

FLEXIBLE SPENDING CLAIM FORM

Employee Name	Member ID
Place of Employment	Group Number

Healthcare Flexible Spending Account

To submit a Healthcare Spending Account, you must:

- Complete this form in its entirety.
- Attach a copy of the bill or receipt from the provider of service for all eligible expenses. Each Explanation of Benefits (EOB), bill, or receipt must contain the following information:
 - » Name of person receiving services
- » Amount charged

» Date of service

» Name of provider rendering service

- » Type of service
- Attach the EOB for all insurance carriers for expenses covered under any group medical, dental, vision, prescription, or hearing plan.
- Retain a copy for your records.

Medical Expenses

Amount of Claim	Patient's Name	Relationship to Employee	Date of Birth

I certify that either I and/or my eligible dependent(s) have incurred these expenses and have not been previously reimbursed and
are not eligible for reimbursement under any other plan. Furthermore, I declare that I will not deduct these expenses on my own or
anyone else's individual Federal Income Tax Return.

Employee's Signature	Date	

Submit all claims to: AultCare Flexible Spending Account at PO Box 6910 Canton, OH 44706 or fax to 330-470-4757 or email to ancillaryclaimsservices@aultcare.com

INSURANCE FRAUD WARNING: Any person who, with intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud. I acknowledge that AultCare may use and disclose my protected health information, as well as, the protected health information of my family for payment, treatment, and operations. This information may be disclosed to other insurance companies, third party administrators, state and federal agencies, health care providers and other organizations and persons that perform professional, business, or insurance functions for AultCare, as permitted by state and federal law. The information may be used for, but not limited to, processing enrollment applications, risk classifications, detecting or preventing fraud, internal and external audits, claims administration, case management, quality improvement programs, public health reporting, law enforcement investigations, coordination of benefits, medical management programs, and subrogation.

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