



How Your Account Works

Paying for Care is Easy...

This step-by-step guide explains how to use your account. **Let's start at the doctor's office.**

Step 1

Go to the Doctor, Dentist, Eye Doctor, Pharmacist or other Health Care Provider.

- ✓ Show your insurance ID card.
- ✓ **Pay copays and other charges** with your payment card or with personal funds. Your choice of payment impacts Step 3, so keep reading.
- ✓ Ask your doctor for an **itemized receipt** as documentation* – be sure it contains these five pieces of information:
 1. Patient name
 2. Date of service
 3. Doctor's name
 4. Description of the service
 5. Amount charged

*Health Savings Accounts (HSAs) will not require documentation, but you should always retain your documentation in case it is needed at tax time.

Step 2

Pay Additional Charges (if any)

- ✓ Your insurance plan will process the claim. You may receive a bill for your portion owed.
- ✓ Paying with your payment card is always fastest and easiest. If necessary, you can always pay with personal funds. Your payment choice impacts **Step 3**.
- ✓ Keep all necessary documentation.

HOT TIP

An Explanation of Benefits (EOB) provided by your insurance carrier usually contains all the required information.

Step 3

Complete the Payment Process

- ✓ **Payment Card:** If you paid using your payment card, you may have to submit documentation. We'll try to automatically verify that your payment card charges were eligible, but if we cannot, we'll ask you for documentation.
- ✓ **Personal Funds:** If you paid with personal funds, you will have to request reimbursement online or via the mobile app, and submit your documentation. (See **How to Submit a Reimbursement Request** section.)

We'll automatically check as many payment card charges as we can, but at times, you may have to submit documentation.

How does ConnectYourCare automatically check eligibility?

We use a number of methods, like automated information from the merchant or your health plan and exact matches to your plan's copay amounts or previously approved claims, to automatically approve as many charges as possible.

Why would a doctor/dentist/eye doctor charge need documentation?

It may seem obvious that a charge at a legitimate health provider would be approved, but we must check the item's eligibility (not teeth whitening, for example) and that it was during your plan year.

What if I don't submit documentation?

Your payment card will be temporarily suspended if documentation is not received. We'll turn it back on once documentation is received and processed. You may have to reimburse your plan for the expense.



Documentation Success

Make sure your documentation is accepted everytime. IRS guidelines require these five pieces of information on all documentation.

1. Name of the patient (you, your spouse or dependent)
2. Date the service was provided
3. Name of the service provider
4. Description of service
5. Amount/cost of item or service provided

HOT TIP

An Explanation of Benefits (EOB) provided by your insurance carrier usually contains all the required information.

“The mobile app is very user friendly and makes it easy to track claims and upload necessary documentation.”

– CYC participant



How to Submit a Reimbursement Request

If you used personal funds – a personal credit card, cash or check – to pay for an eligible expense, you'll have to submit a request to be reimbursed. Here's how.

Step 1

Getting Started

Log into your account online or using the mobile app.

Step 2

Enter the Required Information

Select “Make a Payment” and follow the on-screen prompts to fill in the requested information.

Step 3

Check Your Documentation

Be sure your documentation contains these five pieces of information:

1. Patient name
2. Date of service
3. Doctor's name
4. Description of the service
5. Amount charged

Step 4

Submit Your Documentation

Follow the on-screen prompts to submit your documentation. If you are on your phone, you can take a picture and upload it directly. If on your computer, you can browse and select your image to upload.



You also have the option to fax your documentation when online, though this method takes longer to receive reimbursement. Fax the form, along with your documentation, to the number on the form. Continue through the on-screen prompts to finalize your request.



Each fax cover form has a unique barcode at the top; be sure to use the fax cover form for this claim. If you have more than one claim, send each claim as a separate fax.

You're done! If we have all the information we need, we'll process the claim

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Use technology to your advantage.

Save yourself time by downloading myCYC, our secure mobile app. Use it to:

- ✓ View account balances and payments
- ✓ Request a payment
- ✓ Receive important account alerts
- ✓ Take a photo of your receipt and upload it directly to the system
- ✓ View FAQs or tap to call Customer Service

Are you an advanced user? Sign up for Mobile Alerts in your online account for text messaging.



online access



mobile access



24/7 access