



How to File Claims: Accident, Critical Illness, Cancer, and Hospital Indemnity

Over the past year, have you been hospitalized or treated for an injury or a sickness? How about your dependents? If you have chosen to cover your spouse, domestic partner, and/or children on any of your elective benefits, they may be eligible for benefits as well. If you have an Accident, Critical Illness, Cancer and/or Hospital Indemnity plan, and you have sought treatment for an injury or illness, now is the time to file claims and receive the benefits available to you under these plans.

Not quite sure what steps to take to start the claim process? Midwest Heritage is here to help make the process of filing a claim as smooth as possible.

To begin a claim, you may reach out to Midwest Heritage to obtain a claim form for your specific plan. From there, you will need to collect itemized billing statements along with the doctor's notes from the initial visit. A couple of items to note in regards to itemized billing statements:

- When asking your provider for an itemized billing statement, please ask for: UB04 or HCFA 1500.
- Make sure the form has: diagnosis codes, procedure codes, patient name and date of service. (The forms listed above should have this information, but it never hurts to double-check.)
- If you are filing a Hospital Indemnity claim, the itemized billing statement must also include room and board charges showing the day you were admitted and discharged.
- If you are filing a Cancer claim, you must provide the pathology report showing the diagnosis.



Claim(s) forms and related documentation can be faxed to 641-774-2022, emailed to CSR@mhbankins.com or mailed to Midwest Heritage Insurance Services at PO Box 737, Chariton, IA 50049. Employees who have questions related to claims may contact Midwest Heritage at 800-622-0057 or CSR@mhbankins.com.



Ameritas Vision Members: Access benefits information from your mobile Device!

By setting up a secure member account, you have 24/7 access to your:

- Personalized ID card; print it or save it to your smartphone
- Plan details and remaining benefit amounts

The one-time setup is quick and easy:

- Go to ameritas.com
- Click "Account Access" in the upper right corner
- Select the Dental/Vision/Hearing drop-down
- Choose "Secure Member Account"
- On the Login page, select "Register Now"
- Complete the New User Registration form

Part-Time Dental Change

Hy-Vee is enhancing the Dental plan available to part-time employees! Effective January 1, 2022, coverage will be included for:

- Child Orthodontia
- Major Services

Now is the time to enroll for the 2022 plan year. Information on the enhanced Delta Dental plan can be found by going to hy-veePTenroll.com. **Open Enrollment ends**



Hy-Vee Elective Benefits

3580 EP True Parkway

Phone: 800-622-0057

Email: csr@mhbankins.com

www.hveb.com



Year-End Benefits Reminders

Please take a few moments to review the following year-end benefits reminders:

- Mailing Address – please verify accuracy with your HR Manager or Benefits Coordinator to ensure benefit information is delivered to your home address.
- Beneficiaries – are these up to date with who you want to receive benefits upon your death? Contact Midwest Heritage for the proper forms to update beneficiaries on each of your policies. (Accident, Critical Illness and Life insurance plans require beneficiaries.)
- Full-/regular-time employees who have elected Supplemental Life Insurance through the Hartford may need to complete Evidence of Insurability. EOI is required if this plan is elected outside of your new hire window, or if you choose a benefit amount above the guaranteed issue limits. The EOI form can be found under the Reference Center on hy-veebenefits.com.
 - **Basic Life** – this benefit requires a beneficiary. If you have not logged into hy-veebenefits.com and designated a beneficiary, please do so. Part-Time employees can go to hy-veePTenroll.com to enter beneficiary information, and Full-/Regular-Time employees can go to hy-veebenefits.com.
- ID Cards and policy information for newly chosen elective benefits should arrive in the mail during the month of January (if not before). Please be on the lookout for these important documents, and open all mail from our insurance carrier partners before discarding it.
- If you have not done so already, please submit your wellness claims for 2021!

How to File Claims: Wellness

Have you filed wellness claims for you and your family this year? Filing wellness claims is a simple way to use the benefits available to you under your Critical Illness and Cancer plans. Even if you haven't been diagnosed with or treated for an illness this year, you can still claim on the wellness benefit if you have undergone a biometric screening, mammogram, PSA, EKG, or Colonoscopy. (Additional screenings are covered under this benefit. Please refer to your policy or HVEB.com for a full list of covered screenings.)

If you have the Cancer and/or Critical Illness policies through Kemper Benefits, you are eligible for a wellness benefit one time per year per covered person. When filing wellness claims, keep in mind:

- You will need to provide an itemized billing statement showing the procedure or test you had completed, patient name and date of service.
- A list of eligible wellness screenings can be found on HVEB.com by clicking the Cancer or Critical Illness tile and then scrolling to the bottom of the page and clicking on the Wellness Claim tile.
- Biometric screenings are an approved wellness screening for your Cancer and/or Critical Illness policies.

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