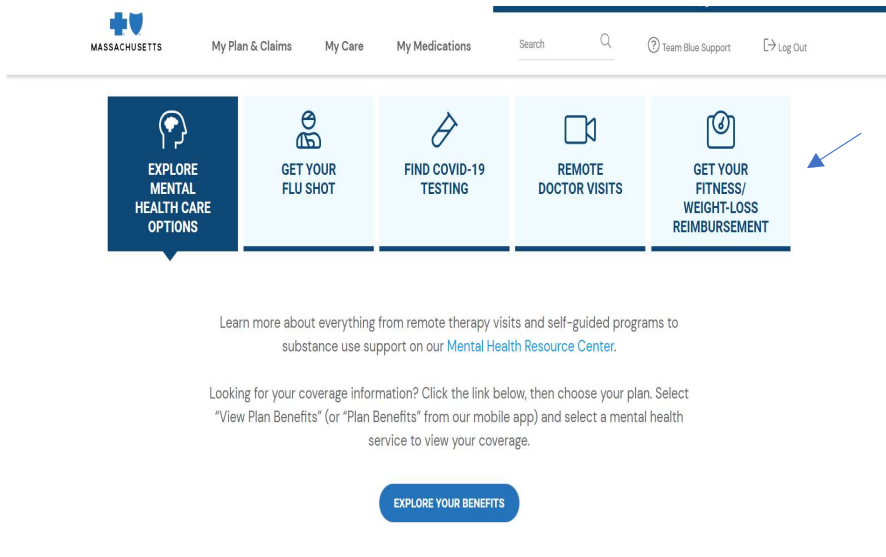


# Fitness and Weight Loss Online Submission

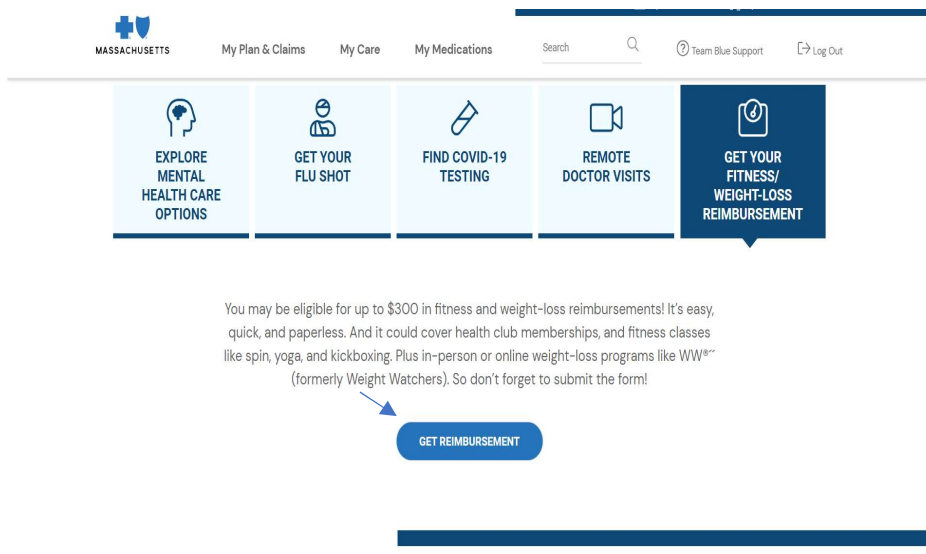
**In order to submit a claim, a member must first be logged into their own account on MyBlue.**

After the member logs into MyBlue he or she can initiate an online claim.

*Scroll down the page and click on "Get your Fitness/Weight-loss Reimbursement".*



Next, select the radio button that says "Get Reimbursement"



## Fitness and Weight Loss Online Submission

Select the radio button that corresponds with the benefit period as well as the type of reimbursement. Once the options have been selected click the *Continue* button.

Fitness & Weight-Loss Reimbursement

Up To

**\$150**<sup>\*\*</sup>

Per Year

\*\*Reimbursements vary based on your health plan.

To start processing your fitness or weight-loss reimbursement, we'll need some details:

**Select a year\***

☐ 2019

☐ 2020

**Type of reimbursement\***

☐ Fitness

☐ Weight Loss

To request reimbursement for your selection.

Continue

\* Indicates a required field

Fitness & Weight-Loss Reimbursement

Up To

**\$150**<sup>\*\*</sup>

Per Year

\*\*Reimbursements vary based on your health plan.

To start processing your fitness or weight-loss reimbursement, we'll need some details:

**Select a year\***

☒ 2019

☐ 2020

**Type of reimbursement\***

☒ Fitness

☐ Weight Loss

To request reimbursement for your selection.

Continue

\* Indicates a required field

## Fitness and Weight Loss Online Submission

Complete the reimbursement form by entering the total requested as well as the member's **name** (the name of the member submitting for the reimbursement) and the address and phone number of the fitness facility or vendor from whom the item or equipment was purchased.

**Note: Max reimbursement is \$150 a year per member name. A member can submit for additional family reimbursement (\$300 family max) by resubmitting this form under a separate family members name in the drop down.**

### Fitness Reimbursement

How does it work? ⓘ

**Members Name\***

Please Select ▼

**Reimbursement Details\***

**Total Requested Amount\*\*** \$ 0.00

**Qualified Fitness Program\***

**Fitness Program Name**

**Address**

35 Washington St.

**State**

Massachusetts ▼

**Zip Code**

00000

**Phone Number**

(123) 456-7890

### Tip:

Click the arrow located in the member's name field to view a drop-down menu.

### Fitness Reimbursement

How does it work? ⓘ

**Members Name\***

Please Select ▼

Select the member's name who is completing and submitting the reimbursement form.

### Fitness Reimbursement

How does it work? ⓘ

**Members Name\***

ELLEN SCHWENDENMAN

ANDREW SCHWENDENMAN

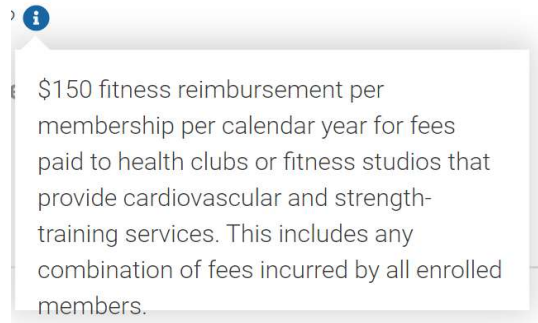
JACK SCHWENDENMAN

**Total Requested Amount\*\*** \$ 0.00



Click this icon to find out how the benefit works. This box will provide details of Ocean Spray's Fitness Benefit.

# Fitness and Weight Loss Online Submission



## Receipts

Beneath the phone number field, the form includes a section for the member to upload a receipt.

Two side-by-side screenshots of the 'Add Receipt' section. The left screenshot shows the title 'Add Receipt (optional)', a note: 'Note: We accept file types pdf, tiff, png, jpg and jpeg. Your total upload size cannot exceed 9MB.', and a button with a camera icon and the text 'Upload Your Receipt'. The right screenshot shows the same title and note, but with a visual representation of a PDF file (a document icon with a red 'PDF' label) and an 'Add More' button with a plus icon.

To upload a receipt, the member would need to save a copy of the receipt on his or her computer or phone. The member would click the *upload your receipt* button and insert a file.

## Email confirmation

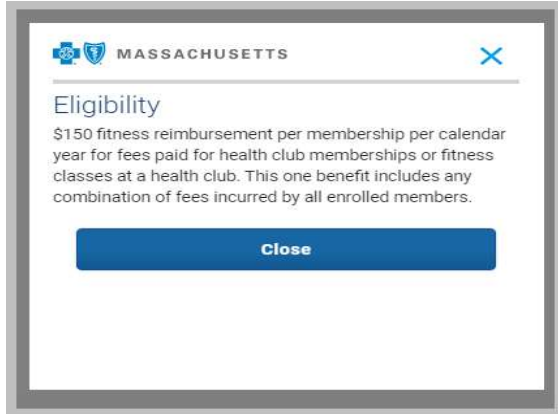
The confirmation will automatically be sent to the email entered by the subscriber when he or she registered for MyBlue. If the email address is not auto-populated the subscriber's email must be entered. The member will not be able to submit until this field is completed. (The button will be greyed out.)

Two side-by-side screenshots of the 'Email Confirmation\*' section. The left screenshot shows the title 'Email Confirmation\*', a label 'Subscriber Email\*', a text input field containing 'a\*\*\*\*\*s@yopmail.com', a link '+ Add another email for updates', an unchecked checkbox with the text 'I have read my eligibility and agree to the certification and authorization.', a greyed-out 'Submit' button, and a 'Cancel' link. The right screenshot shows the same elements, but the checkbox is checked, the 'Submit' button is blue and active, and the 'Cancel' link is also active. Both screenshots include footnotes: '\* indicates a required field' and '\*\*Amount for reimbursement listed is an estimation and is subject to change based on a member's eligibility.'

## Submit

To enable the submit button, the member completes all required fields and clicks the check box to indicate that he or she has read and agrees to the eligibility and certification and authorization disclosures.

## Fitness and Weight Loss Online Submission



MASSACHUSETTS

### Eligibility

\$150 fitness reimbursement per membership per calendar year for fees paid for health club memberships or fitness classes at a health club. This one benefit includes any combination of fees incurred by all enrolled members.

Close



MASSACHUSETTS

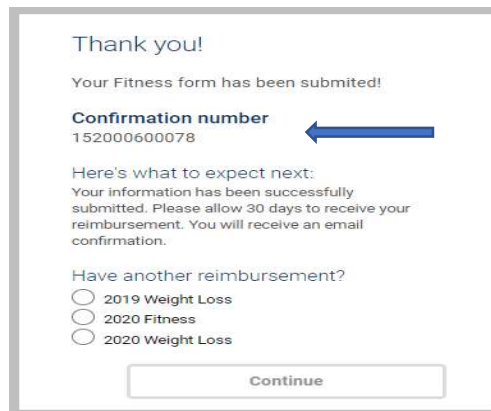
### Certification and Authorization

I certify that the information provided in support of this submission is complete and correct and that I have not previously submitted for these services. I understand that Blue Cross Blue Shield of Massachusetts may require proof of payment for a reimbursement decision. I authorize the release of any information about my qualified fitness/weight loss program to Blue Cross Blue Shield of Massachusetts. By providing my email address, I consent to receiving an email message confirming receipt of my fitness/weight loss submission through an unencrypted method of communication, which means that such information can be at risk of being accessed by third parties during transmission or storage, as the internet is not a secured method of communication.

Close

### Confirmation

That's it. The member has submitted the form and is presented with a confirmation number and expected timeframe for reimbursement. The member is also offered the option to submit for another eligible fitness benefit period or for reimbursement for a weight loss program.



Thank you!

Your Fitness form has been submitted!

**Confirmation number**  
152000600078

Here's what to expect next:  
Your information has been successfully submitted. Please allow 30 days to receive your reimbursement. You will receive an email confirmation.

Have another reimbursement?

☐ 2019 Weight Loss  
☐ 2020 Fitness  
☐ 2020 Weight Loss

Continue