



Direct Member and Enrollee Reimbursement Form

Please use this form each time you submit claims to us for review and payment. Complete one form per family member. Keep a copy of all receipts and documents for your records. Please allow **30 days** for processing. Any missing information will cause a delay in processing your claim.

Step 1: Member information: (Please print)

Patient name: _____

ID number: _____

Address: _____

City, State, ZIP: _____

Date of birth: _____

Contact Number: _____

Step 2: Submission information:

- a. Attach the itemized bill or statement that includes:
 - Patient's name
 - Date of service
 - Dollar amount charged for each service
 - Procedure and diagnosis codes
 - Provider's name, address, and Phone number
 - Provider's tax identification number and NPI (contact your provider's office for this information)
- b. Attach the proof of payment for example, credit card/digital payment receipt, banking statement, or canceled check.
- c. Request must be received within **one year from the date of service**. If not, it will not be considered for processing

Step 3: Sign:

Required: You must sign or have your legally authorized personal representative do so. Personal representative must include the correct legal documentation.

Step 4:

HAP Claims Division
Member Reimbursement
1414 E. Maple Rd.
Troy, MI 48083

0033_ Drt Mbr and Enrlllee Reimburse Form; Approved

Y0076_ Drt Mbr and Enrlllee Reimburse Form_C; Approved

H9712_ Drcot Mbr and Enrollee Reimburse Form_v2; Approved

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If you have questions, call our Customer Service team at the number on your ID card. Or dial 711 for TTY service.

Health Alliance Plan (HAP) has HMO, HMO-POS, PPO plans with Medicare contracts. HAP Medicare Complete Duals (HMO D-SNP) and HAP Empowered MI Health Link are Medicare health plans with a Medicare contract and a contract with the Michigan Medicaid Program, to provide benefits of both programs to enrollees. Enrollment depends on contract renewals. HAP Empowered Health Plan, Inc., a Michigan Medicaid Health Plan, is a wholly owned subsidiary of Health Alliance Plan of Michigan (HAP). It is a Michigan nonprofit, taxable corporation.

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