



Hill Physicians Members Reimbursement Form for Flu Vaccination at a Retail Location

Hill Physicians recommends getting your flu shot at your doctor's office. The appointment is a great opportunity to take care of your flu vaccination and make sure you are up-to-date on other preventive and wellness services. There are no shortages of vaccines this year.

However, if you prefer to get your flu shot at a retail pharmacy location, Hill Physicians will reimburse the cost up to \$60 per member.

If you have several family members being vaccinated, please ask the cashier to **ring up each Hill Physicians member separately** so you can attach one original receipt to each reimbursement form. All reimbursement requests must be mailed by April 1, 2018. Please allow four weeks for reimbursement processing.

Reimbursement Steps:

1. Complete the form below. It is easiest to bring this form to the pharmacy at the time you receive your flu shot to ensure you have all the information required for reimbursement.
2. Attach the **2 original** receipts: the **pharmacy** receipt and the **cash register** receipt.
3. Mail to:
Hill Physicians Medical Group
Flu Vaccine Reimbursement Program
P.O. Box 5080
San Ramon, CA 94583-0980

| Member Reimbursement Form | |
|--|---------------------------|
| Doctor's Name: _____ | Health Plan Name: _____ |
| Subscriber ID # (listed on your insurance card): _____ | |
| Your First and Last Name: _____ | |
| Street Address: _____ | |
| City: _____ | State: CA Zip: _____ |
| Date of Birth for Person Receiving Vaccination: _____ | |
| Phone Number with Area Code: _____ | |
| Where Service Was Performed: _____ | |
| Pharmacy NPI: _____ | Pharmacy TIN: _____ |
| *Attach original receipt. *Allow 4 weeks for reimbursement check. | |

**Please use a separate form (and attach an original receipt)
for each Hill Physicians member being vaccinated.**

*hpmg-claim-en-flu-2017
Eff. 11/06/17*

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