

# PHYSICIAN CO-PAY BENEFIT



## *Major Plan Features*

- Reimburses health insurance co-pays for office visits. Reimbursement is processed once annually up to a maximum of \$120 per family per calendar year.

## *How To Use This Benefit*

- Obtain a Physician Co-Pay Benefit Claim Form from [www.cseaebf.com](http://www.cseaebf.com) or by contacting the Benefit Fund at (800) 323-2732.
- Submit your completed form with Explanation of Benefits (EOB) from your Health Insurance, clearly indicating the services rendered and co-pay amount.
- Cash register receipts, original physician receipts and/or cancelled checks are not accepted for this benefit.
- Claims will be processed and paid upon reaching \$120 maximum or after December 31st of each year.
- The Fund will then send the **check to the member.**

## *Limitations And Exclusions*

- The benefit does not apply to costs covered by your regular health insurance plan.
- **All claims must be submitted by March 31st for the previous calendar year of January 1st– December 31st.**

CSEA Employee Benefit Fund  
P.O. Box 516  
Latham, NY 12110-0516