



**Offices Located in:**

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

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**COST EFFECTIVE INSURANCE PREMIUM REIMBURSEMENT VOUCHER**

To receive reimbursement for health insurance premiums; excluding Medicare:

- ❖ Complete voucher form, with signature
- ❖ Attach proof of premium payment to form by month
- ❖ Return form and proof of premiums by 5<sup>th</sup> working day of the month
- ❖ **Approved payments are issued the Friday following the 3<sup>rd</sup> 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.**

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

**SWHHS**  
**Attn: Jennifer Beek**  
**607 W Main St, Suite 100**  
**Marshall, MN 56258**  
  
**FAX: 507.537.6088**

Lyon and Redwood County clients:  
return completed form to :

**SWHHS**  
**Attn: Chantelle Fogelson**  
**607 W Main St, Suite 100**  
**Marshall, MN 56258**  
  
**FAX: 507.537.6088**

**Reimbursement Month:** \_\_\_\_\_ **Case Number:** \_\_\_\_\_

**Claim payable to:** *(Please Print)* \_\_\_\_\_

**Claimant Address:** *(Please Print)* \_\_\_\_\_  
\_\_\_\_\_

**Claimant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Worker #: \_\_\_\_\_