Helping your Patients meet their Well-Being Goals.

Be Well SHBP is a comprehensive well-being program available to State Health Benefit Plan (SHBP) members* (Medicare Advantage and Kaiser Permanente members excluded). This is a valuable resource to help reinforce the important behavior change recommendations that you provide to your patients regarding healthy eating, exercise, stress management, medication adherence, tobacco cessation and much more.

**BE WELL SHBP AT A GLANCE.**

Members have access to a comprehensive set of effective strategies that empower them to pursue a healthier life. The support available for members includes:

- Biometric Screening
- Well-Being Assessment
- Web-Based Plan For Well-Being
- Telephonic Well-Being Coaching
- Resources For Tobacco Cessation

**WHAT DOES THIS MEAN FOR PROVIDERS?**

Members may ask providers to support their well-being actions by:

- Completing Physician Screening Forms (see reverse side to learn how)
- Reviewing results from SHBP-sponsored onsite biometric screening events
- Reviewing a member Well-Being Assessment Report
- Providing nicotine replacement therapy prescriptions

**YOUR DEDICATED RESOURCE**

Healthways and Be Well SHBP recognize the importance of your role as a health care provider and the influence you have in working to improve the well-being of your patients/SHBP members. We have established a dedicated provider representative to support you in the important work that you do. Contact Healthways with questions or to learn more.

*The Georgia Department of Community Health and its State Health Benefit (SHBP) serve as the state’s administrator of health insurance coverage for state employees, teachers, school system employees and retirees who continued coverage.*
Using the Physician Screening Form

The most common request Providers will receive is to complete a 2017 Physician Screening Form. Your patient will provide you with a pre-populated individualized form. Once lab results are available and the form is completed by you, the form should be faxed or mailed to the contact information listed on the form.

HERE ARE THE KEY THINGS TO KNOW:

Members must provide their individualized Physician Screening Form to the provider.

Members must download their form from www.BeWellSHBP.com or order it by contacting Healthways customer service at 888-616-6411.

Form must be signed and dated by the provider to be processed.

Valid forms will be pre-populated with member information: Name, Healthways Member ID Number, Date of Birth and Gender.

Forms cannot be altered to be used for any other members.

Biometric measurements must be collected in 2017.

Completed forms should be submitted according to the instructions printed on the form.

Deadline to submit completed and signed 2017 Physician Screening Form is December 15, 2017.

Be Well SHBP
www.BeWellSHBP.com/provider