

***Please mail this form and all receipts to:
Prominence Health Plan, Claims Department
1510 Meadow Wood Lane, Reno, NV 89502***

Patient name	
Member ID Number (located on your PHP member ID card)	
Address	
Daytime phone number	
Authorization number (provided by PHP Utilization Management)	
Date(s) of outpatient visit or inpatient stay	
Name of support person/primary caregiver traveling with you who incurred living or travel expenses	
If the patient is a minor under age 18, list the name(s) of the parent(s) who incurred living or travel expenses	

You will be only be reimbursed for covered expenses that are incurred at a Prominence Health Plan (PHP) Center of Excellence (COE) facility. You must contact PHP Customer Service **prior** to any travel to the Center of Excellence to confirm that prior authorization is on file for travel reimbursement. Expenses will only be covered beginning the day before through the day after your appointment/hospital stay. PHP will only reimburse covered expenses that are submitted within 60 days of being incurred. PHP may authorize expenses submitted after 60 days of being incurred, but in no case will expenses older than 120 days be reimbursed.

- This benefit allows a maximum of \$200 per day for all covered living expenses, up to a cumulative limit of \$2,000 per trip (includes covered living expenses for the patient and his/her primary caregiver; if the patient is a minor, covered living expenses for the patient and his/her parents or family members.). You will be reimbursed the lesser of your actual expenses or \$200 per day.
- This benefit also allows a maximum of \$1,000 for travel expenses incurred for each trip to the city of the COE facility. **Covered travel expenses include:**
 - Airfare for patient and one support person (primary caregiver) or both parents if patient is a dependent.
 - Rental car and the IRS mileage allowance for mileage recorded on the rental **car** receipt. Mileage is reimbursed at the current IRS rate – visit www.irs.gov for the current 2018 rates.
 - If the member is driving or being driven from home to the COE facility and back, mileage is reimbursed at the current IRS rate – visit www.irs.gov for the current 2018 rates.

The annual limit on all eligible travel expenses is \$10,000.

- Travel reimbursement will be made to the policy holder.

I acknowledge that I have read and understand the above provisions related to the Health Reimbursement benefit.

Signed: _____ **Date:** _____