



## 2017 Bravo Program







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# How you save.

The Bravo program is voluntary. However, if you enroll in the health plan but choose not to participate, you may miss out on significant financial rewards. **Employees can earn \$30 per month for simply participating!**

## Employees can save up to \$30/month on their health insurance premium!

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### Complete the steps listed in the following categories:

- ☐ Complete Screening (must have a result for either your biometrics or lipid panel) and complete the Health Risk Assessment (\$30/month)

### Goals feel a bit out of reach?

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We can work with you, and if you wish, your provider, to find an alternative way to qualify for the full reward.

Questions? Let's talk. Contact Bravo at 877.662.7286 or visit your company portal at [www.bravowell.com/nogalesaz](http://www.bravowell.com/nogalesaz).

# Don't forget.

Keep these important dates and deadlines in mind.

	Starts	Ends
Register for the Bravo Program	December 1, 2017	February 1, 2018
Complete a Health Risk Assessment	December 1, 2017	February 1, 2018
Complete a Health Screening		February 15, 2018
Submit Your Provider Screening Form	December 1, 2017	March 31, 2018
Receive Your Incentive	July 1, 2018	June 30, 2019

Get started by visiting [bravowell.com/nogalesaz](http://bravowell.com/nogalesaz).

## 1. Register for the Bravo Program

Visit the URL above and follow the step-by-step instructions to create an account or log in. Complete the registration step by providing Bravo with your updated information, ensuring your results are delivered quickly and accurately.

## 2. Complete a Health Risk Assessment

Our health risk assessment (HRA) blends your responses to health-habit questions with biometric data from your screening. (PLEASE NOTE: in order for this step to be considered complete and to receive a comprehensive report, full participation in the biometric screening is required. This includes height, weight, waist circumference, and additional required lab values.) These results and your questionnaire answers generate a report that highlights information regarding your current health status, areas of risk, and suggestions on how to improve your overall health. It covers demographic data, medical history, medications, measured biometrics and actual lab values, resulting in more valuable and telling data.

## 3. Schedule a Screening Appointment or Submit Your Provider Form

Follow the step-by-step instructions to schedule your screening appointment. Your employer is offering on-site screenings at a location near you. You can also opt to download an approved form to visit your own provider or an approved clinic.

## 4. Schedule a Coaching Appointment

For those who stratify into high risk, if you receive an additional letter offering you the option to join, schedule a coaching appointment to help you work towards personal goals and make healthier choices. Consult with experts and take advantage of all the tools available to you.

# Registration is open

## December 1, 2017 – February 1, 2018

To begin registration, visit [www.bravowell.com/nogalesaz](http://www.bravowell.com/nogalesaz). If this is your first time registering, select “Create an Account” to begin the registration process. If you already have an account, simply log in.

### Create an Account

Complete the required criteria to begin (first name, last name, date of birth and SSN) and select “Continue.”

### Create an account

[VER PÁGINA EN ESPAÑOL](#)

#### Step 1 of 2: Participant Information

Complete the following information to begin the process of creating your account.

First Name Use your legal name	<input type="text" value="First Name"/> <small>Please omit any hyphens, apostrophes, or punctuation</small>
Last Name	<input type="text" value="Last Name"/> <small>Please omit any hyphens, apostrophes, or punctuation</small>
Date of Birth	<input type="text" value="mm/dd/yyyy"/>
SSN <small>This is required to match you with information provided by your employer.</small>	<input type="text" value="Last 4 Digits of SSN"/>
<input type="button" value="CONTINUE"/>	

### Account Information

Enter your email/username, and create a password. If you provide your email address, you will receive a verification link. You must click the link in your email in order to verify your account. You must verify your account in order to view your results online.

Choose and answer the security question.

Select your preferred time zone for appointment scheduling.

Click “Continue.”

### Create an account

[VER PÁGINA EN ESPAÑOL](#)

#### Step 2 of 2: Account Information

All fields are required

Need an email address? [Click here](#) to setup a Gmail account in seconds.

Email Address	<input type="text" value="Enter Email"/> <small>You must use either a valid email address or your username.</small>
Confirm Email/Username	<input type="text" value="Confirm Email/Username"/>
Enter a Password	<input type="password" value="Enter Password"/>
Confirm Password	<input type="password" value="Confirm Password"/>
<small>Password must contain:</small> <ul style="list-style-type: none"><li>• Minimum of 8 characters</li><li>• One uppercase letter</li><li>• One lowercase letter</li><li>• One number</li><li>• None of these: " / % &amp;</li></ul>	

Choose a Security Question	<input type="text" value="In what city did you meet your spouse/significant other"/>
Answer to Security Question	<input type="text" value="Enter the answer to the selected security question"/>

Confirm Time Zone <small>Time zone accuracy is important for appointment scheduling</small>	<input type="text" value="Eastern Standard Time"/>
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[Click here to view Bravo's Privacy Statement](#) We are committed to protecting your information. Read more about the steps we take with your employer and our partners.



## Program Overview

# Frequently asked questions.

### Does everyone have to participate?

No, participation in this program is voluntary. However, if you choose not to participate, you may miss out on significant financial rewards, and may be responsible for contributing an additional amount towards your health insurance premium if you enroll in the health plan.

### How will I receive my results?

Results will be posted to your secure account on the health engagement portal. You will receive an email notification to alert you when they are available. You will also receive a results letter mailed to your home.

### Will my employer see my results?

No, Bravo will not share your individual results with your employer. They will be given a summary of the number of dollars each employee received as a result of the health screening, but will not know specifics regarding categories or laboratory results. Your employer may request that your results be sent to an approved third party for coaching or to be included in your health assessment.

### Do spouses need to be screened?

This year, spouses will not be screened.

### Is this program legal? Can my employer really base my premium on my health results?

Bravo administers programs in compliance with the Affordable Care Act's (ACA) Incentives for Non-Discriminatory Wellness Programs in Group Health Plans. This allows employers to adjust healthcare cost for those on the health plan who meet certain health goals. At Bravo, we also adhere to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Protected Health Information (PHI) protocols. This ensures that your personal information, including your results, will not be shared with any unauthorized parties, including your employer.



## Health Screening Details

### Screening with your provider.

When scheduling your screening appointment, it's important to provide your healthcare provider's office with the correct information.

#### **I recently had a preventative health screening. Can I submit those results?**

Bravo will accept results from health screenings that took place on or after July 1, 2017.

#### **What type of appointment am I scheduling?**

When calling your healthcare provider's office to schedule your appointment, tell them you would like to schedule a "preventative screening visit" or an "annual wellness visit." These are the frequently used industry terms and your healthcare provider's office should be able to easily accommodate your request.

#### **If a blood test is required, what type should I request?**

Your healthcare provider's office should perform a standard lipid panel blood test for you. For the most accurate results, fasting 10 to 12 hours prior to your health screening is recommended.

#### **What should I bring with me to the appointment?**

Do not forget to bring your screening form with you to your appointment. Your healthcare provider is required to fill out this form and sign it. This form can be obtained through your web portal.

#### **Who is permitted to sign the form or complete the screening?**

If your provider is an M.D., N.P., P.A., or D.O., CNM their signature is acceptable to process the form. Please remember that a participant signature is also required to process the form. If you are filing an appeal due to pregnancy, a midwife (CNM) is also considered an approved provider.

#### **Once completed and signed, can my healthcare provider submit my form?**

Your healthcare provider can fax the form and lab work results to Bravo on your behalf. As the participant, it is ultimately your responsibility to ensure the completed form is sent to Bravo on or before your "complete by" deadline.

#### **How do I submit my provider screening form to Bravo?**

Submit your form, along with supporting documentation, to your company portal by clicking on the "Upload Document" button on your dashboard.



## Health Screening Details

### Screening tips.

Follow the steps below to ensure a successful screening experience.

- **Arrive five minutes early** and bring a photo ID. This is required to properly verify your identity.
- **Fast for 10 to 12 hours** prior to your screening. Take all medications as prescribed. Speak with your healthcare provider if you feel fasting will affect any medical condition that you have.
- **Stay hydrated** one week prior to screening, and consume 6 to 8 oz. of water before your screening. You **MAY** consume black decaffeinated coffee or clear water but do not add creamer or sweetener to your coffee.
- **Do not smoke or chew tobacco** one hour prior to screening.
- **Avoid exercise** or strenuous activity 24 hours prior to screening.

#### Additional Screening Information

- Remove your shoes and empty your pockets. The health professional will want to make sure your height and weight are accurately captured. Height will be recorded to the nearest 1/4 inch. Weight will not be rounded.
- The waist measurement will be taken at the navel using a 360 degree spin method, rounding to the nearest 1/4 inch.
- Your pulse will be recorded for 60 seconds.
- Your blood pressure will be taken in the opposite arm if the first reading is over 120/80. No more than two blood pressure readings will be taken.
- The finger stick will take place after your blood pressure reading has been recorded.



#### Don't forget!

- Review the recorded measurements to verify accuracy.
- Carefully read and sign your screening form.



## Results

# Appeals

There are two types of appeals.

### Type 1

You're disputing the accuracy of your results.

### Type 2

Your healthcare provider feels it is unreasonably difficult due to a medical condition, or it's medically inadvisable for you to meet the employer's goals or alternative.

#### Where do I obtain an appeal form?

An appeal form may be printed from your web portal at [www.bravowell.com/nogalesaz](http://www.bravowell.com/nogalesaz) or by calling Bravo toll-free at 877.662.7286.

#### How soon should I file an appeal?

Appeals must be filed by the appeal deadline date listed on your results letter, which is typically 30 days. Submit your appeal and supporting documentation via fax, by mail or by email. Contact information is located on your appeal form.

#### Who pays for the retesting when an appeal is submitted?

Any retesting will be at your expense.



**Want to know more about our appeals process?**  
**Visit your personal dashboard on your web portal.**

#### What if I don't meet my program goal? Is there an alternative?

If your program requires the achievement of a goal, there may be alternative ways to qualify. If we have results from your last Bravo screening, your improvement will be automatically considered. If Bravo does not have prior results, you will be provided the information you need to request an alternative goal in your results letter. Alternatives are typically based on improvement from prior results or on completion of a program that is related to health improvement within a certain biometric. Contact Bravo and we will work with you (and, if you wish, with your provider) to find a wellness program with the same reward that is right for you in light of your health status.

#### What if my results are not consistent with recent tests?

In the event that screening results differ significantly from recent medical results, a Type 1 (dispute of accuracy) appeal may be submitted with supporting documentation within 30 days of the date displayed on your original results letter. Any retesting may be at your expense.

#### What if I have a medical condition and I cannot meet the goal or the alternative goal (if applicable)?

If your employer's goal(s) or reasonable alternative goal(s) are considered unreasonably difficult due to a medical condition or medically inadvisable (Type 2 appeal), Bravo manages appeals and coordinates personalized alternatives for these goals. Contact us for more information.

# Healthy Resources & Activities



Track daily activities, nutrition and fitness.



Access meal plans and hundreds of recipes.



View exercise videos with certified trainers.



Access individual challenges.

## The Online Health University

You can choose from various video-based courses with topics such as weight reduction and nutrition, stress management, diabetes management and exercise.

**47%** Reported lower stress levels  
(with LivingFree)

**52%** Reduced levels of alcohol  
consumption (with LivingSmart)

**33%** Quit smoking tobacco  
(with LivingFree)

**77%** Increased physical activity  
(with LivingFit)

**53%** Reduced BMI more than 5 percent  
(with LivingLean)

## Individual Challenges

Individual challenges will get you thinking of fresh ways to engage in different areas of focus.

**Purpose:** Find and define your potential and purpose using the 4 P's - purpose, passion, potential and people.

**Financial:** Get real with your current finances and look at your financial life holistically.

**Physical:** Increase physical activity with suggestions for different exercises.

**Brainy:** Exercise and activate your brain with trivia.

**Peer to Peer:** Find ideas and activities to complete with a friend, coworker, neighbor, etc.

**Balance:** Create and maintain work/life balance.

**Nutrition:** Practice healthy nutrition/eating habit ideas.

**Community:** Get involved in your local community.

## To access the tools...

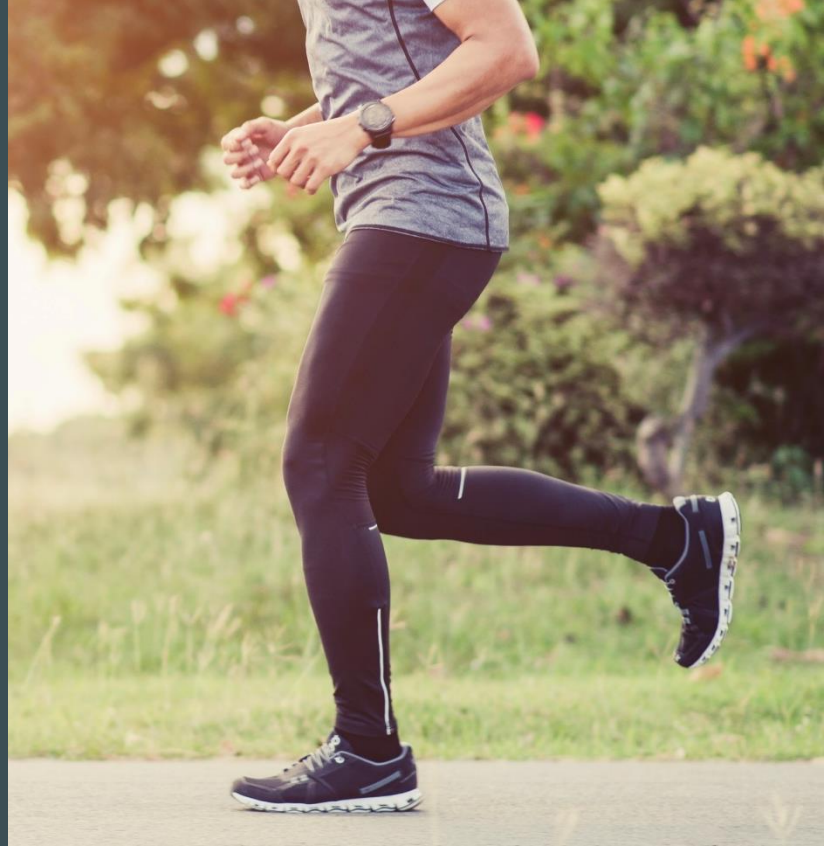
Simply visit [www.bravowell.com/nogalesaz](http://www.bravowell.com/nogalesaz) to get started and click on the "Access Your Healthy Resources" icon on your dashboard.

If you have questions regarding program resources, contact Bravo for more information at 877.662.7286.



# Support

Wellness programs can feel overwhelming. We want to make that easier for you. We have partnered with your employer to provide you with the following tools to make your journey to wellness a little easier.



## Online Health University

How can I control my poor eating habits? Why can't I get (or stay) motivated to exercise? Can I really overcome my smoking addiction? How can I control my diabetes? Do I drink too much alcohol? Why am I so stressed? Take one of the Online Health University courses to get some answers!

## Personal Health Coaching

Sometimes we need a little nudge to help us achieve a goal. Control your risks with one-on-one coaching. In four sessions, your personal coach can help you set realistic goals and develop a plan to improve lifestyle behaviors.

Want more information? Let's talk. Visit your web portal at [www.bravowell.com/nogalesaz](http://www.bravowell.com/nogalesaz).

## Additional Tools and Resources

In addition to all that is available on your portal, check out the information below providing additional health information and your specific employer's resources.

### Cholesterol

- [http://www.heart.org/HEARTORG/Conditions/Cholesterol/Cholesterol\\_UCM\\_001089\\_SubHomePage.jsp](http://www.heart.org/HEARTORG/Conditions/Cholesterol/Cholesterol_UCM_001089_SubHomePage.jsp)
- <http://www.webmd.com/cholesterol-management/lowering-triglyceride-levels?page=2>
- <http://www.mayoclinic.org/reduce-cholesterol/art-20045935>

### Blood Pressure

- [http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/AboutHighBloodPressure/About-High-Blood-Pressure\\_UCM\\_002050\\_Article.jsp#.VyJG3Xp3Upk](http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/AboutHighBloodPressure/About-High-Blood-Pressure_UCM_002050_Article.jsp#.VyJG3Xp3Upk)

### Body Mass Index

- <http://www.bmicalculator.org/how-can-i-lower-my-bmi/>

### Glucose

- <http://www.diabetes.org/are-you-at-risk/>

### Tobacco

- <http://betobaccofree.hhs.gov/>

### Low Blood Sugar

- <http://www.webmd.com/a-to-z-guides/tc/symptoms-of-low-blood-sugar-topic-overview>

### A1C

- <http://www.everydayhealth.com/hs/type-2-diabetes/lower-a1c-for-diabetes-control/>

### Triglycerides

- <http://www.webmd.com/cholesterol-management/lowering-triglyceride-levels#1>



### Health Risk Assessment

The health risk assessment (HRA) is an added feature that provides you with additional information in your results letter about your current health status, areas of risk, and suggestions on how to improve your health. It covers demographic data, medical history, medications, measured biometrics and actual lab values, resulting in more valuable and telling data.



## EEOC Privacy Notice

Federal law requires employers that offer wellness programs that collect employee health information to provide a notice to employees informing them what information will be collected, how it will be used, who will receive it, and what will be done to keep it confidential. The notice below fulfills these requirements.

### Notice Regarding Wellness Program

[City of Nogales] "Employer" has contracted with Bravo Wellness, LLC to administer all or part of its voluntary employee wellness program. 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 (ADA) of 1990, the Genetic Information Nondiscrimination Act (GINA) of 2008, the Affordable Care Act (ACA) and the Health Insurance Portability and Accountability Act (HIPAA), as applicable, among others. If you choose to participate in the wellness program you may be asked to complete a voluntary health risk assessment or "HRA" 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 may also be asked to complete a biometric screening or other examinations, which may include a blood test for cholesterol levels (Total, HDL, LDL), triglycerides, serum cotinine (nicotine) and glucose as well as a blood pressure reading(s), height, weight, waist measurements and your pulse. When possible, your blood specimen will be confidentially processed by a laboratory that provides a panel of common preventative wellness measures provided solely for your information.

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, such as targeted health education, online and telephonic health coaching and health challenges. You also are encouraged to share your results or concerns with your own provider. You are not required to complete the HRA or to participate in the screening or other medical examinations.

However, if you choose to participate in the wellness program you may receive an incentive for participating. More specific details regarding the wellness program, including how incentives are earned can be found in the **Program Guide**. Although you are not required to complete the HRA or participate in the biometric screening, only those who do so will receive the incentives available.

As noted in the **Program Guide**, a portion of the incentives available may be linked to certain health-related activities or to the achievement of certain health outcomes. 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. You may request a reasonable accommodation or an alternative standard by contacting Bravo Wellness at 877-662-7286. See the **Program Guide** for more details concerning reasonable alternatives. Additional information will be provided to you in your results summary as well.

### Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your protected health information (PHI). Although the wellness program and your employer may use aggregate information collected to design a program based on identified health risks in the workplace, Bravo Wellness and its contracted partners will never disclose any of your personal medical 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, as necessary to support health plan or wellness program administration or as permitted by law. In no event will medical information that personally identifies you that is provided in connection with the wellness program 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.

In addition, all medical information obtained through the wellness program is required to be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program may 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 can ask to see or get a copy of the health information we have about you. We may charge a reasonable cost-based fee.

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 are a member of your employer-sponsored health plan, the provisions of the health plan privacy notice may also apply. Please contact your health plan administrator for a copy of the notice. If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, or if you would like a paper copy of this notice or a copy of **Bravo's Privacy Statement** mailed to you, please contact Bravo Wellness Participant Services at 877-662-7286. Bravo's Privacy Statement is also located On the Bravo Wellness website at <http://www.bravowell.com/privacy-statement/>.



Toll-Free 877.662.7286

Support/Help [support@bravowell.com](mailto:support@bravowell.com)

[www.bravowell.com](http://www.bravowell.com)

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