Healthy LifestylesSM Reimbursement and Information Order Form

To request your reimbursement, provide all the information requested on this form and attach required documentation, such as receipts, membership contracts, and enrollment forms. To order free informational materials, mark the check boxes next to the items you want to receive.

For additional reimbursement forms, you may copy this form, download it from ibxpress.com, or call Healthy Lifestyles at the number listed at the bottom of this page.

	State:	ZIP:
	mber ID card):	
elephone (day):	Telephone (evening):	
Reimbursement reques I have completed all requirement below and have attached the resprocess my reimbursement for: Parenting class Baby's due date:// Breast pump Baby's due date:// Lactation consultant Baby's due date:// Delivery date://	nts for the programs indicated quired documentation. Please	Information request Please send me a free copy of the following materials: (Check all that apply.) Adoption booklet Clearing the Air booklet Stress management CD Wellness Guidelines

Mail your form and documentation to:

Independence Blue Cross Healthy Lifestyles Program 1901 Market Street, P.O. Box 41880 Philadelphia, PA 19101-9131

Questions?

Call Healthy Lifestyles at 1-800-ASK-BLUE, TDD 1-888-857-4813, Monday through Friday, 8 a.m. to 5 p.m. ET.

Incentive programs or health care services described in this booklet as part of Healthy Lifestyles are contingent on a member being eligible for coverage at the time of participation and subject to the terms, limitations, and exclusions of his or her health care benefits program. Healthy Lifestyles programs are value-added programs and services; they are not benefits under the health care plan that you purchased and are therefore subject to change without notice.