

Dear Member or Retiree,

During the 2018 Negotiations, the Union negotiated a new benefit for completion of the Health Awareness Initiative. Instead of having your deductible waived and receiving a cash payment, you will receive a credit to an HRA account [that you can use](#) for [all your](#) healthcare expenses. This change has been confusing. To assist members in utilizing this negotiated benefit, Highmark (the medical carrier and HRA administrator) will be holding meetings at each location to explain how to use your HRA and ask questions.

The meeting times and locations are as follows:

Location	Address	Date and Time
Minorca	706 6th Ave N Virginia, MN 55792	Wednesday April 3 3:15pm and 7:15pm
East Chicago 1011		Thursday April 4 4pm Local Union Meeting
I/N TEK and I/N KOTE	110 South Harris New Carlisle, IN, 46552	Thursday April 9 1pm and 4pm
Cleveland	3421 Independence Road Cleveland, OH 44136	Wednesday April 10 7am, 3pm and 7pm
Columbus	Company conference room	Thursday April 11 7:15, 12:15 and 3:15
Weirton	Holiday Inn, Weirton WV	DATE TBD 7am, 3pm and 7pm
Coatesville	750 Charles Street Coatesville, PA 19320	Monday April 15 9am and 4pm
Conshohocken	476 W Elm Street Conshohocken, PA 19428	Monday April 15 1:30pm
Steelton	200 Gibson Street Steelton, PA 17113	Tuesday April 16 11am and 3:30pm

The USW negotiates health insurance benefits for you and your family. Below is a summary of your medical coverage.

BENEFIT CATEGORY	IN-NETWORK	OUT-OF-NETWORK
Deductible (Individual/Family)	\$200 / \$400	\$500 / \$1,000
Coinsurance	90%	70%
Out-of-Pocket Limit (Individual/Family)	\$1,500 / \$3,000	\$2,000 / \$4,000
Hospital Services Inpatient and Outpatient	\$90% after deductible	70% after deductible
Primary Care Office Visit	100% after \$20 copay	70% after deductible

Specialist Office Visit	100% after \$20 copay	70% after deductible
Preventive Care	100% (deductible does not apply)	70% after deductible
Urgent Care	100% after \$30 copay	
Emergency Room Services	100% after \$50 copay (waived if admitted)	
Spinal Manipulations	100% after \$20 copay	70% after deductible
	Limit: 18 visits/ calendar year	

The Plan does not pay for all of your expenses. If you (and your Spouse) complete your Health Awareness Initiative (have an exam with your healthcare provider and submit the required form signed by your provider), you will receive an \$800 credit to your HRA account (\$400 if single). You can use your HRA account to pay your out of pocket costs for medical expenses, deductible, coinsurance, copayments, as well as prescription drug costs, dental expenses, vision expenses, and even Retiree premium payments.

Your deductibles and coinsurance for medical expenses will be automatically paid out of your HRA account. For any other qualified expenses [including copays](#), you will have to submit a claim for reimbursement. There are a few ways to monitor your HRA account and submit claims:

- You can monitor your account and request payment for medical copayments on the Highmark website or on your smartphone via the Highmark Plan App
- You can submit receipts for all qualified expenses through your smart phone via the Highmark Spending Account app
- You can also submit a paper claim to request reimbursement by email or fax.

INSTRUCTIONS TO REGISTER ON HIGHMARK WEBSITE AND REQUEST [A REIMBURSEMENT FOR A COPAYMENT OR FOR ANOTHER EXPENSE](#)

1. Go to highmarkbcbs.com
2. Select "Register"
3. Fill in your Member ID (from your Highmark card-enter numbers ONLY), name and date of birth
4. Select "Claims" and "Spending" tab
5. Click the "ACCESS" button
6. Click the "Claims" tab and select "Claim Activity"
7. You will be able to view your claims and request reimbursement for medical copayments
 - a. Locate the pending copayment within "Claim Activity" and click "Request Reimbursement". Follow the instructions to pay yourself or the provider.
 - b. Select "Pay Provider" or "Pay me" – your desired payee should be highlighted in blue, click "Next"
 - c. After confirming, click "Submit"
 - d. [You will need to download a receipt for claims other than a copay](#)

As stated above there are two different smartphone apps and they can do different things:

Options	HBS Spending App	Highmark Plan App
View ID Cards		X
View Medical Plan Coverage		X
Access Provider Directory		X
View Spending Account Balances	X	X
View Spending Account Claims and Details	X	X
Submit/Upload Manual Claims	X	
Virtual Spending Account Assistant "Ask Emma"	X	
Upload photos of receipts from SmartPhone	X	



Highmark Plan App

1. Users can register on the App, or login with their previously registered member website username and password from the desktop website.
2. Users can login with their new user name and password if they choose to create something different than what the user for the desktop website.
3. Users can set up for biometric finger print Touch ID or Face ID, depending on if their mobile device is enabled for that type of login technology.

4. If you have any difficulty using the app please call Highmark at 844-363-0071



Highmark Spending App

Some USW members have had trouble registering on this app, instructions are below but if you have any difficulties please call Highmark at 844-363-0071

Instructions to log in to Highmark Spending App

****New Users Must Register****



Tap the register button on the landing screen to Register.

****The Highmark Plan App and Member Website User Name and Password will not work with this App, You must Register with this App.****

The image shows two screenshots of the Highmark Spending App registration process. The left screenshot shows the 'Register' screen with fields for 'User Name', 'Password', 'Confirm Password', and 'First Name'. A password requirement note is visible: 'A password must contain 3 of the following types of characters: • AN UPPER CASE LETTER, • lower case letter, • Special Character (% , \$, etc.), • A number'. The right screenshot shows the 'Register' screen with the 'Employee ID' field filled with '00003'. Below this, there is explanatory text: 'Employee ID was assigned by your Administrator and could be your Health Plan Member Number, Social Security Number, an ID provided by your Employer or an alternate ID created by your Administrator. If you do not know your ID or were not provided an ID, please contact your Administrator.' There is a 'Registration ID' field with 'Employee ID' entered. At the bottom, there is a checked box for 'I agree with Terms of Use' and a blue 'REGISTER' button highlighted with a yellow oval. Both screenshots have a blue header with a user icon and the word 'Register', and a blue footer with 'Login Problems' and 'Contacts'.

1. Enter User Name: at least six characters long alphanumeric value
2. Enter Password & Confirm: Must contain 3 of following types of characters


- a. Upper Case Letter, Lower Case Letter, Special Character (&, !, #, *), or a Number
3. Enter First Name and Last Name (as shown on Member ID)
4. Enter E-mail Address
5. Enter Employee ID : must be your 12 digit UMI plus 0 (i.e. 1112223330010)
 - a. Employee ID is the Member ID listed below, Numbers Only, Adding a ZERO at the end.
Example-1006471450010

MEMBER NAME
ROBERT CARDTEST
TESTCARD

MEMBER ID
ISM100647145001

Group	ISM363	Office Visit	\$20
BC/BS Plan	363/865	Specialist Visit	\$20
		Emergency Room	\$50
		Preventive	\$0



6. Enter Employer ID (i.e. SPA031500).
 - a. Any variation will result in failed registration.
 - b. Employer ID-SPA031500, case sensitive
7. Check to agree with term of use and click Register
8. Select 4 security questions from the drop down.
 - a. Provide the answers to the selected questions and follow the on screen prompts.
9. Verify the First ,Last name, and email address entered
 - a. Select continue.
10. Verify Security Questions and Answers
11. Click Submit Setup Info

You have successfully completed the setup process. Click proceed to Account

How to Submit an HRA Claim on Highmark Spending App

1. Select Submit a Claim from Home screen
2. Follow the on screen prompts to enter claim details. Use the dropdowns available for Claimant, Reimbursement Method, and Service Category.
3. Tap the Next button at the bottom of the screen to review the details entered.

4. **Follow the on screen prompts to Attach a receipt, if applicable.**
5. **Tap Submit to agree to the conditions form reimbursement**
6. **Certify the information by selecting Decline or Accept**
7. **Once Accept you will get Success message at top of next screen.**
8. **You can add another claim or use main menu on top left to navigate to another screen**

ATTACH PAPER FORM