summit

File a Claim in ClaimsVault[®]

ClaimsVault[®] may be used as a type of "electronic shoebox" to store medical receipts or Explanation of Benefits. Saved receipts will remained available to you as long as you have an account in Summit.

Another way ClaimsVault® may be used is to defer reimbursement. For example, with HSAs you can save your receipts and file a claim for reimbursement any time you want, as long as you had an HSA at the time the purchase was made.

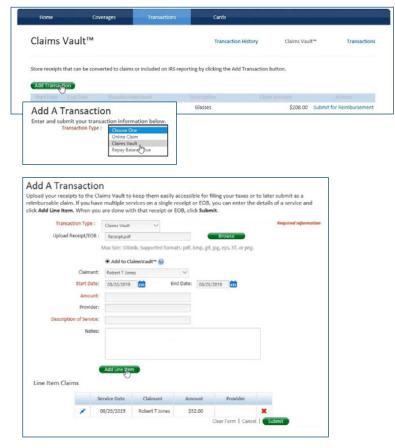
How to File a Claim in ClaimsVault[®]

Log in to your account*. In the navigation bar at the top of the screen, hover over **Transactions**, and **click on** *ClaimsVault*®¹.

- a. Click the Add Transaction button. Choose ClaimsVault[®] from the dropdown list.
- b. **Click** *Browse* to upload a receipt or EOB.
- c. Make sure the claimant is correct, then fill in your *start date, amount of service,* and the *description of service.* If you have several claims you are making, click Add line item, to add more claims. Once you are finished, click the Submit button to file your claim.



* Your home page and accounts may look different from what you see here, but the information will be in the same places.



How to Submit a Claim for Reimbursement in ClaimsVault[®]

To be reimbursed, once you log in, go to **Transactions**, and click on **ClaimsVault®**. On the transaction you want to be reimbursed, **Click Submit for Reimbursement.**"

- Summit
 Processor
 Stoppet

 Home
 Coverages
 Transactions
 Cards

 Home
 Coverages
 Cards
 Cards

 Claims VaultTM
 Transaction History
 Claims Vault^{ace}
 Transactions

 Store receipts that can be converted to claims or included on IRS reporting by clicking the Add Transaction button.
 Add Transaction
 Transactions

 Store receipts that can be converted to claims or included on IRS reporting by clicking the Add Transaction button.
 Add Transaction

 Store Tracedore/Meechant
 Description
 Claims Amount
 Actions

 08/13/2019
 08/13/2019
 Glasses
 5208.00
 Submit for Reimbursement

 08/26/2015
 08/26/2019
 Contacts
 532.00
 Submit for Reimbursement
- a. Select the Service Category², and the Service Code³. These drop down menus vary by administrator, so be sure to read the choices carefully. Choose the benefit plan you are using, and choose whether you are using Direct Deposit or check, if you have the option. Write in any notes that you may want for future reference, and click the check box next to "I have read and agree to the Terms and Conditions."
- b. Click the **Submit** button to complete your **Claim for Reimbursement**.

Submit for Reimbursement	
Edit Claim	
If you don't have all of the de back later to finish and submi	tails for your claim, click Finish Later to save what you have entered then come t your claim.
	Required Information
Upload Receipt/EOB :	receipt.pdf View Receipt
	Max Size: 100mb. Supported formats: pdf, bmp, gif, jpg, eps, tif, or png.
	Pay Me O Pay Provider
Claimant:	Robert T Jones 🗸 🗸
Start Date:	08/26/2019 📅 End Date: 08/26/2019 📅
Amount:	\$52.00
Provider:	
2 Service Category:	Vision 3 Service Code: Glasses V
Description of Service:	Contacts
Plan:	FSA - FSAMed [01-Jan-2019 to 🗸
Reimbursement:	Direct Deposit O Check View Banking Details
Notes:	
	Have read and agree to the Terms and Conditions
	Cancel Delete Submit

If you have further questions, please contact your benefits representative.

