



# NEW MEMBER WEB PORTAL



# LoomisLive Member Registration Instructions



Go to [www.loomisco.com](http://www.loomisco.com)

Click on the MYLOOMIS LOGIN



The registration process begins here and you will need your Benefits ID card for your Insured/Member Identifier and Group Number. Complete this page and Click NEXT:

## Register Now

Personal Information      Login & Security Information      Preference Information

**Personal Information\*** (required field)

\* User Type(s)

\* First Name

\* Last Name

\* Email Address (example: jsmith@abc.com)

\* Date of Birth (mm/dd/yyyy)

**Registration Instructions:**

- For Insured/Members and Dependents, please refer to your welcome letter/email or ID card during registration.
- Enter your Insured/Member ID and Group Number exactly as shown on your welcome letter/email or ID card. If you need assistance, please call the customer service number listed on your welcome letter/email or on the back of your ID card or email [benefits@loomisco.com](mailto:benefits@loomisco.com).

Enter your Insured/Member ID and Group Number

Insured/Member Identifier

Group Number

**IMPORTANT NOTE:** Create a 6 Character or more User ID and 14 Character Password to include at least one uppercase and one special symbol.

Then complete the security questions and Click NEXT:

## Register Now

Personal Information      Login & Security Information      Preference Information

**Login & Security Information\*** (required field)

\* User ID

\* Password

\* Confirm Password

\* Security Question 1

\* Answer 1


\* Security Question 2

\* Answer 2

\* Security Question 3

\* Answer 3

\* Please enter displayed security code



## Choose your preferred language and date format and Click SUBMIT:

### Register Now



Personal Information      Login & Security Information      Preference Information

Preference Information (\* required field)

\* Preferred Language  
English

\* Preferred Date Format  
mm/dd/yyyy

Previous   Submit   Cancel



You should receive this confirmation once your registration is completed:

### Register Now

✓ Congratulations Registration is Complete

You can then go to the Login and log onto your Portal account.



Log In

## Welcome To The Loomis Company Benefits Portal!

From this site you will be able to:

- View Health Plan Documents
- Locate Providers
- View Claims
- Contact Member Services
- Access A Variety Of Resources

### Login

Click the login link below to be redirected to our secure login site.

[Register](#)

Login



## Welcome to The Loomis Company Member Website

Your complete online health plan Information Center!

You will be able to access a wide variety of information about your health plan and benefits on your computer or mobile phone. You will no longer need to use an app.

### To Get Started

- ♦ **Member Website-** Enter: [www.Loomisco.com](http://www.Loomisco.com), click on **MyLoomis login**.
- ♦ **Register-** Your old login and password will not access our site. You will need to register for the new site.
- ♦ **Member ID card-** You will be asked to enter your Group Number and Member ID.
- ♦ Click on "**My Workspace**" to access your options
- ♦ **Your Adult Dependents-** will need to login with their own credentials or register, then provide access authorization under the My Workspace tab to the primary policyholder to see their claims.

**IMPORTANT NOTE:** When you REGISTER The password must be 14 characters in length to include at least one uppercase and one special symbol.

## Welcome To The **NEW** Loomis Company Benefits Portal!

*For security reasons, you will need to register to create a new account if you have previously used our Portal.*

From this site you will be able to:

- . [View Health Plan Documents](#)
- . [Locate Providers](#)
- . [View Claims](#)
- . [Contact Member Services](#)
- . [Access A Variety Of Resources](#)

### Login

User ID

[Register](#) | [Forgot User ID?](#) | [Forgot Password?](#)

Next



Once your registration is completed, feel free to save the NEW URL to your favorites:

<https://loomislive.com/view/login>



1. Email Customer Service
2. Member Actions: Look up "My Coverages" & Grant PHI Access will be listed under "Member Actions" for Adult Dependents Only

**My Workspace** ▾

- Customer Service Message Center
- Member Actions**
  - My Coverages ←
  - Access Authorization

Check your coverage or view recent claims

- 1.
- 2.

My Workspace / My Coverages

## My Coverages

1234-ABC Company

Account	1234	Effective Date	04/01/2022
	ABC Company	Termination Date	
Member ID	23400000		
Member Name	JOHN SMITH		

I Would Like To ... ▾

- Online Forms
- Update Personal Information
- View Claims
- View Coverage
- View Vendors

Drop down menu

## Balance Summary

Description	Limit	Accumulated Amount	Percent Met
Medical In Network Deductible	1,400.00	1,377.30	98%
Medical In Network Out of Pocket	1,000.00	0.00	
Family Medical In Network Deductible	2,800.00	1,317.43	47%

## Recent Claims

Claim Number	Service Date	Patient Name	Claim Amount	Provider
3450000A	11/10/2022	JOHN SMITH	166.54	American Family Medicine
3460000B	05/12/2022	JOHN SMITH	0.00	Dr. Amy Clark
3450000C	06/06/2022	JOHN SMITH	140.00	Johnson Medical Center

## Options from the drop down menu

I Would Like To ... ▾

- Online Forms
- Update Personal Information
- View Claims
- View Coverage
- View Vendors** ←

Click on "View Vendors" to see all options available on your plan.

## Sample:

Medical Vendors

- Cigna  
Cigna SSO Login
- Healthcare Bluebook  
Healthcare Bluebook helps find quality healthcare provide
- WEX Health  
WEX Health SSO Login
- CVS  
CVS pharmacy™
- TELADOC  
TELADOC

Click on the Vendor Link that you want to visit.

# How To Ask A Question OR Submit a Claim You Have Paid For on Your LoomisLive.com Portal

Go to your LoomisLive portal

On your home page in the upper right hand corner you will see the: **Click Here to Submit A Claim or Ask A Question** link



[Click Here To Submit a Claim or Ask A Question](#)

My Workspace ▾

Once you click on the link, the Question/Submit A Claim box will pop up (see below):

- This will have your name pre-populated you will need to complete the remainder of the information.
- **TO FILE a Claim that You have paid for:** In the question field make a note for example:
  - *Please process my out of network medical claim,*(feel free to provide details), or dental claim or vision claim.
  - Then **click the Attachment box to attach your itemized bill.** Before submitting make sure your bills include the following information:
    1. **Employee information (name, DOB, address, ID #)**
    2. **Patient information (name, DOB)**
    3. **ICD10-diagnosis code**
    4. **CPT code-description of service;**
    5. **Date of service;**
    6. **Billed amount;**
    7. **Performing physician's name, physician address, place of service,most importantly the Tax ID number & NPI number.**
  - Then **click the SUBMIT** button. Your claim will then go to the Loomis service team for processing.

You May Type Your Question Below, or Submit A Claim by Selecting Attachment and Uploading Your Documents

\* First Name

\* I

\* Phone

\* Email Address

\* Question

Characters remaining: 100

Attachment



Submit

Close

**REMEMBER** to always maintain a copy of your claims for your records.

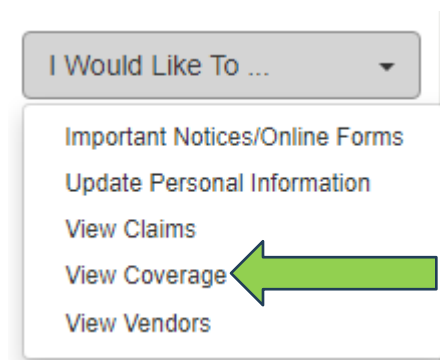
## From Your LoomisLive Member Portal: How to Download A Temporary ID Card or Order a Replacement ID card

Go to [www.loomisco.com](http://www.loomisco.com) and Log In

From your home page click on the My Workspace drop down menu and Select My Coverages:



At the I WOULD LIKE TO drop down Choose VIEW COVERAGE



On the Coverage Summary screen you will see these buttons to either request an ID card or view/print an ID card:

