Travel and Lodging Claim FormFor All Non-transplant Benefits



How to file

The qualifying medical claim must be on file before Anthem will reimburse for Travel and Lodging. The member must include the claim date of service and/or claim number or attach a copy of their qualifying claim's Explanation of Benefits.

The member is responsible for the payment of services rendered and should validate covered expenses prior to submitting this claim form.

A valid receipt must be submitted for the expenses. All receipts must be itemized and legible. Itemization includes, but is not limited to, name, date, time, amounts, and purpose. Credit card and bank statements are not acceptable as documentation. Keep a duplicate copy of your itemized bills and receipts as they will not be returned to you.

It is required that all fields are completed. Use a separate line for each date of service and receipt. The number of occupants for lodging should be documented in the description section of the claim form. For consecutive nights of lodging on one receipt, it is acceptable to list on one line as a date range.

Briefly indicate the type of service, i.e., mileage, lodging, etc. For travel by car list the total number of miles traveled for treatment. Utilize type of service "Other" for each covered expense that is not specifically called out on the claim form. Expenses that are not covered should not be included.

Your signature attests to the accuracy and completeness of all information on the claim form (**including** the receipts). This claim may be returned to you if all required information is not present.

We encourage you to file claims within 90 days of the service date. Please refer to your Description of Benefits for specific timely filing limitations and any applicable limitations and exclusions.

Please remit photocopies of your itemized receipts, completed claim form and any supporting documentation to:

Anthem_MTL_Member_Submit_Claim_Mailbox@anthem.com

Please note: Submission of this form outside the above email address (via Member Portal, USPS mailbox address, etc.) may delay processing.

If you have questions or need assistance, please contact the number indicated on the back of your ID card.

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. In Connecticut: Anthem Health Plans is featured, Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky; Inc. In Maine: Anthem Health Plans of Maine; Inc. In Missouri, Inc. RIT and certain affiliates administer for self-funded plans and do not underwrite benefits underwrite by HALD call HMO Messuar, Inc. RIT and certain affiliates administer for self-funded plans and do not underwrite benefits underwrite by HALD call HMO Messuar, Inc. Rit and Indiana; Inc. In Missouri, Inc. Rit and sertain affiliates administer for self-funded plans and do not underwrite by HALD call HMO Messuar, Inc. Rit and Indiana; Inc. In Missouri, Inc. Rit and sertain affiliates administerative services for self-funded plans and do not underwrite by HALD call HMO Messuar, Inc. Rit and Indiana; Inc. In Missouri, Inc. Rit and service, Inc. HMO products underwriten by HMO Colorado, Inc., dba HMO Nevada. In New Hampshire: Anthem Health Plans of New Hampshire, Inc. HMO plans are administered by Anthem Health Plans of New Hampshire, Inc. and underwriten by Matthew Thorroton Health Plan. In Colorado, Inc., dba HMO Nevada. In New Hampshire, Inc. In Object Self-funded its service area is all of Virginia except for the City of Fairfax, the Town of Vienna, and the area est of State Route 123. In Wisconsin: Blue Cross Blue Shield of Wisconsin (BCSSWI), underwrites or administers PMO or POS policies; WCIC underwrites or administers PMO or POS policies, Independent licensees of the Blue Cross Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.

Travel and Lodging Claim FormFor All Non-transplant Benefits



One patient per claim form.

General information								
Identification no.	Group no.		Patient last name			First name		M.I.
Patient date of birth (MMDDYYYY) Patient relationship to subscrib Self Spouse Child Other		subscriber	Subscriber last name			First name		M.I.
If we have questions, who ma	y we contact?							
Contact name			dress		•		Phone no.	
All Benefits (Non-Transplants) I attest that this is the closest participating provider from m that performs the services for this claim I am submitting:			my residence or temporary work location			ing claim service (MMDDYYYY) Qualifying claim number		ber
Please complete the follow	ving as a summary o	f the item	ized bills	you have attached	to this cla	aim form.		
Date of service (MMDDYYYY)			r service raveled)	Briefly describe the	services y	ou received or incurre	d	
Total charges \$ for which you are requesting consideration of payment				*Type of service co T - number of miles tr A - airfare		ar L - lodging O - other		
I certify to the accuracy and necessary to process this c		nformation	reported l	by me on this form ar	nd authori	ze the release of any	medical information	1
Signature							Date (MMDDYYYY)	

Full signature and date required on each form.

X

Incomplete forms may delay processing. Please ensure all fields are completed.

Anthem Blue Cross and Blue Shield is the trade name of: In Colorado: Rocky Mountain Hospital and Medical Service, Inc. HMO products underwritten by HMO Colorado, Inc. In Connecticut: Anthem Health Plans, Inc. In Georgia Blue Cross Blue Shield Healthcare Plan of Georgia, Inc. In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Maine: Anthem Health Plans of Maine, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates and provide administrative services for self-funded plans and do not underwrite benefits. In Nevada, Rocky Mountain Health Plans of Inc. HMO products underwriten by HMM Colorado, Inc., do at HMO Newsoal. In New Hampshire, Inc. HMO plans are administrated by Anthem Health Plans of Inc. and underwriten by Matthew Thornton Health Plans, Inc. In Georgia Blue Cross Blue Shield of Wisconsinis (BCSSWI), underwrites or administrater PV and indemrity policies and underwrited by Matthem Health Plans of Inc. and underwrited by Anthem Health Plans of Inc. and I

1043418MUMENABS NATIONAL Rev. 9/22 2 of 2