



### Direct Member Reimbursement Form

**Directions: Please read and fill out the entire form.**

1. This form must be completely filled out in order to process your claim(s). Please be thorough.
2. Attach all prescription receipt(s) to the back of this form.
3. Prescription receipt(s) must contain all of the following information: Rx number, date filled, pharmacy name, physician name, drug name, strength, quantity and prescription charge.  
 \*\*\*\*Store cash register receipt(s) will not be accepted, the receipt(s) **MUST** contain the above information.\*\*\*\*

4. Sign form and mail receipt(s) to:                    Molina Healthcare  
    Attention: Pharmacy Department  
    7050 Union Park Center Suite 600  
    Midvale, UT 84047

5. If you have any questions or concerns please call Member Services at (800) 665-3086, TTY users should call 711. We are available October 1 – March 31 - 7 days a week, 8 a.m. to 8 p.m., local time, April 1 – September 30 - Monday – Friday, 8 a.m. to 8 p.m., local time.

**Member Information: (This is the individual considered to be the cardholder.) Please Print**

Member Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Member ID Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

**Prescription Information:**

Rx Number	Date Rx Filled	Pharmacy Name & NPI Number	Drug Name	Strength	Quantity & Day Supply	Amount You Paid

Molina Healthcare is a C-SNP, D-SNP and HMO plan with a Medicare contract. D-SNP plans have a contract with the state Medicaid program. Enrollment depends on contract renewal.

**VA D-SNP Only:** Molina Healthcare is a D-SNP with a Medicare contract. D-SNP plans have a contract with the Virginia Department of Medical Assistance Services' Cardinal Care Medicaid program. Enrollment depends on contract renewal.

**CHP Only:** Central Health Medicare Plan is an HMO/HMO SNP with a Medicare contract. Enrollment in Central Health Medicare Plan depends on contract renewal.

**NM D-SNP Only:** Such services are funded in part with the State of New Mexico.

<https://www.molinahealthcare.com/members/common/en-US/multi-language-taglines.aspx>

[https://centralhealthplan.com/Docs/Member/Multi\\_Lanugage\\_Insert.pdf](https://centralhealthplan.com/Docs/Member/Multi_Lanugage_Insert.pdf)