



# Medical Necessity Certification

According to the IRS rules and regulations that govern the section 125 programs, some medical products and services are only eligible to be reimbursed when your doctor or health care provider deems them medically necessary. The provider must indicate your (or your spouse or dependents) medical diagnosis, what treatment is needed, and how this treatment might alleviate your medical condition.

This certification will assist our participants and their doctors in providing exactly what we need to process your claim. Your provider may also submit a statement on his or her letterhead as long as all of the following information is included.

**If your treatment extends beyond the required treatment period listed below, a new certification will be required covering the new period.**

Employee Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Patient Name	
Diagnosis	
Recommended Treatment	
How will this treatment correct the symptoms or diagnosis?	

Provider Name	
Provider Address	
Provider Telephone #	
Provider Signature	
Date	
How long is the treatment required?	

If you have questions please visit the FEBCO Web site at [www.FEBCO.com](http://www.FEBCO.com) or call FEBCO toll-free 1-800-489-1539. Administrators are available to assist you Monday through Friday, 8:00 A.M. until 4:30 P.M., Eastern Time. **Please fax your claim to 502-695-9692.**