



Benefit Planning Consultants, Inc.

SEND CLAIM FORMS AND DOCUMENTS TO BPC:

Mail: PO BOX 7500 CHAMPAIGN, IL 61826-7500

Fax: 217-239-4499 800-295-2990

Email Claims: faxes@bpcinc.com

Phone: 217-355-2300 800-355-2350

HRA CLAIM FORM

Form with fields: (Please Print) PARTICIPANT NAME, SSN, EMPLOYER: PRAIRIE CENTRAL CUSD # 8, (Required) PARTICIPANT SIGNATURE, DATE SUBMITTED, DAYTIME PHONE, EMAIL ADDRESS, ADDRESS: (COMPLETE ONLY FOR ADDRESS CHANGE) with sub-fields for Street, City, State, Zip.

NOTE: Expenses MUST have been incurred during the current Plan Year. All submitted EOB's must be itemized with the date of service, service provided/or item purchased, and the amount charged. All supporting documentation MUST be attached to this form. Your claim will not be processed until these items are received.

COMPLETE THIS SECTION FOR CHECK OR DIRECT DEPOSIT CLAIM

Expense Type: HRA: Health Reimbursement Arrangement (You must submit an Explanation of Benefits (EOB) from your health insurance provider)

Table with 6 columns: HRA, Expense Description, Dates of Service (From - To), Provider, Name of person Services provided for, Amount of Purchase. Multiple rows with \$ in the Amount of Purchase column.

AMOUNT REQUESTED: \$

I have attached supporting documentation from an independent third party verifying that the medical expense has been incurred and the amount of the expense. By my signature above, I certify that all the expenses are for medical care excluding cosmetic purposes, and are not for general health purposes and are valid expenses under the Plan incurred by myself and/or my spouse and/or my eligible dependents. The expense has not been reimbursed and I will not seek reimbursement under any other plan covering health benefits. I understand that the expense for which I am reimbursed may not be used as deductions or credits on my or my spouse's income tax return. If I have inadvertently received payment for an ineligible expense, I agree to provide repayment to the Plan.

CHECK YOUR ACCOUNT ONLINE AT: WWW.BPCINC.COM