

# HRA Letter of Medical Necessity



A medical care expense's primary use must be to alleviate or prevent a physical or mental disability or illness. They do not include expenses that are merely beneficial to general health or wellness. Per IRS guidelines, certain expenses that might otherwise be considered for the use of general health and wellness require a letter of medical necessity from a licensed medical practitioner in order to be considered for reimbursement.

A letter of medical necessity is a letter written by your doctor that verifies the service or items you are purchasing are for the diagnosis, treatment, or prevention of a disease or medical condition.

You may use this template or have your doctor write you the recommendation on their letterhead. The letter must include your name, medical diagnosis, specific recommended treatment, and duration of treatment. You will need to attach this letter each time you submit an expense that requires a Letter of Medical Necessity. This letter can be used for the duration of the treatment or for up to one year if a duration is not indicated.

Patient name: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Recommended Treatment (Must be specific): \_\_\_\_\_

Duration of treatment: \_\_\_\_\_

I certify that this service or product is medically necessary to treat or prevent the specific medical condition listed above and is not in any way for general health and wellness or for cosmetic purposes.

Printed name of Licensed Practitioner: \_\_\_\_\_

Signature of Licensed Practitioner: \_\_\_\_\_

Date: \_\_\_\_\_