

# HSA / FSA Reimbursement Guide

Use pre-tax dollars for your ARC Recovery sessions

Many of our members pay for their ARC sessions with pre-tax HSA or FSA funds. With the right documentation, your sessions can qualify as an eligible medical expense. Here is exactly how it works and what you will need.

## How it works

- You do not have to pay with your HSA/FSA card. You can pay any way you like and reimburse yourself later.
- Therapeutic massage qualifies as a medical expense when a licensed provider documents that it treats a specific health condition (IRS Publication 502 / Section 213(d)).
- Once you have that note, you submit your itemized ARC invoice along with it to your plan administrator.

## What you'll need

- 1 Letter of Medical Necessity (LMN)**  
From a licensed provider, naming your condition and recommending massage. Ready-to-use template on page 2.
- 2 Your itemized ARC invoice**  
We will email this on request — it lists each session, date, and amount paid.
- 3 Your plan's claim form**  
Most HSA/FSA administrators provide a simple reimbursement form on their website or app.

## Three ways to get your note

- **Your own provider**  
Your primary care doctor, physical therapist, chiropractor, or any licensed clinician you already see.
- **Telehealth**  
Many online services can issue an LMN after a short visit.
- **At INA Spa**  
Our providers can complete a consultation and write your note. One-time \$50 fee, and we'll book it for you.

## Step by step

- 1** Get your Letter of Medical Necessity (see template, page 2).
- 2** Book and pay for your ARC sessions as usual.
- 3** Request your itemized invoice from ARC.
- 4** Submit the invoice and your LMN to your HSA/FSA administrator — by card payment or reimbursement claim.
- 5** Keep copies for your records; the IRS recommends holding tax documentation for at least three years.

# Letter of Medical Necessity

A ready-to-use template for your provider

Give this to your licensed provider to complete on their letterhead, or have them adapt the language below. Replace each bracketed field. This is the documentation your HSA/FSA administrator will want on file.

[Provider / Practice Letterhead]

Date: [MM/DD/YYYY]

**Re: Letter of Medical Necessity for [Patient Full Name], DOB [MM/DD/YYYY]**

To Whom It May Concern:

I am the treating provider for [Patient Name]. They have been diagnosed with [medical condition / ICD-10 code, if available]. As part of their treatment plan, I recommend therapeutic massage therapy as medically necessary to manage and relieve the symptoms of this condition.

Recommended frequency: [e.g., two sessions per month]

Recommended duration: [e.g., 12 months from the date of this letter]

This massage therapy is prescribed to treat the condition above and is not for general wellness or relaxation.

Sincerely,

\_\_\_\_\_  
[Provider Name, Credentials]

[License # / NPI]

[Practice Name] [Phone / Email]

## Quick answers

- **HSA vs FSA?**

Both can reimburse eligible massage. FSAs usually want the LMN on file before you claim; with an HSA you self-substantiate, but keep the LMN in case of audit.

- **How long is the note valid?**

Typically 12 months — renew it annually.

- **Which conditions qualify?**

A wide range: chronic back or neck pain, muscle tension, injury recovery, stress-related conditions, and more. It must be a specific condition, not general wellness.

*ARC Recovery provides this guide for convenience only and is not a tax, legal, or medical advisor. Eligibility and reimbursement are determined by your plan administrator and the IRS. Please confirm details with your administrator or a tax professional.*