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### Doctor's Statement Form

The Internal Revenue Service requires that a doctor's statement be provided for certain healthcare expenses in order to be reimbursed from your health Flexible Spending Account (FSA) or Health Reimbursement Arrangement (HRA). The doctor's statement must indicate the specific medical condition, the specific treatment needed and how this treatment will alleviate the medical condition.

The form below will assist you and your doctor in providing the information necessary in order to process your reimbursement request. Your doctor can also write a letter on his or her letterhead as long as all of the information below is included in the letter.

The form below or doctor's letter should accompany, and is in addition to, the Request for Reimbursement form and itemized documentation required when filing FSA and HRA claims.

The Request for Reimbursement form can be found on [www.corphealthsys.com](http://www.corphealthsys.com).

<b>Employer Name</b>	
<b>Employee Name</b>	
<b>Last 4 digits of Social Security Number</b>	
<b>Phone Number</b>	

<b>Patient Name</b>	
<b>Diagnosis</b>	
<b>Recommended Treatment</b>	
<b>How will the recommended treatment alleviate the diagnosis or symptoms</b>	
<b>*How long is the treatment required?</b>	

<b>Doctor Name</b>	
<b>Doctor Address</b>	
<b>Doctor Telephone #</b>	
<b>Doctor Signature</b>	
<b>Date</b>	

\* Please note that if your treatment extends beyond the time period listed above, you must submit a new Doctor's Statement Form.