



# How to Submit an Online Reimbursement Request

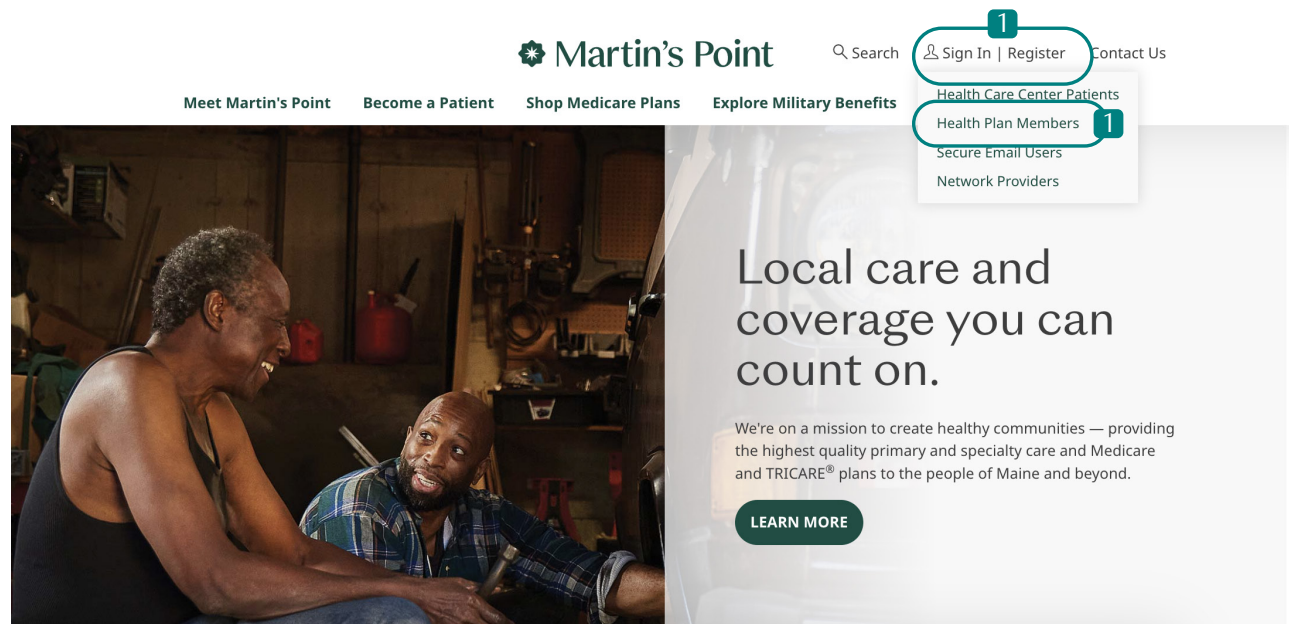
## Wellness Wallet and Eyewear

**Note:** You must have a Generations Advantage Member Portal account to submit online reimbursement requests. If you don't yet have a Member Portal account, follow Step 1 below to be brought to a page to register for an account.

1

## Visit Sign-In Page

Sign into your Member Portal account by clicking on “Sign in” in the upper right-hand corner of any page on the MartinsPoint.org website. Then, choose “Health Plan Members.”



2

## Enter Your Account Information or Register

A sign-in window will appear. Enter your Member Portal Username and Password.

If you don't have a Member Portal account yet, click **Health Plan Member Registration** to sign up first.



### Sign In

Health Care Center portal login at **MyMartinsPoint®**

Username

Password

Sign In

[Forgot your Username?](#)

[Forgot your Password?](#)

[Account Management](#)

## Don't have an account yet?

### **Health Plan Member Registration**

Trouble logging in?  
Please call Member Services:

**Generations Advantage**  
[1-866-544-7504](tel:1-866-544-7504) (TTY: 711)

**US Family Health Plan**  
[1-888-674-8734](tel:1-888-674-8734) (TTY: 711)

### **Provider Admin Registration**

To become a local administrator, use the link above. Non-admin users, contact your local administrator for access or call [1-888-732-7364](tel:1-888-732-7364) for assistance.

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## Visit the Generations Advantage Member Page

Once logged in, click **For Members and Patients** in the top menu and then select **Generations Advantage Members**.

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## Scroll down to see available actions

Click on **Wellness Wallet/Eyewear Online Reimbursement** or **Check Wellness Wallet/Eyewear Balances**.

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## Continue

An orange “alert” window will appear notifying you that you are leaving the Martin’s Point website. Click **CONTINUE**.

The screenshot displays the Martin's Point website interface. At the top, the navigation bar includes links for 'Meet Martin's Point', 'Become a Patient', 'Shop Medicare Plans', 'Explore Military Benefits', and 'For Members & Patients' (highlighted with a red circle and a red '3'). Below the navigation bar, a 'Welcome' message is displayed. The main content area features three cards: 'Generations Advantage Members', 'Martin's Point Network Providers', and 'US Family Health Plan Members'. Below these cards, a dark grey bar contains the text 'Take control of your account with ease. Once signed in, unlock tools to update your information, view claims, and more.' and two buttons: 'MY ACCOUNT' and 'MANAGE ACCOUNT'. Below this bar, two cards are visible: 'Wellness Wallet/Eyewear Online Reimbursement' (highlighted with a red circle and a red '4') and 'Check Wellness Wallet/Eyewear Balances' (highlighted with a red circle and a red '4'). At the bottom, an orange alert window is shown with the text 'You are now leaving the Martin's Point website.' and a 'CONTINUE' button (highlighted with a red circle and a red '5').

Martin's Point

Search Sign Out Contact Us

Meet Martin's Point Become a Patient Shop Medicare Plans Explore Military Benefits

For Members & Patients 3

For Members & Patients

Generations Advantage Members 3

US Family Health Plan Members

Health Care Center Patients

Health and Wellness

Welcome, you're securely signed in.

Generations Advantage Members

Martin's Point Network Providers

US Family Health Plan Members

Continue to your personalized health plan portal.

Continue to your exclusive provider resources portal.

Continue to your personalized health plan portal.

Take control of your account with ease. Once signed in, unlock tools to update your information, view claims, and more.

MY ACCOUNT MANAGE ACCOUNT

Wellness Wallet/Eyewear Online Reimbursement 4

Check Wellness Wallet/Eyewear Balances 4

You are now leaving the Martin's Point website.

CONTINUE 5

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## Click Reimburse Myself

Scroll down to I Want To: and then click the **Reimburse Myself** button. (This is on the portal Home page.)

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## Select Reimbursement Details

Under Create Reimbursement, in the Pay From drop-down, **select Medical**.<sup>\*</sup> In the Pay To drop-down, select **Me**, then hit the **Next** button to continue.

<sup>\*</sup>NOTES: In this section, you will always select “**Medical**.” The information on your uploaded receipt will be used to determine whether you will be reimbursed from your Wellness Wallet balance or your Eyewear balance.

At the beginning of the year, **you may see Available Balances from the current year and the previous year**. Previous-year balances can be used for purchases made in the previous year only (while a plan member). These claims must be submitted by April 30 of the current year.

 Martin's Point

Home

Accounts

Tools & Support

Message Center <sup>1</sup>

I Want To:

Reimburse Myself

Home

Accounts

Tools & Support

Message Center <sup>1</sup>

### Accounts / Reimburse Myself

#### Available Balance

Eyewear-Prime-006-00... <sup>i</sup>  
\$150.00

Wellness Wallet-Prim... <sup>i</sup>  
\$600.00

Eyewear-Prime-006-00... <sup>i</sup>  
\$150.00

Wellness Wallet-Prim... <sup>i</sup>  
\$0.00

#### Create Reimbursement

<sup>\*</sup> Required

Online claim filing is a fast and easy way to file claims. Just click the “Reimburse Myself” or “Send Payment” button to start filing!

Pay From <sup>\*</sup> Medical <sup>i</sup>

Pay To <sup>\*</sup> <sup>i</sup> Me <sup>i</sup>

Based on your selection, you will be requesting a Claim Reimbursement.

Cancel

Next

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## Upload Valid Documentation

Under **Receipt/Documentation**, click the **Upload Valid Documentation** link (in blue).

### Accounts / Reimburse Myself

#### Available Balance

Eyewear-Prime-006-00... ⓘ  
**\$150.00**

Wellness Wallet-Prim... ⓘ  
**\$650.00**

#### Receipt / Documentation

\* Required

Receipt(s) \* ⓘ

[Upload Valid Documentation](#)

#### Summary

Pay From

Medical

Pay To

Me

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## Click Browse for a File

When the **Upload Receipt(s)** dialog box pops up, click the **Browse for a File** link (in blue) to upload your receipt. (You should have your receipt ready on your computer as a PDF or image file. To do this, you may need to scan a paper receipt, take a photo of it, or take a screenshot of your order confirmation email and upload that to a location on your device.)

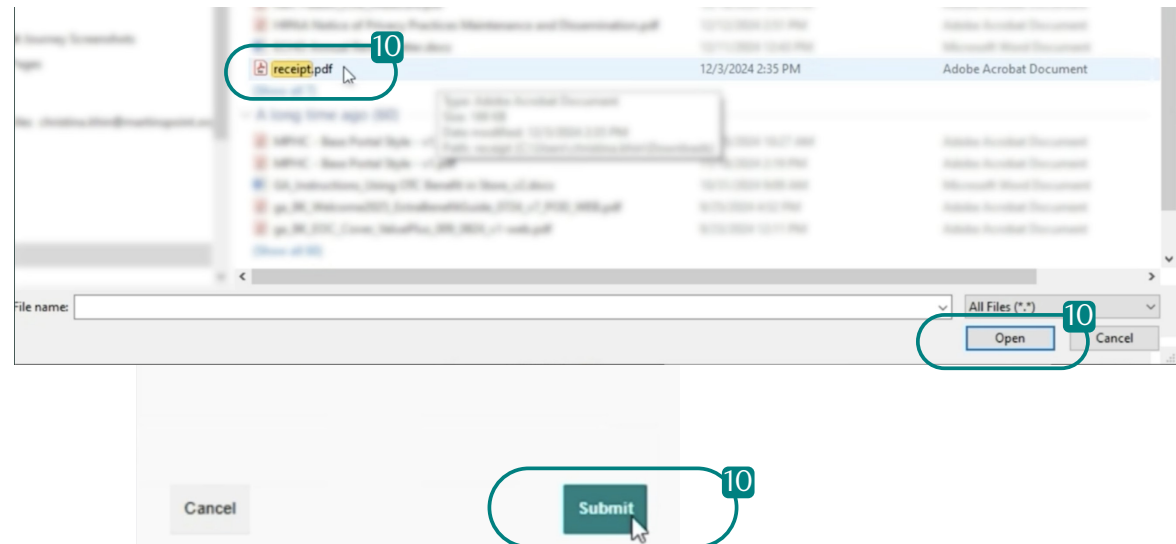
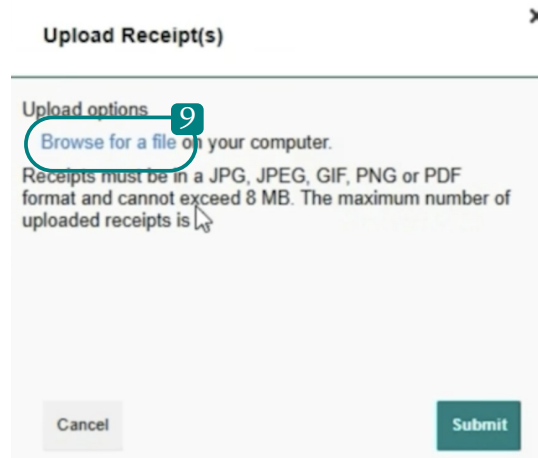
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## Find and Select Your Receipt

Browse to find your receipt file, click on it and hit the **Open** button. Then, click the **Submit** button to upload it, which will close the dialog box.

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## Click Next



### Summary

Pay From	Medical
Pay To	Me



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## Fill Out Claim Details

Fill out the fields under **Claim Details** to provide information related to your reimbursement. Select the **category** and **type** that best describe your item or service.

Select your name as the recipient.

When you're finished, click **Next**.

### Claim Details

\* Required

Start Date of Service \*

1/22/2025

End Date of Service

1/22/2025

Amount \*

\$ 100

Provider \*

Amazon

Category \* ⓘ

Equipment

Type \*

Sport helmet

Description

If the category is 'Other', you must provide a description.

Recipient \*

☒ JOHN SMITH

#### Summary

Pay From	Medical
Pay To	Me
Documentation Uploaded	Yes

Cancel

Previous

Next

Note: "Provider" refers to the entity where you purchased your service or item.

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## Add Another Claim or Submit

Your reimbursement request should now appear under the **Transaction Summary**. If you want to add more reimbursement requests, select **Add Another** and repeat steps 8–12.

When you're ready to submit, under **Claims Terms and Conditions**, click the **checkbox to agree** and hit the **Submit** button.

Then you will see a confirmation that your reimbursement request has been submitted, and a link (in blue) to print it if you wish. If you return to your Home page, your reimbursement will now appear under **Recent Transactions**.

### Accounts / Transaction Summary

Available Balance ⓘ

\*\* Balance reflects claims not yet submitted

Eyewear-Prime-006-00... ⓘ	Wellness Wallet-Prim... ⓘ	Eyewear-Prime-006-00... ⓘ	Wellness Wallet-Prim... ⓘ
\$150.00	\$400.00 **	\$150.00	\$0.00

#### Transaction Summary (2)

FROM	TO	EXPENSE	AMOUNT	APPROVED AMOUNT ⓘ		
✓ Wellness Wallet-Prime-006-001	Me	Sport helmet	\$100.00	\$100.00	Remove	Update
✓ Wellness Wallet-Prime-006-001	Me	Bicycle repair	\$100.00	\$100.00	Remove	Update
Total Amount			\$200.00	\$200.00		

#### Claims Terms and Conditions

☐ I have read, understand, and agree to the [Terms and Conditions](#).

Cancel

Save for Later

Add Another

Submit