

# MICHIGAN ELECTRICAL EMPLOYEES' HEALTH PLAN



# SPECIAL FUND PAYMENT REQUEST FORM

Member ID or SS #:	Local Union #:
Telephone #:	
	if new address
OR MISCELLANEOUS EXPENSES	
not taken and will not take a tax deduction You also certify that medications (including iption (other than insulin). You further ce	g vitamins) are ONLY for use by you or rtify that you have not submitted these
	not taken and will not take a tax deduction You also certify that medications (including iption (other than insulin). You further ce

## **INSTRUCTIONS**

- You have three (3) years from the date of service to submit for reimbursement.
- You must enclose an itemized bill stating the provider's name and address, patient name, and date of service or a copy of the complete (ALL PAGES) Explanation of Benefits from Blue Cross Blue Shield and any other application health plan, indicating the amount paid by insurance and/or expected to be paid by insurance. Collection notices and bills indicating only a balance due are NOT acceptable. (Cash register receipts from providers are NOT acceptable, except for Over-The-Counter (OTC) medications and drugs. Please see below.)
- For health insurance or long term care contract premiums, verification that the premium was not paid or eligible for payment under a Section 125 cafeteria plan. You must also provide the name of the insured, coverage period, premium statement and proof of payment. A Special Fund Verification Form for Health Insurance Premium Expenses is required for health, dental and vision premiums. Additional documentation is required for reimbursement of premiums under a long-term care contract. You must certify and document that the policy is tax qualified. Acceptable documentation is a letter from the insurance company or a copy of a page of the policy that states it is tax qualified.
- The minimum amount requested should be \$50 unless you have accumulated less than \$50 in a year.
- If you do not have enough funds in your Special Fund account, the Plan Office will pay up to the balance in your account and you can resubmit the total amount of the unpaid balance for reimbursement at a later date, but not after the three year date of service limit described above. NOTE: You may only resubmit for reimbursement on the remaining balance of the "large claim" one time, so it is in your best interest to wait until your Special Fund balance will cover the remaining balance on the claim without going over three years from the date of service.

Please note, occasionally claims must be suspended or denied due to a lack of information. If either of these events occurs on a claim you have submitted, you will be notified in writing of the reasoning behind either a suspended claim or one that has been denied. In addition, should this occur on one but not all claims submitted, the Fund Office will issue a check for those claims where additional information is not necessary, therefore you may receive a partial payment with explanation of other claims' status.

#### SPECIAL FUND EXPENSES

#### COVERED EXPENSES THAT CAN BE REIMBURSED FROM THE SPECIAL FUND

(Only expenses incurred after the employee's Special Fund participation date are eligible to be reimbursed.)

- Deductibles and co-payments from the regular benefit plan.
- Medical expenses not covered by or in excess of the regular benefit plan.
- Dental and vision expenses not covered by or in excess of the regular benefit plan, including advance payments for orthodontic services.
- Guide dogs for blind or deaf persons; special telephone and television equipment for hearing impaired persons.
- Annual physical exams, including doctor's services and lab tests.
- Full-body electronic scans to identify internal disease or abnormality (even without a doctor's prescription).

  Premiums for a qualified long-term care insurance policy, up to the limits allowed by the IRS. (The limits are based on the person's age at the end of the calendar year.) Ask your insurance company or agent to provide you with written proof of the policy's tax-qualified status. \*
- · Pregnancy test kit.
- Breast pumps and related lactation supplies.
- Home modifications for accommodating a personal residence for a disability (e.g., wheelchair ramp) up to the amount reimbursable under IRS guidelines.\*A doctor's statement is required.
- Healthcare insurance premiums (not paid or allowed to be paid pre-tax under a section 125 Cafeteria plan), but not student insurance in the student's name.
- Certain travel and lodging expenses for you or another patient's medical treatment.\*
- Qualified special schooling for the mentally impaired or physically disabled. Verification of medical care is required.\*
- Smoking cessation programs.
- · Hearing aids and examinations.
- · Acupuncture.
- Surgery or laser treatments to correct vision.
- Weight loss programs if recommended by a physician to treat a medical condition, but not food or dietary supplements. A letter of medical necessity from your doctor is required.
- Over-the-counter medical supplies for the diagnosis or treatment of a medical condition such as thermometers, blood pressure monitoring devices, bandages, blood sugar test kits.
- Over-the-Counter (OTC) medications (see approved list) and vitamins (that require a prescription for purchase). A prescription is NOT required for insulin.
- Other deductible medical expenses (as determined by the IRS).\*

# \* See IRS Publication 502 for requirements and details. You can also contact the Plan Office for assistance. IRS PUBLICATION 502

While Publication 502 is helpful in determining whether a medical expense may be reimbursed under the Special Fund, there are important differences with the rules that apply to the Special Fund as an employer-sponsored health reimbursement arrangement and the rules that apply to tax deductible medical expenses for federal Income tax purposes. Among the expenses that are not allowed to be reimbursed under the Special Fund, although they may be listed in Publication 502, are long-term care expenses or health insurance premium expenses that could be paid pretax through a Section 125 cafeteria plan offered by your employer, if applicable, or by a spouse's employer.

NOTE: Although Publication 502 states that nonprescription drugs are not tax deductible, you can be reimbursed for both prescription drugs and over-the-counter nonprescription drugs under the Special Fund. In general, the Special Fund may reimburse expenses for over-the-counter medicines and other medical supplies so long as they are for the diagnosis or treatment of a medical condition and not for your general well-being. However, you cannot be reimbursed for over-the-counter medicines and supplies if you purchase unreasonable quantities unless they are prescribed by a physician (except for insulin).

#### NON-COVERED EXPENSES

- Cosmetic surgery and treatments.
- Household help.
- Charges incurred by a person not covered by the Plan.
- Health club memberships/expenses.
- Child and dependent care expenses.
- Burial expenses.
- Sales tax, shipping & handling fees.
- Long-term care expenses.
- College tuition/books.
- Expenses reimbursed by some other source.
- Environmental devices such as, air conditioners, air purifiers, or humidifiers.
- OTC medications (not on the approved list and without a prescription) and vitamins (without a prescription).
- Any insurance premiums that are or could be paid pretax through a Section 125 cafeteria plan offered by your employer or your spouse's
  employer.

Self-payments that were paid in cash or by check or money order cannot be reimbursed at a later date from the Special Fund.

## IMPORTANT REMINDER

Your Special Fund account is not a savings account and you are not vested in the balance. Amounts in the account can be used only for the expenses described in this form. The Board of Trustees can change the list of covered expenses and any of the Special Fund's rules and procedures at any time.