





SPORTS/CAMP PHYSICAL REIMBURSEMENT

Blue Cross and Blue Shield of Texas (BCBSTX) will reimburse providers a maximum of **\$25.00** to perform the service for one (1) sports or camp physical per year per child enrolled in our STAR, CHIP or STAR Kids Program. If you have any questions regarding the Sports/Camp Reimbursement process, please contact a BCBSTX Member Advocate at **1-877-375-9097** today!

The completed form must be mailed to: Blue Cross and Blue Shield Texas Attn: Sports/Camp Physicals P.O. BOX 201166 Austin, Texas 78720-9919

Provider Information
Provider Name:
Provider Tax Id Number:
Group NPI:Individual
NPI:Provider
Remit to address:
Street Address
CityStateZip Code
Phone:
Email Address:

Total amount of reimbursement requested: \$25 X_____

Member Information	
Member	ID:
Member Name:	
Member Address:	
Date of	Service:
Detailed Description:	

SCP-9093-17

Blue Cross and Blue Shield of Texas, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association.

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Member Information	l
Member	ID:
Member Name:	
Member Address:	
Date of	Service:
Detailed Description:	

Member Informa	tion
Member	ID:
Member Name:	
Member Address:	
Date of	Service:
Detailed Description	on:

Member Information	on		
Member	ID:	_	
Member Name:		_	
Member Address:		_	
Date of	Service:	_	
Detailed Description	:	_	

Member Information	1
Member	ID:
Member Name:	
Member Address:	
Date of	Service:
Detailed Description:	