SUBSTANTIATION FAQ



It can be difficult to remember when documentation is required for an FSA claim and which types of documentation you can submit. To help you out, we've compiled the answers to a few of the most commonly asked questions related to claim substantiation:

Why do I have to substantiate FSA claims?

The IRS requires participants to provide documentation to make sure the expenses are FSA-eligible.

How will I know if I need to substantiate a claim?

If Discovery Benefits doesn't receive enough detail from the provider when you use your benefits debit card, you'll receive a request for an itemized receipt.

What type of detail needs to be included in my documentation? The IRS requires that participants provide:

- I. Date service was received or purchase made
- 2. Description of service or item purchased
- 3. Dollar amount (after insurance, if applicable)
- 4. Name of merchant/provider

If I used my card at a hospital or dental office, shouldn't my claim be automatically approved?

Unfortunately, not all expenses from a hospital or dental office are FSA-eligible. For example, some hospital gift stores sell flowers that could still be coded as "hospital" expenses, and some dental offices provide elective services like teeth whitening that could still be coded as "dental" expenses. Unfortunately, these are not FSA-eligible. By obtaining supporting documentation, we're able to verify the eligibility of the expense to maintain compliance with IRS regulations.

How do I submit documentation?

The easiest ways to upload documentation are by logging in to your account at www.discoverybenefits.com or by using the free Discovery Benefits mobile app. If you choose to fax your documentation, please just be sure to include the receipt reminder for smooth processing.

Who should I contact with questions about my claim or the substantiation requirements?

Reach out to our Participant Services team at I-866-45I-3399. They're available Monday through Friday, from 6 a.m. to 9 p.m.

