



2017
2017
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Knox County Government
Employee Benefits Guide
For use with www.knoxcounty.org/benefits

Benefits
(865) 215-3800 | benefits@knoxcounty.org

Selecting Benefits

Open Enrollment Oct. 17 - Nov. 18

Enrollment Checklist

Select or Decline
Employees who do not select or decline medical coverage during their enrollment period are enrolled in Option 1 Employee Only coverage.

- When:** You can select, change or decline benefits during 1) open enrollment or 2) a qualifying event during the plan year.
 - **Qualifying Event:** Marriage/divorce, birth/adoption, death, change in job status of yourself or your spouse, and change in Medicaid or CHIP eligibility (60 days). You must notify the Benefits office immediately of a qualifying event. All changes (with the exception of Medicaid/CHIP) and required documentation must be submitted within 30 days of your qualifying event.
 - **New Employees** who are benefits eligible must enroll within 30 days of their date of hire. New employee benefits are effective the first of the month following 30 days of employment.
 - **Children up to age 26** may be covered on your medical insurance plan, regardless of dependent status. At the end of the month the dependent turns 26, they will automatically be dropped from the insurance plan and offered COBRA coverage if requested.
- Decide:** Review this booklet and plan information found at www.knoxcounty.org/benefits. Information about dependent eligibility is available on the website.
- Log On:** Go to www.knoxcounty.org/benefits and click Munis Employee Self Service. Your username is firstname.lastname (john.smith). Password information will be emailed to you.
- Verify Personal Information:** Click Employee Self Service and then Personal Information. Verify your mail and email addresses are correct. Enter dependent information.
- Make Elections or Decline Benefits:** Click Benefits. Click Open Enrollment – for each benefit option, click Make New Election or Decline.
 - For Medical Coverage, click the arrow next to the plan you want (1, 2 or 3). Select the level of coverage: Employee Only, Employee + Spouse, Employee + Child(ren) (includes one or more children), or Family (includes child(ren) and a spouse). If applicable, select your dependent(s) from the drop down box and click Add Coverage. Verify dependent information and click OK. After all dependents are added, click Continue.
 - Repeat the steps above for each benefit option. For the Flexible Spending Account options, enter the amount you want deducted from each paycheck.
 - After you have made a choice for or declined each benefit, click Continue. Review the information on your new elections. If this information is correct, click Submit Choices. Print a copy of the confirmation for your records. If this information is not correct, click Modify, make changes, review and Submit Choices.

Disclaimer & Notices

This guide is designed to provide a general overview of your benefits at Knox County Government. It is not a contract or an official interpretation of the benefit plans. For more detailed information, please refer to your summary plan descriptions or the legal plan documents. Copies of the Summary Plan Documents and notices for all benefits are available at www.knoxcounty.org/benefits. Should any questions or conflicts arise, the plan documents will be the final authority in determining your benefits. Knox County Government reserves the right to modify or discontinue the plans at any time. This document was prepared exclusively for employees of Knox County Government. Unauthorized reproduction is strictly prohibited.

Medical & Pharmacy

Knox County is self-insured. This means employee and employer contributions pay for medical and prescription claims. Humana and OptumRx administer the networks and claims.

Humana

Group Number: 632556
Network: National POS Open Access Network
Website: www.humana.com
Customer Service & Card Replacement: (888) 357-6767
 Use your Humana insurance card for medical benefits.

In-network Providers: The medical plan allows you to go to any provider. If you choose a out-of-network provider, you will be subject to a higher deductible, a larger percentage of the charges, provider charges over the customary rate and a greater out-of-pocket maximum. To find an in-network provider visit www.humana.com. Find in-network Humana Behavioral Health Providers at www.humanabehavioralhealth.com or call (800) 777-6330.



Group Number: KNOXCTY
Website: www.optumrx.com/mycatamaranrx
Customer Service & Card Replacement: (844) 265-1774
Specialty Medications / BrivoRx: (855) 427-4682
 Use your OptumRx insurance card for pharmacy benefits.

In-network Pharmacies: Visit the 2017 pharmacy page at www.knoxcounty.org/benefits for a link to the pharmacy locator.



Money Saving Tip

Look for options with fewer dollar signs (\$) on Page 5.

Minor sicknesses and injuries can often be treated at an urgent care clinic for much less than at the emergency room.



Money Saving Tip

Ask your doctor or pharmacist about lower-cost options. Generics are safe, effective and can save you money.

Medical & Pharmacy Insurance Premiums

Coverage options now include Employee + Child(ren). This allows employees to cover multiple children without paying the family rate.

Non-preferred Rates: Each pay period, returning members who were on the plan for all of 2016 will pay an additional \$70 per employee and \$70 per spouse who did not complete the requirements for preferred rates by Sept. 30, 2016.

Preferred Rates:	Option 1	Option 2	Option 3
Employee Only	\$12.00	\$31.00	\$65.00
Employee + Spouse	\$79.00	\$116.00	\$235.00
Employee + Child(ren)	\$71.00	\$100.00	\$211.00
Employee + Family	\$114.00	\$166.00	\$290.00

What You Pay (26 pay periods)
 Deductible, Coinsurance,
 Copays & Premiums

Money Saving Tips

Follow the instructions on Page 11 to get preferred rates in 2018.

Preventive exams with an in-network provider are free, and you can get them multiple times a year. Taking care of your health can save you money.



Medical & Pharmacy Benefits

Plan Documents

These two pages reflect what the member pays for in-network medical and pharmacy benefits after premiums. Review plan documents at www.knoxcounty.org/benefits for out-of-network rates, prior authorization requirements, limits on the number of visits per year and service restrictions.

Understanding Insurance Terms

Copay: The amount paid directly to the medical provider, usually during the visit, for specific services. Copays do not count toward the deductible.

Coinsurance: The percent an individual will pay for covered services (typically after the deductible has been met) until they reach the out-of-pocket maximum.

Deductible: The amount an individual or family will need to pay before insurance begins to pay for covered services.

In-network: In-network providers agree to a negotiated charge. The member will typically not be responsible for balance billing or additional paperwork to file a claim. Members who use out-of-network providers are usually subject to a higher deductible, a larger percentage of the charges, provider charges over the customary rate and a greater out-of-pocket maximum.

Member: Someone covered by the insurance plan (includes the subscriber and dependents).

Out-of-Pocket Maximum (OOPM): The maximum amount an individual or family will pay (in addition to premiums) for covered services during a plan year. This amount includes all money paid toward the deductible, coinsurance and copays.

Premiums or Rates: The cost per pay period for insurance coverage.

Subscriber: For Knox County insurance plans, this is typically the employee who enrolled in the plan. The subscriber may carry other members (dependents) on the plan.

In-network Pharmacy Benefits*

	Option 1	Option 2	Option 3
Traditional Medications			
Prescription Drug Deductible	Cost up to medical deductible, then 20% coinsurance	\$100 Individual/\$200 Family	
Retail (Up to 30-day Supply)		\$4/40/60 copay based on drug tier	
Retail (Up to 90-day Supply) or Mail Order		\$8/80/120 copay based on drug tier	

Specialty Medications - Please see www.knoxcounty.org/benefits for more information

Money Saving Tip: Ask your doctor or pharmacist about generics or medications at lower-cost tiers that are safe and effective for your needs.

In-network Medical Benefits*

Money Saving Tip: Services with fewer dollar signs (\$) will usually cost less money for similar types of care.

Changes for 2017 have been written in **green**.

		Option 1	Option 2	Option 3
Deductible	Individual / Family	\$2000 / \$4000	\$1500 / \$3000	\$500 / \$1000
OOPM	Individual / Family	\$4000 / \$8000	\$4000 / \$8000	\$3000 / \$6000
Plan Maximum		Unlimited		
Preventive Care				
\$	See Page 11 and online plan booklet for more information on covered services.	Unlimited: No cost and no requirement to wait 12 months between services. Includes covered tobacco cessation medications.		
Office Visits				
\$	Primary Care Provider / Specialist Provider services, basic imaging (x-ray, ultrasound) & office analyzed labs	Cost up to deductible, then 20% coinsurance	\$35 / \$45 copay	\$30 / \$40 copay
\$	Physical, Occupational, Speech, Audiology and Cognitive Therapy		\$35 copay	\$30 copay
\$	Outpatient & group therapy Mental health, chemical and alcohol		\$35 copay	\$30 copay
Imaging Services				
\$	Physician's office (x-ray, ultrasound)	Cost up to deductible, then 20% coinsurance	Included in visit copay	Included in visit copay
\$\$	Non-hospital, Independent Facility Advanced Imaging (MRI, CAT, PET)		\$100 copay	
\$\$\$	Hospital Outpatient Advanced Imaging (MRI, CAT, PET)		\$125 copay + cost up to deductible, then 20% coinsurance	
Surgery				
\$	Non-hospital, Independent Facility Surgery	Cost up to deductible, then 20% coinsurance		
\$\$\$	Outpatient or Inpatient Hospital Surgery	Cost up to deductible, then 20% coinsurance		
Urgent & Emergency Care				
\$	Urgent Care	Cost up to deductible, then 20% coinsurance	\$20 copay	\$15 copay
\$\$\$	Emergency Care Includes urgent care centers at a hospital. Copay waived for inpatient hospital admissions.		\$200 copay + cost up to deductible, then 20%	\$150 copay + cost up to deductible, then 20%
Other Services				
Home Health Care, Durable Medical Equipment, Prosthesis and Most Other Covered Services		Cost up to deductible, then 20% coinsurance		

*Review plan documents at www.knoxcounty.org/benefits for out-of-network rates, prior authorization requirements, limits on the number of visits per year and service restrictions.

Dental Benefits



MetLife®

Group Number: 162041
Network: PDP Plus Network
Website: www.metlife.com/dental
Customer Service & Card Replacement: (800) 438-6388

What You Pay (24 pay periods) Deductible, Coinsurance & Premiums

Employee Only	\$7.66
Employee +1	\$23.40
Family	\$31.06

In-network Providers: To find an in-network provider visit www.metlife.com/dental or the MetLife app in the iTunes or Google Play store.

	In-Network	Out-of-Network
Deductible: Individual / Family (Aggregate)	\$25 / \$75	\$100 / \$300
Benefits Paid by the Plan		
Calendar Year Maximum	\$1,500	\$500
Preventive - Includes exams/cleanings (2 per year), sealants, x-rays	100% Covered	80%
Basic - Fillings, periodontic services, minor oral surgery	80%	60%
Major - Root canals, periodontic surgery, crowns, dentures, bridges, anesthesia	50%	30%
Orthodontia Coinsurance / Orthodontia Lifetime Maximum	50% / \$1,000	50% / \$500



DELTA DENTAL®

Group Number: 7453-1001
Network: PPO Plan
Website: www.DeltaDentalTN.com
Customer Service: (800) 223-3104
 Delta Dental does not issue member cards.

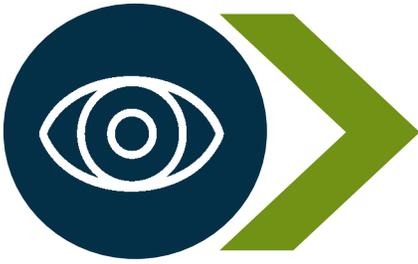
What You Pay (24 pay periods) Deductible, Coinsurance & Premiums

Employee Only	\$16.27
Employee +1	\$30.92
Family	\$55.33

In-network Providers: Visit www.deltadentaltn.com and use the Find a Dentist option. The benefit levels are the same in-network and out-of-network.

	PPO Dentist	Premier Dentist	Non-Participating Dentist
Deductible (<i>Basic and Major Services only</i>) Individual / Family	\$50 / \$150	\$50 / \$150	\$100 / \$300
Benefits Paid by the Plan			
Calendar Year Maximum	\$1,500	\$1,500	\$1,500
Preventive - Exams and cleanings (2 per year), sealants, x-rays	100% covered	100% covered	100% covered
Basic - Fillings, periodontic services, minor oral surgery	90%	80%	80%
Major - Root canals, periodontic surgery, crowns, dentures, bridges, anesthesia	60%	50%	50%
Orthodontia Lifetime Maximum \$1,500	50%	50%	50%

Vision Benefits



eyeMed

Group Number: 9854837
Network: Insight
Website: www.eyemed.com
Customer Service & Card Replacement: (866) 299-1358

What You Pay (24 pay periods) Deductible, Coinsurance, Copays & Premiums

Employee Only	\$2.79
Employee +1	\$5.11
Family	\$7.83

In-network Providers: Go to www.eyemed.com to find an in-network provider.

Benefits Paid by the Plan	In-network	Out-of-Network
Exam*	\$10 copay	reimbursement up to \$40
Lenses* Single Bifocal Trifocal Lenticular Progressive, Anti-reflective and Photochromic	\$25 copay \$25 copay \$25 copay \$25 copay Please visit www.knoxcounty.org/benefits for details on our increased benefits for 2017.	reimbursement up to \$40 reimbursement up to \$60 reimbursement up to \$80 reimbursement up to \$80
Frames*	plan pays up to \$150; 80% of charge over \$150	reimbursement up to \$45
Contact Lenses* <i>instead of eyeglasses</i> Medically Necessary Conventional Disposable	covered in full \$0 copay; \$125 allowance; 85% of charge over \$125 \$0 copay; \$125 allowance; plus balance over \$125	reimbursement up to \$210 reimbursement up to \$125 reimbursement up to \$125
Laser Vision Correction Lasik or PRK from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A

*Once every calendar year



Humana Member Vision Discount

Humana health insurance members who do not elect to be covered by the EyeMed plan in 2017 will have access to the EyeMed Vision Discount program through Humana. Exams, standard lenses, premium lenses, frames, contact lenses and laser vision correction are all offered at discounted rates. Visit www.knoxcounty.org/benefits or login at www.humana.com for more information about this program.

Flex Spending Accounts



Website: www.tasconline.com
Customer Service & Card Replacement: (800) 422-4661
Plan Year: Jan. 1 - Dec. 31

What You Pay (26 pay periods)
Elected Flex Deductions

Medical Flexible Spending Accounts:

You may elect to set aside \$250 to \$2,550 from your paycheck (before taxes) to help pay qualified medical expenses not covered by insurance for yourself, your spouse and dependent children. Qualified medical expenses include co-pays, deductibles, prescription drug co-pays, hearing aids, vision and dental expenses. Over the counter medications are not considered eligible expenses without a Medical Necessity Form completed by a physician.

The full medical FSA annual election will be available to existing employees in January. Each year, funds are added to the existing debit cards. TASC will mail debit cards to new enrollees in January. Keep your receipts! You may be asked to certify your claim. Up to \$500 of unused medical flexible spending funds may be rolled over to the following plan year. Visit our website knoxcounty.org/benefits for more information about FSA.

Dependent Care Flexible Spending Accounts:

For your dependent care account (DCA), the money set aside is to be used for your approved child-care services provided at a daycare facility, in your home or in someone else's residence. Certain requirements must be satisfied for reimbursement. The maximum annual contribution is \$5,000 for single or married filing jointly (\$2,500 if you are married and file separately).

The full medical FSA annual election will be available to existing employees in January. Each year, funds are added to the existing debit cards. TASC will mail debit cards to new enrollees in January. Keep your receipts! You may be asked to certify your claim. Money deducted from pay pre-tax for dependent care will be lost if not used by the end of the grace period. Visit our website knoxcounty.org/benefits for more information about dependent care FSA.

Voluntary Aflac Products



Website: www.aflacgroupinsurance.com
Customer Service: (800) 433-3036

What You Pay (26 pay periods)
Arranged with Aflac

Knox County provides access to voluntary benefits through Aflac. The benefits are supplemental to your group insurance coverage and premiums are paid 100% by you. Voluntary benefits offered include disability, accident, critical illness and hospital indemnity plans. Additional benefits include hospital advocacy, medical bill negotiation assistance, telemedicine and wellness coverage. Visit our website knoxcounty.org/benefits for more information.

Life Insurance



Knox County Retirement & Pension Board

400 Main St. Room 371, Knoxville, TN 37902

Phone: (865) 215-2323

Fax: (865) 215-2421

Email: retirement@knoxcounty.org

Website: www.knoxcounty.org/retirement

AETNA is the Life Insurance Carrier

Group Basic Life and Accidental Death and Dismemberment Insurance

Knox County's Basic Life and Accidental Death & Dismemberment (AD&D) Insurance is provided to all full-time and part-time employees that work at least 18 1/2 hours per week. The Basic benefit provided is one and one half times your annual salary up to a maximum of \$50,000 at no cost to employee.

With AD&D coverage, you are eligible to receive an additional benefit according to a schedule of losses such as loss of life, limb or sight due to an accident. This benefit pays up to two times your annual salary with a maximum of \$100,000 at no cost to employee.

Voluntary Supplemental Life Insurance

Knox County also offers voluntary Supplemental Term Life Insurance which can be purchased by you (see coverage amounts and rates below). Employees have 31 days from their hire date or qualifying event to elect supplemental life insurance with no medical questions. After 31 days an Evidence of Insurability form must be completed and approved by the Insurance Carrier for employee or spousal coverage.

Spousal Coverage

Coverage is also available for your spouse in the following amounts:

Spousal Coverage	\$10,000	\$20,000	\$30,000
Cost Semi-Monthly	\$1.41	\$2.82	\$4.23

Child Coverage

Child coverage may also be purchased in the amount of \$5,000 per child (\$.45 per pay period - 24 times a year). The premium of \$.45 per pay period covers all children. Children are covered from age 14 days old to 26 years old.

During the 2017 Open Enrollment Period (October 17 – November 18, 2016), employees may increase their supplemental life coverage or spousal coverage one step without an Evidence of Insurability form.

Employee Supplemental Life Rates (Semi-Monthly/24 Pay Periods)

The maximum supplemental life coverage for employee has increased from \$105,000 to \$150,000.

Employee Age	Rate/1000	\$20,000	\$30,000	\$45,000	\$60,000	\$75,000	\$90,000	\$105,000	\$120,000	\$135,000	\$150,000
Under 30	\$0.06	\$0.60	\$0.90	\$1.35	\$1.80	\$2.25	\$2.70	\$3.15	\$3.60	\$4.05	\$4.50
30 - 34	\$0.08	\$0.80	\$1.20	\$1.80	\$2.40	\$3.00	\$3.60	\$4.20	\$4.80	\$5.40	\$6.00
35 - 39	\$0.09	\$0.90	\$1.35	\$2.03	\$2.70	\$3.38	\$4.05	\$4.73	\$5.40	\$6.08	\$6.75
40 - 44	\$0.10	\$1.00	\$1.50	\$2.25	\$3.00	\$3.75	\$4.50	\$5.25	\$6.00	\$6.75	\$7.50
45 - 49	\$0.15	\$1.50	\$2.25	\$3.38	\$4.50	\$5.63	\$6.75	\$7.88	\$9.00	\$10.13	\$11.25
50 - 54	\$0.23	\$2.30	\$3.45	\$5.18	\$6.90	\$8.63	\$10.35	\$12.08	\$13.80	\$15.53	\$17.25
55 - 59	\$0.43	\$4.30	\$6.45	\$9.68	\$12.90	\$16.13	\$19.35	\$22.58	\$25.80	\$29.03	\$32.25
60 - 64	\$0.66	\$6.60	\$9.90	\$14.85	\$19.80	\$24.75	\$29.70	\$34.65	\$39.60	\$44.55	\$49.50
65 - 69	\$1.27	\$12.70	\$19.05	\$28.58	\$38.10	\$47.63	\$57.15	\$66.68	\$76.20	\$85.73	\$95.25
70 - 74	\$2.06	\$20.60	\$30.90	\$46.35	\$61.80	\$77.25	\$92.70	\$108.15	\$123.60	\$139.05	\$154.50
75 and over	\$2.90	\$29.00	\$43.50	\$65.25	\$87.00	\$108.75	\$130.50	\$152.25	\$174.00	\$195.75	\$217.50

Wellness & Work-life Balance

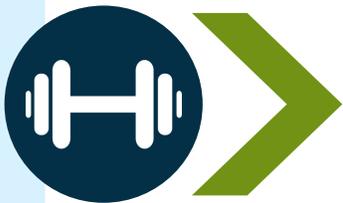


**Free Resource
for Employees & Dependents**

Website: www.deeroakseap.com
24/7 Resources Line: (866) 327-2400

Deer Oaks Employee Assistance Program (EAP) provides free and confidential assessment, short-term counseling, prevention, education, and referral services for you and your dependents. EAP benefits are provided at no cost to all active Knox County Government employees and their immediate families, regardless of health plan election, part-time or full-time status.

Trained counselors are available to help you find solutions for the everyday challenges of work and home as well as for more serious issues. Everything discussed with your counselor is confidential.



Discounted Gym Membership

YMCA

Knox County employees may join any local YMCA

without signing a contract. Stop by any Y with your Knox County ID badge or a recent pay stub, complete the membership application and payroll deduction form.

Employee Only	\$12.00
Employee +1	\$15.00
Family (Spouse + Children <26 years)	\$17.50

**What You Pay
Membership Fee (24 pay periods)**

National Fitness Center /Court South

Current employees may join only during the enrollment period each June. New employees may enroll within 30 days of their date of hire. The contracts are required annually and end June 30 of each year. New Membership Agreement forms are available at www.knoxcounty.org/benefits.

Employee Only	\$19.98
Employee +1	\$24.98
Family (Spouse + Children <26 years)	\$44.98



**Free Resource
Win Rewards**

Website: www.knoxsmarttrips.org

Smart Trips promotes alternatives to driving alone and when you participate, you can improve your health, save money, save the environment and earn rewards! We can help you find alternatives to driving alone, such as carpooling, taking transit, biking, walking and telecommuting to work. In the event of an unexpected change in your schedule, we've got you covered with an Emergency Ride Home. Learn more or sign up today at www.knoxsmarttrips.org.

2018 Preferred Insurance Rates



Save Hundreds of Dollars & Earn Rewards

Employees and spouses covered by Knox County medical insurance for the entire year of 2017 have the opportunity to earn preferred insurance rates in 2018 and rewards of up to \$300 each through the Go365 wellness program.

Employees and spouses new to the plan in 2017 will automatically receive the preferred rates in 2018. They are welcome to participate and earn Go365 rewards. Dependent children of any age do **not** need to participate for preferred 2018 rates, but children 18+ years old can register for their own Go365 account.

Preferred Rate Requirements



Replaces HumanaVitality
Website Live on 1/1/2017:
www.go365.com
Customer Service:
(855) 221-2270

HC21 HealthCare 21
SOLUTIONS
Secure Fax: (865) 312-6724
KYN-Knox County
625 Market Street, Ste. 900
Knoxville, TN 37902

- 1) After Jan. 1, register for a Go365 account.
- 2) Complete the Go365 Health Assessment.
- 3) Reach Silver Status between Jan. 1, 2017 - Sept. 30, 2017.

- 1) Complete sections A and C of the Biometrics Form on Page 12.
- 2) Have section B completed by a clinician during a preventive exam between Oct. 1, 2016 - Sept. 30, 2017.
- 3) Fax securely to HealthCare 21.

Engaging in Your Health

Many people have a chronic disease and don't even know it. You could save your own life by getting a physical. Annual physicals establish baselines that help your doctor identify problems you may have in the future and prevent serious health issues. Go365 can help you make goals to improve or maintain your health.

Most Preventive Services are 100% Covered

Annual physicals with an in-network doctor are covered in full by our medical plans, and you can get more than one per year. Tobacco cessation drugs, select labs, select immunizations, mammograms (except 3D), pap smears, colonoscopies and prostate specific antigen testing are also covered in-network.

Your Privacy is Important to Us

Your participation is voluntary, and your information is protected. Federal law prohibits Knox County Government from receiving or using an employee or spouse's personal health information. Do not give the completed biometrics form to any Knox County employee. Completed forms should be faxed securely to HealthCare 21 at (865) 312-6724. HealthCare 21 is an independent company selected by Knox County to maintain the data and ensure our compliance with Federal law. Please visit www.knoxcounty.org/benefits for notices about the wellness program and requesting alternative activities.

FORM INSTRUCTIONS

This form is not valid unless ALL information is complete. Any answer left blank in Section C will be considered False.

FAX the completed form to Secure FAX: 865-312-6724

HC21 Solutions
KYN - Knox County
625 Market St., Ste. 900
Knoxville, TN 37902

For Preferred 2018 Premiums, forms are due between Oct. 1, 2016 and Sept. 30, 2017.

Please keep a copy for your files

SECTION A Personal Information (to be completed by YOU)

Form fields for personal information including First Name, Last Name, MI, Birthdate, Last 4 of SSN, Gender, Relationship, Address, City, State, Zip, Primary Phone, and Email Address.

SECTION B Biometric Assessment (section MUST be completed by a CLINICIAN)

Form fields for biometric assessment including cholesterol levels, blood pressure, height, weight, BMI, waist circumference, appointment date, provider name, and provider signature.



Known Chronic Illnesses (check all that apply):

- Diabetes, Asthma, Heart Disease, Hypertension, Hyperlipidemia

Other: [text input field]

SECTION C Guide to Better Health (to be completed by YOU)

Form fields for health guide including pregnancy status, aspirin use, cancer screening, immunization, pap smears, mammograms, smoking status, primary care doctor, overall health, life satisfaction, and alcohol consumption.

By signing, I authorize the disclosure of my health screening results to HC21 Solutions, a third party providing health risk analysis and other services related to illness management. All information released to HC21 Solutions will be protected in accordance with any applicable law. I understand that information contained on this form may be used to determine eligibility for program incentives managed by my employer.

Patient Signature [line]

Date [text input field]