



A Wellness Reimbursement Program for Healthy Living

Independence 
Independence Administrators

A healthy lifestyle should be rewarded

We know how important it is to maintain a healthy lifestyle for you and your family. That's why your health benefits plan includes a Wellness Reimbursement Program to encourage you and your loved ones to get healthy and stay healthy.



Whether you're looking for an affordable way to get fit, or need an extra incentive to quit smoking – the Independence Administrators Wellness Reimbursement Program can make it easier to live healthy.

Take advantage of benefits such as:

- **Weight management.** Receive up to a \$150 reimbursement when you enroll in one of the following:
 - onsite Weight Watchers® program;
 - online Weight Watchers program;
 - onsite in-network hospital based program.
- **Bicycle helmets.** Get a \$25 reimbursement when purchasing a bike helmet that meets the Consumer Product Safety Commission Standards or one that is certified by Snell Memorial Foundation.
- **Fitness reimbursement.** Whether you attend a fitness center in person or subscribe to virtual fitness programs for at-home workouts, you can get reimbursed up to \$150 of your yearly fees.

Fees can include fitness club fees or subscriptions to programs that you join online - or a combination of in-person and virtual program costs - when you meet all requirements.
- **Tobacco cessation incentive.** Offers 100 percent reimbursement of fees, up to \$150, when you complete a tobacco cessation program.

How to get reimbursed

Email your requests for reimbursement to the Wellness Reimbursement Department at Healthaccountplus@ibxtpa.com

If you have questions, call the service number on your ID card, TTY/TDD 711.*

You will receive reimbursement after Independence Administrators verifies your documentation.

Please read the full eligibility requirements before submitting your requests for reimbursement.

Weight management reimbursement

Get up to \$150 back.

Your Wellness Reimbursement Program can put \$150 back in your pocket if you participate in a qualified weight management program. You can attend in-person meetings through Weight Watchers or an in-network hospital based program. Or do it online at weightwatchers.com. Just follow the steps below and you'll be reimbursed for getting healthy.



Eligibility

Active plan members in your health benefits plan are eligible for one reimbursement of up to \$150 per covered plan member, per 365-day period. If you participate in more than one program in a 365-day period, only one can qualify for reimbursement.

Weight Watchers program

- 1. Join Weight Watchers.** Find an onsite location OR join online at weightwatchers.com.
- 2. Your first visit counts.** The 365-day period begins on the date of your first visit or the date you join online.
- 3. Save receipts.** Mail your receipts or email confirmation as proof of payment.
- 4. Submit for reimbursement.** Mail your receipts for reimbursement no later than 90 days after the end of your 365-day benefit period.

In-network hospital based program

- 1. Join an in-network hospital based program.** Find a program that is in-network and works best for you.
- 2. Your first visit counts.** The 365-day period begins on the date of your first visit.
- 3. Save receipts.** Be sure to provide proof of payment and participation.
- 4. Submit for reimbursement.** Mail your receipts and proof of participation for reimbursement no later than 90 days after the end of your 365-day benefit period.

The following items and programs are not eligible for reimbursement:

- dietary supplements
- plans that require the purchase of food products designed for use with the plan
- injections
- meal plans
- liquid meals

Bicycle helmets

Get \$25 back when you buy a helmet.

Getting reimbursed is as easy as 1,2,3!

1. Purchase a qualified bicycle helmet. The helmet must meet the Consumer Product Safety Commission standards or be certified by the Snell Memorial Foundation.

2. Save your receipts. Be sure to save proof of purchase and proof of helmet certification, such as a tag, box, or receipt.

3. Request your reimbursement. Submit your receipt and helmet certification no later than 90 days after the end of your 365-day benefit period.

Eligibility

Active plan members in your health benefits plan are eligible for **one reimbursement** of up to \$25 per covered plan member, per 365-day period.



Tobacco cessation reimbursement

Get up \$150 cash back.

An incentive to quit

You can be reimbursed up to \$150 in any 12-month period upon confirmation of your successful completion.

Eligibility

Active plan members in your health benefits plan are eligible for one reimbursement of up to \$150 per covered plan member, per 365-day period. If you participate in more than one program within a 365-day period, only one is eligible for reimbursement.

Ready. Set. Quit!

1. Complete a tobacco cessation program. Join any in-network hospital-based program that focuses on behavior modification and provides regular support such as weekly meetings or telephone based sessions.

2. Your first visit counts. Your 365-day period starts on the date of your first visit.

3. Request your reimbursement. Submit documentation from the facility stating you completed the program along with proof of payment, no later than 90 days after the end of your 365-day benefit period.

The following costs and programs are not eligible for reimbursement

- copays, coinsurance, deductibles
- hypnosis
- acupuncture

- dietary supplements
- injections
- electronic cigarettes



Fitness reimbursement

Join a fitness center or subscribe to virtual fitness programs for at-home workouts, complete 120 workouts, and get reimbursed.

An incentive to stay fit

Exercise regularly and you can earn back up to \$150 per year of your gym membership fee, virtual fitness subscription, or a combination of both.

Eligible fitness programs

Fitness facilities

An eligible fitness facility must be full-service and offer continuous cardiovascular, flexibility, and resistance training and classes, such as: aerobics, spinning, body sculpting, kickboxing, resistance training, free weights, treadmills, elliptical, pool for laps, track for running/walking, and cross fit in a supervised setting.

Virtual subscriptions for at-home workouts

Virtual subscriptions approved for participation include Peloton, Nike Training Club, MyFitnessPal, Polar, and other trackable activities that encompass a fitness facility workout.

Eligibility

Active plan members in your health benefits plan are eligible for one reimbursement of up to \$150 per covered plan member, per 365-day period. You must be enrolled in the health benefits plan at the time of your reimbursement.

- 1. Join a gym or online subscription service.** Choose a full-service fitness center or virtual subscription service as described above.
- 2. Exercise 120 days in a year.** Complete and record 120 workouts within 365 days. You may record up to one workout per day, and each workout must last at least 30 minutes. You can count eligible workouts at a gym, eligible virtual subscription workouts at home, or a combination of both.
- 3. Your first workout counts.** The 365-day period begins with the date of your first workout.
- 4. Record your workouts.**

For workouts at a gym, get a computer printout of your attendance from your gym or use the log in this booklet. If you use the log, it must be completely filled out, and **signed by a facility representative.**

For virtual subscription at-home workouts, complete the log in this booklet or use a digital log if the service offers one.
- 5. Provide receipts.** You'll need either: (1) proof of your membership fee payment on fitness facility letterhead; or (2) a copy of the fitness facility contract and receipt; and/or (3) verification of the original virtual subscription payment receipts along with the virtual visits.
- 6. Request your reimbursement.** Submit your proof of payment and the logs or printouts of your visits/workouts no later than 90 days after the end of your 365-day benefit period. The 365 days start on the date of the first visit/workout you submit.



How to get reimbursed

Email your requests for reimbursement to the Wellness Reimbursement Department at Healthaccountplus@ibxtpa.com

Lost workout data

If you use a fitness facility printout as your workout log or track/log your at-home workouts digitally with your online subscription service, you assume the risk that some workouts may not be credited toward the reimbursement if the facility or service has computer or other difficulties. We do not assume any responsibility for the reliability of fitness facility computer systems or online subscription services. To prevent issues of this type, you can complete the log to track your workouts.

The following items and programs are not eligible for reimbursement:

Memberships for athletic clubs that focus on a single competitive or recreational sports activity are not eligible for reimbursement. Personal fitness instructor fees are not eligible for reimbursement. Ineligible programs also include: Pilates; yoga; outdoor "boot camp" style program; tennis; chiropractic services; racquetball; squash; golf; basketball; recreational swim clubs; dance school; sculling/rowing; martial arts; karate class; sports leagues; or country clubs.

Lifetime memberships. You can receive up to \$150 reimbursement of the membership fees you paid during your 365-day fitness program benefit period.

Falsification

Logging in for another plan member at a fitness facility is prohibited.

Falsification of information in order to receive your reimbursement is strictly prohibited.

Questions?

Call the service number on your ID card.

*Independence Administrators has free telephone language-line services and TTY/TDD for the deaf or hearing impaired. If you or a member you know has difficulty communicating because of an inability to speak or understand English and needs language assistance, call the Customer Experience number on your ID Card (for the hearing impaired: TTY/TDD 711). Follow the prompts or wait to speak with a Customer Experience Advocate.

Wellness Reimbursement Fitness Logbook

Member name _____ ID # _____

Fitness center authorized signature _____

Fitness center signature required for in-person fitness center workouts. For virtual workouts, please include a copy of the subscription service's digital log.

Date	Type/place of workout (such as fitness center or virtual program name)	Workout duration
1.	_____	_____
2.	_____	_____
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Date	Type/place of workout (such as fitness center or virtual program name)	Workout duration
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Date	Type/place of workout (such as fitness center or virtual program name)	Workout duration
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Date	Type/place of workout (such as fitness center or virtual program name)	Workout duration
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