



WORKING TO MAKE A DIFFERENCE

GUIDELINES FOR COMPLETING REIMBURSEMENT FORMS

If you have previously completed a WorkSafeBC form for reimbursement of healthcare expenses, you will notice that it is now two separate forms: **Worker Prescription Claim (Form 3)** and **Worker Supply and Services Claim (Form 3A)**.

Some new procedures are now required when completing forms for reimbursement of expenses:

- Complete **Form 3** for reimbursement of prescriptions receipts only
- Complete **Form 3A** for reimbursement of all other medical supplies and services expenditures
- Complete all mandatory fields on these forms (indicated by *)
- Make a **copy of your receipts** and attach them to the completed forms
- Write your name and claim number on each copy of receipts submitted

Important information about receipts

Do not send original receipts to WorkSafeBC. When submitting your completed forms, attach copies only. We are unable to return originals, which you may need to submit to another insurer if WorkSafeBC does not cover those expenses.

Please note: keep a copy of the original receipt on file, as you may be required to present it at a later date for audit purposes.

Submitting forms

Submit completed forms and receipt copies as follows:

Form number	Submit via FAX	Submit via MAIL
3	604 233-9777 Toll-free: 1 888 922-8807	Payment Services WorkSafeBC PO Box 94460, Stn Main Richmond BC V6X 8V6
3A	604 233-9777 Toll-free: 1 888 922-8807	Payment Services WorkSafeBC PO. Box 4700 Stn Terminal Vancouver BC V6B 1J1

If you require more information, please call Payment Services, M – F, 8:30 am - 4:30 pm:

Tel: 604 276-3085
Toll-free: 1 888 422-2228