

## 2023 Fitness Reimbursement Benefit



Get reimbursed up to \$225 per family\* per calendar year for an eligible expense. Available to employees who elected this as their wellness benefit for 2023 and all retirees on a Dartmouth sponsored medical plan.

Follow these 3 easy steps:

# 1

# MAKE AN ELIGIBLE PURCHASE

- Fitness Facilities
- Exercise Classes

2

### COMPLETE FORM

Complete form on reverse side (page 2) 3 SUBMIT FORM BY 12/31/2023

Send completed form AND receipt to Cigna for processing

#### What qualifies?

- Full-service brick and mortar facilities with cardiovascular and strength training equipment
- Exercise classes brick and mortar inperson classes, on-line/streaming, apps, or DVD classes led by an instructor
- Swimming and Tennis-only Facilities

#### What DOES NOT qualify?

- Home Exercise Equipment
- Personal Training Sessions
- Sports Lessons (e.g. golf lesson)
- Sports Equipment (e.g. skis, skates)
- Sneakers or Clothing
- Activity Tracking Devices (e.g. Fitbit)
- Workshops (e.g. Weight Watchers)
- Race Fees
- Ski Passes
- Sport Leagues (e.g. basketball, rowing)
- Massage, Acupuncture, Hypnosis
- Open Gym (e.g. climbing gyms)

#### What is the deadline to submit?

Submissions must be postmarked by December 31, 2023.

\*Family only includes the employee/retiree and a spouse/partner who is enrolled on the employee/retiree's medical plan through Dartmouth College.

#### **Important Information:**

- \$225 is the maximum reimbursement amount per family\* per calendar year.
- There is no attendance requirement, you can submit your form and receipt(s) as soon as you make an eligible purchase.
- Your receipt must be for 2023 fees/services (2022 receipt is acceptable if you paid for 2023 services in 2022).

#### • For Active Employees:

- Reimbursements will be provided via payroll and are subject to applicable tax withholdings.
- Please allow approximately 2 months to receive your reimbursement.

#### • For Retirees:

- Reimbursements will be mailed to your address on file. Any reimbursements received as part of the Fitness Benefit are considered taxable income. Please consult your personal tax advisory regarding the proper reporting of this income.
- Please allow up to 10 weeks to receive your reimbursement check.

## 2023 Fitness Reimbursement Form

**Section 1 - Employee/Retiree Information:** 

Employee/Retiree Name (First, Last):					
Dartmouth ID:	Partmouth ID: Date of Birth (mm/dd/yyyy):				
Mailing Address:					
If you are a Retiree, check off this box:					
Section 2 - Purchase Information:					
Purchaser Name (Employee, Retiree, or Partner/Spouse):					
I am submitting for:					
Fitness Facility	Date of Purchase:		Amount Paid: —		
Fitness Facility Name:					
Dates of Membership:—					
AND/OR					
Exercise Class	Date of Purchase: _		Amount Paid:		
Exercise Class Name:			Online/App/	/DVD (Y/N):	
Location (if applicable):	Class Dates (if applicable):				
Section 3 – Submission:  Receipts may be submitted immediately after purchase and must be for services in 2023. Submissions must be postmarked by December 31. Reimbursements will be provided through payroll for Employees (and eligible spouse) and via check for Retirees (and eligible spouse). Please retain a copy of all receipts and documents for your records.  Total # of Receipts Attached: Total Amount Requesting: \$ (max of \$225)  Section 4 – Signature:  I authorize the release of any information verifying purchases and payments regarding the activities I					
I authorize the release of seek reimbursement for. I correct and that I have no submission based on eligprocess this request.	I certify the information previously submitte	ion provided in sup ed for these service	port of this submi es. I understand tha	ission is complete and at Cigna may deny a	
Purchaser Signature:			Da	ate:	

Please send this form and all receipts postmarked by December 31, 2023 to:

Cigna Health Promotions 1750 Elm Street, Suite 800 Manchester, NH 03104