



Summary of Travel Benefit for Reproductive Health and/or Gender Affirmation

Up to \$5,000 lifetime travel benefit for obtaining covered reproductive healthcare and gender affirmation services that are restricted in your home state or for a covered provider who is not available within a 100-mile radius of your primary residence.

Available to all US employees and their dependents covered on our Premera Blue Cross medical plan. Employees may use accrued sick or vacation time to cover the time off. Travel must be booked in accordance with Premera's Travel Policy listed below.

- (1) Prior approval
 - a. Member calls Customer service
 - b. Customer service will validate against a list of codes
 - c. Premera will send letter confirming approved for T&L, but there will be disclaimers about PA and medically necessary because that will continue to be a separate process from approving medical travel
- (2) Standard Travel Benefit Exclusions:
 - a. Reimbursement for mileage rewards or frequent flier coupons
 - b. Reimbursement for stays at any establishment that is not a hotel or motel
 - c. Reimbursement for mobile home, RV, trailer travel
 - d. Personal care items
 - e. Pet care except for service animals
 - f. Airline charges, first class and fees for booking changes
 - g. Reimbursement for travel to out of network facilities without prior approval
 - h. International travel
 - i. Phone service and long-distance calls
 - j. Cable TV, internet charges, and movie rentals
 - k. Reimbursement for companion travel and lodging, except for medical necessity or safety of the patient

Notes on Reimbursement - Members will pay upfront and submit for reimbursement as follows (claim form attached):

1. Medical completes the attached Member Claim Form for these expenses and mail it to our standard claims mailing address.
2. The claim form should include:
 - a. Clear, legible copies of receipts for their expenses
 - b. Dates of service
 - c. Expense amounts
 - d. Provider names (examples: hotel, restaurant, store, etc.) and what the expense was for
 - i. Important Note: We do not need Current Procedural Terminology (CPT) codes, Diagnosis (Dx) codes or Provider Tax Identification Number (TIN)#s as

Claims will use proxy information for those fields in Facets. Legible receipts and dates of service are critical for timely claims processing.

3. Providing Mileage Reimbursement Information: We use the mileage guidelines based on the member benefit from the benefit booklet. In the case of F5, they requested 100-mile radius. We will use the higher reimbursement for the mileage rate from the [IRS Website](#).