

Wellness Card Reimbursement Form

Make healthy changes with our new nationwide Wellness Card benefits.

If your card is declined at an approved location due to an issue with the credit card machine or lack of a credit card machine, please pay out-of-pocket and submit this form with a copy of your receipt for reimbursement.

Approved locations and services include:

Fitness centers: gym memberships, fitness classes, and personal training sessions

Health food stores: nutritional supplements and health products from retailers including GNC, Feel-Rite, and Vitamin World

Additional services: acupuncture treatments, massage therapy, and chiropractic visits

Exclusions apply. The following outlets do not participate in our Wellness Card program: pharmacies, sporting good stores, grocery stores, doctors' offices, optometrists, salons and department stores.

Please fill out the bottom portion and return with a copy of your receipt. If it's not an approved location or service, you will not be reimbursed.

First Name	<input type="text"/>	Last Name	<input type="text"/>
Member ID	<input type="text"/>	Member Suffix	<input type="text"/>
Date of Birth	<input type="text"/>	Amount Spent	<input type="text"/>
Address	<input type="text"/>		

Please check service obtained:

- Fitness (gym membership, personal training, fitness classes)
- Massage with a licensed massage therapist
- Health foods (vitamins, supplements, and health products)
- Chiropractic visit
- Acupuncture treatment

Return completed form and copy of receipt to:

BlueCross BlueShield of Western New York
Attn: Health Promotion
257 West Genesee Street
Buffalo, NY 14202

