



HEALTH CARE & BENEFITS DIVISION

July 21, 2025

Understanding Your Benefits

The Live Life Well Incentive

Learn how to earn \$60 per month off your State Plan benefit contributions in 2026 by completing the Live Life Well Incentive. Double your monthly incentive if your covered spouse or domestic partner also participates. Live Life Well Incentive Activities and self-reporting must be completed by October 31, 2025.



Earn the Live Life Well Incentive for 2026 by completing the following activities by October 31, 2025:

1. Complete a [State-sponsored Health Screening](#)
2. Self-report you are [Nicotine Free](#) or have completed and Eligible Alternative.
3. Self-report you have completed an [Eligible Provider Visit](#)

[Watch this short recorded presentation](#) to learn more about the incentive and how to complete the required activities. Then visit benefits.mt.gov/incentive for more details.

Eligibility: Employees, Retirees, Legislators, COBRA participants, and their enrolled spouses/domestic partners are eligible for the Live Life Well Incentive.

Monthly Understanding Your Benefits Series

To help members better understand their State of Montana Benefit Plan (State Plan) benefits, the Health Care & Benefits Division provides monthly “Understanding Your Benefits” presentations. These presentations are designed to provide State Plan information regarding specific benefit related topics in short easy to understand videos.

STATE OF MONTANA HEALTH CARE & BENEFITS DIVISION

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Non-Discrimination Notice: The State of Montana Benefit Plan complies with applicable Federal civil rights laws, state and local laws, rules, policies and executive orders and does not discriminate on the basis of race, color, sex, pregnancy, childbirth or medical conditions related to pregnancy or childbirth, political or religious affiliation or ideas, culture, creed, social origin or condition, genetic information, sexual orientation, gender identity or expression, national origin, ancestry, age, disability, military service or veteran status or marital status. 45 C.F.R. § 92.8(b)(1) and (d)(1)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-270-3877 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-270-3877 (TTY: 711).

This service is provided to you at no charge by [State of Montana Health Care & Benefits Division](#).