



HOW CAN I GET MY IN-NETWORK DEDUCTIBLE WAIVED?

The Highmark Community Blue plan of the Laborers' District Council of Western Pennsylvania Welfare Fund has a yearly **in-network** individual deductible of \$800 and a family deductible of \$1,600. You have the opportunity to have the **in-network** deductible waived if you and your spouse (if applicable) voluntarily elect to complete the wellness requirements. You deserve the best benefits options, so please read the following information to take the necessary steps to have your in-network deductible waived.

To meet the wellness requirements you and your spouse (if applicable) can voluntarily elect to complete a Wellness Profile ("WP") and have a routine physical exam with the appropriate diagnostic health screenings every year.

What is the Wellness Profile and what are the requirements?

A "Wellness Profile" ("WP") is a confidential survey about your wellness and health. The WP takes about 20 minutes to complete. The simplest way to complete the WP is by doing so online, by using the enclosed instruction information.

If you have any difficulties accessing the Highmark Blue Cross Blue Shield website (www.highmarkbcbs.com) you can call Dedicated Customer Service at 1-866-594-1732. It is strongly recommended that the WP be completed online. Remember that separate log on information must be used by you and your spouse. If you use the same log on only one family member will receive credit for the completion of the WP. If you don't have computer access, you may complete and mail a completed paper WP. To request a paper WP, contact Dedicated Customer Service at 1-866-594-1732. **All paper Wellness Profiles MUST be mailed by September 1st for processing by the September 30th deadline.**

What is the annual routine physical exam with appropriate diagnostic health screenings and what are the requirements?

An annual routine physical exam with appropriate diagnostic health screenings for you and your spouse (if applicable) is required in addition to completion of the WP in order to waive the **in-network** deductible. A minimum of one of the following diagnostic health screenings is required in conjunction with your physical exam to meet the wellness requirements:

- Lipid Profile
- Fasting Blood Glucose
- Routine Cholesterol Screening

Remember to ask if there are any special instructions for your exam or health screenings when making your appointment.

If the member and spouse voluntarily complete the Wellness Requirements the IN NETWORK DEDUCTIBLE will be waived.

If your spouse's preventive exam and diagnostic screenings are covered by another insurance company, you must submit a copy of the explanation of benefits for the preventive exam and appropriate diagnostic health screenings to the Fund Office, so they can be considered to satisfy your spouse's requirements to have the **in-network** deductible waived.

You and your spouse can obtain routine physical exams from your primary care physicians or other professional providers. You may also find a doctor by going to www.highmarkbcbs.com, or you can call Dedicated Customer Service for assistance at 1-866-594-1732.

If you are eligible, or become eligible, for Welfare Fund benefits in the period from January 1st through June 30th, you and your spouse (if applicable) must both meet the wellness requirements by September 30th of that year in order to have the **in-network** deductible waived for the following year. If the wellness requirements are not met you will be responsible for the **in-network** deductible effective January 1st of the following year. **The Fund requires the completion of the wellness requirements EVERY calendar year.**

If you become eligible for Welfare Fund benefits between July 1st and December 31st of any year the **in-network** deductible will be initially waived and you and your spouse (if applicable) must both meet the wellness requirements by September 30th of the following year. If the wellness requirements are not met you will be responsible for the **in-network** deductible effective January 1st of the following year.

Once you are responsible for the **in-network** deductible, you can have it waived by completing the wellness requirements. Once the wellness requirements have been met the **in-network** deductible will be waived for you and your eligible dependents the first day of the following month.

If you fail to meet the September 30th deadline, the earliest the in-network deductible could be waived would be February 1st of the following year.