



Hospital-Based Health Education Classes

Many local hospitals offer classes on topics that can help you optimize your health. As part of your PacificSource medical coverage, you can participate in hospital-based health education classes and receive reimbursement. Covered dependents are also eligible for this program.

What classes can I take?

Hospital-based classes cover a wide range of health topics, such as pregnancy and parenting, heart health, weight loss, nutrition, and fitness. Check with your local hospital to see what health and wellness classes they offer. You can also visit the For Members Health & Wellness section of our Web site for direct links to some area hospitals which offer classes.

Are there any limitations?

The program will reimburse all PacificSource medical members up to \$50 per class, series, or program (up to a maximum of \$150 per member per plan year). You must be an eligible and enrolled PacificSource member at the time of class registration to

qualify for class reimbursement.

Please note the following exclusions: babysitting training, CPR or first aid training, financial planning, health screenings, and entry fees for walks or other fundraising events. Finally, classes offered by organizations other than hospitals and classes on topics other than health and wellness are not eligible for reimbursement. Other restrictions may apply. Our Customer Service Representatives are happy to help you determine if the class you'd like to attend is eligible.

More Information

If you have questions, you're welcome to contact our Customer Service Department at (541) 684-5582, or toll-free at (888) 977-9299, or e-mail us at cs@pacificsource.com.



PacificSource
HEALTH PLANS

Discover the Source.

(541) 684-5582
toll-free (888) 977-9299

www.pacificsource.com

Reimbursement Request Form

Please attach a copy of your class payment receipt. Mail your receipt and this completed form to PacificSource, attn: Health Management, PO Box 7068, Eugene, OR 97401. Or fax it to (541) 686-2051, attn: Health Management.

Member Information	
Member Name	PacificSource ID #
Date of Birth	Group #
Home Phone Number	E-mail address:
Mailing Address	
Class Information	
Hospital Name	Instructor Name
Hospital Address	
Class Name	
Class Cost	Class Start Date