

Ivanhoe, MN • 507-694-1452 Slayton, MN • 507-836-6144

Pipestone, MN • 507-825-6720 Luverne, MN • 507-283-5070

Marshall, MN • Human Services 507-537-6747 • Health Services 507-537-6713 Redwood Falls, MN • Human Services 507-637-4050 • Health Services 507-637-4041

Offices Located in:

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COST EFFECTIVE INSURANCE PREMIUM REIMBURSEMENT VOUCHER

To receive reimbursement for health insurance premiums; excluding Medicare:

- Complete voucher form with signature electronic signature not accepted
- Return form and proof of premiums deducted from each paycheck by 5th working day of the month
- ❖ Approved payments are issued the Friday following the 3rd Wednesday of each month. Forms received after the due date will delay payment until the following month. Income verifications returned without a completed voucher will not be reimbursed.
- Email address listed below is allowed to send vouchers and income verifications. However, there will be no communication back from this email address regarding receipt of documents or status of reimbursement. If sending document to the email address, PDF Version of documents are preferred as images in jpg are not always clear and legible.

Lincoln, Murray, Pipestone and Rock County clients:: return completed form to:

in completed form

SWHHS
Attn: Jane Mellenthin
607 W Main St, Suite 100
Marshall, MN 56258

mfrontdesk@swmhhs.com

FAX: 507.537.6088

Lyon and Redwood County clients:

return completed form to:

SWHHS

Attn: Jennifer Beek 607 W Main St, Suite 100 Marshall, MN 56258

mfrontdesk@swmhhs.com

FAX: 507.537.6088

Reimbursement Month:	Case	Case Number:	
Claim payable to: (Please Print)			
Claimant Address: (Please Print)			
Claimant Signature:		Date:	
Approved by:	Date:	Worker #	