Beginning April 1, 2016, APEHP is offering to its employers and members a new Wellness Program that will benefit both employers and employees.

The following Q&A should answer any questions you may have regarding participation in the program. If you have any questions after reviewing this Q&A, please reference the APEHP website at APEHP.com or call 1-888-670-8135.

**Employer Questions**

Q1. Does an Employer or Employee have to participate in the program?
A1. No. Participation in the program is strictly voluntary.

Q2. What is the benefit of an employee electing to participate in the program?
A2. If 80% of your employees complete the program by Dec 31, 2016, you will be eligible for a health care fee credit of 1% of your paid health care fees less any ACA fees.

Q3. When will the Employer receive this credit?
A3. You will be credited 1% of your Jan-Dec 2016 Health Care Fees on your April 2017 invoice.

Q4. What if the group terms before April 2017?
A4. If a group terminates before April 2017, they forfeit their eligibility for the 1% credit.

Q5. What are the requirements for participation?
A5. 80% of your employees must complete the program in order for you to be eligible for a health care fee credit of 1% of your paid health care fees less any ACA fees.

Q6. What do the Employers’ employees have to do in order to complete the program?
A6. Employees will have to complete and return a Wellness Participation Form.

Criteria for employees:

- Enrolled members, age 18+.
- Earn a **$50 cash reward** for completing the following wellness Initiatives:
  - Health Assessment Questionnaire
    - This action can be completed online by going to [www.qualcareinc.com](http://www.qualcareinc.com) and select Go to My QualCare. The completion of the Health Assessment Questionnaire does not require physician signature.
Frequently Asked Questions

✓ Biometric Screening
  ▪ Blood Pressure
  ▪ Body Mass Index (BMI) Screening
  ▪ Cholesterol & Glucose Screening
✓ Health Exams/Screenings
  ▪ Annual Physical Exam
  ▪ Colorectal Screening¹
  ▪ Mammography Screening²
  ▪ Engagement in QualCare’s Health Promotion Program³

¹ All individuals over age 50 should have colorectal screening performed once every 5 years. If you have previously met this requirement or your physician opts you out, you can have your physician sign the form indicating the reason.

² All women age 40 and older should have a mammography screening performed once per year.

³ If member satisfies the clinical requirements (based on claim data), member will be contacted by a member of QualCare’s Health Promotion team and must agree to actively participate to be credited for this Health Action.

*Note: CentraState members will receive a $50 cash reward for completing the Health Assessment Questionnaire and an additional $50 cash reward upon completion of the Wellness Program Screenings.

Q7. Can employees participate in the program if the group chooses not to?
A7. Yes.

Q8. How does an Employer enroll in the program?
A8. To enroll, sign the APEHP Wellness Program Participation that was sent to you. Additional forms can be found on the APEHP website (APEHP.com).

Q9. How does the Employer return the APEHP Wellness Program Participation Form?
A9. Form can be returned by:

  Fax: 732-465-7328

  Mailing address:
  Affiliated Physicians & Employers Health Plan
  30 Knightsbridge Road
  Piscataway, NJ 08854
  Attn: Operations Coordinator
Affiliated Physicians & Employers Health Plan (APEHP)
Wellness Program
Frequently Asked Questions

Employee Questions

Q1. What are the guidelines required for Employee participation?
   A1. There are 4 easy steps for employees to follow in order to begin and complete the process.
   • Step 1. Complete enrollment form.
   • Step 2. Complete Health Actions form between 4/1/16 and 12/31/16.
   • Step 4. Receive your reward

Q2. Do employees have to participate in the program?
   A2. No. Participation in the program is strictly voluntary.

Q3. What is the benefit of participating in the program?
   A3. Upon completion of the program your employee will be entitled to a $50 cash reward.

Q4. Will Plan M & N members be compensated separately for completing the Health Assessment Questionnaire and the Wellness Program Screenings?
   A4. Yes. If your employee has selected to participate in Plan M or N, they will receive a $50 wellness reward for completing the Health Assessment Questionnaire and an additional $50 upon completion of the Wellness Program screenings.

Q5. Is a spouse, domestic partner or dependent(s) eligible to participate in the program?
   A5. No. The program is only open to enrolled employees.

Q6. What are the requirements for employee participation?
   A6. (1) Enrolled members, age 18+.
   (2) Employee must complete the following health actions and have their physician date and sign the Health Actions Requirement form by 12/31/16 in order to be eligible for your reward. Exceptions can be requested if they have already received any of their health actions between 1/1/16 and 3/31/16 by having their physician date and sign the form for those previously completed actions.
   - Health Assessment Questionnaire
     • This action can be completed on line by going to www.qualcareinc.com and select Go to My QualCare. The completion of the Health Assessment Questionnaire does not require physician signature.
Biometric Screening
- Blood Pressure
- Body Mass Index (BMI) Screening
- Cholesterol & Glucose Screening

Health Exams/Screenings
- Annual Physical Exam
- Colorectal Screening\(^1\)
- Mammography Screening\(^2\)
- Engagement in QualCare’s Health Promotion Program\(^3\)

\(^1\) All individuals over age 50 should have colorectal screening performed once every 5 years. If you have previously met this requirement or your physician opts you out, you can have your physician sign the form indicating the reason.

\(^2\) All women age 40 and older should have a mammography screening performed once per year.

\(^3\) If member satisfies the clinical requirements (based on claim data), member will be contacted by a member of QualCare’s Health Promotion team and must agree to actively participate to be credited for this Health Action.

**Note:** Plan M & N members will receive a $50 cash reward for completing the Health Assessment Questionnaire and an additional $50 cash reward upon completion of the Wellness Program Screenings.

**Q7. How do your employees enroll in the program?**

**A7.** Employees will need to sign the APEHP Wellness Program Enrollment form. Additional forms can be found on the APEHP website (APEHP.com) or by calling 1-888-670-8135. Once completed, the form can be returned by:

- **Fax:** 732-465-7328
- **Or**
  - **Mailing address:**
    - Affiliated Physicians & Employers Health Plan
    - 30 Knightsbridge Road
    - Piscataway, NJ 08854
    - Attn: Operations Coordinator

**Q8. How do your employees obtain a Wellness Program Health Actions Form?**

**A8.** The Wellness Program Health Actions Form will be included with your employee’s welcome letter. Additional forms can be found on the APEHP website (APEHP.com) or by calling 1-888-670-8135.
Q9. How long does your employee have to complete the program?
A9. Your employee must complete the health actions referenced in Question 6 and have their physician date and sign the Health Actions Requirement form by 12/31/16 in order to be eligible for their reward. Exceptions can be requested if your employee has already received any of their health actions between 1/1/16 and 3/31/16 by having their physician date and sign the form for those previously completed actions.

Q10. Where does your employee send their Health Actions form once completed?
A10. Once completed, form can be returned by:

- Fax: 732-465-7328
- Or
- Mailing address:
  Affiliated Physicians & Employers Health Plan
  30 Knightsbridge Road
  Piscataway, NJ 08854
  Attn: Operations Coordinator

Q11. When does your employee receive their $50 Wellness Reward?
A11. Upon completion of the health actions and receipt of the Health Actions Requirement form, your employee will be eligible to receive a $50 wellness reward once verification of screenings/assessments is complete. The reward will be mailed to your employee’s home within approximately 60 days from receipt.

*Note: Plan M & N members will receive a $50 cash reward for completing the Health Assessment Questionnaire and an additional $50 cash reward upon completion of the Wellness Program Screenings.*