and fair review of your claim and provide you with written notice of the decision within 30 days of receiving your appeal request.

Download the [Appeal Form](#).

A: You can also designate another person to manage the appeal process on your behalf by completing an Authorization for Release of Information for them.

See [Authorization for Release of Information](#) for more information.

Printable forms

For HSA withdrawals: [Download the HSA Withdrawal form](#)

For FSA, HRA, or VEBA withdrawals: [Download the Medical Expense Claim form](#)

To return overpaid funds to a spending account: [Download the Reimbursement Return form](#)

To reclassify HSA funds reimbursed with an incorrect service type [Download the HSA Distribution Reclassification form](#)

