

YOUR spending ACCOUNT™

Receipt Request

Transaction Number	Date of Service	Provider	Due Date	Amount
[9999999-01]	[mm-dd-ccyy]	[Name]	[mm-dd-ccyy]	[\$9,999.99]
[9999999-01]	[mm-dd-ccyy]	[Name]	[mm-dd-ccyy]	[\$9,999.99]
[9999999-01]	[mm-dd-ccyy]	[Name]	[mm-dd-ccyy]	[\$9,999.99]

Action Needed!

Visit the website and select your transaction and submit your receipt(s) by [Month dd, ccyy] to determine if these are eligible YSA expenses and to avoid having your YSA card suspended. The following ways are available to submit your receipts:

- Upload to our website at my.aa.com
- Upload using the “Reimburse Me” mobile app
- Fax to 1-888-211-9900
- Mail to Your Spending Account, P.O. Box 785040, Orlando, FL 32878-5040

Health Care Claim Receipt Requirements

Provide an itemized receipt that includes the following, so your claim can be approved.

- Date of service
- Name of service provider, supplier, or pharmacy
- Name of patient
- Identification of drug or product, or description of service
- Amount paid

Federal regulations require us to confirm that YSA card claims qualify under your plan. Even though you may have used your card at a doctor or dentist, you are required to provide an itemized receipt to prove that your claims qualify under your plan. If you don't have an itemized receipt, you may send other supporting documentation, such as an Explanation of Benefits (EOB) statement from your health plan. Card vouchers that show only the total amount paid are **not** sufficient.

What Happens Next

Once you've uploaded, faxed, or mailed your receipts, you may view the status of your claims on our website at my.aa.com. A decision on your claim typically takes ten days after everything is received.

Reminder: If we don't receive your receipts by the due date indicated above and the total amount of unsubstantiated claims on your account exceeds \$100.00, your YSA card will be suspended until you repay the total amount.