

### *Paperless Reimbursement: Special Agents Mutual Benefits Association*

Please review this document along with the [Paperless Reimbursement Overview Quick Reference Guide](#) for all the information you need to know about PR including the types of claims Special Agents Mutual Benefits Association (SAMBA) automatically forwards to FSAFEDS.

#### **Information for Employees Enrolled in FSAFEDS Paperless Reimbursement (PR) with Special Agents Mutual Benefits Association (SAMBA):**

- You automatically receive reimbursement from your FSAFEDS Health Care Flexible Spending Account (HCFSAs) for certain health care expenses you, your spouse, your eligible dependents, and your adult children up to age 26 incur without having to submit a claim to FSAFEDS. **NOTE:** Eligible expenses incurred by your adult children from his/her 26<sup>th</sup> birthday through the end of the calendar year in which he/she turns 26 will **NOT** be reimbursed through PR. You must fill out a claim form for those expenses and send it to FSAFEDS for reimbursement.
- If you enroll **during** Open Season, SAMBA automatically forwards to FSAFEDS all claims for services incurred and processed on or after January 1 of the new Benefit Period.
- If you enroll **after** Open Season at any time during the Benefit Period, your enrollment is effective the next day. SAMBA does not forward claims for services processed for you, your spouse, your eligible dependents, and your adult children up to age 26 prior to your PR enrollment.
- *Example: You enroll in PR on March 1. The effective date of the PR enrollment is March 2. SAMBA forwards claims to FSAFEDS for services incurred processed on or after March 2. You need to submit an [FSAFEDS claim form](#) for any health care services processed prior to March 2.*
- Any claim that SAMBA receives and processes for you, your spouse, your eligible dependents, and your adult children up to age 26, and for which you receive an Explanation of Benefits (EOB), is automatically forwarded to FSAFEDS for processing your out-of-pocket expenses, **except** for the following, which may require action on your part:

#### **Fully or Partially Denied Claims**

Sometimes, your claims information we receive from SAMBA for you may not provide enough specific information to allow FSAFEDS to determine whether the expense is eligible for reimbursement from your HCFSAs. You receive an FSAFEDS Reimbursement Statement for any claim that is denied, including the reason for the denial and the information we need for your claim to be reconsidered. You need to submit an [FSAFEDS claim form](#) with the necessary supporting documentation for these claims. FSAFEDS reviews your documentation and determines if the services or items denied are eligible for reimbursement under your HCFSAs, and if so will process your claim and reimburse you.

#### **Denied Claims for All Denied Pharmacy and Dental Services**

SAMBA does not forward fully denied claims for all denied Pharmacy and Dental Services to FSAFEDS. You need to manually submit an [FSAFEDS claim form](#) with the necessary supporting documentation for these claims. FSAFEDS reviews your documentation and determines if the services or items denied are eligible for reimbursement under your HCFSAs, and if so will process your claim and reimburse you.

#### **No Social Security Number (SSN) on File/HIPAA Privacy Claim Request**

We do not receive claims information from SAMBA if they do not have your Social Security Number on file (or your spouse's SSN if he/she is the FEHB enrollee). We also do not receive claims for you or any of your covered family members who have requested privacy protections available under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). In either case, you need to manually submit an [FSAFEDS claim form](#) for those expenses.

### **SAMBA Cannot Verify Enrollment**

If SAMBA is unable to verify your enrollment, FSAFEDS disenrolls you from PR. We will notify you of the disenrollment. You will remain disenrolled and need to manually submit all of your claims using the [FSAFEDS claim form](#). If you are enrolled in an FEHB or FEDVIP plan, please verify the social security number of the enrollee when re-enrolling.

### **Federal Employees Dental and Vision Insurance Program (FEDVIP)**

Your FEHB plan offers some dental and/or vision benefits that are submitted via PR. However, if you or any of your covered family members are also enrolled in a FEDVIP dental and/or vision plan, the claim will be considered in the following order:

1. The claim should be submitted by either you or the provider to the FEHB plan.
2. The claim should then be submitted to your FEDVIP dental or vision carrier, as appropriate.
3. If you are enrolled in one of the FEDVIP PR plans (Aetna Dental, FEP Blue Vision, GEHA Dental, United Concordia Dental and/or Vision Service Plan (VSP)), your claim will be sent automatically for processing. If you choose not to be enrolled in PR with one of the FEDVIP PR plans, you will need to submit your dental and vision claims manually.

### **Additional Claim-Related Information:**

- If your account is frozen due to an overpayment, future PR claims are processed towards the overpayment amount until it is satisfied. If you have disenrolled from PR, or have expenses that are not forwarded to FSAFEDS by SAMBA, you need to manually submit an [FSAFEDS claim form](#) to offset the overpayment.
- You can request reconsideration of any claim not reimbursed by FSAFEDS via the appeal process. Refer to the [Appeals QRG](#) for more information.
- For more information on submitting paper claims, refer to [How to File a Claim](#).
- For all claims (both received automatically from SAMBA or directly from you), we notify you of our determination. Information on both types of claims (automatic and manual) processed appears under [My Account Summary](#).
- Carrier adjusted claims will need to be submitted manually to FSAFEDS.
- We are not able to answer questions about how SAMBA processed your claims. If you need assistance with how your plan processed your claim, contact SAMBA at the telephone number printed on the back of your SAMBA identification card.

### **Reimbursement Timeline for Claims Sent to FSAFEDS from SAMBA:**

- Step 1:** SAMBA receives claims from your health care provider(s), and forwards processed claim information to FSAFEDS weekly. We estimate that it takes between 2-4 weeks from the date of service to when FSAFEDS receives your processed claim from SAMBA for medical, dental, vision and retail prescription drug services. For mail-order prescription drug services, we estimate that it takes between 4-6 weeks from the date of service to when FSAFEDS receives your processed claim from SAMBA.
- Step 2:** FSAFEDS receives the claim information from SAMBA and processes your claim for payment within five business days of receipt.
- Step 3:** FSAFEDS releases payment
- For claims we approve that total \$25 or more, we release your payment as described below.
  - For claims we approve that total less than \$25, we hold your payment until we receive, process and approve additional claims that, when combined with the held claim(s), equal or exceed \$25 or until the end of the quarter, whichever comes first.

### **Payment Methods:**

We release your payment through Electronic Funds Transfer (EFT) to your bank the next business day after we process your claim. Check with your bank for details on when this deposit will be available in your account.

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#### **The Federal FSA Program**

FSAFEDS Program • PO Box 36880 • Louisville, KY 40233 • [www.FSAFEDS.com](http://www.FSAFEDS.com)