

MCPS Wellness Initiatives Program

Frequently Asked Questions

GENERAL QUESTIONS/ANSWERS

1. What are the Wellness Initiatives incentives and am I required to participate?

Association agreements approved by the Montgomery County Board of Education established a Wellness Initiatives program designed to inform employees covered by an MCPS-provided medical insurance plan about their health and help them reduce their share of health insurance premiums. Employee participation in the program began in the fall of 2014. Retiree participation began a year later, in 2015.

There are three components to the Wellness Initiatives program. They are a—

1. biometric health screening,
2. health risk assessment, and
3. smoker (i.e., tobacco-user) surcharge.

The **biometric health screening** and **health risk assessment** provide financial incentives to the employees and retirees who are not yet eligible for Medicare who complete them. If you are covered by a Montgomery County Public Schools (MCPS) medical plan, MCPS will pay—

- an additional 1 percent of the total cost of your health insurance if you complete a biometric health screening, and
- an additional 1 percent of the total cost of your health insurance if you complete a health risk assessment.

You are not required to complete a biometric health screening or a health risk assessment, as these are voluntary components of the program. If you choose not to complete them, you will not receive the rate reductions.

The aim of the **smoker surcharge** is to improve the health of those who use tobacco by encouraging them to quit. As part of the Wellness Initiatives program, if you (or your covered spouse if you are a married employee) smoke or use other forms of tobacco, MCPS will impose a 25 percent surcharge to the total cost of your health insurance.

2. Why should I participate in the Wellness Initiatives program?

If you participate, you will not only save money on your health insurance premiums, you will also learn more about your health. Being screened annually for blood pressure, cholesterol, blood sugar, and body mass index can save your life. A health risk assessment offers you an opportunity to identify your risk factors, provides individualized feedback, and links you with interventions to promote health, sustain function, and/or prevent disease.

3. Who will see my personal information?

Your personal medical information is protected by the federal Health Insurance Portability and Accountability Act (HIPAA). All data submitted through biometric health screenings and health risk assessments will be treated as confidential by your medical insurance plan. MCPS will never have access to your individual results.

4. If MCPS doesn't have access to results of my biometric health screening and health risk assessment, how will I receive the incentive(s)?

MCPS will receive a report from your medical insurance plan to confirm that you completed the requirements for the incentive(s). MCPS will only receive a YES or NO response from the medical plan.

5. When do I need to complete the biometric health screening and health risk assessment to receive the incentives?

To receive the rate reduction incentives, you must complete your biometric health screening and health risk assessment between the first day of fall Open Enrollment and the Friday before the next Open Enrollment begins a year later. For incentives that are effective January 1, 2019, you will have from **October 9, 2017–October 5, 2018** to complete the health risk assessment and biometric health screening.

6. When will I receive the incentive(s)?

The incentives begin on January 1 of the calendar year that follows the biometric health screening and health risk assessment completion deadline.

7. How can I tell if I have received credit for completing a biometric health screening or health risk assessment?

Before you can receive credit for completing a biometric health screening and/or health risk assessment, CareFirst and Kaiser Permanente must notify the Employee and Retiree Service Center (ERSC) of your Wellness Initiatives participation. They will submit this data to ERSC throughout each fall. There are two ways to check to see if your credits have been applied. Both begin by visiting the Employee Self-Service (ESS) web page. From the ESS web page—

1. Click on **Tobacco attestation** and log in using your Outlook username and password, or
2. Click **My current benefits** and—
 - Log in using your Outlook username and password;
 - Change the effective date to January 1 of the next calendar year*;
 - Click **Continue**.

If you completed a biometric health screen and/or health risk assessment between the first day of fall Open Enrollment and the Friday before the next Open Enrollment begins a year later, your credits will be indicated by a “Y” if ERSC has received the information, and an “N” if ERSC has not received the information.

If, by December 1 of the current calendar year, your credit(s) have not been entered, please [e-mail ERSC](#) with the following—

- your name and employee ID number,
- the dates you completed your biometric health screening and/or health risk assessment, and
- whether your screening was conducted by your primary care physician or at a Well Aware health screening.

8. Do I need to do this every year?

If you would like to continue receiving the 1 percent incentive for completing a health risk assessment and/or the 1 percent incentive for completing a biometric health screening, you must participate annually. You can decide each year whether or not you would like to participate.

9. What if I only want to complete one of the incentive options? Do I have to complete both the health risk assessment and the biometric health screening?

No. Wellness Initiatives is a voluntary program. You can choose to complete one, both, or neither program component.

10. What if my biometric health screening results reveal that I am unhealthy. Will I be penalized?

No. You do not receive the incentive based on your results. You receive one incentive if you complete the assessment and another incentive if you complete the screening. The goal of this program is not only to save you money, it is to make you aware of your current health status. If you are given an unfavorable result during your biometric screening, you can view it as an opportunity to take steps to live a healthier life. These steps can include improving your diet, exercising, learning stress reduction techniques, or mapping out a plan of action with your primary care physician.

11. What if I don't carry medical insurance through MCPS? Can I complete a biometric health screening and/or the assessment?

Employees and retirees who are covered by a prescription, dental, and/or vision plan, but do not carry medical insurance through MCPS will **not** be able to complete a health risk assessment since it is offered only through the medical plans. While these individuals are encouraged to complete a biometric health screening, they will **not** be eligible for either of the 1 percent rate reduction incentives.

12. Does my spouse or family need to complete the health risk assessment and/or biometric health screening for me to receive the incentive(s)?

No. To receive the incentive(s), the only person who needs to complete the health risk assessment and/or biometric health screening is you, the MCPS medical plan subscriber. (As the subscriber, you carry medical insurance coverage for yourself and/or your dependents through an MCPS-provided medical plan.)

13. Can my spouse or family participate in the health risk assessment and/or biometric health screening?

Yes. We encourage your dependents to log in to your medical insurance plan's website to complete the health risk assessment. This is a great tool to inform each of you of any health routines or issues that can be improved. We also encourage your dependents to be screened annually for potentially

serious health conditions. Your dependents' participation, however, will not increase the amount of the incentive(s).

BIOMETRIC HEALTH SCREENINGS

14. How do I complete a biometric health screening?

There are two ways to complete the biometric health screening. The first option is to schedule an appointment with your primary care physician for an annual physical (wellness) exam. The second option is to register and attend one of Well Aware's free health screenings. You must attend the screening sponsored by your current medical insurance plan. For a list of health screening dates and instructions for registering, visit the [Well Aware Biometric Health Screenings web page](#).

15. What do I need to do to complete the biometric health screening with my primary care physician?

If you are a **Kaiser Permanente** plan member, you will need to complete an annual wellness exam with your physician that includes a screening of your blood pressure, cholesterol, blood sugar, and body mass index (height and weight). If you are referred to a lab for some of this work, that is okay. You **MUST** log in to this [Kaiser Permanente incentive web page](#) to confirm your participation in the Wellness Initiatives program and determine if you must meet any additional requirements.

If you are a **CareFirst** member, there is a form that your primary care physician will need to fill out and sign during your annual wellness exam. A link and instructions for locating and completing the form can be found on both the [Wellness Initiatives for Employees web page](#) and on the [Wellness Initiatives for Retirees web page](#).

16. How do I schedule an appointment for a free Well Aware biometric health screening?

To schedule your Well Aware health screening, simply [e-mail Well Aware](#) with the specific date and time you prefer. Remember to select a screening sponsored by your current medical insurance plan. For screening dates and times, visit the [Well Aware Biometric Health Screenings web page](#). Walk-ins are not accepted.

17. What does a Well Aware onsite biometric health screening entail?

A Well Aware biometric health screening takes approximately 30 minutes to complete. You will fill out some basic paperwork and then will have your height, weight, blood pressure, blood sugar, body mass index (BMI), and cholesterol checked. You will receive your results before you leave and will have an opportunity to ask a health coach any health-related questions you may have.

18. Do I need to fast for my Well Aware onsite biometric health screening?

No. Fasting is not required for the cholesterol or blood sugar testing for an onsite biometric health screening, nor is it necessary for total cholesterol and HDL (good cholesterol) measurements. Blood sugar measurements will be taken out of a non-fasting range.

HEALTH RISK ASSESSMENTS

19. How do I complete a health risk assessment?

To complete your health risk assessment, log in to your password-protected account on your medical insurance plan's website. Links to each of the medical plan websites are available on the [Wellness Initiatives for Employees web page](#) and on the [Wellness Initiatives for Retirees web page](#).

20. What if I can't log in to my medical insurance plan's website?

Each medical insurance plan has a password-protected website for your personal use. If you are unable to access the web site, please contact your medical insurance plan (CareFirst or Kaiser Permanente). MCPS does not maintain these web pages.

21. How will I know that I have completed the health risk assessment?

You must answer all of the assessment questions and then click **Submit**. Once you have done this, you will have completed the requirement to receive the health risk assessment incentive. Your medical insurance plan will upload a list of their participants who have completed the health risk assessment and will forward it to MCPS. MCPS will then credit you with the incentive (rate reduction).

SMOKER (TOBACCO-USER) SURCHARGE

22. What is the smoker surcharge?

Effective on January 1 each year, MCPS will impose a 25 percent surcharge to the total health insurance (medical, prescription, dental, and/or vision) costs of medical plan subscribers if they or their covered spouses smoke or use other forms of tobacco at any time during the previous 12 months. This means that if either you or your covered spouse use tobacco in the 12 months prior to January 1, 2019, you will pay the 25 percent surcharge in 2019. The maximum surcharge is 25 percent; if you both use tobacco, you will NOT both be charged a 25 percent surcharge.

23. How will MCPS know that I use tobacco?

If you are an employee covered by an MCPS medical insurance plan, you need to attest during fall 2018 Open Enrollment as to whether or not you (and, if you are a married, your covered spouse) will be tobacco free throughout 2018.

24. If I do not use tobacco products, the smoker surcharge will not affect me, right?

Wrong. If neither you nor your spouse use tobacco products during the 12 months prior to January 1, but you do not attest to your and your spouse's tobacco-use status for the year in question, you will be charged a 25 percent surcharge to the total cost of your health insurance. To avoid the surcharge, ***all employees who are covered by an MCPS-provided medical insurance plan must attest during fall Open Enrollment. Employees also must attest to their covered spouse's tobacco-use status.***

Non-tobacco users who fail to attest during Open Enrollment can attest after January 1 of the following year to have the 25 percent surcharge removed within two pay periods. Refunds will NOT be issued to non-tobacco users who did not attest during Open Enrollment.

25. How do I attest to being a smoker or non-smoker?

The procedures for declaring your tobacco-use status are available in the yearly Open Enrollment materials. Be sure to read and follow the procedures carefully. During previous open enrollments, if you were not making changes to your benefits, you did not need to submit anything. You will need to declare your tobacco-use status annually. Ignoring this process could mean incorrect payroll deductions later.

26. How do you define a non-smoker?

A non-smoker is defined as someone who has not used tobacco products during the previous 12-month period.

27. What if I attest to being a non-smoker, but I am actually a smoker?

A plan participant who falsely attests to being tobacco free during the year in question will be subject to a \$2,500 penalty.

**This is the calendar year in which you should receive the credits and rate reductions.*