

Reasonable Alternative Standard

What if this FAQ does not answer my questions?

- For questions about using SmartHealth:
 - Call SmartHealth: **1-800-947-9541**
 - Online: **Contact SmartHealth**
- For questions about eligibility, the SmartHealth wellness incentive deadline, and more, visit:
 - **PEBB SmartHealth**
 - **SEBB SmartHealth**

Contents

About the SmartHealth Reasonable Alternative Standard	1
What is the Reasonable Alternative Standard (RAS)?	1
I can't do any of the activities offered. What can I do to qualify?.....	2
Who is eligible for a Reasonable Alternative program?.....	2
How do I apply?.....	2
How will my request be evaluated?.....	2
What if I'm denied? Can I appeal the decision?	2

About the SmartHealth Reasonable Alternative Standard

What is the Reasonable Alternative Standard (RAS)?

The Reasonable Alternative Standard is a way to ensure that PEBB and SEBB subscribers who have a health-related inability to participate in SmartHealth can earn points to meet the point requirement for the wellness incentives.

For members deemed eligible for the Reasonable Alternative Standard, the SmartHealth contractor, WebMD, will work to identify a substitute requirement for each wellness program requirement that needs to be reasonably accommodated. After completing the Reasonable Alternative program, you will earn 2,000 points.

To qualify for SmartHealth incentives, Reasonable Alternative participants must meet all program requirements, including completing the well-being assessment.

I can't do any of the activities offered. What can I do to qualify?

All SmartHealth subscribers, regardless of their health condition, have the opportunity to participate in the SmartHealth program and qualify for the wellness incentives. If you are unable to participate in the activities included in the SmartHealth program, you can complete a Reasonable Alternative program.

Who is eligible for a Reasonable Alternative program?

You may be eligible for a Reasonable Alternative program if you are a subscriber and:

- cannot complete SmartHealth activities due to a health-related inability to participate, or
- have no access or inadequate access to the Internet, or
- do not speak or understand English or Spanish, which are the two languages available in SmartHealth

How do I apply?

Call SmartHealth customer service at **1-800-947-9541**.

How will my request be evaluated?

The SmartHealth program offers a wide variety of activities for all eligible members to participate in. In reviewing Reasonable Alternative Standard requests, WebMD, the SmartHealth contractor, will consider all activities offered and determine if the requestor can participate in them. WebMD will escalate reasonable accommodation requests for which they are unable to determine an available accommodation through SmartHealth. The Washington Wellness Program Manager will work with the eligible SmartHealth subscriber to determine other available programs or possible participation exemption options.

What if I'm denied? Can I appeal the decision?

If you disagree with the decision made by the SmartHealth program, you may submit an appeal directly to the Health Care Authority's PEBB Appeals Unit or SEBB Appeals Unit. The Appeals Unit must receive your written request no later than 30 days after you receive your initial denial. You may provide any additional written material for review. You may use the appeal form available on the **PEBB Appeals webpage** or **SEBB Appeals webpage**. Make sure you submit your appeal to the correct address and that it is received by the deadline.

If you choose not to use the appeal form, you may submit a written appeal. Your appeal should contain all of the following:

1. Your name and mailing address.
2. The name and mailing address of your representative, if any.
3. Documentation or reference to documentation of decisions previously provided through the appeal process, if any.
4. A statement identifying the specific portion of the decision being appealed and clarifying what is believed to be unlawful or in error.
5. A statement of facts in support of your position.

6. Any information or documentation you would like considered that supports why the decision should be reversed. Information or documentation submitted later, unless specifically requested by the Appeals Unit, may not be considered in an appeal decision.
7. The type of relief you are seeking.
8. A statement that says you believe the contents of your appeal are truthful and correct.
9. Your signature or your representative's signature.