

Highmark Value-Added **Programs**













Dear Fund Member,

At Highmark, we are committed to offering you tools and resources to help you live your healthiest possible life. The Fund requested that we provide you information on important programs available to you as part of your health plan.

For more information on any of these programs or for information on additional programs as they become available, refer to the fund website at www.261welfarefund.com or call Highmark Member Service at the number on the back of your ID card. You can also visit the Highmark member website at highmarkbcbs.com.

Sincerely, Highmark Member Service



Meet the healthier YOU in 2019!

Your health plan now features Sharecare, a personalized health and wellness platform that empowers you with information that can help you stay healthy and meet your wellness goals. Read on to learn more about the enhanced features you'll receive with Sharecare as a Highmark member. **Register today** to access your personalized experience by performing the simple steps below.

Get started:



Visit Mycare.Sharecare.com



Sign in or sign up!

Already have an existing Sharecare account? Sign in with your existing Sharecare username and password, then be sure to complete the "get started" steps below to unlock your personalized experience.

New to Sharecare? Follow the prompts to set up a new account. Unlock your personalized experience by entering your information exactly as it appears on your Highmark member ID card.

Sharecare



Learn more:



Join 45 million others and discover your RealAge (it only takes minutes).



Monitor your sleep, stress levels, fitness and more — in real time.



Track your health habits and get personalized recommendations to lower your RealAge.

Access your profile:



Download the App or go online. Sharecare gives you a personalized health profile, tips for reaching your goals and a dashboard that shows you when you're in the green with your goals.













MEMBER DISCOUNTS

SAVE ON NON-COVERED PRODUCTS AND SERVICES

The mind – body connection is important to the healing process. Your health care coverage includes access to a wide range of discounts on health-and-wellness-related products and services from national, well-known brands. Take a more active role in your health by using these discounts ... and save up to **30 percent.**

STARTING AN EXERCISE PROGRAM?

Get discounts on fi ness centers, personal trainers and running shoes.

THINKING ABOUT IMPROVING YOUR DIET?

Save on nutrition counseling, diet programs and vitamin supplements.

NEED TO RELAX?

Try yoga, tai chi or massage at discounted rates.

INTERESTED IN COMPLEMENTARY OR ALTERNATIVE MEDICINE?

Experience the benefits of acupuncture, mind – body therapies or holistic medicine.

HAVE VISION OR HEARING ISSUES?

Buy hearing aids at discounted prices or explore eye surgery options.

Learn more. To search the member discounts available to you or to find a practitioner in the discount program, go to your member website and complete the login process by entering your login ID and password. If you do not have a login ID and password, select **Register** and follow the instructions. Select **Member Discounts** and click on **Blue365 Discounts**.

When you visit a practitioner, just show your ID card to get your discount. You are responsible for paying the practitioner directly at the time the product is purchased or the service is received.

The member discount program is separate and distinct from your health benefits plan.



 $\label{thm:linear} \mbox{Highmark Blue Cross Blue Shield is an independent licensee of the Blue Cross and Blue Shield Association.}$

Blue 365 is a registered mark of the Blue Cross and Blue Shield Association.

The Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarjeta de identificación (TTY: 711).

请注意:如果您说中文,可向您提供免费语言协助服务。请拨打您的身份证背面的号码(TTY:711)。

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IF YOU ARE PREGNANT, JOIN BABY BLUEPRINTS[®]!

Expectant mothers who live a healthy lifestyle are more likely to have a healthy baby. But having a baby can be an over-whelming event filled with questions and confusion.

To help expectant mothers better under-stand every stage of pregnancy and make more informed care and lifestyle-related decisions, we are offering Baby Blueprints Maternity Education and Support Program.

This free program provides members with access to in-depth educational information on all aspects of pregnancy through multiple online offerings. Baby Blueprints also gives participants access to individualized support throughout their pregnancy from a nurse Health Coach.

Enrolling in Baby Blueprints is convenient. Expectant mothers simply call toll-free at 1-866-918-5267 to enroll over the phone. They will then receive a confi mation mailing with helpful pregnancy tips.

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Baby Blueprints is a registered mark of the Blue Cross and Blue Shield Association.

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You've made the decision to quit. Now comes the hard part. Quitting requires determination, behavior change and support. The benefits of quitting are immediate and long-term. You can reverse some of the damage tobacco causes to your body. You can reduce your risk for tobaccorelated illnesses and add years to your life. Plus, you can save money — by avoiding tobacco itself and on the cost of tobacco-related illnesses.

OUIT AT YOUR OWN PACE

Your health coach can guide you through the hurdles of quitting with convenient programs that give you the information, strategies and support you need to quit at your own pace.

Programs include:

- Unlimited toll-free telephone access to a coach trained to help people quit tobacco
- · Personalized attention to meet your individual needs
- Ongoing support from your coach to keep you on track, so you can kick the habit once and for all

COPE WITH WITHDRAWAL

The discomforts of nicotine withdrawal are temporary but difficult. Every day that you remain tobacco-free is a victory. Reward yourself in some small way for another smoke-free day.

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Blues On Call is a service mark of the Blue Cross and Blue Shield Association.

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Cross and Blue Shield Association.

FEND OFF CRAVINGS

When cravings hit, call your coach for support. Talk through your craving, identify your tobacco triggers, get tips for making behavioral changes and get the encouragement you need to stick with your decision to quit.

CURB WEIGHT GAIN

If you are tempted to replace tobacco with food, take your mind off ating by doing something else you enjoy. Call your coach for tips.

MANAGE STRESS

Part of quitting tobacco is finding ways to handle stress. Practice relaxation techniques, like yoga, deep breathing or meditation.



KICK THE HABIT FOR THE LAST TIME

Kick the habit for the last time. Talk to your doctor. Or contact Member Service at the number on the back of your ID card to be connected to a health coach.

WALK. RUN A LITTLE. THEN RUN A LITTLE MORE.

GAIN A SENSE OF ACCOMPLISHMENT AND PRIDE WITH THE RUNNING 101 TRAINING PROGRAM.



Train to be a runner with Running 101, a free 10-week physical activity program that provides the tools and support to help you train and complete your first 5K race.

Getting started is easy. Identify a race you want to run. Register and select your race date. Then, 10 weeks before your race, you'll begin receiving the training guide via email.



REGISTER NOW:

To register, visit: http://bit.ly/HighmarkRunning101

CONNECT WITH US:



Fitness Your Way by Tivity Health™

Get access to nearly 9,500 fitness locations

Enroll Now —

Whether you want to lose weight and maximize your energy or manage stress and improve your mood, here's a great, low-cost way to meet your goals. Fitness Your Way allows you to join a network of finess facilities for a discounted rate, so you can work out anywhere when it's convenient for you — at a cost that doesn't stretch your budget.

How It Works —

Fitness Your Way gives you access to nearly 9,500 fitness locations, including select national chains. As a Fitness Your Way member, you can visit any participating fi ness location — anytime, anywhere — as often as you like.

Pay only \$29 a month*, plus a low \$29 enrollment fee, and make a three-month commitment. Do it all online. Then put your fi ness plan into action.

How to Enroll ———

Log in to highmarkbcbs.com (or follow instructions to register).

- Select Member Discounts.
- Scroll to Discounts & Rewards and select Blue365 Discounts.
- Select Login (or register for Blue365 by following the instructions).
- Once registered or logged in, select Browse All Deals and select Fitness Your Way.
- Select Redeem Now to enroll.
- Start using your membership right away! Print your card or download it to your smart phone and present it at any participating facility.

Note: You will be billed for \$29 monthly. If you prefer, you can call 1-888-242-2060 to enroll. For member web support, please call 1-877-298-3918. The fitness center discount is separate and distinct from your health benefits plan.











You just got a bee sting. What should you do? You are going to see your doctor. What questions should you ask? You have back pain. Where can you get help deciding about treatment?

HOW A HEALTH COACH CAN HELP YOU

A health coach provides information and support — at no cost to you. Health coaches are specially trained to answer your questions and support you in making informed health decisions. Even if you're healthy, you can call a health coach to help you set goals that will keep you well.

Call a coach if:

- You have diabetes and need information to change your diet.
- Your cholesterol is a little high, but you don't understand what the numbers mean.
- Your soccer player may have sprained his ankle. Should he go to the emergency room?
- Your bone density test shows that you have osteopenia. How can you prevent it from turning into osteoporosis?
- Your family has a history of heart disease. What can you do to protect yourself?
- You have trouble managing your weight. How can you stay on track?

A HEALTH COACH MAY CALL YOU

If you have a health condition, a health coach may call to off r you programs to meet your needs. We encourage you to discuss these opportunities with the coach.

COACHING IS FREE, CONFIDENTIAL AND VOLUNTARY

There is no charge to talk with a coach. All information shared during your phone conversations with a health coach will remain confidential. There is no obligation to participate in the programs off red. If you do not want to participate in coaching conversations, simply tell the health coach. The coach will make no further attempt to contact you.



MAKE THE CALL

Get the answers you need.
Call Member Service at the number on the back of your ID card for more information or to connect you with a health coach.

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2019 Preventive Schedule

Effective 1/1/2019

PLAN YOUR CARE: KNOW WHAT YOU NEED AND WHEN TO GET IT

Preventive or routine care helps us stay well or finds problems early, when they are easier to treat. The preventive guidelines on this schedule depend on your age, gender, health and family history. As a part of your health plan, you may be eligible to receive some of these preventive benefits with little to no cost sharing when using in-network providers. Make sure you know what is covered by your health plan and any requirements before you receive any of these services.

Some services and their frequency may depend on your doctor's advice. That's why it's important to talk with your doctor about the services that are right for you.

QUESTIONS?



Call Member Service



Ask your doctor



Adults: Ages 19+



Male



General Health Care



Routine Checkup* (This exam is not the work- or school-related physical)

Osteoporosis (Bone Mineral Density)

Screening



Pelvic, Breast Exam

Ages 19 to 49: Every 1 to 2 years

· Ages 50 and older: Once a year

Once a year

Screenings/Procedures	
Abdominal Aortic Aneurysm Screening	Ages 65 to 75 who have ever smoked: One-time screening
Ambulatory Blood Pressure Monitoring	To confirm new diagnosis of high blood pressure before starting treatment
Breast Cancer Genetic (BRCA) Screening (Requires prior authorization)	Those meeting specific high-risk criteria: One-time genetic assessment for breast and ovarian cancer risk
Cholesterol (Lipid) Screening	Ages 20 and older: Once every 5 yearsHigh-risk: More often
Colon Cancer Screening (Including Colonoscopy)	 Ages 50 and older: Every 1 to 10 years, depending on screening test High-risk: Earlier or more frequently
Certain Colonoscopy Preps With Prescription	Ages 50 and older: Once every 10 yearsHigh-risk: Earlier or more frequently
Diabetes Screening	High-risk: Ages 40 and older, once every 3 years
Hepatitis B Screening	High-risk
Hepatitis C Screening	High-risk
Latent Tuberculosis Screening	High-risk
Lung Cancer Screening (Requires use of authorized facility)	Ages 55 to 80 with 30-pack per year history: Once a year for current smokers, or once a year if currently smoking or quit within past 15 years
Mammogram	Ages 40 and older: Once a year including 3-D

Ages 60 and older: Once every 2 years



^{*} Routine checkup could include health history; physical; height, weight and blood pressure measures; body mass index (BMI) assessment; counseling for obesity, fall prevention, skin cancer and safety; depression screening; alcohol and drug abuse, and tobacco use assessment; and age-appropriate guidance.

Adults: Ages 19+

Screenings/Procedures Pap Test • Ages 21 to 65: Every 3 years, or annually, per doctor's advice • Ages 30 to 65: Every 5 years if combined Pap and HPV are negative · Ages 65 and older: Per doctor's advice Sexually Transmitted Disease (STD) Sexually active males and females Screenings and Counseling (Chlamydia, Gonorrhea, HIV and Syphilis) **Immunizations** Chicken Pox (Varicella) Adults with no history of chicken pox: One 2-dose series One-time Tdap Diphtheria, Tetanus (Td/Tdap) • Td booster every 10 years Flu (Influenza) Every year (Must get at your PCP's office or designated pharmacy vaccination provider; call Member Service to verify that your vaccination provider is in the Highmark network) Haemophilus Influenzae Type B (Hib) For adults with certain medical conditions to prevent meningitis, pneumonia and other serious infections; this vaccine does not provide protection against the fland does not replace the annual flu vaccine **Hepatitis A** At-risk or per doctor's advice: One 2-dose series Hepatitis B At-risk or per doctor's advice: One 3-dose series **Human Papillomavirus (HPV)** To age 26: One 3-dose series Measles, Mumps, Rubella (MMR) One or two doses Meningitis* At-risk or per doctor's advice Pneumonia High-risk or ages 65 and older: One or two doses, per lifetime · Zostavax - Ages 60 and older: One dose Shingles • Shingrix - Ages 50 and older: Two doses Preventive Drug Measures That Require a Doctor's Prescription **Aspirin** • Ages 50 to 59 to reduce the risk of stroke and heart attack · Pregnant women at risk for preeclampsia **Folic Acid** Women planning or capable of pregnancy: Daily supplement containing .4 to .8 mg of folic acid Raloxifene Tamoxifen At-risk for breast cancer, without a cancer diagnosis, ages 35 and older **Tobacco Cessation** Adults who use tobacco products (Counseling and medication) **Low to Moderate Dose Select Generic** Ages 40 to 75 years with 1 or more CVD risk factors (such as dyslipidemia, diabetes, Statin Drugs For Prevention of hypertension, or smoking) and have calculated 10-year risk of a cardiovascular event Cardiovascular Disease (CVD) of 10% or greater.

 $[\]ensuremath{^*}$ Meningococcal B vaccine per doctor's advice.

Preventive Care for Pregnant Women



Screenings and Procedures

- · Gestational diabetes screening
- Hepatitis B screening and immunization, if needed
- · HIV screening
- · Syphilis screening
- · Smoking cessation counseling
- Depression screening during pregnancy and postpartum
- Rh typing at first visit
- Rh antibody testing for Rh-negative women
- Tdap with every pregnancy
- Urine culture and sensitivity at first visit

Prevention of Obesity, Heart Disease and Diabetes



Adults With BMI 25 to 29.9 (Overweight) and 30 to 39.9 (Obese) Are Eligible For:

- Additional annual preventive office visits specifically for obesity and blood pressure measurement
- Additional nutritional counseling visits specifically for obesity
- Recommended lab tests:
 - ALT
 - AST
 - Hemoglobin A1c or fasting glucose
 - Cholesterol screening

Adult Diabetes Prevention Program (DPP)



Applies to Adults

- Without a diagnosis of Diabetes (does not include a history of Gestational Diabetes) and
- Overweight or obese (determined by BMI) and
- Fasting Blood Glucose of 100-125 mg/ dl or HGBA1c of 5.7 to 6.4 percent or Impaired Glucose Tolerance Test of 140-199mg/dl.

Enrollment in certain select CDC recognized lifestyle change DPP programs for weight loss.

2019 Preventive Schedule

PLAN YOUR CHILD'S CARE: KNOW WHAT YOUR CHILD NEEDS AND WHEN TO GET IT

Preventive or routine care helps your child stay well or finds problems early, when they are easier to treat. Most of these services may not have cost sharing if you use the plan's in-network providers. Make sure you know what is covered by your health plan and any requirements before you schedule any services for your child.

It's important to talk with your child's doctor. The frequency of services, and schedule of screenings and immunizations depends on what the doctor thinks is right for your child.

QUESTIONS?







Children: Birth to 30 Months¹

General Health Care	Birth	1M	2M	4M	6M	9M	12M	15M	18M	24M	30M	
Routine Checkup* (This exam is not the preschool- or day care-related physical.)	•	•	•	•	•	•	•	•	•	•	•	
Hearing Screening	•											
Screenings												
Autism Screening									•	•		
Critical Congenital Heart Disease (CCHD) Screening With Pulse Oximetry	•											
Developmental Screening						•			•		•	
Hematocrit or Hemoglobin Screening							•					
Lead Screening						•						
Newborn Blood Screening and Bilirubin	•											
Immunizations												
Chicken Pox							Dose 1					
Diphtheria, Tetanus, Pertussis (DTaP)			Dose 1	Dose 2	Dose 3		Dose 4					
Flu (Influenza)**					Ages 6 months to 30 months: 1 or 2 doses annually							
Haemophilus Influenzae Type B (Hib)			Dose 1	Dose 2	Dose 3		Dose 4					
Hepatitis A							Dose 1		Dose 2			
Hepatitis B	Dose 1	Dose 2					Dose 3					
Measles, Mumps, Rubella (MMR)							Do	se 1				
Pneumonia			Dose 1	Dose 2	Dose 3		Do	se 4				
Polio (IPV)			Dose 1	Dose 2	Age	Ages 6 months to 18 months: Dose 3						
Rotavirus			Dose 1	Dose 2	Dose 3							

^{*} Routine checkup could include height and weight measures, behavioral and developmental assessment, and age-appropriate guidance. Additional: Instrument vision screening to assess risk for ages 1 and 2 years. ** Must get at your PCP's office or designated pharmacy vaccination provider. Call Member Service to verify that your vaccination provider is in the Highmark network.

THE Children: 3 Years to 18 Years¹

General Health Care	3Y	4Y	5Y	6Y	7Y	8Y	9Y	10Y	11Y	12Y	15Y	18Y
Routine Checkup* (This exam is not the preschool- or day care-related physical)	•	•	•	•	•	•	•	•	Once a year from ages 11 to 1			o 18
Ambulatory Blood Pressure Monitoring**												•
Depression Screening									Once a year from ages 11 to 18			o 18
Hearing Screening***		•	•	•		•		•		•	•	•
Visual Screening***	•	•	•	•		•		•		•	•	•
Screenings												
Hematocrit or Hemoglobin Screening	Annually for females during adolescence and when indicated											
Lead Screening	When indicated (Please also refer to your state-specific recommendations)											
Cholesterol (Lipid) Screening							Once between ages 9-11 and ages 17-21					
Immunizations												
Chicken Pox		Dose 2									eviously ted: Dose s apart)	1 and 2
Diphtheria, Tetanus, Pertussis (DTaP)		Dose 5			1 dose of Tdap if 5 doses were not received previously							1 dose every 10 yrs.
Flu (Influenza)****	Ages 3 t	o 18: 1 o	r 2 doses	annually					1			
Human Papillomavirus (HPV)		Provides long-term protection against cervical an other cancers. 2 doses when started ages 9-14. 3 doses all other ages.										
Measles, Mumps, Rubella (MMR)		Dose 2 (at least 1 month apart from dose 1)										
Meningitis****									Dose 1		Age 16:	
Pneumonia	Per doct	or's advi	ce						1			
Polio (IPV)		Dose 4										
Care for Patients With Ris	k Facto	rs										
BRCA Mutation Screening (Requires prior authorization)					Per doc	tor's advi	ce					
Cholesterol Screening	Screenir	ng will be	done bas	sed on the	child's fa	mily histo	ory and ri	sk factors				
Fluoride Varnish (Must use primary care doctor)	Ages 5 a	nd youn	ger									
Hepatitis B Screening									Per doc	tor's advic	ie .	
Hepatitis C Screening											High-ri	sk
Latent Tuberculosis Screening												High- risk
Sexually Transmitted Disease (STD) Screenings and Counseling (Chlamydia, Gonorrhea, HIV and Syphilis)										sexually outine che 15-18		
Tuberculin Test	Per doct	or's advi	ce									

^{*}Routine checkup could include height and weight measures, behavioral and developmental assessment, and age-appropriate guidance; alcohol and drug abuse, and tobacco use assessment. ** To confirm new diagnosis of high blood pressure before starting treatment. *** Hearing screening once between ages 11-14, 15-17 and 18-21. Vision screening covered when performed in doctor's office by having the child read letters of various sizes on a Snellen chart. Includes instrument vision screening for ages 3, 4 and 5 years. A comprehensive vision exam is performed by an ophthalmologist or optometrist and requires a vision benefit. **** Must get at your PCP's office or designated pharmacy vaccination provider. Call Member Service to verify that your vaccination provider is in the Highmark network. ***** Meningococcal B vaccine per doctor's advice.



Preventive Drug Measures That Require a Doctor's Prescription

Oral Fluoride

For preschool children older than 6 months whose primary water source is deficient in fluoride

Prevention of Obesity and Heart Disease

Children With a BMI in the 85th to 94th Percentile (Overweight) and the 95th to 98th Percentile (Obese) Are Eligible For:

- · Additional annual preventive office visits specifically for obesity
- Additional nutritional counseling visits specifically for obesity
- · Recommended lab tests:
 - Alanine aminotransferase (ALT)
 - Aspartate aminotransferase (AST)
 - Hemoglobin A1c or fasting glucose (FBS)
 - Cholesterol screening

Adult Diabetes Prevention Program (DPP) Age 18



Applies to Adults

- Without a diagnosis of Diabetes (does not include a history of Gestational Diabetes) and
- Overweight or obese (determined by BMI) and
- Fasting Blood Glucose of 100-125 mg/ dl or HGBA1c of 5.7 to 6.4 percent or Impaired Glucose Tolerance Test of 140-199mg/dl.

Enrollment in certain select CDC recognized lifestyle change DPP programs for weight loss.

Information About the Affordable Care Act (ACA)

This schedule is a reference tool for planning your family's preventive care, and lists items and services required under the Affordable Care Act (ACA), as amended. It is reviewed and updated periodically based on the advice of the U.S. Preventive Services Task Force, laws and regulations, and updates to clinical guidelines established by national medical organizations. Accordingly, the content of this schedule is subject to change. Your specific needs for preventive services may vary according to your personal risk factors. Your doctor is always your best resource for determining if you're at increased risk for a condition. Some services may require prior authorization. If you have questions about this schedule, prior authorizations or your benefit coverage, please call the Member Service number on the back of your member ID card.

¹Information About Children's Health Insurance Program (CHIP)

Because the Children's Health Insurance Program (CHIP) is a government-sponsored program and not subject to ACA, certain preventive benefits may not apply to CHIP members and/or may be subject to copayments.

The ACA authorizes coverage for certain additional preventive care services. These services do not apply to "grand-fathered" plans. These plans were established before March 23, 2010, and have not changed their benefit structure. If your health coverage is a grandfathered plan, you would have received notice of this in your benefit materials.

See a Doctor on Your Time





Virtual medicine is a convenient way to get non-emergency care wherever you are, whenever you want.

Some conditions we treat include:

- Cold & flu symptoms
- Lung infection with or without bronchitis
- Urinary tract infection
- Sore throats
- Coughs

... And more!

Register and download the app to get started

- Visit amwell.com or doctorondemand.com
- Register and download their mobile apps

You can use either or both of these services, depending on the availability of virtual doctors in your area.

To learn more, call Member Service or visit highmarkbcbs.com.





Diabetes Prevention Program

Build healthy lifestyle habits that work for you

If you are not at your ideal weight, chances are you may not feel your best. Carrying even a few extra pounds can increase your risk for developing many conditions, including prediabetes. Diabetes has no cure, but prediabetes can be reversed. If you are at risk for developing diabetes, our Diabetes Prevention Program (DPP) can help you take action.

Lifestyle changes that fit your life

Feel better, have more energy, reduce stress, and lose weight. With coaching and the support of an online community, you can build healthy habits that can last a lifetime.

Retrofit[™] online and mobile app

Our Diabetes Prevention Program is a 12-month, comprehensive program offered through Retrofit and recognized by the Centers for Disease Control and Prevention (CDC). It is available **at no cost to you** as part of your Highmark coverage, if you meet the criteria on the CDC prediabetes screening tool. The Retrofit program provides you with resources like expert-led classes, an online community for peer support, food, weight and activity tracking, personalized coaching and much more. You'll also receive a digital scale and activity tracker to make it easy for you to monitor your progress on Retrofit's dashboard using your computer or Retrofit's mobile app.

Get started today!

To see if you meet the criteria for prediabetes and are eligible for the program, complete the eligibility quiz by following the steps below. If you qualify, you can choose to enroll in Retrofit and receive your program information.

- Log in to your member website at **highmarkbcbs.com**.
- Click on **Diabetes Prevention** to complete the eligibility quiz and learn more.



With the program, you'll get:

Expert coaching



Engaging lessons



Support from a community of individuals just like you



Have questions? We can help.

Call Member Service at the number on the back of your ID card.



Easy Guacamole

Makes 4 to 5 servings

Ingredients:

- 1 T. coarsely chopped red onion
- 1 T. fresh lime juice
- 1/8 tsp. salt
- 1 garlic clove
- 1 ripe peeled avocado
- 1/2 small jalapeño pepper (optional)
- 1 T. cilantro leaves

Directions:

- 1. Place first 5 ingredients in a food processor.
- 2. Pulse 5 times or until finely chopped.
- 3. Add avocado, process until smooth.
- 4. Sprinkle with cilantro.

Nutritional Information:

2 tablespoons: 60 calories, 5 grams fat, 1 gram saturated fat, 61 mg sodium, 2.5 grams fiber, 1 gram protein

For additional recipes and more information on additional programs as they become available, refer to the Ironworkers website.



Discrimination is Against the Law

The Claims Administrator/Insurer complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, including sex stereotypes and gender identity. The Claims Administrator/Insurer does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex assigned at birth, gender identity or recorded gender. Furthermore, the Claims Administrator/Insurer will not deny or limit coverage to any health service based on the fact that an individual's sex assigned at birth, gender identity, or recorded gender is different from the one to which such health service is ordinarily available. The Claims Administrator/Insurer will not deny or limit coverage for a specific health service related to gender transition if such denial or limitation results in discriminating against a transgender individual. The Claims Administrator/Insurer:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Civil Rights Coordinator.

If you believe that the Claims Administrator/Insurer has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, including sex stereotypes and gender identity, you can file a grievance with: Civil Rights Coordinator, P.O. Box 22492, Pittsburgh, PA 15222, Phone: 1-866-286-8295, TTY: 711, Fax: 412-544-2475, email: CivilRightsCoordinator@highmarkhealth.org. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

Insurance or benefit/claims administration may be provided by Highmark, Highmark Choice Company, Highmark Coverage Advantage, Highmark Health Insurance Company, First Priority Life Insurance Company, First Priority Health, Highmark Benefits Group, Highmark Select Resources, Highmark Senior Solutions Company or Highmark Senior Health Company, all of which are independent licensees of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield plans.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call the number on the back of your ID card (TTY: 711).

ATENCIÓN: Si usted habla español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame al número en la parte posterior de su tarjeta de identificación (TTY: 711).

请注意:如果您说中文,可向您提供免费语言协助服务。 请拨打您的身份证背面的号码(TTY:711)。 CHÚ Ý: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Xin gọi số điện thoại ở mặt sau thẻ ID của quý vị (TTY: 711).

알림: 한국어를 사용하시는 분들을 위해 무료 통역이 제공됩니다. ID 카드 뒷면에 있는 번호로 전화하십시오 (TTY: 711).

ATENSYON: Kung nagsasalita ka ng Tagalog, may makukuha kang mga libreng serbisyong tulong sa wika. Tawagan ang numero sa likod ng iyong ID card (TTY: 711).

ВНИМАНИЕ: Если вы говорите по-русски, вы можете воспользоваться бесплатными услугами языковой поддержки. Позвоните по номеру, указанному на обороте вашей идентификационной карты (номер для текст-телефонных устройств (ТТҮ): 711).

تنبيه: إذا كنت تتحدث اللغة العربية، فهناك خدمات المعاونة في اللغة المجانية متاحة لك. اتصل بالرقم الموجود خلف بطاقة هويتك (جهاز الاتصال لذوي صعوبات السمع والنطق: 711).

Kominike: Si se Kreyòl Ayisyen ou pale, gen sèvis entèprèt, gratis-ticheri, ki la pou ede w. Rele nan nimewo ki nan do kat idantite w la (TTY: 711).

ATTENTION: Si vous parlez français, les services d'assistance linguistique, gratuitement, sont à votre disposition. Appelez le numéro au dos de votre carte d'identité (TTY: 711).

UWAGA: Dla osób mówiących po polsku dostępna jest bezpłatna pomoc językowa. Zadzwoń pod numer podany na odwrocie karty ubezpieczenia zdrowotnego (TTY: 711).

ATENÇÃO: Se a sua língua é o português, temos atendimento gratuito para você no seu idioma. Ligue para o número no verso da sua identidade (TTY: 711).

ATTENZIONE: se parla italiano, per lei sono disponibili servizi di assistenza linguistica a titolo gratuito. Contatti il numero riportato sul retro della sua carta d'identità (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen unsere fremdsprachliche Unterstützung kostenlos zur Verfügung. Rufen Sie dazu die auf der Rückseite Ihres Versicherungsausweises (TTY: 711) aufgeführte Nummer an.

注: 日本語が母国語の方は言語アシスタンス・サービスを無料でご利用いただけます。ID カードの裏に明記されている番号に電話をおかけください (TTY: 711)。

توجه: اگر شما به زبان فارسی صحبت می کنید، خدمات کمک زبان، به صورت رایگان، در دسترس شماست. با شماره واقع در پشت کارت شناسایی خود (TTY: 711) نماس بگیرید.

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