

FAQs

Are Pre-existing Conditions covered on the HD True Protection Accident and Sickness Hospital Indemnity Insurance Plans?

The Accident and Sickness Limited Benefit Health Insurance does not cover pre-existing conditions for the first 12 months. Specifically, if members have had care rendered or prescribed to them by a physician within the 12 months leading up to their effective date, they will have a waiting period for 12 months from the effective date before any claims related to their condition will be covered. There is a 30-day waiting period for sickness on the Accident and Sickness Limited Benefit Health Insurance (not applicable for residents of CA, ID and TX). However, there is no waiting period for the Accident Insurance benefits - members are covered for accidents beginning on their effective date. The Term Life benefit provided by Amalgamated Life and included in the Max plans has a 30 day waiting period. No benefits will be paid for a claim during the first 30 days of coverage.

Is there a co-pay or deductible on the HD True Protection plan benefits?

There are no co-pays and only one benefit has a deductible. The Accident Excess Medical Expense Benefit has a \$250 deductible per occurrence.

How do the benefits pay?

Accident and Sickness Limited Benefit Insurance pays a maximum benefit amount toward each specific service. Members are responsible for any remaining balance on the amount billed that is above the maximum amount. To guarantee the lowest out-of-pocket expenses, members should choose a provider or facility in the MultiPlan Limited Benefit Plan Network. Critical Illness, Accident Excess Medical Expense, Accidental Death & Dismemberment and Term Life pay a lump sum payment.

How do members file claims for their benefits?

A claim form must be completed within 90 days after the covered loss begins or as soon as it is reasonably possible. Members can ask their provider to file the claim and send it to the address on the back of your ID card. If the provider does not file the claim, then members may register and login to the Member Portal at members.healthdepotassociation.com; print the appropriate Claim Form; complete and sign; and send completed forms to: Unified Life Insurance Company, P.O. Box 25326 Overland Park, KS 66225. If they have questions about filing a claim or would like to check on a claim status, they can call Unified at (800) 237-4463 and their Customer Service Team will be glad to assist them. If members need to file a death claim, they need to contact Health Depot Customer Service at **(855) 351-7535**.

Can members make changes to their membership?

Members may make changes to their membership during the first thirty (30) days of coverage. After that, they may only make changes if they experience an event listed below:

- **Change in legal marital status** – marriage, divorce, annulment, death of a spouse or legal separation
- **Change in dependent children** – birth, adoption, legal guardianship or death of a child
- **Dependent children “age out”** – child’s age exceeds the age limitations of the membership

If members need to make changes to their membership, they can call Health Depot Customer Service at **(855) 351-7535**.

If a member moves, what do they need to do?

Members can login to the Member Portal and change their address or they can call Health Depot Customer Service at **(855) 351-7535**. It is crucial that their address is correct in our system, because an incorrect address could delay claims.