Self Insured Plans LLC
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(239) 403-7884 – phone • (239) 403-9028 – fax
Hawaii Only: 877-557-4SIP (4747) • Fax: 877-556-4SIP (4747)
www.selfinsuredplans.com

PHF/HRA Expense Claim Form

Employee Social Security No.: _____ Group No.: _____

Participant's Name: _____
Last First Middle

The undersigned participant in the Plan requests reimbursement in the amounts shown below: (If additional space is needed please use the attached sheet.)

NOTE: Federal law requires that you submit a written statement (such as an itemized bill from the benefit provider) as well as proof that the claim is not being reimbursed by other coverage. Also, you will not be entitled to claim any reimbursed expenses as a tax deduction.

Medical Care Expense

Date Incurred	Name of Service Provider	Describe Expense	Person for Whom Expense Incurred		Net Amount
_____	_____	_____	_____	$	_____
_____	_____	_____	_____	$	_____
_____	_____	_____	_____	$	_____
			Amount from attached form	$	_____
			Total amount of medical expenses	$	_____

READ CAREFULLY

The undersigned participant in the Plan certifies that all expenses for which reimbursement or payment is claimed by submission of this form, were incurred (i.e., services were provided) during a period while the undersigned was covered under the Plan with respect to such expenses and that such expenses have not been reimbursed, or are not reimbursable, under any other health plan coverage. The undersigned fully understands that he or she alone is fully responsible for the sufficiency, accuracy and veracity of all information relating to this claim which is provided by the undersigned, and that unless an expense for which payment or reimbursement is claimed is a proper expense under the Plan, the undersigned may be liable for the payment of all related taxes including federal, state or city income tax on amounts paid from the Plan which relate to such expense. The undersigned further understands that no medical expense tax deduction or credit is permitted for amounts for which reimbursement is made.

_____ Date _____
Employee's signature

 12/31/02

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QUALIFYING MEDICAL CARE EXPENSES

In addition to the limits imposed by the Plan on the amount and types of expenses that may be reimbursed, the law only permits reimbursement for those types of medical expenses eligible under your Major Medical Plan. They include, for example, expenses you have incurred for:

1. Medicine, drugs, birth control pills and vaccines that your doctor prescribed.

2. Medical doctors, chiropractors, osteopaths, podiatrists, psychiatrists, psychologists, physical therapists, acupuncturists and psychoanalysts (medical care only).

3. Medical examination, X-ray and laboratory service, insulin treatment and whirlpool baths the doctor prescribed.

4. Nursing help. If you pay someone to do both nursing and housework, you can be reimbursed only for the cost of the nursing help.

5. Hospital care (including meals and lodging), clinic costs and lab fees.

6. Medical treatment at a center for substance abuse.

7. Medical aids such as braces, orthopedic shoes, crutches, and wheelchairs.

8. Ambulance service and certain other travel costs to get medical care.

You cannot obtain reimbursement for:

1. Life insurance or income protection policies.

2. The hospital insurance benefits tax withheld from your pay as part of the Social Security tax or paid as part of Social Security self-employment tax.

3. Nursing care for a healthy baby.

4. Illegal operations or drugs.

5. Travel your doctor told you to take for rest or change.

6. Cosmetic Surgery.

7. Long-term care expenses.

Qualifying medical expenses generally only include those expenses incurred for:

1. Yourself.
2. Your spouse.
3. All dependents you list on your federal tax return.

You need to review the plan and summary plan description to determine the extent to which a medical expense will be reimbursed by the Plan. In addition, regardless of any statements in Publication 502 to the contrary, expenses under this Plan are treated as being "incurred" when you are provided with the care that gives rise to the expenses, not when you are formally billed or charged, or you pay for the medical care.

