



#66T02652#####

Recurring Payment Request



Fax completed form to:
321.445.9618



Mail completed form to:
Empower CDH
P.O. Box 161588
Altamonte Springs, FL 32716



Questions
855-375-3050

PARTICIPANT INFORMATION (Please Print)

EMPLOYER/PLAN NAME MERS	FIRST NAME	MI	LAST NAME
ADDRESS			DATE OF BIRTH
CITY	STATE	ZIP	PHONE
LAST 4 DIGITS OF SSN		EMAIL ADDRESS	

Recurring Payments

Recurring payments may be paid ONLY via Direct Deposit using this claims form. Please complete this form and sign up for Direct Deposit using the online or mobile experience. If you wish to pay a provider directly for recurring payments, use the online or mobile experience. DOCUMENTATION IS REQUIRED for reimbursement.

RECURRING PAYMENT REQUEST DETAILS

DATE	SERVICE	PATIENT NAME	FREQUENCY	FIRST PAYMENT DATE	LAST PAYMENT DATE	AMOUNT
			Weekly ☐ Monthly ☐			\$

PARTICIPANT SIGNATURE (REQUIRED)

I certify that this claim submission is accurate, complete, and eligible for reimbursement to the best of my knowledge. I certify that I have not been reimbursed or expect to be reimbursed by any other source.

Additionally, I understand I must submit documentation to support my submission to receive reimbursement.

PARTICIPANT SIGNATURE: _____

DATE: _____



SUBMISSION GUIDELINES

Please follow these guidelines to ensure that your claims are reimbursed quickly. Failure to attach the proper documentation may result in a declined or rejected claim.

Acceptable Documentation

- Statement of Insurance coverage from your insurance carrier or Medicare provider. Should include annual/monthly premium and coverage period.
- Orthodontia contract with start and end dates, showing full amount due with description of expense.

Unacceptable Documentation

- Canceled checks
- Debit card or credit card receipts
- Balance forward or previous balance statements
- Paid on account statements
- Pre-payments for future services
- Services incurred prior to your eligibility for medical reimbursement
- Insurance estimates

Recurring Claims

Recurring payments will be made up to the available balance in your account at the time of payment. We recommend you sign up for direct deposit on the portal or mobile app for quick and easy access to funds.

Get Reimbursed Faster

File a claim and sign up for Direct Deposit using your online or mobile experience.

Online & Mobile App

Access your account online at empower.com/MERS or download the **Empower Benefit Accounts** app from the Apple App Store or Google Play to:

- Manage your debit card and claims profile — personal information, communication preferences, and more
- View your debit card and claims summary — balance, transactions, important dates, and more
- Create new claims, upload receipt documentation, and track the status of your claims
- Enroll to receive claims reimbursement via Direct Deposit