

# Get \$150 back!

Complete a tobacco  
cessation program

You probably know many of the reasons why you should quit smoking — it can help you breathe easier, live longer, and protect the health of those around you. Quitting isn't easy, and many people try more than once before they succeed, but it's worth it.

To help you quit for good, our Healthy Lifestyles<sup>SM</sup> Tobacco Cessation Program will reimburse you up to \$150 for completing an approved tobacco cessation program.\*

## How it works

1. Sign up for an approved tobacco cessation program.
2. Complete the approved program.
3. Submit documentation and request your reimbursement.

Log on to [ibx.com/reimbursements](https://ibx.com/reimbursements) and submit the following documentation:

- Proof of your participation in an approved tobacco cessation program or a certificate of completion
- All program receipts and receipts for nicotine replacement products or medications prescribed to you to help you quit

Start your well-being  
journey today!

Visit [ibx.com](https://ibx.com) or download the IBX mobile app.

Once all of your documentation is submitted, you can request your reimbursement to be paid by direct deposit or American Express rewards card.†

## Achieve Well-being

Our personalized online tools and resources help you achieve what's important in a way that's simple, easy, and fun. Visit [ibx.com](https://ibx.com) to get started today.

\* If you're 18 or older and your program costs less than \$150, you can apply the difference toward reimbursement of nicotine replacement products or medications prescribed to you to help you quit.

† Please note that American Express charges a fee of \$4.00 plus three percent of the reimbursement amount.

*Approved tobacco cessation programs include those that focus on behavior modification and provide frequent and regular support.*

## Tobacco Cessation Program guidelines

### Selecting a tobacco cessation program

No matter who you are, you can find a program that will give you the type of support and encouragement you need to kick the habit. Eligible programs include those that focus on behavior modification and provide frequent and regular support such as weekly meetings or telephone-based sessions. Work with your health care provider to determine which method is best for you. You can opt for an individual approach, or choose a program that offers group support. Some programs can even help you manage stress, avoid weight gain, and overcome barriers to quitting. You can also choose a program offered by a network hospital in your area. Search for a network hospital in your area at [ibx.com](https://www.ibx.com) for more information.

### The following are not reimbursable:

- Copays, coinsurance, deductibles
- Hypnosis
- Acupuncture
- Dietary supplements; injections
- Electronic cigarettes

**You are only eligible for one reimbursement per program, per calendar year.**

For more information, please contact Healthy Lifestyles at **1-800-590-8880**.

### Support for quitting other forms of tobacco

There are 28 known cancer-causing substances in chewing tobacco, spit tobacco, and other smokeless tobacco products. All smokeless tobacco contains nicotine, so it's just as addictive as cigarettes. And if you use any form of smokeless tobacco, you put yourself at an increased risk for serious health conditions including tooth decay, gum disease, and oral cancers of the lip, tongue, cheeks, gums, throat, and floor and roof of your mouth. If you're using smokeless tobacco, make a commitment to quit today. Many of the tobacco cessation programs that are eligible for our reimbursement also support individuals who want to quit using smokeless tobacco.

### Nicotine replacement and medication prescribed to assist with tobacco cessation

You may be eligible to obtain nicotine replacement medications under your pharmacy plan with a prescription from your doctor.

Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.

## Language Assistance Services

**Spanish:** ATENCIÓN: Si habla español, cuenta con servicios de asistencia en idiomas disponibles de forma gratuita para usted. Llame al 1-800-275-2583 (TTY: 711).

**Chinese:** 注意: 如果您讲中文, 您可以得到免费的语言协助服务。致电 1-800-275-2583。

**Korean:** 안내사항: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-275-2583 번으로 전화하십시오.

**Portuguese:** ATENÇÃO: se você fala português, encontram-se disponíveis serviços gratuitos de assistência ao idioma. Ligue para 1-800-275-2583.

**Gujarati:** સૂચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. 1-800-275-2583 કોલ કરો.

**Vietnamese:** LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi sẽ cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho bạn. Hãy gọi 1-800-275-2583.

**Russian:** ВНИМАНИЕ: Если вы говорите по-русски, то можете бесплатно воспользоваться услугами перевода. Тел.: 1-800-275-2583.

**Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-275-2583.

**Italian:** ATTENZIONE: Se lei parla italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-275-2583.

**Arabic:** ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية متاحة لك بالمجان. اتصل برقم 1-800-275-2583.

**French Creole:** ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-275-2583.

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga serbisyo na tulong sa wika nang walang bayad. Tumawag sa 1-800-275-2583.

**French:** ATTENTION: Si vous parlez français, des services d'aide linguistique-vous sont proposés gratuitement. Appelez le 1-800-275-2583.

**Pennsylvania Dutch:** BASS UFF: Wann du Pennsylvania Deitsch schwetzsch, kannscht du Hilf griege in dei eegni Schprooch unni as es dich ennich eppes koschte zellt. Ruf die Nummer 1-800-275-2583.

**Hindi:** ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। कॉल करें 1-800-275-2583।

**German:** ACHTUNG: Wenn Sie Deutsch sprechen, können Sie kostenlos sprachliche Unterstützung anfordern. Wählen Sie 1-800-275-2583.

**Japanese:** 備考: 母国語が日本語の方は、言語アシスタンスサービス (無料) をご利用いただけます。1-800-275-2583へお電話ください。

### Persian (Farsi):

توجه: اگر فارسی صحبت می کنید، خدمات ترجمه به صورت رایگان برای شما فراهم می باشد. با شماره 1-800-275-2583 تماس بگیرید.

**Navajo:** Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh. Hódííłnih koji' 1-800-275-2583.

### Urdu:

توجه درکار ہے: اگر آپ اردو زبان بولتے ہیں، تو آپ کے لئے مفت میں زبان معاون خدمات دستیاب ہیں۔ کال کریں 1-800-275-2583.

**Mon-Khmer, Cambodian:** សូមមេត្តាចាប់អារម្មណ៍៖ ប្រសិនបើអ្នកនិយាយភាសាមន-ខ្មែរ ឬភាសាខ្មែរ នោះ ជំនួយផ្នែកភាសានឹងមានផ្តល់ជូនដល់លោកអ្នកដោយឥតគិតថ្លៃ។ ទូរសព្ទទៅលេខ 1-800-275-2583។

## Discrimination is Against the Law

This Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

This Plan 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).
- 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 our Civil Rights Coordinator. If you believe that This Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Civil Rights Coordinator. You can file a grievance in the following ways: In person or by mail: ATTN: Civil Rights Coordinator, 1901 Market Street, Philadelphia, PA 19103, By phone: 1-888-377-3933 (TTY: 711) By fax: 215-761-0245, By email: [civilrightscordinator@1901market.com](mailto:civilrightscordinator@1901market.com). If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

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, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.