MetroPlusHealth

Exercise facility reimbursement form

Need an incentive to get back in the gym? MetroPlusHealth has what you're looking for.

As a MetroPlusHealth member, we want to help you stay healthy. To help you do this, MetroPlusHealth will reimburse you up to $200 or the cost of your membership (whichever is lower) for your exercise facility membership. If your spouse is also a MetroPlusHealth member, they are eligible for a reimbursement of up to $100 or the cost of your membership (whichever is lower). You can qualify for these reimbursements every six months.

What types of health clubs qualify? Exercise facilities that maintain equipment and programs that promote cardiovascular wellness qualify for reimbursement. Memberships in tennis clubs, country clubs, weight loss clinics, spas, or any other similar facilities will not be reimbursed. Lifetime memberships are not eligible for reimbursement. Reimbursement is limited to actual work-out visits. We will not provide reimbursement for equipment, clothing, vitamins, or other services that may be offered by the facility (massages, yoga, etc.)

How do I become eligible? You must be an active member of the exercise facility and complete 50 visits in a claim period. Your membership with MetroPlusHealth must be current and paid to date at time of submission.

How do I obtain the reimbursement? You must complete six consecutive months of membership before submitting a claim (you must wait until six months have passed, even if you complete 50 visits sooner than six months). Monthly memberships require this six-month period; annual memberships are reimbursed once per plan year, up to the allowed limit. Claims must include the following:

- Complete the reimbursement form on the reverse side of this document.
- Submit a copy of your current facility bill which shows the fee paid for your membership.
- Submit proof of payment. Acceptable proof includes: Payment receipts (must have the same name as the health club), credit card statements, and a printout on health club letterhead detailing payments.
- Submit proof of **50 visits**. Acceptable proof includes: Printout from health club showing 50 visits. If the health club does not provide a computer printout, then visits must be documented on the reverse side of this reimbursement form.
- Submit all required documentation no later than **120 days** from the claim period end date.

Submit your completed form and documentation by email or mail:

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



mph_reimbursements@metroplus.org

Important: Please complete the form in its entirety or the processing of your claim maybe delayed or denied. Please complete one form per member, for each six-month period for which you are submitting a claim.

Member information

MetroPlusHealth ID number	Last name	First name	Middle initial

Address (number, street, apt.)	City	State	ZIP code

Claim period requested (mm/dd/yyyy — mm/dd/yyyy)	to

Health club information

Gym/health club's name	City, State
Phone number (xxx) xxx-xxxx	**Amount being claimed**
	$

Dates of your 50 gym visits

1.	2.	3.	4.	5.
6.	7.	8.	9.	10.
11.	12.	13.	14.	15.
16.	17.	18.	19.	20.
21.	22.	23.	24.	25.
26.	27.	28.	29.	30.
31.	32.	33.	34.	35.
36.	37.	38.	39.	40.
41.	42.	43.	44.	45.
46.	47.	48.	49.	50.

Please attach a printout from your facility that documents your 50 visits or write in your visits on the above grid. This document must have your facility's name, address, and phone number.

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

Member's signature: _____ **Date:** _____

Alteration or falsification of any information or documentation will be subject to disqualification from participation in the gym reimbursement program.

Gym representative's signature: _____ **Date:** _____
(only required if gym cannot provide facility printout)

If you have any questions, please call our Customer Success Team at: **800.303.4073** (TTY: 711), Monday – Friday 8am – 6pm, and Saturday 9am – 5pm.