

Wellness Claim

- ❖ Accident Plan will pay \$100 for ONE test, ONCE per year, per covered person
- ❖ Critical Illness will pay \$100 for ONE test, ONCE per year, per covered person
- ❖ Hospital Plan will pay \$50 for ONE test, ONCE per year, per covered person

Screening & Tests

- | | |
|---|--|
| • Blood test for Triglycerides | • Hemocult stool analysis |
| • Bone Marrow aspiration or biopsy | • Human Papillomavirus (HPV) Testing |
| • CA 15-3 (blood test for breast cancer) | • Lipid Panel |
| • CA-125 (blood test for ovarian cancer) | • Mammography |
| • Carotid Doppler | • Pap Smear |
| • CEA (blood test for colon cancer) | • PSA (blood test for prostate cancer) |
| • Chest x-ray | • Serum cholesterol test to determine HDL and LDL levels |
| • Colonoscopy | • Serum protein electrophoresis (blood test for myeloma) |
| • Doppler screening for carotids | • Skin cancer biopsy |
| • Doppler screening for peripheral vascular disease | • Stress test on a bicycle or treadmill |
| • Echocardiogram | • Thermography |
| • Endoscopy | • Thin prep pap test |
| • Fasting blood glucose test | • Two hour post-load plasma glucose |
| • Fasting plasma glucose (FPG) | • Virtual colonoscopy |
| • Hemoglobin A1C (HbA1c) | • Whole body skin cancer screening |
| • Flexible sigmoidoscopy | |

Examinations & Immunizations

- | | |
|--------------------|---|
| • Immunizations | • Routine Physicals |
| • Routine Eye Exam | • Well child/preventive exams ages birth through 18 |

Which product are you filing a claim for?



Wellness

- ☐ Accident
- ☐ Critical Illness
- ☐ Hospital Indemnity

Web Portal: www.chubb.com/WorkplaceBenefitsClaims

First-time users click Register Now to set up profile

EMAIL: IAM@Chubb.com

For Questions, Please contact our EBS at 888-521-2900

QUICKEST METHOD

- Phone: 1-833-542-2013
 - Press Option 2 for Union Members
 - If calling, a Policy # will be required
- Fax: 1-312-351-7120
- Mail: Chubb Workplace Benefits
Claim Department
PO Box 6803
Scranton, PA 18505

Plan Year	Accident \$100		Critical Illness \$100		Hospital Indemnity \$50		TOTAL
	Date of Exam	✓	Date of Exam	✓	Date of Exam	✓	
M.							_____
Sp.							_____
Ch.							_____
Ch.							_____
Ch.							_____
Ch.							_____

Plan Year	Accident \$100		Critical Illness \$100		Hospital Indemnity \$50		TOTAL
	Date of Exam	✓	Date of Exam	✓	Date of Exam	✓	
M.							_____
Sp.							_____
Ch.							_____
Ch.							_____
Ch.							_____
Ch.							_____

How to collect on your Wellness Benefits Online or Via Smart Phone:

- Log on to **chubb.com/WorkplaceBenefitsClaims**
 - First Time Users to this site will need to register a new login
 - First Name, Last Name, D.o.B., Last 4 of SSN
 - Create Username/Password, Etc.
- Once logged in & ready to start claims process, select **"Start a New Claim"**
 - Select **"Continue", next to Wellness**
 - Select **which Wellness Exam was performed**
 - Input Date** of Exam or Visit (**MM/DD/YYYY**)
 - Decide on **Form of Payment**
 - Paper Check (Mailed)
 - Electronic Payment (Direct Deposit)
 - When selecting to use Direct Deposit for the 1st time, & are approved for a claim, you will receive an email with a secure link from "hyperwallet" to input your Banking Information for payment.**
 - If the Direct Deposit Enrollment is not completed within 3 days, a letter as well as paper check for the approved claim will be sent to the address on file.**
 - Sign E-Signature & Submit Claim

