

Wellworks^{For You} 

2020-2021

WELLNESS PROGRAM

GUIDE



BONNER COUNTY

Participate in your Wellness Program this year to earn a Premium Discount!

Welcome to your 2020-2021 Wellness Program. All medically enrolled employees will have opportunities to participate in various wellness activities to earn an incentive. Your new program details are outlined in this guide.

STEPS TO EARN AN INCENTIVE



STEP 1: BIOMETRICS WITH LAB WORK

You must complete at least **one (1)** of the options below to earn credit for this requirement.

- Visit your Primary Care Provider for an annual physical lab work. Print out the **Physician Results Form** located on the Wellness Portal under **MENU>Wellness Locker** and take it to your care provider. All metrics must be collected in order to fulfill this requirement. All biometric results are PHI protected
- Schedule an appointment with **White Cross Pharmacy** at (208) 263-9080 to complete your **Biometric Screening** and fulfill this requirement.
- Attend an **Onsite Biometric Screening** at **Bonner County**. Details will be announced via email at a later date.



STEP 2: ANNUAL WELLNESS VISIT WITH PRIMARY CARE PROVIDER

Visit your Primary Care Provider to complete your annual physical. Print out the **Proof of Annual Visit Form** located on the Wellness Portal under **MENU>Wellness Locker** and take it to your care provider.

Please Note: If you complete the lab work with your care provider at the same time you receive your **Annual Wellness Visit**, you do **not** need to submit the Proof of Annual Visit Form. The **Physician Results Form** will count for this requirement as well as count for step **one (1)** above. If you attend an **Onsite Biometric Screening** or go to a **White Cross Pharmacy**, you will **need** to submit the **Proof of Annual Visit Form** to fulfill this requirement.



STEP 3: KNOW YOUR NUMBER ASSESSMENT

Upon logging into the Wellness Portal, you will be prompted to complete the **Know Your Number Assessment**. Complete all questions, except for the **Health Metrics** section. Wellworks will upload your screening results once you complete **STEP 1**.

- If your health metrics **have already been entered**, complete the questionnaire and click **Finish** to submit your responses.
- If your health metrics **have not been entered**, complete the questionnaire and click **Save**. The assessment will be completed once your metrics are entered by Wellworks For You.

Once your assessment is completed in its entirety (questionnaire and health metrics), your results report will be generated and uploaded to the **Wellness Locker** under the **Health Records** section. Your participation in the assessment will also be updated at this time.



STEP 4: TOBACCO ATTESTATION FORM/CESSATION E-LEARNING SERIES

Complete the **Tobacco Attestation Form** and **Tobacco Cessation Program**, if applicable, to receive credit for this step. Whether or not a tobacco user, an employee must complete and sign the affidavit to certify that he or she is either tobacco-free or a tobacco user.

- **Non-Tobacco Users:** If you certify that you **do not use** tobacco, you will fulfill this step by completing and submitting the **Tobacco Attestation Form** located on the Wellness Portal in the **Wellness Locker**.
- **Tobacco Users:** If you certify that you **use** tobacco, you must complete the six-week **e-Learning Series Tobacco Cessation Program** on the Wellness Portal by **July 31, 2021** to complete this step.

TOBACCO CESSATION E-LEARNING SERIES:

1. Log into your **Wellness Portal** (www.wellworksforyoulogin.com)
2. Access the **e-Learning series** through the e-Learning section from the homepage or via the Portal **MENU**
3. Complete the **Pre-Module Survey**, then begin **Module 1**. You must watch each video and take the quiz associated with each module. If you do not pass the quiz (a **70% score** or higher) you must wait **24 hours** before taking the quiz again.
4. You will be required to wait **one (1) week** in between each module before the next module will open
5. After you finish **Module 6**, you must complete and submit the **Post-Module Survey**

Please Note: The **Tobacco Cessation Program** (including all quizzes and surveys) must be completed by **July 31, 2021**. To ensure that you complete the entire program prior to the deadline, you must begin the program by **June 1, 2021**.

INCENTIVES

You must complete **Steps 1-4** to be eligible for an **HRA/HSA contribution**. **Premium Reduction** incentives will be distributed on the **first of the month following 30 days of completion**. **HSA/HRA contributions** will be completed on a **quarterly basis** (August-October; November-January; February-April; May-July).

MEDICAL ENROLLMENT STATUS	INCENTIVE
Enrolled in HSA Plan	\$300.00 Contribution to HSA Bank Account
Enrolled in PPO Plan	\$300.00 Contribution to HRA VEBA Account

WELLNESS PORTAL

In order for your participation in the program to be tracked, employees must be registered under the **Bonner County** Portal. If you do not have an account, please follow the instructions below.

REGISTER ON THE WELLNESS PORTAL

1. Go to www.wellworksforyoulogin.com
2. Click the link to create an account as a **New Member**
3. Enter your Company ID: **10925**
4. Complete the registration process

ADDITIONAL INFORMATION

VIEW DETAILS FOR PROGRAMS, EVENTS, AND ACTIVITIES

Events are listed on your personal Wellness Portal within **ResultsNow**. You can access this via the **ResultsNow** section on the homepage or via the **MENU** page. To view more details about a program component, select **Click for Details**. If there are sub-events associated with a component, they will display in the pop-up. Click the **+** and **-** buttons to expand or minimize the details of the sub-events.

VIEW AND DOWNLOAD DOCUMENTS FOR COMPLETION

All forms are located in your Wellness Portal within the **Wellness Locker** accessed via the Portal **MENU** or homepage section. Download and/or print PDF forms for completion.

VIEW YOUR PARTICIPATION

Wondering what you have completed to date?

1. Log into your **Wellness Portal** (www.wellworksforyoulogin.com)
2. View your program status right on the homepage!
3. For more details, click an icon within the **ResultsNow** section of the homepage or use the Portal **MENU** to access the **ResultsNow** page
4. A large green check mark will display over the icon once the component's requirements are complete
5. Click an icon or select **Click For Details** to view a list of available options for each program component
6. A small green check mark will be visible in the Completed column once an event is complete

PLEASE NOTE: Wellworks For You requires at least 7-10 business days for processing and participation to be updated in the Wellness Portal.

SUBMIT YOUR COMPLETED DOCUMENTS ON OR BEFORE JULY 31, 2021

Submit forms on or before **July 31, 2021** for the benefit year incentive. Premium Incentives will be distributed on the **first of the month following 30 days of completion**. **HSA/HRA contributions** will be completed on a **quarterly basis**. All forms should be submitted to the Wellworks Forms Department. Submit your completed forms in one (1) of the following ways:

- **Scan and email:** forms@wellworksforyou.com
- **Upload to Portal:** Click **Contact Us** on the main menu bar of the Portal, or via the Portal **MENU**, and use the **Attach File** button to select a file from your computer. Users are limited to one (1) file per email.
- **Mail:** 70 E Lancaster Ave, Frazer, PA 19355, Attention: Forms Department

PLEASE NOTE: Submission via email will result in an immediate confirmation that your forms were received. Any other means of submission require you to log into your Wellness Portal to confirm your forms were processed.

THE FINE PRINT

The Bonner County wellness program is a voluntary wellness program available to all employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program, you will be asked to complete a voluntary health risk assessment, Know Your Number, that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You will also be asked to complete an Annual Physical with Lab Work, which will include a lipid panel/glucose blood test and body measurements, the Tobacco Attestation Form, and the Tobacco Cessation e-Learning Series (if applicable). You are not required to complete these components. However, employees who choose to participate in the wellness program will receive a Premium Differential and HSA/HRA contribution.

If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request a reasonable accommodation or an alternative standard by contacting Wellworks For You at 800-425-4657.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program. You also are encouraged to share your results or concerns with your own doctor.

PROTECTIONS FROM DISCLOSURE OF MEDICAL INFORMATION

We are required by law to maintain the privacy and security of your personally identifiable health information. Although the wellness program and Bonner County may use aggregate information it collects to design a program based on identified health risks in the workplace, Wellworks For You will never disclose any of your personal information either publicly or to the employer, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information are the Wellworks For You team in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact Wellworks For You at 800-425-4657.



Questions about your Wellness Program?

CONTACT YOUR WELLNESS TEAM

All questions regarding your Wellness Program structure, status in the program, deadlines, etc. should be directed to your **Wellness Team** via the Wellworks For You Portal.

Simply select Contact Us from the Portal homepage or Wellworks For You mobile app. You can also call Wellworks For You at **800.425.4657**.

Wellworks For You

800.425.4657

www.wellworksforyoulogin.com