

How to Submit Your Reimbursement Request

1. This form may be used for well-being benefit requests only. The maximum credit is provided to each subscriber (contract holder). For example, a family of four on one plan contract would be eligible for one maximum reimbursement, per calendar year.
2. Reimbursement applies to the calendar year in which the service is paid. For example, if a service was provided in December, but you paid for it in January of the current calendar year, it will apply to the current calendar year's reimbursement.
3. All reimbursement forms must be received no later than one year after the date you paid for the service.
Due to processing time, if you submit a reimbursement request late in the calendar year, MVP may need to issue your reimbursement in the following calendar year. Depending on your plan's specific benefit, this may cause you to meet or exceed the \$600 threshold that would require the filing of a Form 1099 with the Internal Revenue Service (IRS).
4. You must pay for the service before submitting a request for reimbursement. For each reimbursement you are requesting, you must attach:
 - A copy of an itemized bill, statement, debit/credit card statement, or receipt that is preprinted, stamped, or on company letterhead and includes the service provider's name and address. (Balance forward/prior balance statements are not acceptable.)
 - The documentation from the service provider must include all of the following information:
 - The name of the service provider
 - The type of service provided
 - Your out-of-pocket cost for the service, including date(s) of all payment(s)
 - The name of the person(s) receiving the service