## Submitting a Claim- Smart Scan

Smart Scan makes it easy to scan an EOB right from the mobile app and autofill expense details. It is conveniently located on the home page of the **mobile app**.

1. To begin simply click 'Start Scanning'.

Sentinel Benefits		
My Accounts		
Medical FSA 2022 01-01-22 to 12-31-22 \$473.84 >		
Smart Scan Import your Explanation of Benefits to auto-fill data for faster reimbursement Start Scanning		
l Want To		
Reimburse Myself		
Send Payment >		
Scan Item for Eligibility >		
E Manage Expenses		
View and Upload Receipts >		
Tasks		
No messages available		
Home Profile Log Out		

2. Select the type of EOB to scan. (For our example we selected Medical).





3. Select the insurance provider.





4. Select 'Add Pages' then choose upload method. (For our example we are using the phone camera).



< Ba	ck Smart Scan			
	Explanation of Benefits			
	Add Pages			
	_			
	Choose upload method			
	RECEIPT ORGANIZER			
	DOCUMENTS			
	CAMERA			
	PHOTOS			
	CANCEL			
	NEXT			
,	Home Profile	<b>⊡</b> ⊳ Log Out		

5. After adding your documentation, you will have the option to upload additional pages using the 'Add Pages' option or if you have all documentation needed you can select 'Next'.





6. The system will read your document and autofill claim details. You will have the ability to review the auto filled information, make changes and add notes if needed before submitting your expense. Scroll through the details until you have two options for submission:

- Pay Expense Now: This will create a claim that you can elect to pay from your desired plan.
- <u>Save for Later</u>: This will save your expense in your**expense tracker**. You will need to go in during your plan year and select 'Pay" to have the claim submitted for adjudication. (This option is most often utilized by our HSA participants who want to keep their funds invested longer in the market).



K Back Create Expense

Details		
C Description*		
EOB		
Required		>
Date of Service*	11/15/22	·
Total Billed Amount		
\$500.00		
The total amount billed before insurance provider discount deductions.	e and	
C Expense Amount*		
\$200.00		
C Provider		
Lahey Hospital		



Expense	Medical	>	
Recipient/Patient	Please select	>	
Notes			
	Receipts		
Upload F	Receipt		
SmartScan.pdf PDF   Submitted 11/	30/2022 10:26 AM	>	
Su	bmit Expense		
PA	Y EXPENSE NOW		
SAVE FOR LATER			
Home	Q ⊑⊳ Profile Log Ou	ıt	

7. Once your claim is successfully submitted you will receive a 'Success' message.



K Back	Create Expense	
Lahey Hosp	ital	
Expense	Medica	>
Recipient/Patie	nt Please select	>
Notes		
Succ	с <b>ess</b> ок	
SmartScan.pdf PDF   Submitter	d 11/30/2022 10:26 AM	>
	Submit Expense	
	PAY EXPENSE NOW	
	SAVE FOR LATER	
Home	Profile Log C	) Dut

8. Now you would need to navigate back to your home screen and select 'Manage Expenses' to submit the claim for review.



Sentinel Benefits		
My Accounts		
Medical FSA 2022 01-01-22 to 12-31-22 \$473.84 >		
Smart Scan     Import your Explanation of Benefits to auto-fill data for faster reimbursement     Start Scanning		
I Want To		
Reimburse Myself >		
Send Payment >		
Scan Item for Eligibility >		
E Manage Expenses		
View and Upload Receipts >		
Tasks		
No messages available		
Home Profile Log Out		

9. Next select the claim you want to submit for payment.



Back Manage Expen	ses	
CREATE NEW EXPR	ENSE	
Expenses	<u> </u>	
Lahey Hospital 11/15/2022	\$200.00 Unpaid PAYABLE	>
ORTHODONTICS BY DESIGN 11/2/2022	\$166.67 Paid	>
ORTHODONTICS BY DESIGN 10/3/2022	\$166.67 Paid	>
ORTHODONTICS BY DESIGN 9/1/2022	\$166.67 Paid	>
ORTHODONTICS BY DESIGN 8/2/2022	\$166.67 Paid	>
ORTHODONTICS BY DESIGN 7/5/2022	\$166.67 Paid	>
Home Profile	[]♪ Log Ou	ıt

10. Select 'Pay'.



K Back	Expense	
<b>EOB</b> Unpaid		
	Actions	
Pay		>
Update Expense		>
Remove Expense		>
Mark as Paid		>
Exp	pense Details	
Date(s) of Service 11/15/2022		
Total Billed Amount \$500.00		
Submitted Amount \$200.00		
Expense Amount \$200.00		
Home	Q Profile	Log Out

11. Select the benefit account you would like reimbursement from.





12. Select who should be reimbursed for this expense. (In this example we selected 'me' but we could 'add a new payee' if we wanted to send payment to a provider directly.



## K Back Medical FSA 2022 (1/1/2022 - 12/31...



13. There is a final page to review all the claim details. Once all fields are completed, select 'Submit'.



K Back New Cla	lim	
Claim De	tails	
Start Date of Service*	11/15/22	>
End Date of Service	Please select	>
Amount*		
\$200.00		
Provider*		
Lahey Hospital		
Category & Type*	Please select	>
Incurred on 11/15/2022 at	t Lahey Hospital	
Recipient*		>
You must have a valid receipt	to file a claim	>
Receip	ts	
Upload Receipt		





14. Select 'OK'. You will see the claim deducted from your available balance. The claim will be sent to the adjudication team for review.



## **Claim Submitted**



