

Blue Rewards Health and Wellness ProgramSM



Earn up to \$300

with employee health and wellness rewards

*Blue Cross and Blue Shield of Vermont is committed to the health and well-being of our members. We created our Blue Rewards Health and Wellness Program to encourage and reward you for taking charge of your health. As a Blue Cross and Blue Shield of Vermont Blue Rewards ProgramSM member, you are automatically eligible to enroll in the Blue Rewards Health and Wellness Program. You can earn **up to \$300** for engaging in healthy behaviors during the year.*

Earning and using your reward dollars

Once you have registered at My Blue Health Wellness Center and completed any of the four activities listed, we will send you a health and wellness rewards card containing your first cash reward*. Please allow up to three weeks to receive your card. Once you complete and record each activity, we automatically add rewards to your card.

**Unless you receive \$600 or more in wellness rewards, you will not receive a 1099 form. However, these rewards may still be taxable. Please consult a tax advisor if you have questions.*

You can use your reward dollars at many health and wellness vendors. Visit the My Blue Health Wellness Center to view the list of vendor types where your card is accepted. You can even use your reward dollars to help fund your HealthEquity[®] health savings account (if applicable).

Complete each of the four activities to earn up to \$300:

- Take the online health assessment (\$50)
- **NEW for 2018!** Participate in an individual challenge or complete an online workshop (\$50)
- Get an annual preventive care check-up with your primary care provider (\$100)
- Get a dental check-up or vision exam (\$100)

Use your rewards for wellness expenses such as:

- Gyms, spas and health clubs
- Massage therapists and acupuncturists
- Golf courses
- Outdoor activity centers
- Dental and vision providers
- Naturopathic remedies

To view the complete vendor list, log on to My Blue Health and Wellness Center at <https://mybluehealth.bcbsvt.com>.

Getting started is simple

1. Register and log on to My Blue Health and Wellness CenterSM

My Blue Health is Blue Cross and Blue Shield of Vermont's online wellness center where you will log and keep track of your activities and rewards, complete your health assessment, participate in the challenge or workshop, and record your dental/vision exam. Visit <https://mybluehealth.bcbsvt.com> to register or log on.

2. Take the online health assessment

The health assessment is a 15-minute confidential online questionnaire, which provides you with a picture of your overall health. It is an important step in recognizing and understanding your health risks. Once you complete the health assessment, you automatically earn \$50.

3. Participate in an individual challenge or complete an online workshop

New for 2018 is the option to participate in either an individual challenge or an online workshop. Pick from one of three challenges focused on either physical activity, healthy eating or stress management or complete an online workshop with over 40 topics to choose from. Once you complete the challenge or workshop, you'll automatically earn \$50.

4. Get an annual preventive care check-up with your primary care provider

Age-appropriate exams and screenings can help detect health risks early on. We will automatically reward you \$100 once this service is listed on your Explanation of Benefits.

5. Get a dental check-up or vision exam

Get a dental cleaning and exam or a preventive vision exam, record the completion of your exam on My Blue Health and earn another \$100 (limit one reward per calendar year).

For more information about the Blue Rewards program or for assistance logging on to your account, please call BCBSVT customer service: (800) 247-2583.

Blue Rewards benefits address your unique needs

Everyone has unique needs when it comes to their health care benefits. We created our Blue Rewards plans with your individual health and wellness needs in mind to make sure you receive the care you need when you need it.

Through our **Blue Rewards Gold, Silver or Bronze** plans, you will receive three, six or nine primary care or mental health visits per calendar year at no cost. The total visits you will receive depends on your membership type.

- Single—three visits
- Couple or parent and child—six visits*
- Family—nine visits*

**You can use visits in any combination across family members.*

You will also receive certain lab services performed during these visits at no cost to ensure you're getting the care you need.



What is the difference between preventive and diagnostic medicine?

A preventive procedure starts with the intent of confirming your good health when you are apparently free of symptoms or disease. Diagnostic medicine happens when you go to your doctor or other health care provider with symptoms and your provider recommends screenings and tests to diagnose their cause. While we cover these services, you may have to pay deductibles, co-payments and/or co-insurance.

Can preventive care turn into diagnostic medicine?

Yes. Sometimes a provider begins a preventive screening or test and, during its course, finds or suspects disease. The provider then bills for a diagnostic procedure. You may have to share in the cost. Also, if you have a history of a particular illness, a screening related to that illness might be considered diagnostic for you, while it may be preventive for other patients.

Examples of the difference between ACA-defined preventive care and diagnostic screenings

In scenario 1, a 40-year-old man with no previous diagnosis of high cholesterol visits his PCP for a preventive annual visit. As part of his routine screenings, the PCP orders both a lipid test and a metabolic test, both of which return normal. He would not have to pay cost-sharing for the lipid test, but since the metabolic test does not appear on the USPSTF's list of A- and B-rated services*, he must share in the cost of the metabolic test.

In scenario 2, a 40-year-old man, who had been treated for high cholesterol from age 30 to age 36, visits his PCP for an annual preventive visit. The PCP orders a lipid test and metabolic test, both of which return normal. Due to the personal history of high cholesterol, this member may have to pay cost-sharing for the lipid test. He will also pay cost-sharing for the metabolic panel because the metabolic test doesn't appear on the USPSTF's list of A- and B-recommended services*.

Are there other preventive services that I may need?

Yes, you may need other preventive services because of your individual health care needs. The USPSTF bases its recommendations on the needs of the general population. You may have special needs, so we encourage you to consult your doctor or other health care provider about additional preventive care.

**The United States Preventive Services Task Force (USPSTF) is a board of physicians that has researched preventive services to determine which are the most effective and issues a grade based on the strength of evidence, regardless of the cost of the preventive service. For a more detailed description of preventive care, including charts that list care rated A or B by the USPSTF, visit www.bcbsvt.com/preventive*