



Meritain Connect User Manual for Employees

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Introduction

Meritain Connect offers members a user-friendly web experience, including account information and various other tools in a secure environment. The following documentation will help you use Meritain Connect and all its features.

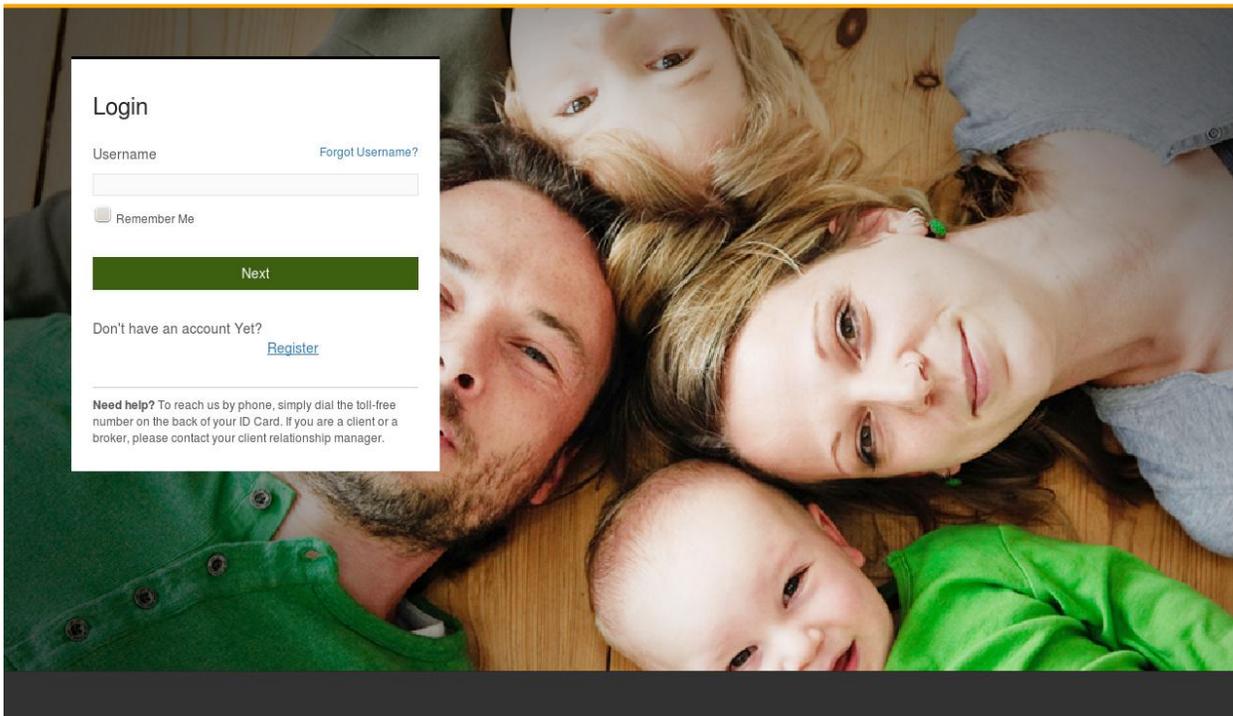


Accessing Meritain Connect

Meritain Connect is accessible via the Internet. Use the following steps to access the site. You can log in to Meritain Connect from <https://account.meritain.com/>. If you have accessed another member website in the past, you may be asked to re-register in the new and improved Meritain Connect. Use the following steps to re-register.

Logging In

From the meritain.com homepage, click on *Login* or access <https://account.meritain.com> to log in. The Meritain Connect login page will open.



1. Enter your **username** in the *Username* field and click *Next*.
2. Enter your **password** in the *Password* field.
3. Click the *Login* button.

The member homepage will open.

Forgot Username

1. On the *Login* page, click on the *Forgot Username* link.
2. Enter your group ID and click *Continue*. You'll be redirected to the *Forgot Username* process.

Step 1: Enter your Personal Information

3. Enter your member ID in the *Member ID* field. You can find your member ID on your member ID Card.
4. Enter your date of birth in the *Date of Birth* field. You may enter it directly or use the calendar pop-up to choose your date of birth.
5. Enter your email in the *Email* field.
6. Click *Continue* to continue to the next step. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 2: Answer Security Question

7. Enter the answer to your security question in the text field.
8. Click *Continue* to continue to the next step. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 3: Review and Confirm Information

9. A name will be displayed in the screen. Confirm that that's you by clicking the *Yes, I am* checkbox.
10. Click *Submit* to submit the process. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 4: Process Complete

11. You have completed the process. An email will be sent to you with your username reminder.

Forgot Password

1. In the *Login* page enter your username and click *Next*.
2. Click on the *Forgot Password?* link. Enter your group ID and click *Continue*. You'll be redirected to the *Forgot Password* process.

Step 1: Enter your Personal Information

3. Enter your member ID in the *Member ID* field. You can find your member ID on your member ID Card.
4. Enter your date of birth in the *Date of Birth* field. You may enter it directly or use the calendar pop-up to choose your date of birth.
5. Enter your email in the *Email* field.
6. Click *Continue* to continue to the next step. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 2: Enter your Username

7. Enter your username.
8. Click *Continue* to continue to the next step. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 3: Answer Security Question

9. Enter the answer to your security question in the text field.
10. Click *Continue* to continue to the next step. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 4: Review and Confirm Information

11. A name will be displayed in the screen. Confirm that that's you by clicking the *Yes, I am* checkbox.
12. Click *Submit* to submit the process. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 5: Create a New Password

13. Enter a new password in the *Password* field. Follow the rules noted below the field, for the password creation.
14. Re-enter the password in the *Confirm Password* field.
15. Click *Submit* to continue to the next step. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 6: Process Complete

16. You will get a prompt that says *Click [here](#) to go back home*. Enter your new username and password in the corresponding fields and click *Login* to access the portal.

Registration Process

If you are a first time user, click on *Register* on the *Login* page. You may also click on the Register button on the Meritain Connect homepage, or just access <https://account.meritain.com/Portal/Registration>. The *Registration* page will open up, with *Member* pre-selected.

1. Enter your group ID and click *Next*. The *Member Registration* page will open.

Step 1 - Enter Personal Information

2. Enter your member ID, which can be found on your member ID Card.
3. Enter your first name from your ID Card in the *First Name* field. Do not enter a middle initial.
4. Enter your middle initial in the *Middle Initial* field. This step is optional.
5. Enter your last name from your ID Card in the *Last Name* field. Do not enter a suffix. This field is optional.
6. Enter your suffix in the *Suffix* field. This field is optional.

7. Enter your date of birth in the *Date of Birth* field. You may enter it directly or use the calendar pop-up to choose your date of birth.
8. Enter your zip code / postal code in the *ZIP/Postal Code* field.
9. Click the *Next* button to move on to step 2 of the registration process. Clicking the *Cancel* button at any time during the registration process will prompt you to start from the beginning.

Step 2 - Review and Confirm Information

The page for the second step of member registration will be displayed.

Confirm that the information you have entered is correct.

Note: if any information is incorrect, click the *Previous* button to go back and correct it.

10. Read the confirmation statement and choose *Yes, I am* or click the *Cancel* button. Please note, you will not be able to click the *Next* button until you check the confirmation box.
11. Click the *Next* button to continue to step 3 of the process.

Step 3 - Create Username and Password

The third step of the member registration process will be displayed.

12. Create a username in the *Username* field.
13. Create a password in the *Password* field and re-enter your password in the *Confirm Password* field. Please be sure to create a password that complies with the requirements listed on this page.
14. Enter your email address in the *Email Address* field and then re-enter your email in the *Confirm Email Address* field.
15. Choose a security question from the *Security Question* dropdown list.
16. Enter an answer in the *Security Answer* field.
Note: please remember the security answer you have created. You will need it in order to utilize the *Forgot Username* and *Forgot Password* functions.
17. Please review the terms and conditions of the site. Read the entire statement and choose *I have read and agree* or click the *Cancel* button, which appears at the bottom of the page. Please note you will not be able to click the *Submit* button until you check the confirmation box.
18. Click the *Next* button to complete your registration.

Using Meritain Connect

Meritain Connect offers you the ability to access benefits, claim and plan information; find resources, forms, documents and health tools; and manage account information. The Meritain Connect homepage is designed to provide you with easy access to all of the website tools. Please note, Meritain Connect features may vary depending on your access rights.

Each feature is explained in detail below.

Homepage

Your Meritain Connect landing page displays a series of components aimed to provide you with important information or easy access to the site's main sections.

The screenshot shows the Meritain Connect homepage dashboard. At the top, there is a navigation bar with links for Plan, Benefits & Coverage, Claims, Find Care, and Tools & Resources. Below the navigation bar, the user is logged in as 'YTD, Subscriber' with a Group ID and Membership ID. The dashboard is divided into several sections:

- My Dashboard:** This section contains three main widgets:
 - Claim Types:** A bar chart showing the number of claims for different categories: Others (1), Rx (2), Vision (2), Dental (5), and Medical (10).
 - Top Benefit Services:** A table showing the total visits and total billed charges for various services. For example, Medical has 15 visits for \$700.00 and 2 visits for \$250.00.
 - Recent Claims:** A list of recent claims with details such as Date of Service, Processed Date, and You may Owe.
- Dashboard Message:** A message dated 06/15/2014 8:14PM, welcoming the user to the MyMeritain member portal.
- Useful Links:** A section with two placeholder links, each with a description of the link.
- Find your Forms and Documents!:** A button with a document icon and a 'Go' button.
- Don't forget! Open Enrollment starts today!:** A promotional banner featuring a family and the text 'Open Enrollment starts today!'.
- Healthcare Bluebook:** A button with the Healthcare Bluebook logo and a 'Go' button.
- ActiveHealth MANAGEMENT:** A button with the ActiveHealth MANAGEMENT logo and a 'Go' button.

Home Icon

Click on the home icon to navigate to the homepage at any point while navigating through the portal.



Account Settings

Click on the profile icon in the header to navigate to *Account Settings*. This is explained in detail in later sections of this document. Click [here](#) to navigate to *Account Settings* section.



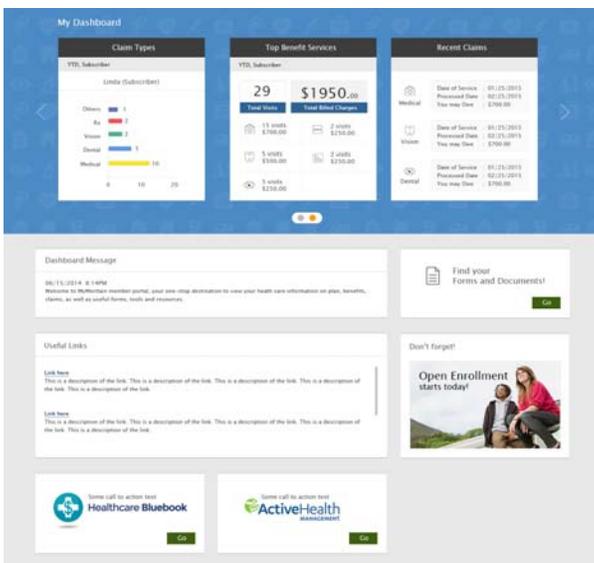
Logging Out

Click on *Logout* in the header to log out of Meritain Connect.



Viewing your Account Dashboard

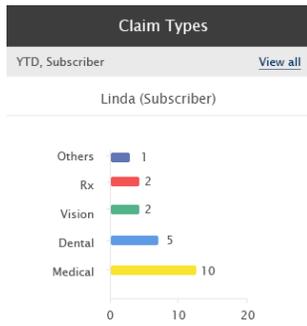
The Account Dashboard consists of four important components: *Infographics*, *Promo Tile*, *Dashboard Message* and the *Useful Links* tile. This section displays the Account Dashboard of a specific group / division.



The Account Infographics, Dashboard Message, Forms, Useful Links and Promo tile will be displayed depending on their availability.

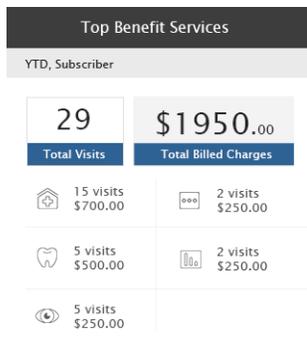
Account Infographics

The following Account Infographics are displayed for your group / division:



Claim Types:

Displays the number of claim types out of the total claims. Data shown corresponds to year to date.



Top Benefit Services:

This displays the number of total medical, dental, vision, Rx and FSA services, as well as billed charges. Data shown corresponds to the year to date.



Recent Claims:

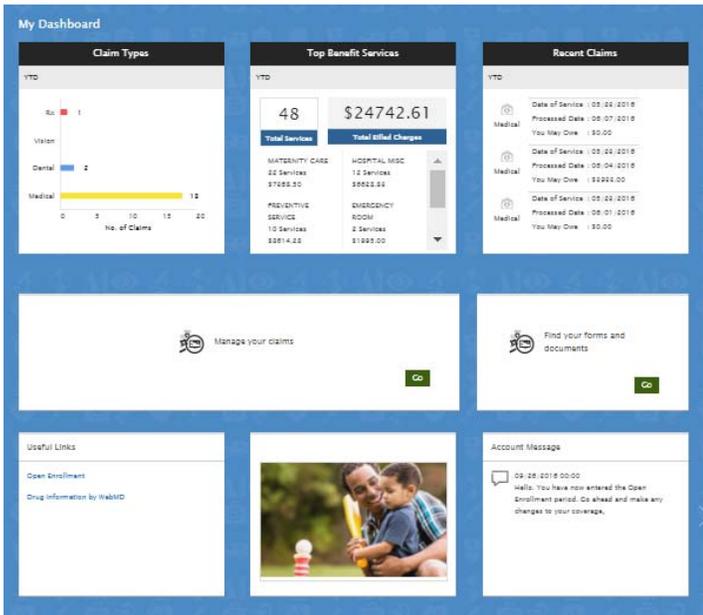
This displays information on the three latest claims. Data shown corresponds to the year to date.

Note: The dashboard data gets refreshed every 24 hours. A message, located to the right of the dashboard title, will inform you of your last login.

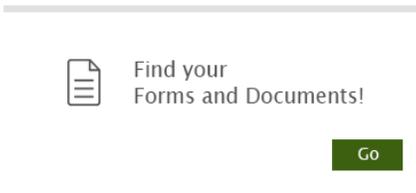
Dashboard Message

The Dashboard Message is the communication channel for important messages related to Meritain Connect. Make sure to pay attention to it whenever you access the portal. If no message is set, a default message will appear; *“Welcome to the Member Portal! You can view your benefits, order ID Cards and modify your account information.”*

Note: When the Dashboard Message exceeds four lines, it will display an excerpt with a *Read more* link that leads to a page with the full message.



Forms and Documents



The *Forms and Documents* tile provides quick access to the *Forms and Documents* library, if applicable for your group.

Useful Links

The *Useful Links* tile will provide you with a list of helpful links. When this tile expires, it will not appear in the account dashboard section.

Note: this tile will only be displayed when there's information available for it.

Useful Links

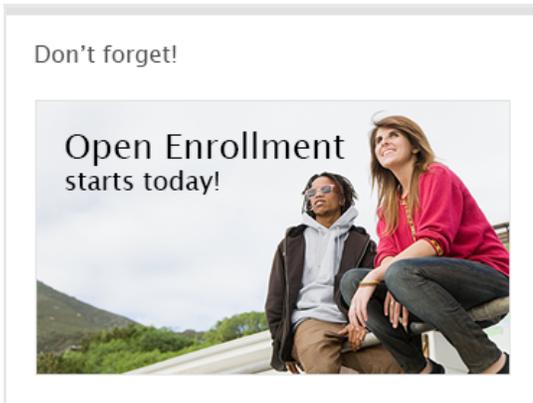
[Link here](#)

This is a description of the link. This is a description of the link.

[Link here](#)

This is a description of the link. This is a description of the link.

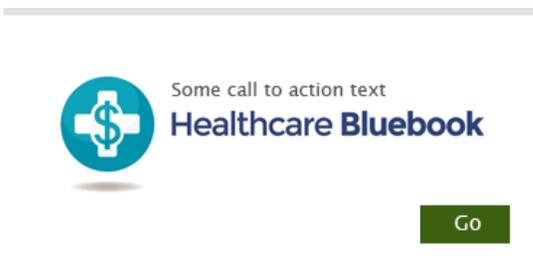
Promo Tile



The promo tile can display an image / link / text. When the promo tile expires, it will not appear in the account dashboard section.

Note: this tile will only be displayed when there's information available for it.

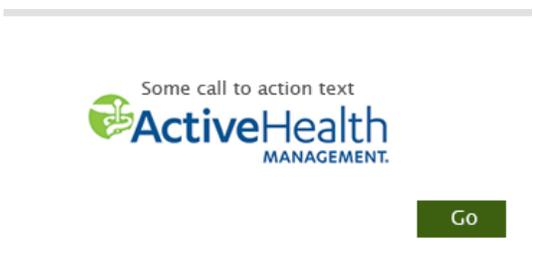
Healthcare Bluebook



If you have access to Healthcare Bluebook, the Healthcare Bluebook tile will be displayed, providing quick access to the Healthcare Bluebook tool.

Note: this tile will only be displayed if you have Healthcare Bluebook as part of your plan.

Active Health



If you have access to Active Health, the Active Health tile will be displayed, providing quick access to the Active Health tool.

Note: this tile will only be displayed if you have Active Health Management as part of your plan.

Account Settings

This section details the *Account Settings* section in Meritain Connect.

Updating your Account Information

By default, this is the landing page for the *Account Settings* section.

The page allows you to change information for your:

- Password.
- Current security question.
- Current email ID.

Each section in the *Update Account Information* page will have an [Edit](#) link. Click on [Edit](#) to edit the respective section.

Changing your Password

1. Click on the [Edit](#) link on the right corner of the sub-section. Additional fields will be displayed. The data in the current password in the field will be reset and the field made editable.
2. Enter your new password in the *New Password* field.

The password must meet password requirements—these are also displayed in the page:

- Password must contain 10–16 characters and at least one uppercase letter (A, B, C...), at least one lowercase letter (a, b, c...), at least one number (1, 2, 3...), and at least one of the following symbols: (#\$!%^@&*()=+-).
- When changing your password, the new password cannot be the same as your old or current password.

3. Confirm the new password by typing it again in the *Confirm New Password* field.
4. Enter your current password.
5. Click *Save Changes*. Your new password is now saved.

Changing your Security Question and Answer

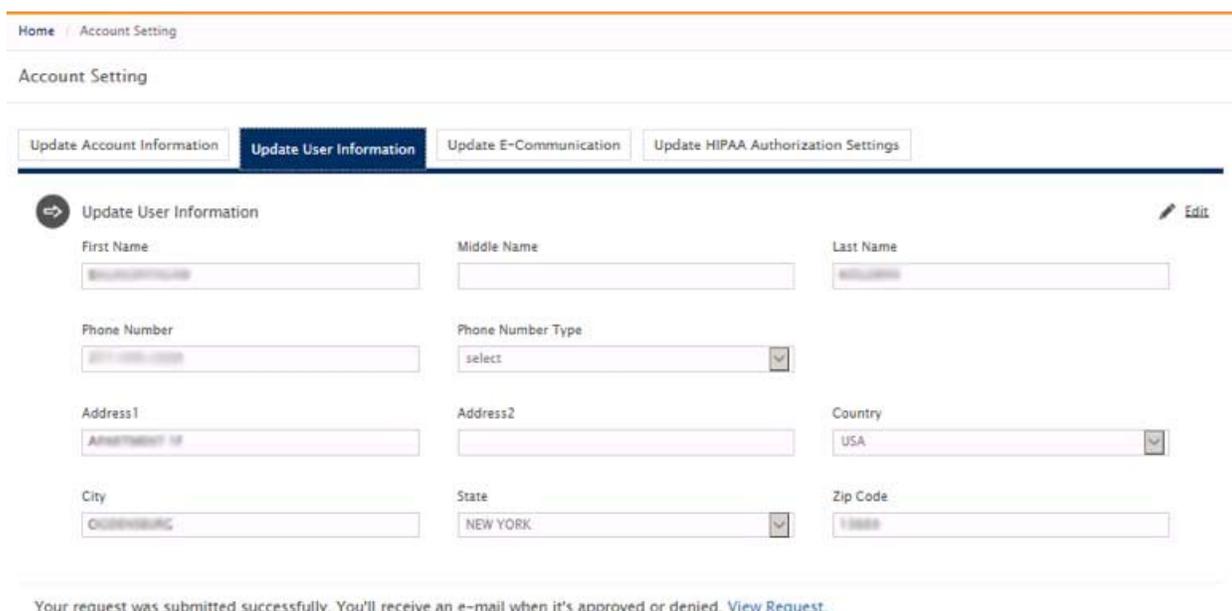
1. Click on the [Edit](#) link on the right corner of the sub-section. Additional fields will be displayed. The data in the current security question and answer will be reset and the fields made editable.
2. Select a new security question in the *Security Question* field.
3. Enter your current password.
4. Click *Save Changes*. Your new security question and answer are now saved.

Changing your Email

1. Click on the [Edit](#) link on the right corner of the sub-section. Additional fields will be displayed. The data in the current email will be reset and the field made editable.
2. Enter a new email ID in the *New Email ID* field.
3. Confirm your new email by typing it again in the *Confirm New Email ID* field.
4. Provide a reason for changing your email ID in the *Notes* field.
5. Enter your current password.
6. Click *Save Changes*. Your new email ID is now saved.

Updating your User Information

Click on the *Update User Information* tab. The *Update User Information* page will be displayed (not all users will have access to this.)



Home / Account Setting

Account Setting

Update Account Information Update User Information Update E-Communication Update HIPAA Authorization Settings

Update User Information Edit

First Name Middle Name Last Name

Phone Number Phone Number Type

Address1 Address2 Country

City State Zip Code

Your request was submitted successfully. You'll receive an e-mail when it's approved or denied. [View Request.](#)

This page allows you to change information for:

- First name.
- Middle name.
- Last name.
- Address 1.
- Address 2.
- City.
- State.
- Zip code.
- Phone number.
- Phone number type.

Changing your User Information

1. Click on the [Edit](#) link on the right corner of the section. Additional fields will be displayed. The data in the current fields will be reset and the fields made editable.
2. Enter your first name in the *First Name* field.
3. Enter your middle name (if you have one) in the *Middle Name* field.
4. Enter your last name in the *Last Name* field.
5. Enter your phone number in the *Phone Number* field and select the phone number type from the *Phone Number Type* drop-down.
6. Enter your address in the *Address (Line 1)* field. If applicable, enter your apartment number / floor in the *Address (Line 2)* field.
7. Enter your city in the *City* field. Select your state from the *State* drop-down. Enter your zip code in the corresponding field.
8. Click *Submit Changes*.
Upon successful submission of the request below, the below message shall appear:
Your request was submitted successfully. You'll receive an email when it is approved or denied.
If you click on *View Request*, a pop-up with the submitted request will be displayed.

Updating your Electronic Communication Preferences

Click on the *Update Electronic Communication Preferences* tab. The *Update Electronic Communication Preferences* page will be displayed.

Home / Account Setting

Account Setting

Update Account Information Update User Information **Update E-Communication** Update HIPAA Authorization Settings

 Update Electronic Communication Settings for Benefits

In order to receive benefit program communications quickly and efficiently, we'll use the email address you provide to deliver this information.

I Agree I Disagree

 Update Electronic Communication Settings for Claims

Our records indicate that you have agreed to receive electronic email notifications for processed claims.

To Withdraw consent:

To withdraw your consent to receiving email notifications for processed claims to , please click the "Withdraw" button below.

If you change your mind in the future, you can accept to receive email notifications for processed claims by clicking "I Agree" which can be accessed from the main dashboard by clicking "Update E-Communication Settings".

This page allows you to change information for:

- Electronic communication settings for benefits.
- Electronic communication settings for claims.

Updating your Electronic Communication Settings for Benefits

The follow message is displayed:

In order to receive benefit program communications quickly and efficiently, we'll use the email address you provide to deliver this information.

1. You can receive benefit program communications via email to the email address you provided by clicking the *I agree* button.
2. Click *Save changes*. Your settings are now saved and your selection will be displayed by showing button as selected. You'll be able to change to another option at any time.

Updating your Electronic Communication Settings for Claims

Note: this page will only be available to you if you are a subscriber.

If you have yet not agreed to receive electronic communications, the page will display the below information:

Our records indicate that you are not currently signed up to receive electronic notifications. In a continuous effort to improve service and preserve privacy, we would like to notify you via email when a claim has been processed and a new document is available to you. You can view the document on this website where your privacy is protected with SSL encryption.

Please note:

- *Your consent for this process can be withdrawn at any time. Once you accept, you will have the option to withdraw by clicking *Withdraw*, which can be accessed from the main dashboard by clicking the *Email Notification Preferences*.*
- *Electronic notifications will be sent to <Member Email ID>, which is the email address for your account.*
- *In order to access your documents on this site, you will need Adobe Acrobat Reader software installed on your computer. You can download and install a free copy at www.adobe.com.*
- *If you need to print a paper copy of your Explanation of Benefits (EOB), you will be able to print it directly from this website; however, you may also obtain a paper copy at no charge by emailing your request to our Service Center, or calling the Service Center with the number on the back of your ID Card.*
- *Documents on this site will not be mailed through the U.S. Postal Service.*
- *Notifications for claims for dependents over the age of 18 will not be sent.*

*To sign up for electronic notifications of when a claim is processed to <Member Email ID>, please click the *I Agree* button below.*

- You can accept receiving claim communications via email to the email address you provided by clicking the *I agree* button.
- Click *Save changes*.
- A pop-up message will display as follows:

Update Submitted!

Your electronic communication consent has been received.

You will now receive e-mail notifications for processed claims at xxx@xxxx.xxx.

After you close the pop-up, a different message will be displayed in the *Update your Electronic Communication Settings for Claims* section noting the current settings. You'll be able to withdraw this option at any time.

To withdraw your update:

- Click *Withdraw*.
- A pop-up message will display as follows:

Update Withdrawn!
Your electronic communication consent has been withdrawn.
You will no longer receive e-mail notifications for processed claims.
- After you close the pop-up, a different message will be displayed in the *Update your Electronic Communication Settings for Claims* section noting the current settings.

Updating your HIPAA Authorization Settings

Click on the *Update HIPAA Authorization Settings* tab. The *Update HIPAA Authorization Settings* page will be displayed.

Update Account Information Update User Information Update Electronic Communication Preferences **Update HIPAA Authorization Settings**

ⓘ HIPAA Authorization to Disclose Protected Health Information (Authorization to View Claims History and Claims in Process)

By completing this authorization process, you will be authorizing the release of your Protected Health Information, as defined in the Health Insurance Portability and Accountability Act of 1996, as amended ("HIPAA"), to a certain individual of your choice that are registered on the MyMeritain portal.

The individual to whom you grant access will have the ability to view information regarding your claims history and your claims in process on the myMeritain member portal. To begin the process, please click on the "Grant Access" link next to the corresponding individual below.

You may revoke a HIPAA Authorization at any time by clicking the "Remove Access" link next to the corresponding individual below and following the revocation process.

You may also change a HIPAA Authorization's expiration date at any time by clicking the "Change Date" link below. If you would like other family members to access your information, they must register on the portal first.

Any HIPAA Authorization granted on this website is limited to the release of information regarding your claims history and your claims in process on the myMeritain member portal.

Name : Linda Smith
Member ID : 123456789
Group ID : WM001
Division / Department : WM001.001
Date of Birth : 10/2/1978
Email : lindasmith@email.com

HIPAA Settings Table

Member ID	First Name	Last Name	Date of Birth	Relationship	Authorization to view my Protected Health Information	Expiration Date	Access
123456789	Jacob	Smith	7/16/1950	Spouse	No	12/1/2014	Grant Access
123456789	Anna	Smith	7/16/1950	Child	No	12/1/2014	
123456789	Peter	Smith	7/16/1950	Child	No	12/1/2014	
123456789	Sarah	Smith	7/16/1950	Child	No	12/1/2014	

This page will allow you to view your current HIPAA authorizations, as well as grant permission to other members of your choice. Note that any HIPAA authorization granted on this website is limited to the release of information regarding your claims history and your claims in process on Meritain Connect.

To view current permissions:

If you are a subscriber, when you log in, all the adult dependents who have registered on the portal shall be listed in a table like the one below:

Member ID	First Name	Last Name	Date of Birth	Relationship	Authorization to view my Protected Health Information	Expiration Date	Access
123456789	Jacob	Smith	7/16/1950	Spouse	No	12/1/2014	Edit Date Revoke Access
123456789	Anna	Smith	7/16/1950	Child	No	12/1/2014	
123456789	Peter	Smith	7/16/1950	Child	No	12/1/2014	
123456789	Sarah	Smith	7/16/1950	Child	No	12/1/2014	

Granting access to personal health information to another user

There are three steps in granting access to Personal Health Information to a member:

- Select the member to whom the permission shall be granted.

- Define the expiration date.
- Summary page.

Click on the *Grant Access* button next to the individual you want to grant access to. The authorization process will begin.

Step 1 - Authorization

1. The information for the selected individual you are authorizing will be displayed. The page will also display legal information. For each piece of legal information, you can agree to it by checking the checkbox labelled *Yes, I agree*. After you have agreed to the legal information, you will be able to go to the next step.
2. Click the *Continue* button on the bottom right to go to the next step. If you click *Cancel Request*, you'll be redirected to the homepage.

Step 2 – Review Information and select Expiration Date

The step 2 page will be displayed.

1. Choose the date on which you want the HIPAA authorization to expire by clicking on the date picker. This field is mandatory.

Note: You may not choose an expiration date that exceeds one (1) year from today's date. You may change this HIPAA authorization's expiration date at any time by clicking the *Edit Date* button on the *HIPAA Authorization to Disclose Protected Health Information* main page.

2. Click the *Continue* button on the bottom right to go to the next step. If you click *Cancel Request*, you'll be redirected to the homepage.

Step 3 – Request Submitted

The step 3 page will be displayed.

1. A message will be displayed, informing you that you have received an email with a link you have to click on to complete the authorization process. Once you click on the link provided in the email, the authorization will be complete.

Note the option to confirm the authorization will expire in 15 days.

Once the process is finished, next to the individual whom you granted authorization, two buttons will appear to allow you to edit the date or revoke access at any given time. See reference below:

Member ID	First Name	Last Name	Date of Birth	Relationship	Authorization to view my Protected Health Information	Expiration Date	Access
123456789	Jacob	Smith	7/16/1950	Spouse	No	12/1/2014	Edit Date Revoke Access
123456789	Anna	Smith	7/16/1950	Child	No	12/1/2014	
123456789	Peter	Smith	7/16/1950	Child	No	12/1/2014	
123456789	Sarah	Smith	7/16/1950	Child	No	12/1/2014	

Revoking access to personal health information to another user

1. Click on the *Revoke Access* button in the *Access* column in the user's row.
2. A confirmation page will be displayed with the message *Are you sure you want revoke the access?* Click *Yes* to confirm. The access revoke shall be made effective immediately.

Editing the Date for a HIPAA authorization

1. Click on the *Edit Date* button in the *Access* column in the user's row. You'll be redirected to the Edit Date Process.

Step 1 – Select Expiration Date

2. Enter the expiration date in the *Expiration Date* field. You may enter it directly or use the calendar pop-up to choose it.
3. Only after you have chosen an expiration date, the *Submit* button will be enabled. Click *Continue* to move to the next step. If you click *Cancel Request*, the request will be canceled and you'll be redirected to the *Update Account Information* tab.

Step 2 – Request Submitted

1. A message will be displayed informing you that you have received an email with a link you have to click on to complete the authorization process. Once you click on the link provided in the email, the authorization will be complete.
Note: the option to confirm the authorization will expire in 15 days.

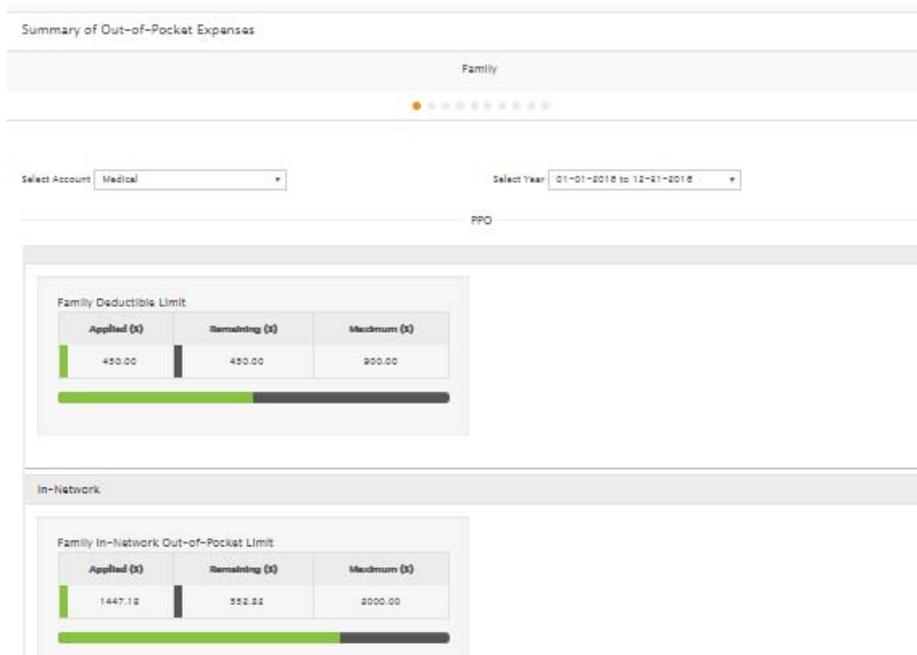
Plan

This section details the *Plan* section of Meritain Connect.

Summary of Out-of-Pocket Expenses

The *Summary of Out-of-Pocket Expenses* section displays the deductible and out-of-pocket information at a family (if applicable) and individual (if applicable) level of the provider networks to which you / your family have access to.

1. Click on *Plan* in the *Header* menu. A drop-down menu will open. Click on *Summary of Out of Pocket Expenses*. The Summary of Out-of-Pocket Expenses will open.



If you are a subscriber:

- The first page you'll see will display the deductible, out-of-pocket and other benefit limits information of your family, if applicable.

Note: If there is only one member in the family, there should be no display of family-level accumulators.

- The subsequent pages, which can be navigated using the *previous* / *next* arrows, will display the deductible, out-of-pocket and other benefit limits information of the member(s).

If you are a dependent:

- The first page you'll see will display your name, and your out-of-pocket information will be available below. You will only be able to see your individual deductible, out-of-pocket and other benefit limits information.

Viewing the information for Summary and Out-of-Pocket Expense:

1. Click on the *Select Year* drop-down to choose the period for which you want to view information. You can select only one benefit period at a time.
2. Click on the *Select Account Type* drop-down to choose the type of account you want to view:
 - When *Medical* is selected, out-of-pocket and deductible information on the medical plan shall be displayed.
 - When *Dental* is selected, out-of-pocket and deductible information on the medical plan shall be displayed.
 - When *Other Benefits* is selected, service limits on other benefits, like Chiropractic, shall be displayed.

FSA (Flexible Spending Account)

This section details the FSA section of Meritain Connect. Click on *Plan* in the top menu and select FSA. The FSA page will be displayed.

The first tab of the dropdown will be named after the FSA type you selected.

Flexible Spending Account
Lorem ipsum dolor sit amet

Select Account Type: Limited FSA | Select Year: 01/15/2014 to 02/15/2015

Limited FSA

Balance
\$400.00

Annual Election: \$ 400.00 | Prior Year Carryover: \$ 200.00

Total Funds	\$ 900.00
Deposits to Date	\$ 300.00
Claims Submitted	\$ 250.00
Claims Paid	\$ 200.00

FSA Terms	
Health FSA	\$600.00
Maximum FSA Carryover Amount	\$0.00
Maximum FSA Carryover Amount	0
Health & DCAP Runout Period	90
Debit Card	Yes
Direct Deposit	Yes
Next Scheduled Check Processing Date	5-21-2014
Order of Payment	1. FSA 2. HRA

Auto Crossover: ON

Auto Crossover allows you to automatically make payments to claims using available funds from your flexible spending accounts.

i Auto Crossover will be activated in Limited FSA as well.

Account Register | FSA Reimbursements

The FSA section displays the summary of available and used dollars in your FSA. This information is only available for subscribers. If you are a spouse or dependent, you will not have access to this section.

Note: if you have access to PowerPlus, a hyperlink with SSO will be displayed, which upon clicking will redirect you to the PowerPlus portal, where you'll be able to view your FSA information.

Selecting FSA type and benefit year

- Click on the *Select Account Type* drop-down to choose the type of FSA you want to view. Options can include *Health FSA*, *Limited FSA*, *DCAP FSA* and *Other Eligible Premium*. However, note you can be enrolled in either a Health FSA or a Limited FSA.

Select Account Type

- Once you select the *Account Type*, the *Select Year* drop-down will be refreshed and display the corresponding years for which an account was held of that type. Click on the *Select Year* dropdown to choose the benefit period for which you want to view the applicable FSA information.

Select Year

Note: When retrieving account information, the system will do so for the current year and prior year only. If an account was held among two different groups over this time period, the information from both groups will appear.

Viewing your FSA information

- The FSA information will be displayed in an dropdown format. Use the  icon to open a section and the  icon to close it. By default, the *Overview* section for Health FSA will be displayed.

Overview

Open the *Overview* section to view information on your FSA balance and terms.

Select Account Type: Select Year:

Limited FSA

Balance
\$400.00

Annual Election: \$ 400.00 Prior Year Carryover: \$ 200.00

Total Funds	\$ 900.00
Deposits to Date	\$ 300.00
Claims Submitted	\$ 250.00
Claims Paid	\$ 200.00

FSA Terms	
Health FSA	\$600.00
Maximum FSA Carryover Amount	\$0.00
Maximum FSA Carryover Amount	0
Health & DCAP Runout Period	90
Debit Card	Yes
Direct Deposit	Yes
Next Scheduled Check Processing Date	5-21-2014
Order of Payment	1. FSA 2. HRA

Auto Crossover ON

Auto Crossover allows you to automatically make payments to claims using available funds from your flexible spending accounts.

i Auto Crossover will be activated in Limited FSA as well.

Account Register

FSA Reimbursements

→ Use the ON and OFF buttons to activate or deactivate Auto Crossover, if applicable.

Account Register

Account Register displays information on your FSA claims.

Click on the **+** icon to the right of the Account Register. The *Account Register* section will open.

Transaction Type	Processed Date	Contribution	Disbursement Amount	FSA Claim ID	Medical Claim ID	Payment Status
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	Process
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	In Proce
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	Process
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	In Proce

Export



You can export the table as a PDF, XLS or print it.

Use the up and down arrows to sort column

* Your claim payment can be: pending / paid / denied / verified

FSA Reimbursements

Details for Medical Claim ID 2559718

HRA Details	
Group ID	12345
Patient Name	Linda Smith
Service from Date	DD/MM/YY
Service To Date	DD/MM/YY
Billed Charges	\$0.00
Paid By Plan	\$0.00
You May Owe	\$0.00
Comments	This is a Comment.

[Claim Details](#)

Click on the HRA claim ID link to view details for the HRA claim.

Click on the medical claim ID link to view details for the HRA claim.

Details for Medical Claim ID 2559718

HRA Details	
Group ID	12345
Patient Name	Linda Smith
Service from Date	DD/MM/YY
Service To Date	DD/MM/YY
Billed Charges	\$0.00
Paid By Plan	\$0.00
You May Owe	\$0.00
Comments	This is a Comment.

[Claim Details](#)

Processed Date:

- For in-process claims, this shall be the date when the CDHP claim was received and a CDHP claim number was generated.
- For processed claims, this shall be the date when the payment was made.
- For denied claims, this shall be the date when the claim processing was completed.
- For claims contribution, this shall be the date when the money was credited to the CDHP account.

FSA Claim ID: this displays a hyperlink ID, which upon clicking opens the FSA claim information in a pop-up window, as follows.

Medical Claim ID: this displays a hyperlink ID, which upon clicking opens the medical Claim information in a pop-up window, as follows.

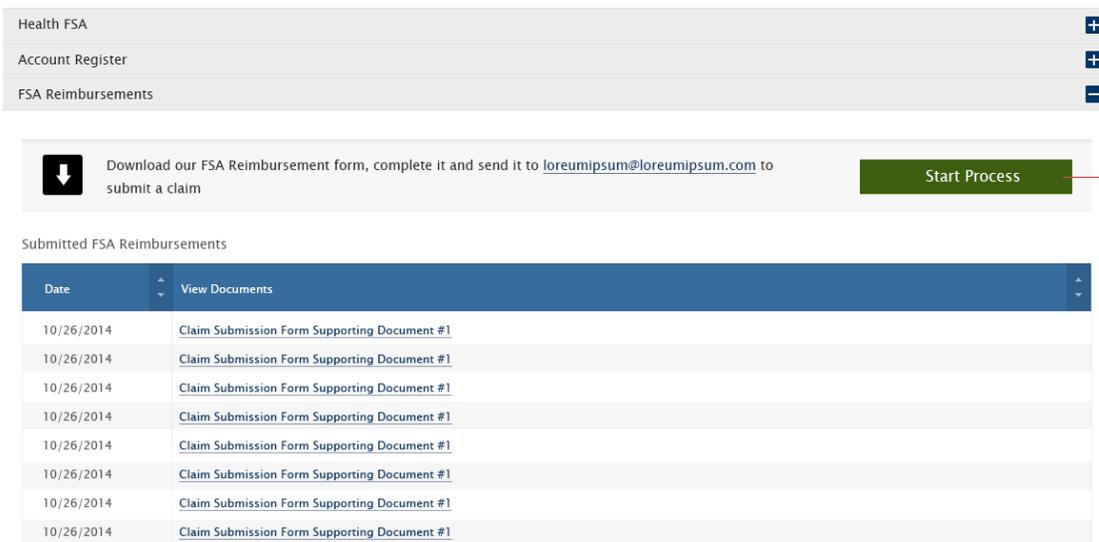
Note: The table rows are ordered by latest processed date at the top of the table. You can click on the arrows in the table header titles to sort by a different parameter. You can also export the table as a PDF or Excel / Print. These options will not be available if you are using a smartphone or tablet to navigate the site.

Use  the up and down arrows to the side of each column label to sort the entries.

Use  |  the options below the table to export or print it.

FSA Reimbursement

Click on the  icon to the right of *FSA Reimbursements*. The *FSA Reimbursement* section will open. The *FSA Reimbursements* section allows you to submit FSA claims for reimbursements and displays the historical data in a table format.



Health FSA 

Account Register 

FSA Reimbursements 

 Download our FSA Reimbursement form, complete it and send it to loreumipsum@loreumipsum.com to submit a claim 

Submitted FSA Reimbursements

Date	View Documents
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1
10/26/2014	Claim Submission Form Supporting Document #1

Click on Start Process to initiate the FSA Claim Submission process

Note: this section will not be available if you are accessing Meritain Connect from a tablet or smartphone.

FSA Claim Submission Process

Click on *Start Process* to initiate the claim submission process.

Step 1: FSA Reimbursement Form Download

Download the FSA Reimbursement Form and complete it. Click *Continue* to go to the next step.

Step 2

After completing it, upload the FSA Reimbursement Form. Add other supporting documents if you have any. Click *Submit*.

Step 3:

You have completed the process. You'll be provided with a link to check the submitted claim, as well as the claim number.

HRA (Health Reimbursement Account)

This section details the HRA section of Meritain Connect.

Click on *Plan* in the top menu and select *HRA*. The *HRA* page will be displayed.

The first tab of the dropdown will be named after the HRA type.

Select Account Type: Health HRA

Select Year: 01/15/2014 - 02/15/2015

Health HRA

Balance \$700.00

Rollover Funds: \$ 500.00 Funds Deposited: \$ 400.00

Total Funds: \$ 900.00

Funds Used: \$ 200.00

Bridge Amount Balance: \$80 Bridge Amount Applied: \$20

Bridge Amount: \$ 100.00

HRA Terms	
Covered Services	Medical
Debit Card	Yes
Direct Deposit	Yes
Order of Payment	1. FSA 2. HRA
Outstanding Overpayment	\$100

Auto Crossover: ON

Auto Crossover allows you to automatically make payments to claims using available funds from your flexible spending accounts.

Auto Crossover will be activated in Limited FSA as well.

Account Register

HRA Reimbursements

The **HRA** section displays the summary of available and used dollars in your HRA.

Account Register

The *Account Register* displays information on your HRA claims.

Click on the  icon to the right of *Account Register*. The *Account Register* section will open.

Health HRA
Account Register

HRA Claims

Transaction Type	Processed Date	Contribution	Disbursement Amount	HRA Claim ID	Medical Claim ID	Payment Status	Balance
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	Processed	\$0.00
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	In Process	\$0.00
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	Processed	\$0.00
Debit Card	10/26/2014	-	\$259.80	2559718	2559718	In Process	\$0.00

* Your claim payment can be: pending / paid / denied / verified

HRA Reimbursements

You can export the table as a PDF, XLS or print it.

Use the up and down arrows to sort column data.

Click on the HRA claim ID link to view details for the HRA claim.

Details for Medical Claim ID 2559718

HRA Details
Group ID
Patient Name
Service from Date
Service To Date
Billed Charges
Paid By Plan
You May Owe
Comments

Click on the medical claim ID link to view details for the HRA claim.

Details for Medical Claim ID 2559718

HRA Details
Group ID
Patient Name
Service from Date
Service To Date
Billed Charges
Paid By Plan
You May Owe
Comments

Use  the up and down arrows to the side of each column label to sort the entries.

Use  the options below the table to export or print it.

Processed Date:

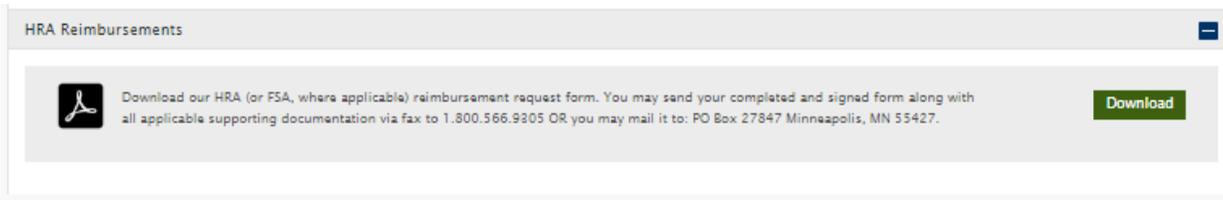
- For **in-process** claims, this shall be the date when the CDHP claim was received and a CDHP claim number was generated.
- For **processed** claims, this shall be the date when the payment was made.
- For **denied** claims, this shall be the date when the claim processing was completed.
- For **claim contributions**, this shall be the date when the money was credited to the CDHP account.

HRA Claim ID: this displays a hyperlink ID, which upon clicking opens the HRA claim information in a pop-up window, as follows.

Medical Claim ID: this displays a hyperlink ID, which upon clicking opens the medical claim information in a pop-up window, as follows.

HRA Reimbursement

Click on the  icon to the right of *HRA Reimbursements*. The *HRA Reimbursement* section will open.



The *HRA Reimbursements* section will allow you to download the HRA Claims Submission Form to submit your claims.

- ➔ Download the HRA Reimbursement Form, complete it and send it to the details provided to submit a claim.

Prescription Plan

This section details the *Prescription Plan* section of Meritain Connect.

Click on *Plan* in the top menu and select *Prescription Plan*. The *Prescription Plan* page will be displayed.

Prescription Plan

Your pharmacy benefits are not administered by Meritain Health. Please contact your pharmacy benefits administrator directly.

[4D PHARMACY MGMT SYS INC](#)

The *Prescription Plan* page will display the list of prescription plans to which you are enrolled.

- ➔ Click on the hyperlink of each prescription plan to access the site.

Plan Documents

This section details the *Plan Documents* section of Meritain Connect.

Click on *Plan* in the top menu and select *Plan Documents*. The *Plan Documents* page will be displayed.

Health HRA							
Account Register							
HRA Claims							
Transaction Type	Processed Date	Contribution	Disbursement Amount	HRA Claim ID	Medical Claim ID	Payment Status	Balance
Debit Card	10/26/2014	-	\$259.80	201410260001	201410260001	Processed	\$0.00
Debit Card	10/26/2014	-	\$259.80	201410260002	201410260002	In Process	\$0.00
Debit Card	10/26/2014	-	\$259.80	201410260003	201410260003	Processed	\$0.00
Debit Card	10/26/2014	-	\$259.80	201410260004	201410260004	In Process	\$0.00

* Your claim payment can be: pending / paid / denied / verified

The *Plan Documents* section displays a list of the plan documents associated with the current medical, dental, vision and / or Rx plans in which you are currently enrolled, as well as the historical data related to old plans.

- If you are a subscriber, you'll be able to see information related to the plans you and your dependents are/were enrolled in.
- If you are a dependent, you will only be able to see information related to the plan you are/were enrolled in.

Note: for fully insured groups, the Summary of Benefits and Coverage, Schedule of Benefits, and Group Certificate of Coverage will be displayed in the plan document sections.

Coverage Overview

This section details the *Coverage Overview* section of Meritain Connect.

Click on *Plan* in the top menu and select *Coverage Overview*. The *Coverage Overview* page will be displayed.

Subscriber Information			
Member ID	4400001234	First Name	Daniel W
Group ID	10000	Last Name	Barnes
Division ID	10000001	Date of birth	01-01-1977
Hire Date	04/01/2002	Gender	Male
Covered From	01/01/2005	Address 1	2100 GARDEN COURT
Term Data		Address 2	
Status	Active	City	HOUSTON
		State / Province	TX
		ZIP Code	77001

Dependent Information			

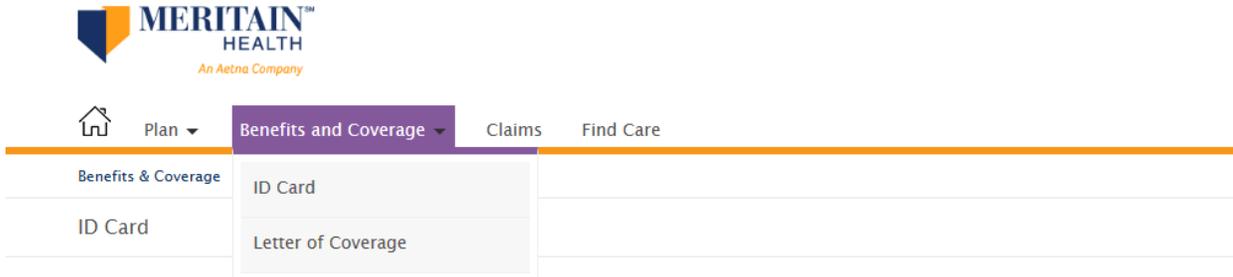
Coverage Information			

The *Coverage Overview* section will display your personal details as well as your coverage information.

- If you are a subscriber, you'll be able to see information related to you, as well as to your dependents—if any.
- If you are a dependent, you will only be able to see your personal details and coverage information.

Benefits and Coverage

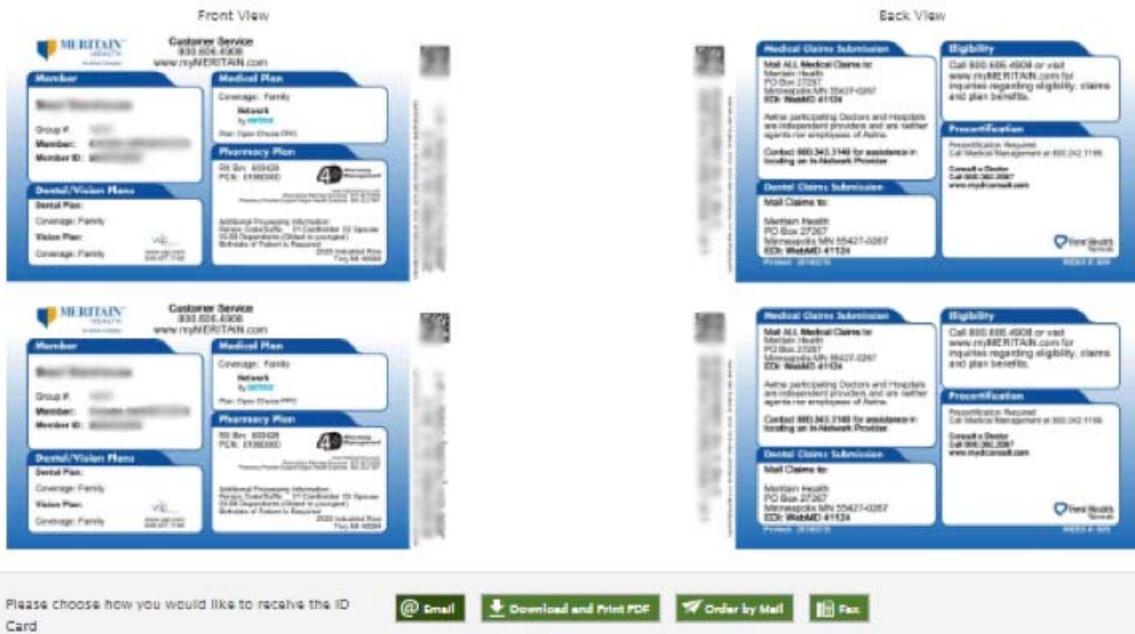
This section details the *Benefits and Coverage* section of Meritain Connect.



ID Card

This section details the *ID Card* section of Meritain Connect, if applicable.

Click on *Benefits and Coverage* in the top menu and select *ID Card*. The *ID Card* page will be displayed.



The front and back of your ID Card will be displayed.

Email your ID Card

1. Click on the *Email* button. Your email address will be auto-populated.
2. Enter your email address if it's something different than what appears.
3. Read and accept the legal disclaimer.
4. Click the *Submit* button.

5. A pop-up message will be displayed, asking you to confirm sending the ID Card to the submitted email. Click *No* to cancel and *Yes* to confirm.
After clicking *Ok*, a message will appear in the *Mail* section to show that your request was successfully submitted:
Thank you, <Member Name>.
Your ID Card was successfully sent to <Email ID>.

Print PDF

1. Click on the *Download ID Card* button to download your ID Card.

Mail your ID Card

1. Click on the *Order by Mail* button. The mail address to which the ID Card will be sent will be displayed.
2. Read and accept the legal disclaimer.
3. Click the *Submit* button.
4. A confirmation window will pop up with the message: *Are you sure you want to send your ID Card to <Address>.* Click *Ok* to submit the request or *Cancel* to go back to the *Order by Mail* section.
After clicking *Ok*, a message will appear in the *Order by Mail* section to show your request has been successfully submitted:
Thank you, <Member Name>.
Your ID Card will be mailed within 7-10 business days

Fax your ID Card

1. Click on the *Fax* button.
2. Enter the number to which you want your ID Card to be faxed in the *Enter Fax Number* field.
3. Read and accept the legal disclaimer.
4. Click the *Submit* button.
5. A confirmation window will pop up with the message: *Are you sure you want to send your ID Card to <Fax Number>.* Click *Ok* to submit the request or *Cancel* to go back to the *Fax ID Card* section.
5. After clicking *Ok*, a message shall appear in the *Fax ID Card* section to show your request was successfully submitted:
Thank you, <Member Name>.
Your ID Card was successfully sent to <Fax Number

Letter of Coverage

This section details the *Letter of Coverage* section of Meritain Connect.

Click on *Benefits and Coverage* in the top menu and select *Letter of Coverage*. The *Letter of Coverage* page will be displayed.

Letter of Coverage

Letter of Coverage

Please choose how you would like to receive the Letter of Coverage: @ Email Download and Print PDF Order by Mail Fax

Email Letter of Coverage
Enter Email Address*
GANESH.MVEKANANDANT22@MERIT

Disclaimer
⚠ This information is being provided to you as an informational tool and is not a guarantee of benefits. All plan terms and conditions must be met to continue plan eligibility.

I Accept*

Cancel Submit

Your letter of coverage will be displayed.

If you do not have a letter of coverage, the *letter of coverage* page will be disabled.

Plan Benefits and Coverage Claims Tools and Resources Find Care

Benefits & Coverage / Letter of Coverage

Letter of Coverage

Info : - Unable to find detail and instruction pages for 9004821278.

Letter of Coverage

Select a method by which you want to receive your letter of coverage @ Email Fax Download and Print PDF Order by Mail

Email Letter of Coverage
Enter Email Address*

Disclaimer
⚠ This request will only generate Letter of Coverage for your healthcare products. Contact your other providers to access any non-healthcare Letter of Coverage. This information is being provided to you as an informational tool and is not a guarantee of benefits. All plan terms and conditions must be met to continue Plan eligibility.

I Accept*

Cancel Submit

Email your Letter of Coverage

1. Click on the *Email* button. Your email address will be auto-populated.
2. Enter your email address only if it's different than what appears.
3. Read and accept the legal disclaimer.
4. Click the *Submit* button.
5. A pop-up message will be displayed, asking you to confirm sending the letter of coverage to the submitted email. Click *No* to cancel and *Yes* to confirm.

After clicking *Ok*, a message will appear in the *Mail* section to show your request was successfully submitted:

Thank you, <Member Name>.

Your Letter of Coverage was successfully sent to <Email ID>

Print PDF

1. Click on the *Download Letter of Coverage* button to download your letter of coverage.

Mail your Letter of Coverage

Please choose how you would like to receive the Letter of Coverage:

Order by Mail

Mailing Address
12345 Main Street
PO Box 1234
City, State
12345-6789

Disclaimer
 This information is being provided to you as an informational tool and is not a guarantee of benefits. All plan terms and conditions must be met to continue plan eligibility.

I Accept

1. Click on the *Order by Mail* button. The mail address to which the letter of coverage will be sent will be displayed.
2. Read and accept the legal disclaimer.
3. Click the *Submit* button.
4. A confirmation window will pop up with the message: *Are you sure you want to send your Letter of Coverage to <Address>*. Click *Ok* to submit the request or *Cancel* to go back to the *Order by Mail* section.

After clicking *Ok*, a message will appear in the *Order by Mail* section to show your request was successfully submitted:

Thank you, <Member Name>.

Your ID card will be mailed within 7-10 business days

Fax your Letter of Coverage

Please choose how you would like to receive the Letter of Coverage:

Fax Letter of Coverage
Fax Number*

Disclaimer
 This information is being provided to you as an informational tool and is not a guarantee of benefits. All plan terms and conditions must be met to continue plan eligibility.

I Accept*

1. Click on the *Fax* button.
2. Enter the number to which you want your letter of coverage to be faxed in the *Enter Fax Number* field.
3. Read and accept the legal disclaimer.
4. Click the *Submit* button.
5. A confirmation window will pop up with the message: *Are you sure you want to send your Letter of Coverage to <Fax Number>*. Click *Ok* to submit the request or *Cancel* to go back to the *Fax Letter of Coverage* card section.
5. After clicking *Ok*, a message shall appear in the *Fax Letter of Coverage* section to show your request was successfully submitted:
Thank you, <Member Name>.
Your ID card was successfully sent to <Fax Number>

Primary Care Physician Election

This section details the *Primary Care Physician Election* section of Meritain Connect, if applicable.

Click on *Benefits and Coverage* in the top menu and select *Primary Care Physician Election* from the drop-down. The *Primary Care Physician Election* page will be displayed.

Primary Care Physician Election

Current Primary Care Physician Election

Member Name: [Redacted]

Member Type: Subscriber

Primary Care Physician Name: [Redacted] [Change PCP](#)

Updated By: [Redacted]

Start Date: 08/11/2016

Your medical plan requires you to choose a primary care physician. Your primary care physician will get to know you and help you better manage your health care needs. When selecting a new primary care physician or changing an existing one, you must choose a future effective date, within the next 60 days. If you have elected a primary care physician with a future effective date and wish to make changes, you must do so by calling customer service at 1.866.209.2929.

Frequently Asked Questions
If you have any doubts regarding this process, go through our list of [frequently asked questions](#).

Historical Primary Care Physician Election

Physician Name	Elected by	Start Date	End Date
[Redacted]		01/01/2015	08/11/2016

 For assistance in electing a primary care physician, please contact Meritain's Customer Service at 1.866.209.2929.

By default, you'll see PCP information for yourself. If you are a subscriber and have dependents, you'll be able to see their accounts by using the arrows by your name.

Current Primary Care Physician Election

Member Name: [Redacted]

Member Type: Subscriber

Primary Care Physician Name: [Redacted] [Change PCP](#)

Updated By: [Redacted]

Start Date: 08/11/2016

Your medical plan requires you to choose a primary care physician. Your primary care physician will get to know you and help you better manage your health care needs. When selecting a new primary care physician or changing an existing one, you must choose a future effective date, within the next 60 days. If you have elected a primary care physician with a future effective date and wish to make changes, you must do so by calling customer service at 1.866.209.2929.

Frequently Asked Questions
If you have any doubts regarding this process, go through our list of [frequently asked questions](#).

Historical Primary Care Physician Election

Physician Name	Elected by	Start Date	End Date
[Redacted]		01/01/2015	08/11/2016

 For assistance in electing a primary care physician, please contact Meritain's Customer Service at 1.866.209.2929.

This section allows you to:

- ➔ View *Existing PCP Information* and *Historical PCP information*.
- ➔ Elect a PCP.

Viewing Existing Primary Care Physician (PCP) Information

Current Primary Care Physician Election

Member Name	Elizabeth Gonzalez
Member Type	Adult Dependent
Primary Care Physician Name	David Gonzalez Change PCP
Updated By	
Start Date	01/07/2015

1. By default, the *Primary Care Physician Election* page will display a table with your current PCP information.

Viewing Historical Primary Care Physician Information

Historical Primary Care Physician Election

Physician Name	Elected by	Start Date	End Date
David Gonzalez		01/01/2015	01/06/2015

1. Click on the *Historic Primary Care Physician Election* tab. A table with your historic PCP information will be displayed.

Electing or changing a Primary Care Physician

- If you are a subscriber, you can elect a PCP for yourself, as well as the child dependents of your family. You can also elect PCP for an adult dependent if he/she grants you permission to do so.
 - By default, if you are an adult dependent, you'll elect PCP for yourself. You can also elect a PCP for an individual (subscriber or any dependent) if he/she grants you permission to do so.
 - You should be able to add or change your PCP as soon as the member request is processed in the system.
 - You can only choose one PCP at a time. And use a future date to elect a future PCP.
2. Click the *Add New* button in the *Primary Care Physician Election* row. You'll be redirected to the *Primary Care Physician Election* process. A search option will be displayed.

Step 1: Search for and elect a PCP

1. Complete the search parameter fields to search for a PCP and click *Search*. Click on the (-) to find additional search fields.
2. A table will be displayed with the results.

Search for a Primary Care Physician
Click on search to view all providers or enter specific information and click to filter your results.

Search for a Primary Care Physician

I am looking for

First Name Last Name Who Practices

Zip Code

Additional Search Options

Reset Search

First Name	Last Name	Address	Specialties	Gender	Languages Spoken	Accepting New Patients	Select
DOE	HAPPY	PO BOX 10, APPLE VALLEY, MN, 55124	FAMILY MEDICINE	F	ENGLISH	Yes	▶
DON	ALLRED	1756 W PARK AVE, RIVERTON, UT, 84065	FAMILY MEDICINE	M	ENGLISH	Yes	▶
DON	ALLRED	1756 W PARK AVE, RIVERTON, UT, 84065	FAMILY MEDICINE	M	ENGLISH	Yes	▶
MARK	BAXTER	2121 N 1700 W, LAYTON, UT, 84041-8802	FAMILY MEDICINE	M	ENGLISH-SPANISH-PORTUGUESE-GERMAN-FRENCH-GREEK-NAVAJO-CAT-DOG-ENGLISH-HEBREW-LATIN-ITALIAN-WIFE-BLONDE	Yes	▶

Showing 1-4 of 4 results

< 1 >

Use  the up and down arrows to the side of each column label to sort the entries.

Use   the options below the table to export or print it.

3. Select a PCP by clicking on the button by the name.

Notes:

- You can only select a PCP that is currently accepting new patients.
- Only 15 rows will be loaded each time. Navigate to the next 15 by going to the next page.
- Only 15 rows will be displayed at one time in the table. To go to another row, navigate using pagination.
- Only after you have chosen a PCP, the *Continue* button will be enabled. Click *Continue* to move on to the next step. Clicking the *Cancel* button at any time during this process will prompt you to start from the beginning.

Step 2: Select Start Date

A message explaining the rules for the start date will be displayed.

- ➔ The start date must be a future date but cannot be more than 60 days in the future.
- ➔ Elections with a future start date can only be changed by calling customer service.
- ➔ You can only change your PCP three times during a 12-month period.

4. Enter the start date in the *Start Date* field. You may enter it directly or use the calendar pop-up to choose it.

- Only after you have chosen an start date, will the *Continue* button be enabled. Click *Continue* to move to the next step.

Step 3: Summary Page and Submit

- A summary of the elected PCP and start date will be shown. You can print it by clicking on the *Print* button.
- Click *Submit* to submit the request.
- After you click *Submit*, the process will be completed. A message will be displayed to communicate the process was successful, and remind you of the amount of elections you have left. Click *Go back to PCP Election* to go back to that screen.

Primary Care Physician Referral

This section details the *Primary Care Physician Referral* section of Meritain Connect.

Click on *Benefits and Coverage* in the top menu and select the *Primary Care Physician Referral* section. The *Primary Care Physician Referral* section page will be displayed.

Viewing your Primary Care Physician Referrals

By default, a table showing your historic PCP referrals will be displayed.

Referral #	Referrer	Referee	Patient Name	Referral Start	Referral End	Visits
1001	1001	1001	1001	10/1/2015	10/1/2015	1
1002	1001	1001	1001	10/1/2015	10/1/2015	1
1003	1001	1001	1001	10/1/2015	10/1/2015	1
1004	1001	1001	1001	10/1/2015	10/1/2015	1
1005	1001	1001	1001	10/1/2015	10/1/2015	1
1006	1001	1001	1001	10/1/2015	10/1/2015	1
1007	1001	1001	1001	10/1/2015	10/1/2015	1
1008	1001	1001	1001	10/1/2015	10/1/2015	1
1009	1001	1001	1001	10/1/2015	10/1/2015	1
1010	1001	1001	1001	10/1/2015	10/1/2015	1
1011	1001	1001	1001	10/1/2015	10/1/2015	1
1012	1001	1001	1001	10/1/2015	10/1/2015	1

Use  the up and down arrows to the side of each column label to sort the entries.

Use   the options below the table to export or print it.

Claims

This section details the *Claims* section of Meritain Connect.

Click on *Claims* in the top menu. The *Claims Summary* page will be displayed.

Claims Search

Claims Summary

DAVID DRISKO

Search

Claim Type <input checked="" type="checkbox"/> Medical <input checked="" type="checkbox"/> Dental <input checked="" type="checkbox"/> Vision <input checked="" type="checkbox"/> Rx	Paid by HRA <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Show All	Provider Name <input type="text"/> Claim Number <input type="text"/>	Date of Service From <input type="text" value="mm/dd/yyyy"/> <input type="calendar"/> To <input type="text" value="mm/dd/yyyy"/> <input type="calendar"/> Billed Charges (\$) <input type="text"/> You May Owe (\$) <input type="text"/>
--	--	---	---

Clear All Apply

Enter values for the claims you want to find. You can search by *Claim Type*, *Paid By*, *Status*, *Provider Name*, *Claim Number*, *Date of Service*, *Billed Charges* and *You May Owe*. Click *Apply*. The search box will close and the results will be displayed in the form of a table as the one below:

Click on the claim number or the detail arrow to access the *Detail* page for a particular claim.

Export Print

Claim Status	Claim Type	Provider Name	Date of Service From	Date of Service To	Claim Number	Billed Charges	Paid by HRA	You May Owe	Note	Details
In Process	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	Yes	TBD	1234	>
Processed	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	No	\$50.00	1234	>
In Process	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	Yes	\$75.00	1234	>
Processed	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	No	\$25.00	1234	>
In Process	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	Yes	TBD	1234	>
Processed	Rx	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	No	\$50.00	1234	>
In Process	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	Yes	\$75.00	1234	>
Processed	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	No	\$25.00	1234	>
Processed	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	Yes	TBD	1234	>
Processed	Medical	Meritain Health Inc	03/15/2015	03/15/2015	1234	\$258.00	No	\$75.00	1234	>

Showing 1-10 of 100 results

1 2 3

Use the up  and down arrows to the side of each column label to sort the entries.

Use  |  the options below the table to export or print it.

Claim Details

Click on a claim number hyperlink or the *Detail* arrow to access the *Claim Details* page for a particular claim. The *Claim Details* page will be displayed.

- The *Claim Details* information will be displayed in a dropdown format.
- Use the  icon to open a section and the  icon to close it. By default, the *Claim Details* section will be displayed.
- Use the  button to go back to the *Claim Summary* page.

[Back To Claims Summary](#)

[View EOB](#)

Claim Information

Group ID		Address 1	
Subscriber		Address 2	
Patient Name		City	
Patient Account Number		State / Province	
Provider Name		Zip Code	

Payment Information

You May Owe
30.00



* Exact amount owed may be different, see EOB for details

Processed Date	12/20/2015
Paid Date	12/24/2015
Paid Amount	\$50.54
Check Number	
Paid to	
Paid to Address1	
Paid to Address2	
Paid to City	
Paid to State	
Paid to Zip Code	

Benefit Information

Benefit	Date From	Date To	Secured	Excluded	Notes	Rate	Eligible	Co-pay	Coinsurance (%)	Paid Amount	You May Owe
HCR PREVENTIVE SERVICES	11/20/2015	11/20/2015	\$40.00	\$27.50	120	\$12.70	\$0.00	\$0.00	100	\$12.70	\$0.00
HCR PREVENTIVE SERVICES	11/20/2015	11/20/2015	\$20.02	\$5.98	120	\$24.07	\$0.00	\$0.00	100	\$24.07	\$0.00
OFFICE VISIT - PCP	11/20/2015	11/20/2015	\$25.57	\$22.50	120	\$61.77	\$0.00	\$00.00	100	\$61.77	\$20.00

Note Code	Description
120	Provider discount through Aetna Choice Point of Service II. Patient not responsible for this amount.

Payment Information

Payment Information displays information on your claim payment details.

Click on the **+** icon to the right of *Payment Information*. The *Payment Information* section will open.

Payment Information -

\$ **You May Owe**
0.00

Billed Charges \$427.00

* Exact amount owed may be different, see EOB for details

Processed Date	02/12/2014
Paid Date	02/18/2014
Paid Amount	\$212.45
Check Number	7967271
Paid to	XXXX
Paid to Address1	9978 214
Paid to Address2	
Paid to City	Wichita
Paid to State	KS
Paid to Zip Code	67208

Benefit Information -

Benefit Information

Benefit Information displays information on your claim benefits.

Click on the **+** icon to the right of *Benefit Information*. The *Benefit Information* section will open.

< Back to Claims Summary
View EOB

Claim Information +

Payment Information +

Benefit Information -

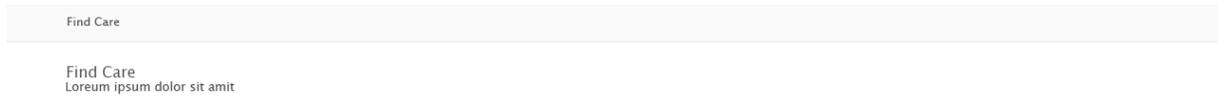
Benefit	Date From	Date To	Included	Excluded	Notes	Eligible	Deductible	Co -Pay	Co insurance%	Paid Amount	You May Owe
HCR Preventive Exam	10/26/2014	11/26/2014	\$147.53	\$147.53	1234	147.53	147.53	\$0.00	80%	\$110.4	\$0.00
	10/26/2014	11/26/2014	\$147.53	\$147.53	1234	147.53	147.53	\$0.00	80%	\$110.4	\$0.00
	10/26/2014	11/26/2014	\$147.53	\$147.53	1234	147.53	147.53	\$0.00	80%	\$110.4	\$0.00
	10/26/2014	11/26/2014	\$147.53	\$147.53	1234	147.53	147.53	\$0.00	80%	\$110.4	\$0.00

Note Code	Description
1234	Lorem ipsum dolor sit amet, consectetur adipiscing elit. Morbi sit amet tellus eget eros accumsan consectetur. Nulla at placerat orci. Lorem ipsum dolor sit amet, consectetur adipiscing elit.

Find Care

This section details the *Find Care* section of Meritain Connect.

Click on *Find Care* in the top menu. The *Find Care* page will be displayed.



Network	Network Type	Effective From
Medical 01	Medical	1/12/2012
Dental 01	Dental	1/12/2012
Vision 01	Vision	1/12/2012
PBM 01	PBM	1/12/2012

A table will be displayed showing a list of your available medical, dental, vision and PBM networks, as well as the date they became effective.

➔ Each network name is a hyperlink. You can click it to visit the network's website.

Tools and Resources

This section details the *Tools and Resources* section of Meritain Connect. There are three available sub-sections (if applicable):

- Forms & Other Documents
- Education
- Health Tools

Forms & Other Documents

Click on *Tools and Resources* in the top menu. A drop-down will open, showing the available sub-sections. Select *Forms & Other Documents*. The *Forms & Other Documents* page will open.

Click an item to open or download. Click a header to sort the list. You can also alternatively search by keyword.

Filter by Text:

Name	Date Published
No results	

Showing 0 to 0 of 0 entries

A table will be displayed, showing all available forms and documents.

- Use the search box to search by keyword.
- You can sort results by type, name and published date. Sort the table by clicking on the *Name* and *Date Published* fields.
- Click on *Name* to download a file.

Education

Click on *Tools and Resources* in the top menu. A drop-down will open, showing the available sub-sections. Select *Education*. The *Education* page will open.

Click an item to open or download. Click a header to sort the list. You can also alternatively search by keyword.

Filter by Text:

Name	Date Published
No results	

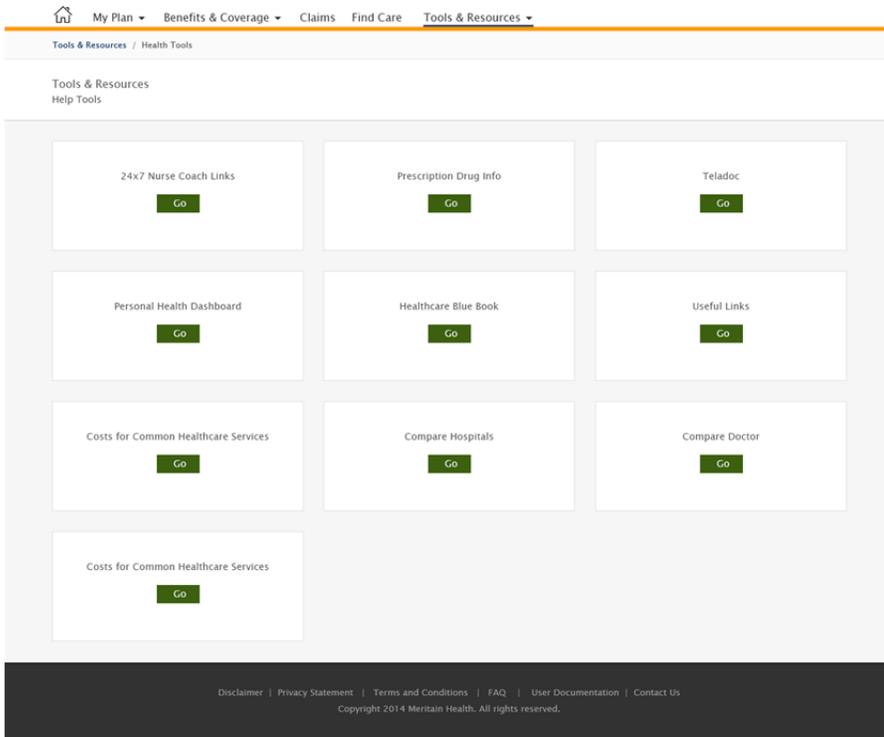
Showing 0 to 0 of 0 entries

A table will be displayed showing all available education documents / links.

- Use the search box to search by keyword.
- You can sort results by type, name and published date. Sort the table by clicking on the header arrows.
- Click on *Name* to download a file.

Health Tools

Click on *Tools and Resources* in the top menu. A drop-down will open, showing the available sub-sections. Select *Health Tools*. The *Health Tools* page will open.



Using the Footer Links

This section details the footer links available on Meritain Connect.



Disclaimer

Click on the *Disclaimer* link in the Meritain Connect footer to navigate to the *Disclaimer* page. Click on the *Print* option to print the page.

Disclaimer

Disclaimer Print 

Account Summary

Claim status is updated nightly. Once your claim has been reviewed and posted for payment, it will be registered in your online Account Summary. Posting for payment is inclusive of all claims subject to funding by an FSA, HRA, HSA, Traditional or Member Responsibility as applicable within the Member's Plan.

Coverage – Summary of Benefits, Well Child, Adult Preventive Care

Information is updated frequently to reflect any updates to your health plan. However, this summary is not intended for use as a legal document or guarantee of benefits. Validation of benefits is conducted at time of payment, based on the date of services incurred. Please refer to the Summary Plan Description for complete details regarding Members' benefits and eligibility.

Eligibility

Eligibility information is updated within forty-eight (48) hours of receipt of enrollment or change status materials by the Plan. Eligibility is subject to stipulation defined within the Plan, through the Summary Plan Description. Claim payment is contingent on the status of the Member's eligibility on the date of service incurred. Please refer to the Summary Plan Description for complete details regarding members' benefits and eligibility.

Resources

Channel vendors have been selected on good faith that their material is the most credible and reliable in the industry. All Content provided within this site or through a related Resource Link(i) is provided for informational purposes only, (ii) is not a substitute for professional medical advice, care, diagnosis or treatment, and (iii) is not designed to promote or endorse any medical practice, program or agenda or any medical tests, products or procedures. The site does not contain information about all diseases, nor does this site or Resource Link contain all information that may be relevant to a particular medical or health condition. Effective as of 05/01/2008, This disclaimer applies to all users and may change without notice.

Privacy Policy

Click on the *Privacy Policy* link in the Meritain Connect footer to navigate to the *Privacy Policy* page. Click on the *Print* option to print the page.

Privacy Policy Print 

Meritain Health, Inc., its affiliates, and subsidiaries ("Meritain Health") understands your concerns about privacy and we are committed to protecting your personal, financial, and health information. Be confident that Meritain Health takes this responsibility seriously and protects your information closely.

Meritain Health by definition is a Business Associate of Covered Entities under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). All of our business practices are in compliance with the requirements of a Business Associate of Covered Entities under our agreements as is required under HIPAA.

Protecting Your Information

Meritain Health has taken measures to ensure that all information received on our Web site (the "Site") is protected to the fullest extent possible from unauthorized access and use. At no time will Meritain Health share or sell your information to companies outside of our organization.

Meritain Health may, however, provide your information and that of other registered users to appropriately contracted third parties. This is done so that Meritain Health and those parties may perform the functions and/or services for which we were contracted. The third parties may only use or disclose the information that they receive from us for the specified purpose, as outlined in their contract.

Security

Meritain Health is committed to privacy protection and utilizes the most current security tools available to ensure the privacy and confidentiality of all registered users. An individual username and password protect each Meritain Health account so that only authorized users can access its features. In addition, all information is protected through secure socket layer (SSL) software, which encrypts the data to protect it during transmission. Meritain Health maintains this information in a secure, protected environment. Meritain Health's site is certified by VeriSign <http://www.verisign.com> as a secure site.

Terms and Conditions

Click on the *Terms and Conditions* link in the Meritain Connect footer to navigate to the *Terms and Conditions* page. Click on the *Print* option to print the page.

Meritain Health's member web site is a free service to registered users of <http://www.myMERITAIN.com>. PLEASE READ THE TERMS AND CONDITIONS CAREFULLY BEFORE USING THIS SITE.

The following terms and conditions ("Terms and Conditions") govern your use of this web site (the "Site"). The site is an on-line information and communication service offered to assist you as an employer of a plan administered by Meritain Health. By accessing, viewing, or using the information on the site, you signify that you understand and agree to these terms and conditions and that it is the legal equivalent of a signed written contract between you, Meritain Health, Inc., its affiliates, and subsidiaries ("Meritain Health"). If you do not agree to these terms and conditions, please exit this site immediately.

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FAQ

Click on *FAQ* to view the frequently answered questions. Each question is displayed in a dropdown. Clicking on the "+" will expand that particular question and you will be able to view the answer for the question:

- Click on the *Expand All* link to expand all questions.
- Click on the *Collapse All* link to collapse all questions.

[Expand All](#) | [Collapse All](#)

Claims & Accounts

How can I file a claim?

What if I have a question about how my claim was processed?

How can I verify all the claims paid for my family for the year?

How can I get a copy of an Explanation of Benefits (EOB) or an Explanation of Payment (EOP)?

I've already received my EOB, but my provider hasn't yet received payment. Why not?

I'm enrolled in a HealthDirect HSA plan. How can I check my account balance?

Manage my coverage

Can I cover my dependents under my plan?

How can I add a dependent to my coverage?

What proof do I need to provide that my child is a full-time student?

What if I or my dependents have other coverage?

How long will it take to receive my ID Card?

How can I order a replacement ID Card?

How can I change personal information that Meritain Health has on file, such as my name and address?

How can I get a Certificate of Creditable Coverage from Meritain Health for my next benefit plan?

Benefits

User Documentation

Click on *User Documentation* to view the list of user documents available. Click on the PDF icon to download the user documentation guide. You need an Adobe Reader to view the downloaded file.

Home Plan Benefits and Coverage Claims Tools and Resources Find Care

Help / User Documentation

User Documentation

Attached below, please find a copy of our comprehensive employer website user reference guide. This documentation will help you to use the employer website and all its features.

Click on the icon below to download the guide.

 [Member Portal User Documentation Reference Guide](#)

You will need Adobe Reader to access the documentation



Contact US

Click on the *Contact Us* link in the Meritain Connect footer to navigate to the *Contact Us* page. You are required to fill in the fields marked with * to submit a service request.

You will be able to download the PDF that provides a guide to release encrypted information. You will need PDF reader to view the PDF.

Home Contact Us

Contact Us

Service Request: Toll free number
800-925-2272
Email
servicehelp@meritain.com

User Name :

Member ID :

Email Address :

Group ID :

Email ID *

I have a question about *
Select:

Request Details *

[Submit Request](#)

All email originating from Meritain Health may be encrypted in accordance with Protected Health Information (PHI) guidelines under the Health Insurance Portability and Accountability Act (HIPAA). To release encrypted information please click here on the attachment below to download the attachment and follow directions to view the encrypted.

 [Guide to release encrypted information](#)

You will need Adobe Reader to access the documentation

Error Messages

The table below lists the error messages that will be displayed under various scenarios.

Scenario	Error Message
Mandatory Inputs not provided	Please enter <field name>.
Password to complete the settings change	Please enter the correct password.
If the new password does not meet the password requirement then highlight the password field	<p>Password does not follow password rules. It must be at least ten characters long and contain at least one of the following:</p> <ul style="list-style-type: none"> o An uppercase letter o A lowercase letter o A number o One of the following symbols: (# \$! % ^ @ & *) = + -
If the values entered in “New Password” and “Confirm New Password” does not match	<i>New Password</i> and <i>Confirm New Password</i> fields do not match.
Fatal error	Something went wrong, but we can help. Please contact customer service using the number on the back of your ID Card.
Incorrect email format	Please enter a valid email address, for example: abc@xyz.com
If the values entered in “New Email ID” and “Confirm New Email ID” does not match	<i>New Email ID</i> and <i>Confirm New Email ID</i> fields do not match
If the user does not enter values for First Name, Middle Name, Last Name, Phone Number, Phone Number Type, Address 1 and Address 2	You will need to enter at least one of the following: <i>First Name, Middle Name, Last Name, Phone Number, Phone Number Type or Address.</i>
incorrect phone format	Please enter a valid phone number (exclude dashes and parentheses)
Incorrect zip code	Please enter a valid zip code.
User does not agree to required declarations	You will not be able to continue until you agree to the HIPAA statement below.
Incorrect date format	Please enter the date in this format: MM/DD/YYYY
If for a given search parameters, no data is available	Sorry, we can't find any information. Please try again using different search terms.
if the application is unable to upload a document	We can't upload your file. Please make sure it is a <file types> and try again.
Incorrect fax number format	Please enter a valid fax number (exclude dashes and parentheses).

Scenario	Error Message
Incorrect username and / or password	You entered an invalid username or password
Invalid or incorrect information provided while recovering username or password	Please check your login information and try again.
If the page is under maintenance	This page is currently down for maintenance. We will be back soon.
Invalid or incorrect information provided during the registration process	Please check your login information and try again.