



# Program Requirements | Chronic Condition

The Healthy Choice program is a voluntary premium discount program from the Employee Health Plan (EHP) that rewards you for taking action to manage your health. The program provides resources to help you save on your premium and support your overall well-being. When you participate and meet the program requirements, you'll be eligible to earn up to a 30% discount off next year's premium.

If you have a spouse on the health plan, they can also participate, and together you can achieve the best discount.

## Health Status | Chronic Condition

Your current Health Status is: **Chronic Condition**. This means you have been identified with at least one of the conditions listed below. You will partner with a Care Coordinator and/ or a Health Coach to help you meet your Healthy Choice goals. Select the condition to view the clinical goals.

<a href="#">Asthma</a>	<a href="#">Hyperlipidemia (High Cholesterol)</a>	<a href="#">Weight</a>
<a href="#">Diabetes</a>	<a href="#">Hypertension (High Blood Pressure)</a>	<a href="#">Weight (Health Coaching)</a>
	<a href="#">Nicotine Cessation</a>	

## How to Get Started

- Download the Healthy Choice app and create or log in to your account.
- Login to your Healthy Choice portal, under "Chronic Conditions" click "Enroll".
- Enroll in **ALL** required programs by completing the questionnaire and click "submit".
- Your status will update to "In progress" until you connect with your Care Coordinator or Health Coach.
- If you are enrolling in a Care Coordination program, you can expect a phone call within two weeks from date of enrollment.
- If you are enrolling in a Health Coaching program, you will receive an email from "Cleveland Clinic Support" to complete your enrollment in the Health Coaching program.

APPLE



ANDROID



*continued on next page*

### How to Earn Full Credit

- Enroll in **ALL** required premium Coordinated Care and/or Health Coaching program(s) no later than **March 31**.
- Connect with your Care Coordinator or Health Coach to review your goals and participate in the program for a minimum of **6 months** and meet all program goals.
- If you are identified for multiple conditions, you must meet your goals in all programs between **Aug. 15–Sept. 30** to earn full credit.
- Obtain and report completion of final metrics to your Care Coordinator between **Aug. 15–Sept. 30**.

If you have more than one Chronic Condition your program goals may vary. Pregnancy changes your program requirements. Refer to the specific Program Requirement and FAQs for specific requirements. These can be found in your portal or contact your Care Coordinator or Health Coach for more information.

### How to Earn Partial Credit

#### Option 1

- Enroll in **ALL** required premium Coordinated Care and/or Health Coaching program(s) no later than **March 31**.
- Connect with your Care Coordinator or Health Coach to review your goals and participate in the program for a minimum of **6 months** and meet some of your program goals.
- If you are identified for multiple conditions, you must meet some of your goals in the programs between **Aug. 15–Sept. 30** to earn partial credit.
- Obtain and report completion of final metrics to your Care Coordinator between **Aug. 15–Sept. 30**.

#### Option 2

- Enroll in **ALL** required premium Coordinated Care and/or Health Coaching program(s) no later than **June 30**.
- Connect with your Care Coordinator to set your goals and participate in the program for a minimum of **3 months** and meet all program goals.
- If you are identified for multiple conditions, you must meet all of your goals between **Aug. 15–Sept. 30** to earn partial credit.
- Obtain and report completion of final metrics to your Care Coordinator between **Aug. 15–Sept. 30**.

If you have more than one Chronic Condition your program goals may vary. Pregnancy may change your program requirements. Refer to the specific Program Requirement and FAQs for more details. These can be found in your portal or contact your Care Coordinator or Health Coach for more information.

*continued on next page*

## Clinical Goals | Chronic Condition

The clinical goals below are required for you to earn a Healthy Choice premium discount. Progress toward meeting these goals will be listed in the Healthy Choice portal. These goals are specific to the Chronic Conditions programs and your program goals may vary. Please contact your Care Coordinator to understand the goals specific to you.

Clinical Goals	
<b>Asthma</b>	<ul style="list-style-type: none"> <li>• I communicate with my Care Coordinator regularly.</li> <li>• I understand my asthma action plan and reviewed it with my Care Coordinator this year.</li> <li>• I understand my medications for asthma, and I refill them and take them as directed.</li> </ul>
<b>Diabetes</b>	<ul style="list-style-type: none"> <li>• I communicate with my Care Coordinator regularly.</li> <li>• I had my annual dilated retina eye exam.</li> <li>• I had my annual foot check completed.</li> <li>• I had my HbA1c testing done at least 2 times this year.</li> <li>• My HbA1c is at or below a target of 7.0% or custom target approved through my Care Coordinator.</li> <li>• I have completed my annual Microalbumin testing.</li> <li>• I understand my medications for diabetes and their side effects and I refill them and take them as directed.</li> </ul>
<b>Hyperlipidemia</b>	<ul style="list-style-type: none"> <li>• I communicate with my Care Coordinator regularly.</li> <li>• I had my annual lipid panel testing done.</li> <li>• My low-density lipoprotein (LDL) is at or below 130mg/dl, or 100mg/dl if identified with Coronary Artery Disease (CAD) or diabetes.</li> <li>• If prescribed, I am taking my medication for hyperlipidemia as ordered.</li> </ul>
<b>Hypertension</b>	<ul style="list-style-type: none"> <li>• I communicate with my Care Coordinator regularly.</li> <li>• My blood pressure is at or below 140/90. If I also have Coronary Artery Disease (CAD) my blood pressure is at or below 130/80.</li> <li>• I understand my medications for hypertension and their side effects and refill them and take them as directed.</li> </ul>
<b>Weight</b>	<ul style="list-style-type: none"> <li>• I communicate with my Care Coordinator regularly.</li> <li>• I have met my weight loss goal.</li> <li>• My LDL is at or below 130mg/dl. If I also have Coronary Artery Disease (CAD) or diabetes, my LDL is at or below 100mg/dl.</li> <li>• My blood pressure is at or below 140/90. If I also have Coronary Artery Disease (CAD) my blood pressure is at or below 130/80.</li> </ul>
<b>Weight (Health Coaching)</b>	<ul style="list-style-type: none"> <li>• I have met my weight loss goal.</li> <li>• I have communicated with my Health Coach the required times throughout the program year.</li> </ul>
<b>Nicotine Cessation</b>	<ul style="list-style-type: none"> <li>• I have an active Healthy Choice account.</li> <li>• I have communicated with my Health Coach the required times throughout the program year.</li> </ul>

*continued on next page*

## Finish Strong by the Sept. 30 Final Deadline

**Questions? Call 216.986.1050, option 3 or toll-free at 1.888.246.6648, option 3.**

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to all employees. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. We will work with you (and, if you wish, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

Under HIPAA, EHP, like other health insurers, is permitted to access health data for the purposes of claims payment, health program development and treatment coverage. As with any of our healthcare plans and programs, plan member privacy is protected in full compliance with HIPAA.

For more details about our privacy policies, visit <https://employeehealthplan.clevelandclinic.org/Privacy-Policy.aspx>

*Remember:* HIPAA regulations apply to questions you ask about the members of your household covered by the Health Plan.