



# 2024 INCENTIVE



HEALTH  
SCREENING



NICOTINE  
FREE



ELIGIBLE  
PROVIDER VISIT



\$30/MONTH



(800) 287-8266  
TTY (406) 444-1421  
[benefits.mt.gov](http://benefits.mt.gov)  
[benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov)

# LIVE LIFE WELL INCENTIVE PROGRAM

Earn \$30 per month off your 2025 State of Montana Benefit Plan (State Plan) contribution! Double your Live Life Well Incentive if a covered spouse/domestic partner also participates.

**Schedule your appointment NOW!** You must complete AND self-report an Eligible Provider Visit as one of your three required activities between November 1, 2023, and October 31, 2024, to earn the Live Life Well Incentive in 2025.



## HEALTH SCREENING

Complete a State-sponsored health screening. Appointments are subject to availability. Make an appointment at [mypremisehealth.com](https://mypremisehealth.com) or call (855) 200-6822.

## NICOTINE FREE

Self-report if you are nicotine free or have completed an eligible alternative at [som.app.sbwel.com](https://som.app.sbwel.com). If you use nicotine and need an alternative to complete this portion of the incentive, you must complete and self-report one of two eligible alternatives:

- A nicotine cessation program; or
- A nicotine education session with your primary care provider.

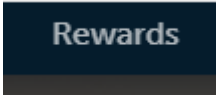
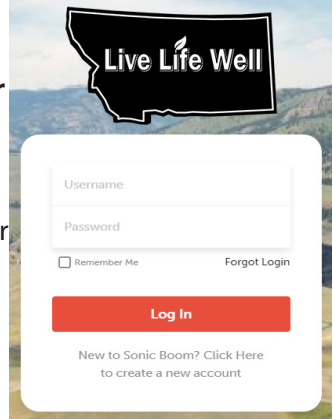
## ELIGIBLE PROVIDER VISIT

Self-report you have completed an eligible visit with a provider at [som.app.sbwel.com](https://som.app.sbwel.com).

# REPORTING YOUR ACTIVITIES

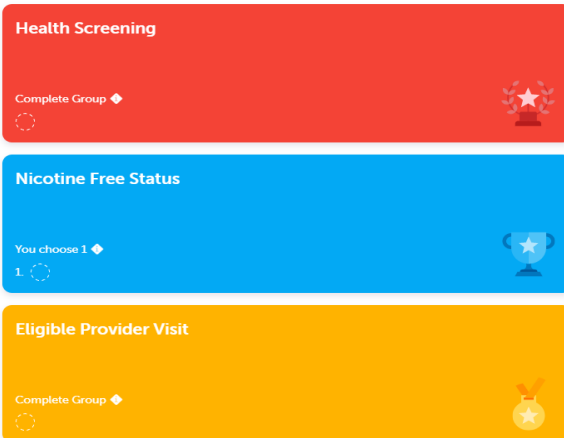
STEP 1: Log in to your account on Sonic Boom Wellness at [som.app.sbwel.com](http://som.app.sbwel.com).

- Don't have an account? Select "New to Sonic Boom? Click here to create a new account." **You will need to know your birth date and six-digit employee/retiree ID number.**
- Covered spouses or domestic partners must make their own account using their birth date and the **employee/retiree's six-digit ID number followed by an "S."** For example: 000654S.



STEP 2: Click on "Rewards" from the black menu bar.

STEP 3: Click on each activity to report



See page 4 for instructions for completing and self-reporting each of the three required Live Life Well Incentive Activities.



**Health Screening:** Your State-sponsored health screening information will automatically appear a few weeks after you complete your health screening. If you need to make an appointment for a health screening, click on “Learn More.”



**Nicotine Free:** You must self-report that you are nicotine free OR if you are not nicotine free that you have completed an eligible alternative.

Click on “Nicotine Free Status.”

Click on the box under Nicotine Free if you are nicotine free and enter the date you are self-reporting and click “Submit”;

**OR** scroll down and click on the boxes under Nicotine Free Alternative and enter the program name and the date you completed an eligible alternative, and click “Submit.”

1 **Nicotine Free**

Self-report if you are nicotine free.

If you use nicotine, skip to the next activity to self-report completion of an eligible alternative. You do not need to fill out both sections.

Enter today's date to certify you are nicotine free

2 **Nicotine Free Alternative**

If you are not nicotine free, you can still earn the Live Life Well Incentive by

1. Completing a nicotine cessation program, or
2. Completing a nicotine education session with your provider to talk about your nicotine use.

No-cost Options for Nicotine Cessation Programs

- Montana Health Center: Live group workshops or self-paced one-on-one telephonic coaching. Call (855) 200-6822. Medicare-eligible retirees, spouses, or dependents are not eligible.
- Montana Tobacco Quit Line: Call (800) QUITNOW

Date of completion  Enter program or provider name



**Eligible Provider Visit:** You must self-report if you have completed an Eligible Provider Visit. Click on “Eligible Provider Visit,” enter the date of your appointment and the provider’s name and and click “Submit.”

Date of your provider visit

Name of provider

## Check out Sonic Boom!

Don't stop after you've self reported to earn your Live Life Well Incentive. Explore the site and find all the great resources Sonic Boom has to offer.



Self-report now! You can, and should, self-report your Nicotine Free status or an eligible alternative and completion of an Eligible Provider Visit as soon as possible. Live Life Well Incentive Activities do not need to be completed in order.



Need help with your account? Call Sonic Boom at (877) 766-4208.



If you do NOT have access to the internet, contact HCBP at (800) 287-8266 for assistance.



# HEALTH SCREENING

Part of earning an incentive in 2025 is completing a State-sponsored health screening between November 1, 2023, and October 31, 2024.

A State-sponsored health screening is completed at a Montana Health Center or health center off-site location and includes a height, weight, and blood pressure measurement. A waist circumference may be provided upon request, but is not required. A blood draw with labs (CBC, CMP, lipid panel) is also included. *You must sign Premise's Incentive Authorization Form during the State-sponsored Health Screening for this to happen.*

## WHO

State of Montana plan members are eligible for one health screening per year. Do not schedule multiple appointments.

## WHERE

At a Montana Health Center in Anaconda, Billings, Butte, Helena, and Missoula OR at a health center off-site location around the state. A full list of off-site screenings is mailed to retirees and legislators in February or is available at [healthcenter.mt.gov/Health-Screenings](http://healthcenter.mt.gov/Health-Screenings).

## APPOINTMENTS ARE REQUIRED

Schedule your appointment using one of the options below.

- From your mobile device: Download the My Premise Health app at [mypremisehealth.com](http://mypremisehealth.com) or in the App Store.
- From the internet: Log in to your account at [mypremisehealth.com](http://mypremisehealth.com). You can find further information and directions for making an appointment at [healthcenter.mt.gov/Appointments](http://healthcenter.mt.gov/Appointments).
- From your telephone: You may also call the Montana Health Centers at (855) 200-6822.

## LAB TESTS

A lipid panel, comprehensive metabolic panel (CMP), and complete blood count (CBC) are included in your State-sponsored health screening.

The following tests are not generally recommended for everyone, but may be included with your State-sponsored health screening IF you bring a prescription/doctors orders with you to your screening.

- A1C
- PSA
- TSH (thyroid test)

At a Montana Health Center ONLY:

- Additional lab tests can be added if you bring a prescription/ doctors orders with you to your screening.

### Default Option: Online Only

Unless you specifically request otherwise (see below), you will need to access your screening results online using the following directions.

Online results are available 2-3 days after your screening date. Login to [mypremisehealth.com](https://mypremisehealth.com) 2-3 days after your screening. If you need assistance accessing your results, contact the Montana Health Centers at (855) 200-6822.

### Opt-In Option: Paper & Online

If you wish to receive a paper copy of your results, you may “opt-in” to the Paper and Online option by calling the Montana Health Centers at (855) 200-6822.



For questions about your results or to change your delivery option contact Premise Health at (855) 200-6822.

# NICOTINE FREE

Part of earning an incentive for 2025 is to SELF-REPORT if you are nicotine free or if you are not nicotine free that you have completed a nicotine free alternative between November 1, 2023, and October 31, 2024. See pages 3-4 for instructions for self-reporting. See the Nicotine Free FAQs on page 15 for a definition of “nicotine free.”

## NICOTINE FREE ALTERNATIVES

If you are not nicotine free, you can still earn the Live Life Well Incentive by self-reporting that you have completed ONE of the two eligible alternatives.

1. Complete a nicotine cessation program, or
2. Complete a nicotine education session with your provider. An education session is a visit with your provider for the purpose of talking about your nicotine use.

## NICOTINE CESSATION PROGRAM OPTIONS

- STEP 1** Make an appointment with your doctor. They may talk with you about prescription quit medication, which may be available at no-cost to you (see next page).
- STEP 2** Make an appointment with a cessation coach. Visit with them at least once per month.  
Two no-cost options:
- Montana Health Center: Self-paced one-on-one coaching. Call (855) 200-6822. Medicare-eligible retirees, spouses, or dependents are not eligible.
  - Montana Tobacco Quit Line: Call (800) QUITNOW.
- STEP 3** Continue with your coach as long as necessary. Talk with your provider and coach about what is right for you.

## NICOTINE CESSATION MEDICATIONS



To get the following medications at no-cost,\* you must have a prescription from your provider and have your pharmacy run it through the State Plan's pharmacy benefit. We highly recommend you have at least one appointment with a cessation coach per month (see Step 2 on page 8).

\*These medications are available at no-cost with a prescription for up to six (6) months maximum per plan year.

- Chantix
- Bupropion - generic only
- Nicotine Replacement Therapy (NRT) - generic patches, lozenges, or gum only

For more information on nicotine cessation medications contact the State Plan's pharmacy benefit manager:

Navitus  
(866) 333-2757 (toll-free)  
TTY (toll-free) 711  
[navitus.com](http://navitus.com)

Navitus - Medicare Retirees  
(866) 270-3877  
TTY (toll free) 711  
[medicarerx.navitus.com](http://medicarerx.navitus.com)

#### No-cost Options for Nicotine Cessation Programs

- Montana Health Center: Self-paced one-on-one coaching. Call (855) 200-6822. Medicare-eligible retirees, spouses, or dependents are not eligible.
- Montana Tobacco Quit Line: Call (800) QUITNOW

Visit [benefits.mt.gov/NicotineFree](http://benefits.mt.gov/NicotineFree) for details.





# ELIGIBLE PROVIDER VISIT

Part of earning an incentive for 2025 is to complete and SELF-REPORT an Eligible Provider Visit between November 1, 2023, and October 31, 2024. See pages 3-4 for self-reporting instructions.

The purpose of the Live Life Well Incentive is to encourage State Plan members to make healthy choices. State Plan members, stakeholders, and research indicate an annual provider check-up (Eligible Provider Visit) is valuable and necessary to improve and maintain good health.

## WHAT IS AN ELIGIBLE PROVIDER VISIT?

An Eligible Provider Visit is an annual physical examination appointment with a **medical** provider. It is usually done in-person. Exceptions to this are very rare, as virtual visits do not normally allow the provider to adequately complete a physical examination. This is not an acute or urgent care visit (i.e. cold, flu, or injury), it is an annual checkup.

- This type of appointment will usually take 45 minutes to an hour.
- Any kind of medical provider is acceptable, from a nurse practitioner to a specialist, depending on who is most appropriate for your health needs. Choose a medical provider (such as a Montana Health Center provider) that best fits your needs.
- This visit will include a complete physical examination based on your age, gender, and other factors. You and your provider will decide exactly what is included in your visit based on your health needs.
- This visit may include a discussion of your health screening results - it is not an appointment to only review health screening results. If your results are available, bring them along so your provider can review the results with you during the appointment.
- During the visit, your provider may renew your prescription for medication you take every day.
- During the visit, be prepared to talk with your provider about any health concern or needs you have. Your provider can refer you for behavioral health, counseling, physical therapy, specialty providers, and more.
- Keep in mind that your regular State Plan benefits apply to this visit and any additional services beyond the provider's time may incur extra expense. Remember, if you are in a Montana Health Center area, all services provided at the health center are at no additional charge!

# LIVE LIFE WELL BENEFITS AND PARTNER PROGRAMS

Have an issue? We can help with that! Check out these great benefits available to you!

- Physical Activity Challenges  
[benefits.mt.gov/challenges](https://benefits.mt.gov/challenges)
- Healthy Weight Incentive  
[benefits.mt.gov/Live-Life-Well/Wellness-Programs/Healthy-Weight-Incentive](https://benefits.mt.gov/Live-Life-Well/Wellness-Programs/Healthy-Weight-Incentive)
  - Healthy For Life Online Self-Study Program - [benefits.mt.gov/healthyforlife](https://benefits.mt.gov/healthyforlife)
  - DPHHS Diabetes/Heart Disease Prevention Program  
[dphhs.mt.gov/publichealth/Diabetes/DPP](https://dphhs.mt.gov/publichealth/Diabetes/DPP)
  - WW (Weight Watchers) - [benefits.mt.gov/weightwatchers](https://benefits.mt.gov/weightwatchers)
- My Health Navigator Asthma Care Program  
(406) 298-4140 - [benefits.mt.gov/asthma](https://benefits.mt.gov/asthma)
- My Health Navigator Diabetes Care Program  
(406) 298-4140 - [benefits.mt.gov/diabetes](https://benefits.mt.gov/diabetes)
- Premise Blood Pressure Management Program  
[healthcenter.mt.gov/Blood-Pressure-Management](https://healthcenter.mt.gov/Blood-Pressure-Management)
- DPHHS Walk With Ease Program - (406) 444-0959  
[dphhs.mt.gov/publichealth/arthritis/stateofmontanawellnessprograms](https://dphhs.mt.gov/publichealth/arthritis/stateofmontanawellnessprograms)
- Ovia Health Apps - Choose from Ovia Fertility, Cycle, Health; Ovia Pregnancy & Baby Tracker; and/or Ovia Parenting & Baby Tracker  
[benefits.mt.gov/Live-Life-Well/Prenatal-Benefits](https://benefits.mt.gov/Live-Life-Well/Prenatal-Benefits)
- BlueCross & BlueShield Wellbeing Management Programs  
[benefits.mt.gov/Live-Life-Well/Wellness-Programs/Disease-Management](https://benefits.mt.gov/Live-Life-Well/Wellness-Programs/Disease-Management)
- Montana Health Center individual health coaching  
[healthcenter.mt.gov/health-coaching](https://healthcenter.mt.gov/health-coaching)
- Montana Health Center group presentations  
[benefits.mt.gov/Live-Life-Well/Wellness-Presentations](https://benefits.mt.gov/Live-Life-Well/Wellness-Presentations)
- Sonic Boom Academy - [som.app.sbwell.com](https://som.app.sbwell.com)  
Enroll in courses for free! Includes mental health, financial health, and more!
- Hinge Health - Back, joint, and muscle pain: online exercise therapy  
[benefits.mt.gov/livelifewell](https://benefits.mt.gov/livelifewell)
- Suicide Awareness and Prevention presentation  
[hr.mt.gov/Programs/Workforce-Wellness](https://hr.mt.gov/Programs/Workforce-Wellness)  
Scroll down under "Training."

\*Some programs may have an additional out-of-pocket cost.



For details on any of these Live Life Well benefits, visit [benefits.mt.gov/livelifewell](https://benefits.mt.gov/livelifewell).

# ALTERNATIVES AND EXCEPTIONS

The State Plan offers the incentive program to all plan members and their enrolled spouse/domestic partner. If you think you may be unable to meet a standard of the incentive program, you may qualify for an alternative program or different means to earn the incentive. You must contact the Health Care & Benefits Division (HCBD) as soon as possible at (800) 287-8266, TTY (406) 444-1421, or email [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov). We will work with you (and if you wish, your doctor) to design a program with the same incentive that is right for you.

We will maintain the privacy of your personally identifiable health information. Medical information that personally identifies you and that is provided through the incentive program will not be used to make decisions regarding your employment. Your health information shall only be disclosed to carry out specific activities related to the incentive program (such as responding to your request for a reasonable accommodation). You will not be asked or required to waive the confidentiality of your health information to participate or to receive an incentive. Anyone who receives your information for purposes of providing you services through the incentive program will abide by the same confidentiality requirements.

We securely maintain all electronically stored medical information we obtain through the incentive program, and will take appropriate precautions to avoid a data breach. If a data breach does occur involving information you provided to us for the incentive program, we will notify you immediately.

A copy of the Plan's privacy notice is available on the HCBD website or by going to [benefits.mt.gov/docs/Documents/hipaa-notice.pdf](https://benefits.mt.gov/docs/Documents/hipaa-notice.pdf).

State of Montana 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).

# AT-RISK HEALTH SCREENING LEVELS

Health Indicator	At-Risk Level
Body Mass Index (BMI)/Waist Circumference	BMI of more than 30 - OR - Waist circumference <ul style="list-style-type: none"> <li>• Males - 40" or more</li> <li>• Females - 35" or more</li> </ul>
Blood Pressure	More than 130/80 mmHg
Cholesterol Level	More than 200 mg/dL (or Total Cholesterol/ HDL ratio is WNL <4)
Fasting Blood Glucose Level	Greater than 100 mg/dL



## AT-RISK LEVELS

If your health screening results are higher than the At-Risk levels shown above, you are at increased risk for developing conditions like heart disease, cancer, and diabetes.

We want to help! We offer the programs and activities listed in this pamphlet to help address your health needs.



## NO INTERNET?

Trouble with the internet? No internet at home? Internet assistance is available at your local library.

If you have NO access to the internet, you must call HCBD to request a paper self-report form, (800) 287-8266, (406) 444-7462, or TTY (406) 444-1421.

# FREQUENTLY ASKED QUESTIONS

For a full list of FAQs visit [benefits.mt.gov/Live-Life-Well-Incentive/Incentive-Program-FAQs](https://benefits.mt.gov/Live-Life-Well-Incentive/Incentive-Program-FAQs).

## **Q: Why does the State Plan ask me to complete an Eligible Provider Visit as part of earning a Live Life Well Incentive?**

**A:** HCBD worked closely with a Wellness Committee to evaluate the Live Life Well Incentive Program. The Wellness Committee included representatives from nine State agencies. The committee reviewed feedback from State Plan members, surveys, State of Montana employee values, health screening data, incentive programs from other states and organizations, and more. The Committee found that State Plan members value the Live Life Well Incentive but wanted it to be simplified. State Plan members also felt that an annual check up was valuable and the best way to maintain and improve overall health. The Eligible Provider Visit both simplifies the Incentive and makes it more applicable to each member's personal health needs

## **Q: What happened to the Next Step Activities?**

**A:** Nothing! All the programs and benefits that were available to you as a "Next Step Activity" continue to be available. You can find a summary of the Wellness Program Benefits on page 11 or at [benefits.mt.gov/livelifewell](https://benefits.mt.gov/livelifewell).

## **Q: How can I verify that I'm receiving the incentive I earned last year?**

**A:**To verify if you are receiving the Live Life Well Incentive for 2024, review your benefit elections.

1. Visit [benefits.mt.gov](https://benefits.mt.gov). Click on the "Existing Member Benefit Changes" button and login to the system. If you have not accessed the system and you are a first time user you will need to register and create a user name and password. The code is stateofmontana.
2. Click the drop-down arrow next to your name located in the upper right corner and select Benefit Summary.
3. The election information section will show bi-weekly (for employees) and monthly (for retirees) contributions for 2024.
4. The Live Life Well Incentive (if earned) is displayed under the Medical section (click on "View Details").

## **Q: I had my yearly check-up and labs done with my doctor. Does this count towards the health screening?**

**A:** No, you must attend one of the State-sponsored health screenings offered by the Montana Health Centers to be eligible for the incentive. Currently, there is no way for the State Plan to keep track of individual members getting health screenings at locations other than the Montana Health Centers.

(continued page 15)

Additionally, the same services received at your doctor's office are more expensive for you and more expensive for the State Plan, which impacts us all financially. We recommend all members follow-up with their health care provider after completing a State-sponsored health screening by taking the results to a regular doctor's appointment so that labs do not need to be repeated, thus avoiding incurring additional expenses to themselves and the State Plan. Lastly, State-sponsored health screenings provide a valuable way for members to manage their own health, by putting the same health information in their hands year after year. This provides an excellent way to establish baselines and follow trends in their personal health and build positive relationships with their health care providers.

**Q: My spouse or I are covered by the State Plan and by Medicare. How does this affect the Live Life Well Incentive, including access to State-sponsored health screenings and other Live Life Well Incentive requirements?**

**A:** Retirees covered by Medicare are eligible to earn the Live Life Well Incentive. If you and/or your spouse/domestic partner are covered by Medicare and the State Plan, the Live Life Well Incentive applies the same as for other State Plan members with one difference; Medicare retirees may ONLY access the Montana Health Center for State-sponsored health screenings and flu shots. Medicare retirees and/or Medicare spouses must see their regular doctor for routine physical exams and all other medical needs, including the Eligible Provider Visit.

## TOP NICOTINE FREE FAQs

**Q: What constitutes Nicotine Free?**

**A:** Nicotine Free – must be self-reported – see instructions on pages 3-4.

- You are nicotine free if you have never used nicotine, have quit using nicotine, infrequently use nicotine (less than 4x per month), or use only FDA-approved Nicotine Replacement Therapy.
- You are nicotine free if you are currently using nicotine but HAVE completed an eligible alternative (nicotine cessation program or nicotine education session with a medical provider) in the past 12 months.

**Q: What constitutes a Nicotine User?**

**A:** You are a nicotine user if you are currently using nicotine (other than FDA-approved Nicotine Replacement Therapy) and HAVE NOT completed an eligible alternative (nicotine cessation program or a nicotine counseling session with a medical provider) during the past 12 months.

**Q: What is a nicotine education session?**

**A:** A nicotine education session is an appointment with your primary care provider specifically for the purpose of discussing your nicotine status. If you schedule an appointment expressly for this purpose at a participating provider, there is no additional out-of-pocket cost.

For more information: HCBP at (800) 287-8266, (406) 444-7462, TTY (406) 444-1421, or [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov).

# LANGUAGE ASSISTANCE AND NON-DISCRIMINATION STATEMENT

*State of Montana is required by federal law to provide the following information.*

**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).

**注意:** 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電 1-866-270-3877 (TTY: 711)。

**注意事項:** 日本語を話される場合、無料の言語支援をご利用いただけます。1-866-270-3877 (TTY:711) まで、お電話にてご連絡ください。

**PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-270-3877 (TTY: 711).

**ATTENTION:** Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-270-3877 (ATS: 711).

**ВНИМАНИЕ:** Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-270-3877 (телетайп: 711).

**주의:** 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-270-3877 (TTY: 711)번으로 전화해 주십시오.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-866-270-3877 (رقم هاتف الصم والبكم: 711).

**เรียน:** ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร1-866-270-3877 (TTY: 711).

**MERK:** Hvis du snakker norsk, er gratis språkassistanstjenester tilgjengelige for deg. Ring 1-866-270-3877 (TTY: 711).

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-270-3877 (TTY: 711).

**УВАГА!** Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 1-866-270-3877 (телетайп: 711).

**Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannsch du mitaus Koschte ebber gricke, ass dihr helft mit die english Schprooch. Ruf selli Nummer uff: Call 1-866-270-3877 (TTY: 711).**

**ATTENZIONE:** In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-866-270-3877 (TTY: 711).

## STATE OF MONTANA NON-DISCRIMINATION STATEMENT

State of Montana 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.



## Non-Discrimination Statement Continued

State of Montana does not exclude people or treat them differently because 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. State of Montana provides free aids and services to people with disabilities to communicate effectively with us, such as: qualified sign language interpreters and written information in other formats (large print, audio, accessible electronic formats, other formats). State of Montana provides free language services to people whose primary language is not English such as: qualified interpreters and information written in other languages. If you need these services, contact customer service at 855-999-1062. If you believe that State of Montana has failed to provide these services or discriminated in another way 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 you can file a grievance. If you need help filing a grievance, the State Diversity Coordinator is available to help you. You can file a grievance in person or by mail, fax, or email:

State Diversity Program Coordinator  
Department of Administration  
State Human Resources Division  
125 N. Roberts  
P.O. Box 200127  
Helena, MT 59620  
Phone: (406) 444-3871  
Email: SABHRSHR@mt.gov

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)

# NOTES

# INCENTIVE CONTACTS

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Check your Incentive Status, SELF-REPORT your Nicotine Free Status and Eligible Provider Visit, participate in Digital Health Coaching or access a variety of wellness-related information.

[som.app.sbwell.com](http://som.app.sbwell.com)

Telephone: (877) 766-4208

E-mail: [info@sbwell.com](mailto:info@sbwell.com)



Make an appointment for a State-sponsored health screening, get screening results, participate in health coaching, visit a provider, participate in the blood pressure management program, complete a nicotine cessation program.

[healthcenter.mt.gov](http://healthcenter.mt.gov)

Telephone: (855) 200-6822



Find more information about the Live Life Well Incentive Program.

[benefits.mt.gov/incentive](http://benefits.mt.gov/incentive)

Telephone: (800) 287-8266

TTY: (406) 444-1421

E-mail: [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov)



## **HEALTH CARE & BENEFITS DIVISION**

100 N. Park Ave. Suite 320  
PO Box 200130  
Helena, MT 59620  
(800) 287-8266

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