2019 Weight Management Reimbursement Form

Participate in a weight management program and receive a rebate of up to $75!

How does it work?

▶ You must **participate in and pay for** classes or an online program for a minimum of three months.

▶ This rebate is valid once per member, per calendar year.*
  » Participants must be 18 or older.

▶ Eligible vendors include but are not limited to: WW®, Ciccotti Center Next Steps, Nutrisystem®, Jenny Craig®, TOPS (Take Off Pounds Sensibly)

How do you receive the rebate?

▶ Mail this rebate form and **proof of payment** to CDPHP.

▶ Rebates for programs completed in 2019 must be redeemed by January 31, 2020.

▶ Rebates are processed once per month. Please allow 4-6 weeks for processing.

★ **All fields listed below are <u>required</u> to process your rebate form.** ★

Member Information

CDPHP member ID: _____ Name: _____

Email address: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone number: _____ Date of birth: _____

My starting weight was: _____ After the program, my weight is: _____

Please check which program you completed:

☐ I attended meetings. (Complete instructor certification below)
  Instructor/Leader Confirmation:
  I hereby verify that the above-named CDPHP member has successfully completed a weight management program.

  Meeting location: _____

  Course start date: _____ Course end date: _____ Total number of classes completed: _____

  Instructor's signature: _____

☐ I participated in a weight management program online for a minimum of 3 months: _____ *(start date)* to _____ *(end date)*

* Consult your contract for eligibility information. Contract eligibility will be verified prior to processing the rebate.

Please complete and return with your proof of payment to:
CDPHP • 500 Patroon Creek Boulevard • Albany, NY 12206

www.cdphp.com/weight-management

Discrimination is Against the Law
Capital District Physicians' Health Plan, Inc. (CDPHP®) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

Multi-language Interpreter Services
ATENCIÓN: Si habla otro idioma que no es el inglés, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que figura en su tarjeta de identificación de miembro (TTY: 711).

注意：如果您使用的語言不是英語，您可以免費獲得語言援助服務。請致電您會員ID卡上的電話（聽力障礙電傳：711）。