

# Fitness Rewards

## Reward Yourself With Fitness Rebates and Discounts

To encourage you to get fit and stay healthy, Tufts Health Plan offers a number of ways for you to save on fitness center fees both in and outside of our network.

### Fitness Center Rebate

We'll give you a rebate on your fitness center membership. Check your benefits for the amount allowed on your plan. It's simple! Once you've been a member of Tufts Health Plan for at least four months, you're eligible for the rebate. All you have to do is be a member of any fitness center for at least four months. To be eligible for the rebate, the fitness center must offer cardio and strength-training machines and other programs for improved physical fitness.

The rebate applies one time per family, one time per year. The rebate is paid to the Tufts Health Plan subscriber after you pay your fitness center fees. Submit the Fitness Rebate Form, along with proof of fitness center membership and payment, and Tufts Health Plan will pay up to the allowed amount of your fees for the year. You can also request your rebate online – just log in to your secure online account at [tuftshealthplan.com](http://tuftshealthplan.com). Fitness centers and programs that are not part of the rebate program include martial arts centers, gymnastics centers, country clubs, aerobics-only or pool-only centers, sports teams and leagues, and tennis clubs. Personal trainers, sports coaches, yoga classes, and exercise machines are also not included in the rebate program.

To learn more about Tufts Health Plan fitness discounts, or to request a rebate for your fitness center membership, log in to your secure online account at [mytuftshealthplan.com](http://mytuftshealthplan.com).

## Great Discounts on Network Fitness Centers

You can save even more money when you join a fitness center in the Tufts Health Plan network.

- Save 20% on one-year memberships and pay no joining fee at any of our Tufts Health Plan network fitness centers in Massachusetts, New Hampshire, and Rhode Island. There are almost 80 to choose from.
- Save 50% when you join a participating New England Curves® club.
- Save 10% on a personal training package at Fitness Together and receive a free fitness evaluation.
- Members 18 years old and younger pay no fee to join a network Boys & Girls Clubs in Massachusetts and Rhode Island. Members also receive a 20% discount on the cost of most programs.
- If you're not ready to join a center, you and your family can go to a fitness center in the Tufts Health Plan network and pay a small copayment of \$6-\$10 for each visit up to five visits a month.

For a full list of fitness centers in the Tufts Health Plan network, go to [tuftshealthplan.com](http://tuftshealthplan.com) and click on Find a Doctor, then search under Other Medical Services.

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TUFTS  Health Plan

No one does more to keep you healthy.

# MEMBER FITNESS REBATE FORM

You must complete all fields. Please print clearly. Retain a copy of all receipts and documents for your records. Please be sure to sign the form.

To qualify for the fitness club rebate, you must complete four consecutive months of membership with Tufts Health Plan and at a qualified fitness center each year you apply.

You will have 24 months from the date you incurred your fitness club fees to submit your request for the fitness rebate. Check your benefits for the reimbursement allowed on your plan. The rebate applies one time per family, one time per year. The rebate is paid to the Tufts Health Plan subscriber after fitness center fees are paid. We usually process reimbursements within 4 to 6 weeks of receipt.

## MEMBER/SUBSCRIBER INFORMATION

### ▶ Member Information

Name (Last, First, Middle Initial): \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex:  Male  Female

Tufts Health Plan ID#

### ▶ Subscriber Information

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

## FITNESS CENTER INFORMATION

Fitness Club Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

### FOR INTERNAL USE ONLY

Diagnosis Code: 799 Description: General Procedure code: T4220 Health club membership, annual

## PAYMENT INFORMATION

Year of fitness club membership: \_\_\_\_\_ Amount Paid: \_\_\_\_\_

### Proof of payment through one of the following:

Please indicate which one of the following forms of proof of payment you are including with this form:

- An itemized receipt from the fitness club, showing the dates of membership and dollar amounts paid
- A credit card statement or receipt indicating fitness club payment
- A statement from the fitness club on the fitness club's letterhead, with an authorized signature, indicating payment was made

## SIGNATURE REQUIRED

I attest that the above information is true and accurate, and the services were received and paid for in the amount requested as indicated above. I acknowledge that if any information on this form is misleading or fraudulent, my coverage may be canceled and I may be subject to criminal and/or civil penalties for false health care claims. I also understand that Tufts Health Plan may request any additional information it deems necessary to verify that services were received and payment was made. I understand that the fitness rebate may be considered taxable income.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit this form and all documentation to:

Tufts Health Plan | Member Reimbursement Claims, PO Box 9191  
Watertown, MA 02471-9191

Please do not staple any materials to this form