



APA

Voluntary Supplemental Medical Plan

**New Third-Party Administrator (TPA)
Information**

Effective January 1, 2025

FREQUENTLY ASKED QUESTIONS
(FAQs)



Dear SMP Participants:

These FAQs contain information regarding your new ID cards, Luminare Health (the new medical and dental claims provider), and NGS (our new eligibility and contributions administrator).

As with any major transition, we know there will be some turbulence. However, keep your seatbelts securely fastened and contact your APA Benefits Department to help quickly resolve any concerns. APA Benefits can be reached at 817-302-2140 or via email at Benefits.Sec@alliedpilots.org.

luminare healthSM


NGS GROUP
OF COMPANIES



Voluntary Supplemental Medical Plan

FREQUENTLY ASKED QUESTIONS (FAQs)

1. Who is Luminare Health?

As of Jan. 1, 2025, Luminare Health will process medical and dental claims for APA's Supplemental Medical Plan. That means Luminare Health will ensure that your doctors, dentists, and other providers are paid. This service has been provided by WebTPA, which will continue to process claims filed through Dec. 31, 2024.

Luminare Health has more than 50 years' experience in servicing self-funded plans. Their headquarters is in Rosemont, Illinois.

2. Who is NGS?

NGS is already the third-party administrator for APA's Pilot Mutual Aid, Pilot Occupational Disability, and Life plans. NGS manages eligibility for these plans, processes benefit payments for pilots on disability, processes dividends, and drafts monthly contributions. They are based in Richardson, Texas.

We have asked NGS to also manage eligibility and draft contributions for APA's Supplemental Medical Plan. NGS will take on those duties on Jan. 1, 2025.

3. What is changing?

- WebTPA will no longer be our third-party administrator as of Dec. 31, 2024.
 - Therefore, any claims with a date of service prior to Jan. 1, 2025, will go to WebTPA for processing. These claims will be processed by WebTPA for a 12-month period.
 - WebTPA's last contribution draft will be in December 2024.
- NGS will be the eligibility and contributions administrator as of Jan. 1, 2025.
 - NGS will process and maintain eligibility for all plan participants.
 - NGS will draft monthly contributions on or about the 25th of each month.
 - The APA Benefits Department will be your point of contact and will work closely with NGS.

4. What is NOT changing?

- Cigna medical network for primary coverage is not changing.
- PHCS/Multiplan medical network is not changing.
- Dental/orthodontia benefits are not changing.

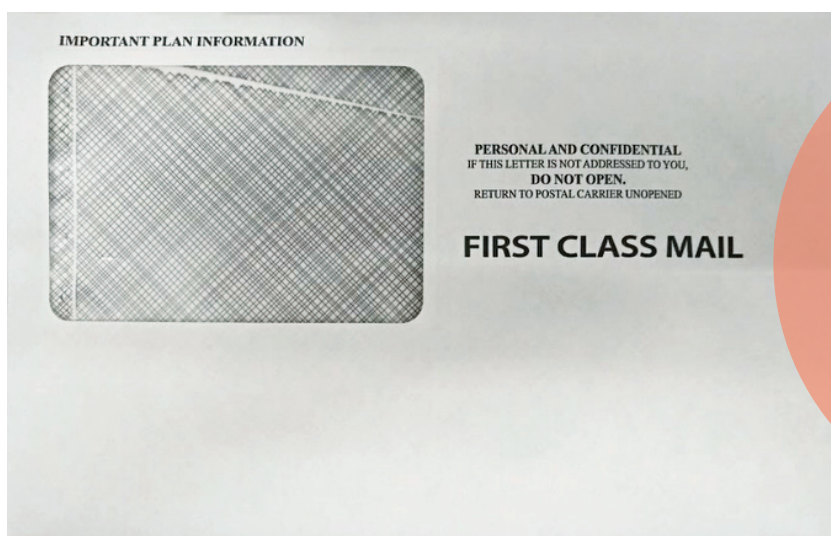
- BeneCard, our pharmacy benefit manager, is not changing. The prescription drug program remains the same.
- VSP, our vision service plan, is not changing. Vision benefits remain the same.
- Benefit Elect, our enrollment portal, is not changing.

5. When will I receive my ID card(s) in the mail?

You should receive them prior to Jan. 1, 2025. However, keep in mind that the cards are being mailed via the U.S. Postal Service. If you do not receive your card(s), there is another option for you to obtain a digital copy.

6. What will the ID card envelope look like?

Do not throw this away! It contains your ID cards.



7. What is the mailing address for medical and dental claims?

Primary claims (if you have no other coverage):

Cigna
P. O. Box 188061
Chattanooga, TN 37422-8061

Secondary/tertiary claims (if you have other coverage such as Medicare):

Luminare Health
P. O. Box 2905
Clinton, IA 52733-2905

8. What is Luminare Health's phone number?

877-498-8937

9. What is Luminare Health's website?

myLuminareHealth.com

10. Where can I get more information?

Visit AlliedPilots.org/Benefits, and click the red “Important Initial Notice” banner. We have also added a “Third-Party Administrator – Luminaire Health” link to AlliedPilots.org/Benefits.

11. Who do I call for questions regarding eligibility and contributions?

APA Benefits will field all calls and work closely with NGS to address any concerns. You can reach the APA Benefits Department by calling 817-302-2140 or emailing Benefits.Sec@alliedpilots.org.

As a reminder, the Supplemental Medical Plan (SMP) was established in 1985 to provide additional supplemental or primary coverage that is custom-tailored for you and your eligible dependents. (“Eligible dependents” means spouse and children as defined by the Plan document.) The SMP provides the following coverage:

- If you are an active pilot, the SMP covers orthodontia and vision for you and your eligible dependents.
- Retirees younger than 65 and their eligible dependents will have primary coverage under the SMP, which is medical, dental, vision, and prescription drug coverage.
- At age 65, SMP is secondary to Medicare.
- Coverage for a dependent child ends on the last day of the month in which the child turns 26. That age limit does not apply to an unmarried child who is incapacitated as defined by the Plan.

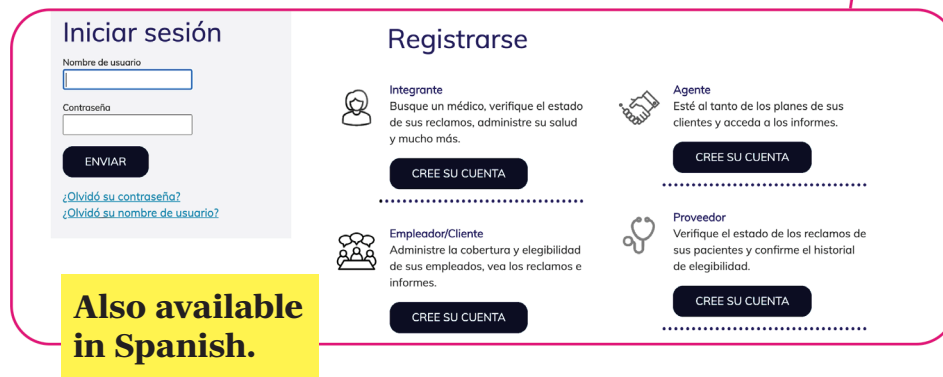
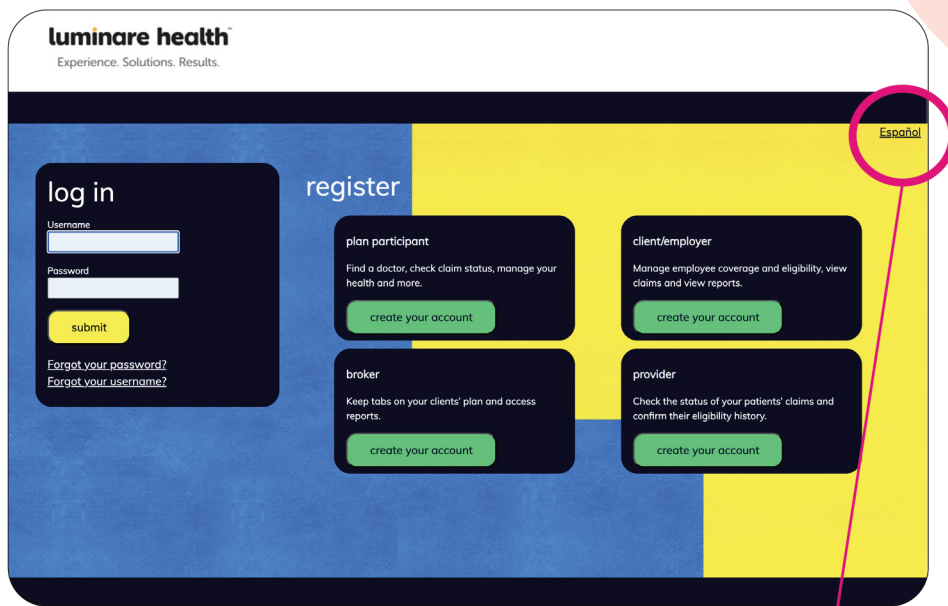
DISCLAIMER: These Frequently Asked Questions provide a brief explanation of the changes to the APA Supplemental Medical Plan (“Plan”) and is not a detailed description of the Plan. While the information provided expresses the intent of the Plan, the actual Plan document and summary plan description contain a complete description of the benefits offered and rights under the Plan. If there is any conflict between this summary and the Plan document, the terms of the Plan document govern.

A Member's Guide to Registering on myLuminareHealth.com

Beginning on Jan. 1, 2025, you will be able to register as a member on myLuminareHealth.com by following these steps:

Step One: Create an Account

Go to myLuminareHealth.com and select the **Create Your Account** button under the Plan Participant section. Each plan member will need to create their own account.



Note: If you forget your username or password, you can select the appropriate link under the login button on the home page, and then follow the prompts.

Step Two: Activation

- Enter the required fields with information from your ID card.
- Click Next.

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Activation [Español](#)

Let's get started!

To keep this simple, all of the fields below are required.

Your Member ID or SSN ?

Your Last Name

Your ZIP/Postal Code

Your Date of Birth

NEXT

luminare health **QUESTIONS?**
012345678910
www.luminarehealth.com

Member
Member ID: E12345678

Employer:
ABC Company

Group #: 9999
Member #: 1st

Medical Plan
Diabetes Coverage

QR Code
www.luminarehealth.com
Member ID: E12345678
Group #: 9999
Member #: 1st

Step Three: Provide Your Consent

Click “I agree” to accept the consent to electronic signatures and communications and terms and conditions.

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Consent [Español](#)

Provide your consent.

To continue, please agree to the terms below.

CONSENT TO ELECTRONIC SIGNATURES AND COMMUNICATIONS AND TERMS AND CONDITIONS

Under certain laws, Luminare Health Benefits, Inc., and its vendors are required to obtain your authorization and consent to obtain your electronic signature on any documents related to the services that Luminare Health Benefits or its vendors provide ("Services") and to receive electronically copies of such documents. As a result, we are providing this notice to you in order to obtain your agreement and consent to conduct our business with you electronically, including your consent to sign electronically any documents we ask you to sign and all other documents related to the Services and to confirm your consent to provide you with electronic copies of the

I AGREE **I DECLINE**

Step Four: Contact Information

Enter your contact information in the fields below. You must enter your email address and at least one phone number.

The screenshot shows the 'Communication' section of the Luminare Health interface. It features the Luminare Health logo at the top left and a 'Español' link at the top right. The main heading is 'Communication'. Below this, there is a blue icon of a person with a speech bubble and the text 'Enter your contact information.' followed by a sub-instruction: 'You must enter your email address and at least one phone number.' There are three input fields: 'Email Address' with the placeholder 'email@email.com', 'Mobile Phone' with the placeholder '555-555-1212', and 'Alternate Phone' with the placeholder '555-555-1212'. At the bottom, there is a question: 'Would you like to receive electronic communications?'.

Step Five: Verification

- Click “Start” next to the communication method you would like to verify, and a code will be sent to the email address or mobile phone number you provided.
- Enter the verification code in the indicated field.
- Click “Next” to continue.

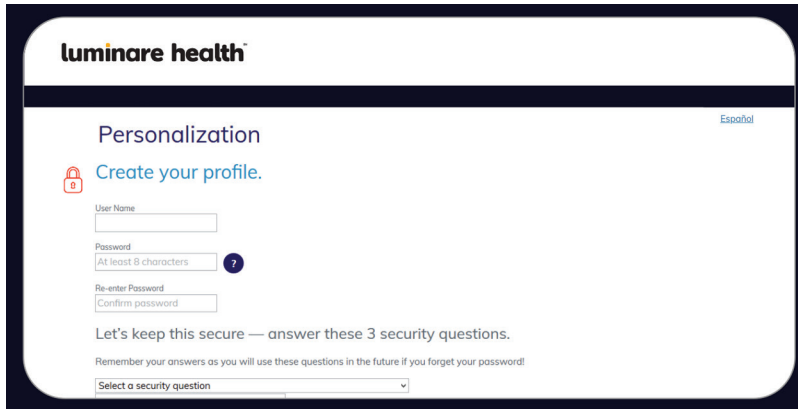
The first screenshot shows the 'Verification' screen with the Luminare Health logo and 'Español' link. The main heading is 'Verification'. Below this, there is a blue icon of a person with a speech bubble and the text 'We will need to verify your information before continuing.'

The second screenshot shows the 'Verification' screen with the Luminare Health logo and 'Español' link. The main heading is 'Verification'. Below this, there is a blue icon of a person with a speech bubble and the text 'We will need to verify your information before continuing.' followed by a sub-instruction: 'Select ONE method below to verify. A code will be sent to the email address or mobile phone number you provided.' There is a blue box with the text: 'Please enter the verification code that has been sent to your Mobile Phone in the field below.' There are three input fields: 'Email Address' with the placeholder 'email@email.com' and a 'START' button, 'Mobile Phone' with the placeholder '847-000-0000' and a 'START' button, and 'Verification Code' with a 'VERIFY' button.

The third screenshot shows the 'Verification' screen with the Luminare Health logo and 'Español' link. The main heading is 'Verification'. Below this, there is a blue icon of a person with a speech bubble and the text 'We will need to verify your information before continuing.' followed by a sub-instruction: 'Select ONE method below to verify. A code will be sent to the email address or mobile phone number you provided.' There is a green box with the text: '✓ Your code is correct! Click 'Next' below to continue.'

Step Six: Personalization

Create your profile by choosing a user name and password. Answer three security questions and click “Next.”



The screenshot shows the 'Personalization' page on the Luminare Health website. The page title is 'Personalization' with a 'Español' link. Below the title is a red padlock icon and the text 'Create your profile.' The form includes fields for 'User Name', 'Password' (with a note 'At least 8 characters' and a question mark icon), 'Re-enter Password', and 'Confirm password'. Below the form, there is a section titled 'Let's keep this secure — answer these 3 security questions.' with a sub-note: 'Remember your answers as you will use these questions in the future if you forget your password!'. A dropdown menu labeled 'Select a security question' is visible at the bottom of the form.

Once you're registered on this site, please be sure to bookmark it as a favorite, and return directly to myLuminareHealth.com for all future visits.

Scan this QR code with your cell phone camera to visit the APA Benefits page on AlliedPilots.org for details about the services Luminaire Health offers, including its online portal, mobile app, text messaging, and electronic communications.



APA BENEFITS

Benefits Department Information

LTD Calculator



Among the many privileges of APA membership are the supplemental benefit programs available to you and your family members. This brochure provides you with a brief overview of the APA benefits plans available. Click on the benefit of interest below for more information.

| Benefits | Disability Corner | Tools and Worksheets | Company Benefits Questions or Concerns | APA Government Filings | HIPAA Privacy | |
|---|-----------------------------------|--------------------------------------|--|--|-------------------------------|---|
| Survivor Benefit Plan | | | | | | + |
| Voluntary Supplemental Medical and Custodial Care | | | | | | + |
| Pilot Occupational Disability | | | | | | + |
| Pilot Mutual Aid | | | | | | + |
| Group Term Life Insurance | | | | | | + |
| Third Party Administrator - Luminaire Health | | | | | | - |

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| Luminaire Health - Welcome Overview |
| Luminaire Health - A Member's Guide To Registering on myLuminaireHealth.com |
| Luminaire Health - Getting Members Better Connected with Digital Engagement Tools |
| Luminaire Health - Access Your ID Card Online |
| Luminaire Health - Access Your Info Fast ... and Stay Connected |
| Luminaire Health - Connect with Your Benefits Wherever and Whenever |



Allied Pilots Association
O'Connell Building
14600 Trinity Blvd., Suite 500
Fort Worth, TX 76155-2512

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ARLINGTON, TX
PERMIT NO. 269