



HOW TO FILE A CLAIM

To be complete, a claim must include a claim form that has been signed and dated by the account holder, and the following five pieces of information:

- Name of the **recipient** of the service provided
- Name of the **service provider**
- **Date** of the service provided
- **Nature** of the service provided
- **Cost** of the service provided

Claims must be accompanied with receipts for the services rendered - **for HRA claims an Explanation of Benefits (EOB) is required** to show that the expense was applied to the insurance deductible.

- Please note that Credit Card receipts or cancelled checks are not valid documentation
- Claims for personal hygiene items and cosmetics are not eligible expenses
- Vitamins and supplements are not eligible without a doctor's prescription
- Massage therapy and weight-loss programs are only allowable to the extent that they are prescribed for a *chronic condition or existing disease* and supported by a doctor's note submitted with the claim
- We will keep doctor's note on file but they must be renewed at the beginning of each plan year

Click [here](#) for a list of Health FSA [qualifying expenses](#)

If you have an HRA, check your Plan Documents for what expenses are eligible under your specific plan.

When you incur a reimbursable expense and are ready to file a claim you can do one of the following:

File a Claim Online through the WealthCare Portal (Registration instructions at the end of this document)

[download presentation](#)

- Browse to amben.com/WealthCare
- Login to your account and choose **Add a Claim** under the **Claims** menu
- Enter your claim information, then either:
 - **Attach** your documentation via the portal or
 - **Validate Later**
 - Choose PRINT A CLAIM FORM and fax it with supporting documentation to 877-723-0147
 - Or log in and choose **Claim Activiy** under the **Claims** menu, find your claim and **ADD RECEIPT**

File a Claim Online using the WealthCare Mobile App for smart phones and tablets

- [Find out more about our mobile app](#)

Complete a Claim Form manually and send to American Benefits Group

- Download our [Claim Form](#)
- Complete and sign the Claim Form, sending it with supporting receipts to American Benefits Group via:

Fax: 877-723-0147

Mail: American Benefits Group, PO Box 1209, Northampton, MA 01061-1209

Securely Email: claims@amben.com - sendsecure.amben.com

The Reimbursements Process

- Claims are paid once a week
- Reimbursements for completed eligible claims received in our office by noon on Fridays, will be processed and checks sent the following Tuesday
- Direct deposits funds*generally will be in participant's bank accounts on Wednesday, however, your bank may take up to three business days to process

***As part of our effort in achieving a 100% paperless office we encourage you to receive your reimbursements directly into your bank account.** If your employer offers the ability to have reimbursements deposited to your bank account, you can set-up direct deposit by logging-in to your account, click **Reimbursement Settings** under the **My Account** tab within the WealthCare Portal. Alternatively, you can complete and sign the [Direct Deposit Authorization Form](#) linked here or found under the **Resources** tab, and send (along with a copy of a cancelled check) to American Benefits Group:

- Fax: 877-723-0147
- Email: processing@amben.com

WealthCare Portal Registration Instructions

- Browse to www.amben.com/WealthCare
- For First Time Registration
 - In the left column choose **New User? Please click here to register**
 - Follow the instructions and enter all the required information
 - **Username** must be 6-12 characters (alphanumeric)
 - **Password** must be 8-16 characters (follow the provided criteria)
 - **Registration ID** - choose **Employer ID** ([Find Employer ID](#))
 - **Employee ID** is your Soc. Sec. (with no hyphens)