

## Why do I need to submit an itemized receipt?

With tax advantaged plans such as Flexible Spending Accounts (FSA), the IRS requires itemized receipts for every transaction. This documentation is needed to verify that your expense was eligible under the plan.

All receipts are reviewed to ensure that they meet IRS eligibility requirements. With certain expense types, additional information may be requested. We also must verify that the date of service took place in the appropriate Plan Year, set by your employer.

For **Health Care** expenses, the **itemized receipt** must include five main components:

1. Who the expense was for
2. Merchant or provider name
3. Service received or item purchased
4. Date of service
5. Amount of expense

*Credit card receipts, bank statements, and payment confirmation receipts most often do not provide the details needed to verify eligibility. If a credit card receipt is submitted, you may receive a written request for more information.*



**Mainline Health Associates** **2. Provider**

**Pay Online** FAST SIMPLE SECURE

**STATEMENT** **1. Who**

Please detach and return top portion with payment.

Guarantor Number	Responsible Party	Statement Date	Due Date
130205587	John Jones	12/29/2021	1/18/2022

Date	Service Description	Status	Charges	Payments/Adjustments	Patient Balance
7/29/2021	PATIENT: TAMMY JONES MAINLINE HEALTH ASSOCIATES CENTER RL ULTRASOUND ON 7/29/2021				
	Previously Billed Charges		\$1,200.00		
	Encounter Total:	Past Due			\$1,200.00

**3. Service** **4. Date of Service** **5. Amount**

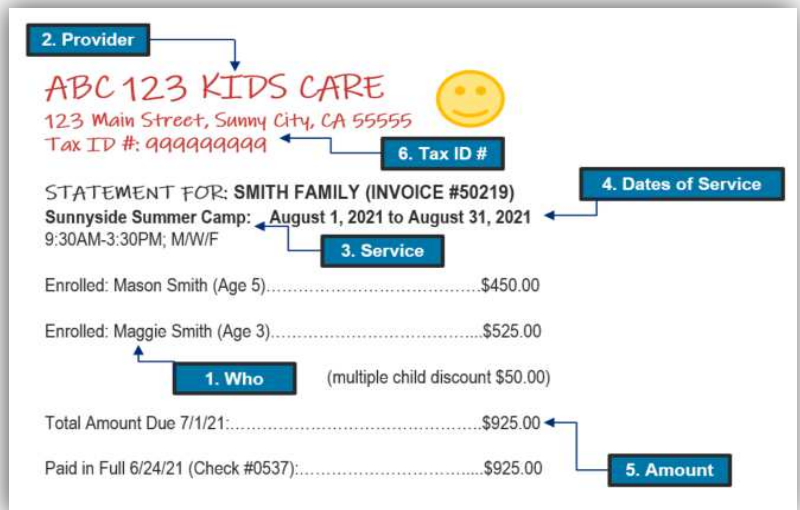
**AMOUNT DUE: \$1,200.00**

You may also submit the **Explanation of Benefits (EOB)** issued by your insurance carrier. The full Explanation of Benefits (EOB) will provide the same details needed, as the itemized receipt.


For **Dependent Care** expenses, the itemized receipt must show the same main components:

1. Who the expense was for
2. Provider or dependent care facility
3. Services received
4. Dates of service
5. Amount of expense.
6. The provider Tax Identification Number, or EIN, is also required.

\*A *Dependent Care Claim Form* is also available as a convenience when provider receipts are not available (provider must complete w/ signature).



**2. Provider**

**ABC 123 KIDS CARE** 

123 Main Street, Sunny City, CA 55555  
Tax ID #: 999999999 **6. Tax ID #**

**STATEMENT FOR: SMITH FAMILY (INVOICE #50219)**

Sunnyside Summer Camp: **4. Dates of Service** August 1, 2021 to August 31, 2021

9:30AM-3:30PM; M/W/F **3. Service**

Enrolled: Mason Smith (Age 5).....\$450.00

Enrolled: Maggie Smith (Age 3).....\$525.00

(multiple child discount \$50.00)

**1. Who**

Total Amount Due 7/1/21:.....\$925.00 **5. Amount**

Paid in Full 6/24/21 (Check #0537):.....\$925.00

