COMMUNITY HEALTH PLAN of Washington™
The power of community

Apple Health (Medicaid)
Medicare Advantage
Individual & Family Plans

Member Claim Reimbursement Form

If you paid for a health expense out of pocket that you believe should have been covered by Community Health Plan of Washington (CHPW), you can ask us to pay you back for covered services up to the allowed benefit amount. Please note that all referral requirements and authorization requirements must be met before reimbursement can be considered.

To make sure you are giving us all the information we need to make a decision, you can fill out this form and return it to us. You don't have to use the form, but it will help us process the information faster. With this completed form, send your bill and documentation of any payment you have made. It's a good idea to make a copy of your bill and receipts for your records. You must submit your claim to us within 12 months of the date you received the service or item.

To request reimbursement for health expenses, fill out the form below and send it to us by mail or online using our secure member portal, myCHPW.

CHP Claims
P.O. Box 269002
Plano, TX 75026-9002

mychpw.chpw.org.

Questions? Call the CHPW Customer Service team for your specific plan:

Apple Health (Medicaid):
1-800-440-1561 (TTY: 711)
8:00 a.m. to 5:00 p.m.
Monday to Friday

Medicare Advantage:
1-800-942-0247 (TTY: 711)
8:00 a.m. to 8:00 p.m.
seven days a week

Individual & Family:
1-866-907-1906 (TTY:711)
8:00 a.m. to 5:00 p.m.
Monday to Friday

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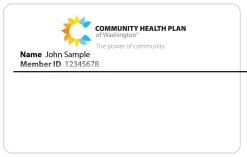

Member ID number is on the front of the CHPW card.

Member Information:

First Name | Last Name | Member ID Number

Date of Birth

Mailing Address | City, State, ZIP

Provider Information:

Provider Name *(Example: Jane Johnson)*

Facility Name *(Example: Evergreen Massage Services)*

Provider and/or Facility Address | City, State, ZIP

Service Information:

Date of Service | Procedure Code | Diagnosis Code

Proof of payment is required (Example: a receipt).

"Where do I get provider and service information?"

After you've seen your provider, your provider should give you an invoice or a superbill. It will list these details. If you aren't sure how to get your invoice or superbill, or aren't sure it has the information you need, you can call CHPW Customer Service.

TIP: You can hover your cursor over an entry field for more information.