

## Gold transportation reimbursement form

Submit form and proof of payment to:

MetroPlusHealth  
Att: Customer Services Department  
50 Water Street, 7th Fl.  
New York, NY 10004



[mph\\_reimbursements@metroplus.org](mailto:mph_reimbursements@metroplus.org)

### Member information

MetroPlusHealth ID number	Last name	First name	Middle initial
Address (number, street, apt.)	City	State	ZIP code

### Trip 1 details

Name of transportation provider: \_\_\_\_\_

Date of trip: \_\_\_\_\_

Trip amount: \_\_\_\_\_

Medical office address: \_\_\_\_\_

### Trip 2 details

Name of transportation provider: \_\_\_\_\_

Date of trip: \_\_\_\_\_

Trip amount: \_\_\_\_\_

Medical office address: \_\_\_\_\_

### Trip 3 details

Name of transportation provider: \_\_\_\_\_

Date of trip: \_\_\_\_\_

Trip amount: \_\_\_\_\_

Medical office address: \_\_\_\_\_

**TOTAL AMOUNT OF REIMBURSEMENT REQUESTED:** \_\_\_\_\_

Please attach appropriate documentation of payment for the trips for which you are seeking reimbursement, including receipts, screenshots of the rideshare app showing payment, and credit card statements.

I certify that the information on the form and all supporting documents are complete, accurate, and unaltered.

Member's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Any alteration or falsification of information will result in disqualification from the reimbursement program. Please note that this benefit may be taxable. If you have questions, call the Gold Member line at **877.475.3795 (TTY: 711)**. Language assistance is available.

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**As a MetroPlusHealth Gold member, we want to help you stay healthy.** To help you do this, MetroPlusHealth will reimburse you up to \$60 per year or the full cost of one ride (whichever is lower) for transportation to see a doctor.

**What types of transportation qualify?** Reimbursement is only available for individual rides. Prepaid options, such as purchasing a MetroCard or transit pass, are not eligible.

**How do I become eligible?** To be eligible, you must be an active subscriber of **MetroPlusHealth Gold**.

**How do I obtain the reimbursement?**

- Submit the completed reimbursement form (multiple trips may be combined)
- Include proof of payment (e.g., receipt, rideshare screenshot, or credit card statement)
- Submit within 120 days of the trip date

Reimbursement is issued within 30 days of receiving complete documentation. For a complete list of exclusions and full details, refer to your Certificate of Coverage at **metroplus.org**.

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**Submit your completed form and documentation by email or mail:**

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