We Will Only Accept Deliveries from UNION Carriers! All Other Deliveries Will Be Refused!

I.B.T. Local 191 Health Services & Insurance Plan

1139 FAIRFIELD AVE.
BRIDGEPORT, CONN. 06605

TEL.(203) 366-5840 (203) 366-5849
CONNECTICUT ONLY 1-800-972-4099
FAX (203) 331-0348

Prescription (RX) Reimbursement Form

Part 1 – Member Information

Member Name_____

Member ID Number_____

Part 2 – Attach copy of receipt

Claimant Name	Relationship to Member	Receipt Date	Amount Paid