

Frequently Asked Questions

Why does the AWA make Accident and Sickness Limited Benefit Health Insurance available to its members?

We are dedicated to empowering American workers and helping them make sound financial, personal and health decisions. We understand that not all workers have access to affordable health benefits, so we bring the buying power of the association membership together to offer these benefit rates. The AdvancedHealth membership is available to all AWA members between the ages of eighteen (18) and sixty-four (64).

Are Pre-existing Conditions covered on the AWA AdvancedHealth 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 you have had care rendered or prescribed to you by a physician within the 12 months leading up to your effective date, you will have a waiting period for 12 months from the effective date before any claims related to your 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 ID and TX). However, there is no waiting period for covered accidents - members are covered for accidents beginning on their effective date.

Is there a co-pay or deductible on the AWA AdvancedHealth plan benefits?

There are no co-pays or deductibles. This is a fixed benefit plan.

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, choose a provider or facility in the MultiPlan Limited Benefit Plan Network.

Can members access their AdvancedHealth membership information online?

Yes, AWA membership includes access to our secure online Member Portal– myhealthmembers.com. On the website, members will be able to view, download and print their Member Materials, including ID cards. Members will also find phone numbers, web links and information describing how to use the AdvancedHealth membership and Association benefits.

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 their ID card. If the provider does not file the claim, then members may register and login to the Member Portal at myhealthmembers.com; print the appropriate Claim Form; complete and sign; and send completed forms to:

Unified Life Insurance Company,
P.O. Box 981845
El Paso, TX 79998-1845
Change Healthcare Payor ID: RP064

If members have questions about filing a claim or would like to check on a claim status, they can call **(800) 237-4463** and their Customer Service Team will be glad to assist them.

How will members identify the monthly drafts from their account?

All drafts will have "amemberbill.com" listed as the originator of the drafts.

Can members make changes to their membership?

Members may make changes to their membership 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

To make changes to their membership, members need to call Customer Service at **(214) 436-8881**.

If members move to another state, will they be able to continue in their plan?

The policy is a contract governed by the laws of the state where it was purchased, not where the person lives. Therefore, Members will continue coverage under the state certificate they were originally issued.

When Members move, they need to call AWA Customer Service at **(214) 436-8881**. It is crucial that their address is correct in our system, because an incorrect address could delay claims.