

OakFit Wellness Program LLEALTH SCREENINGS 2023 GUIDE

Oakland County is inviting employees to participate in this year's health screening program. To participate, employees will need to schedule and attend their yearly well-being visit with their primary care physician and the physician will complete the required screening form. The on-site screenings will not be offered this year.

Employees must complete their annual physical between **January 1 - December 31, 2023.**

Note: Acute care visits (minute clinics & urgent care clinics) do not qualify as a primary care visit.

The health screening program operates in accordance with the privacy practice policy located at OakGov.com/Wellness



HOW TO COMPLETE YOUR 2023 HEALTH SCREENING

STEP ONE

Print the physician screening form (PCP form) for physician completion - located on the next page or <u>click here to use the fillable form.</u>

STEP TWO

Turn completed physician screening form into HR - email, mail, or fax.

PCP Form Submission - return to HR:

• Email: oakfit@oakgov.com

Mail: 2100 Pontiac Lake Rd., Building 41W

Attn: Wellness - Health Screening Waterford, MI 48328

• Fax: 248-452-9893

STEP THREE

Go to Oakland County insurance carrier website to complete online health assessment (ASR/HAP, BSBC or No coverage/New Hire)

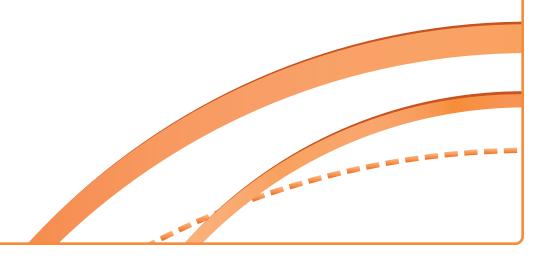
Click Here for ASR/HAP
Click Here for BCBS
Click Here for No coverage/New Hire

STEP FOUR

Receive Your Incentive

- Complete by July 28, 2023 and receive the incentive on September 1, 2023 paycheck.
- Complete between July 29 December 31, 2023 and receive the incentive on February 2, 2024 paycheck.

Employees must submit their physician form and complete their online health assessment by December 31, 2023 in order to receive their incentive.



PHYSICIAN SCREENING FORM(PCP Form)

Take this form with you to your scheduled annual physical exam to be completed and signed by your primary care physician. It is the participant's responsibility to submit the Physician Screening Form as part of the Oakland County's OakFit wellness program.

Employee Contact Information	
Company Name: Oakland County	
First Name:	Last Name:
Date of Birth:	Employee ID#
Department:	
Phone:	
I understand that my individual health information will not be shared with Oakland County. I acknowledge that I have been provided access to the Privacy Practice Policy, which can be found at oakgov.com/wellness.	
Patient's Signature:	Date:
Physician completes this section: This Physician Screening Form confirms that the patient named above received the following preventative care between January 1, 2023 and December 31, 2023.	

I certify that the patient listed above received an annual preventative exam (physical

performed by primary care physician) on:

Physician Name: ______ UPIN/NPI# ______

Office Phone:



Please return completed form to OakFit wellness by December 31, 2023.

Questions? Call: 248-858-5473 or Email: oakfit@oakgov.com





Health Assessment Log-in Instructions

ASR Health Benefits makes it easy to access all of the health information and tools you need. To access the ASR Health Engagement Portal and take the WebMD Health Services Health Assessment, follow the log-in instructions below.

Log-in Instructions:

Go to asrhealthbenefits.com. Select MEMBERS (Figure 1).



Figure 1

Enter your username and password, and then click on the **Login** button. If you have not yet signed up, click on the **SIGN UP FOR A LOG-IN** link and follow the prompts (Figure 2).



Figure 2

To access the ASR Health Engagement Portal, choose the **HEALTH ENGAGEMENT** menu and select **WebMD Health Services** (Figure 3).



Figure 3

Navigation:

Complete the WebMD authentication page and follow the prompts on the screen.

New members will be prompted to complete the security section below (Figure 4). Returning users will be automatically directed to the home page (Figure 5).



Figure 4

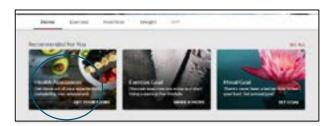


Figure 5

After completing the Health Assessment, you will receive a risk score (Figure 6). Please allow 24 hours for the completion date to be reflected in ASR's Health Engagement Program Tracker. Please note, if you have already completed the assessment, you can access it or retake it by navigating to the three bullet drop down at the top right of the screen (Figure 7).



Figure 6

Figure 7

For assistance, please call (800) 968-2449 or e-mail us at healthengagement@asrhealthbenefits.com.



It's easy to take the online health assessment (for Oakland County BCBS plan holders only, other BCBS plan holders should select the "No Coverage/New Hire option)

- 1. Log in to your Blue Cross member account at bcbsm.com or the Blue Cross mobile app.
 - If you're a first-time user, you must register. Your Blue Cross Blue Shield of Michigan or Blue Care Network ID card has all the information you need to do this.
- 2. Click or tap Health & Well-Being, then WebMD, to enter the Blue Cross Health & Well-Being website.
 - If it's the first time you're entering the Blue Cross Health & Well-Being site, you'll need to register accept the terms and conditions, provide the information requested and choose your areas of interest to customize the website.
- 3. Click on Resources in the left-side navigation box or the bottom of the app, then click on Assess Your Health. Click on the Health Assessment card.
 - Click on Take It Now in the box that pops up.
 - Make sure you click or tap Save & Continue before you move to the next set of questions.
- 4. Once you've answered all the questions, you can review your responses by clicking on Review Answers, or complete your assessment by clicking on Finalize.
- 5. Complete the additional sections about healthy changes, contact information and feedback. Click on Finish when you're done.

We'll receive your health assessment responses and you'll instantly be taken to the Results page where you'll see your health score and other valuable information that can help you improve your health.

If you have problems registering, questions about the app, or need help installing or using it call the **Web Help Desk at 1-888-417-3479.**

Your privacy is protected. The information in your health assessment is confidential and will be disclosed only as permitted by federal and state privacy laws.

WebMD Health Services is an independent company supporting Blue Cross Blue Shield of Michigan and Blue Care Network by providing health and Well-Being services.

Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.

Note: If you are not the primary card holder, cardholder must create an account for you to access the Blue Cross Blue Shield website.

NOTICE REGARDING OAKLAND COUNTY'S WELLNESS PROGRAM

Oakland County's wellness program is a voluntary program available to employees. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve 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 may be asked to complete a voluntary Health Assessment (HA) that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., high blood pressure, diabetes or heart disease). Information from your HA and will provide you with information to help you understand your current health and potential risks.

Protections from Disclosure of Medical Information: The wellness program and your employer may use aggregate data collected to design a program based on identified health risks of the workforce. The wellness program will never disclose any of your personal information, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as 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 will 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. 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 third party vendors as designated by your employer for the purpose of providing you with services under the wellness program.

Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occur involving information you provide in connection with the wellness program, we will notify you immediately. You will not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor will you be subjected to retaliation if you choose not participate. If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact your wellness program administrator or Human Resources Department.

Did you submit your Physician Form and complete your Online Health Assessment?

Employees must submit their physician form and complete their online health assessment by December 31, 2023 in order to receive their incentive.

PARTICIPATION INCENTIVE DRAWINGS

Eligible employees must complete the screening and assessment to be eligible for a prize. Five winners will be drawn from each category.

Repeat Participant: Employees who have participated in past screenings will be entered into a drawing for an additional \$300 incentive.

First Time Participant: Employees who participate for the first time receive a chance to win an additional \$100 incentive.



KNOW YOUR NUMBERS



Oakland County Wellness

BLOOD SUGAR LESS 100

What should my number be? Before eating: Less than 100 Two hours after eating: Less than 140 What is it? The amount of sugar in your blood.

Hb A1c NORMAL LESS 5.7

Normal < 5.7Prediabetes 5.7 - 6.4 Diabetes > 6.5

A1c reflects your average blood glucose levels over the past 3 months.

BLOOD PRESSURE LESS 120/80 THAN 120/80

What should my number be? Less than 120/80 What is it? The force of blood against the arteries when the heart beats (top number) and rests (bottom number).

BLOOD CHOLESTEROL LESS 200

What should my number be? Total Cholesterol score less than 200 What is it?

A waxy substance produced by the liver. Too much can make it harder for blood to circulate.

BODY WEIGHT BODY MASS INDEX 18.5-24.9

What should my number be? A body mass index of 18.5-24.9 What is it? Your ideal body weight depends on your gender, age, height and frame.

HEART RATE 60-100_{BPM}

A resting heart rate of 60-100 bpm What is it? The rate that your heart beats per minute.

... and have heart healthy goals

- Eat a balanced, healthy diet
- Don't smoke
- Schedule regular visits with your doctor and get a good understanding of how your medications work.

Visit OakGov.com/wellness