



# LACERS WELL PREVENTING DIABETES PROGRAM GUIDE

Healthy Balance™  
Program



**FOR QUALIFYING KAISER PERMANENTE, SCAN, AND UNITEDHEALTHCARE MEMBERS**

Join our campaign and you could earn a \$100 reward card and up to FOUR full LACERS Well Passports to Health (worth 5 points each), which can be redeemed for entry into drawings for prizes (gift cards, Fitbit activity trackers, bicycles, iPads and more!)

Diabetes is one of the most prevalent health conditions among the LACERS population. Approximately 8 out of 10 LACERS Members have been identified as either having diabetes or being prediabetic (i.e., having elevated blood glucose levels).

To support LACERS Members and their spouses/ domestic partners on their journey to optimal health, LACERS Well is launching a campaign to help identify if you are at risk for diabetes and if so, provide resources to help you prevent its onset.

The campaign consists of a simple 1-minute quiz to determine if you are at risk. For those who are at risk, you will have an opportunity to participate in Healthy Balance™ classes focusing on healthy eating, daily habits, and physical activity.

To join this campaign, just follow the steps below:

## STEP 1

Complete the enclosed 7-question Centers for Disease Control (CDC) Prediabetes Screening Quiz provided with this mailer. Use the enclosed "My Quiz Results" (top portion of the form) to indicate your results. If your score is between 3-8 points, you are

done! Mail or fax it back to LACERS and earn a full LACERS Well Passport to Health. If you earn a score of 9 or higher, you are eligible for Step 2.



Members who complete and submit their CDC quiz results will earn 5 LACERS Well Passport points for entry into a prize drawing.

## STEP 2

With a score of 9 or higher on the CDC screening quiz, you are qualified to:

- Enroll in Healthy Balance™, a no-cost\*, 16-session program developed by medical and weight loss professionals to help you achieve your health goals and provide peer support to keep you motivated. Although the sessions are provided at Kaiser Permanente facilities throughout Southern California, you do not need to be a Kaiser Permanente member to participate. **Deadline to enroll is June 30th, 2018.**
- Earn a \$100 reward card by being one of the first 100 Members to complete and log 12 or more Healthy Balance™ classes.

(continues on reverse)

\*Non-KP Members may incur a \$10 fee per session which is eligible for reimbursement upon completion of a minimum of 12 sessions up to 15 sessions. Submission of payment receipts to LACERS Well is required. Contact LACERS for further details.





To enroll, contact the Kaiser Permanente facility closest to you (see list below for contact information):

- Antelope Valley: (661) 726-2200
- Baldwin Park: (626) 851-5820
- Fontana/Ontario: (909) 609-3000
- Los Angeles: (323) 421-2710
- Orange County: (888) 988-2800
- Panorama City: (818) 375-3018
- Riverside: (951) 352-0292
- South Bay: (310) 602-7940
- West Los Angeles: (323) 421-2710
- Woodland Hills: (818) 719-4305

For additional information on classes in your area, visit [healthybalance-kaiserpermanente.org](http://healthybalance-kaiserpermanente.org) and click on "Get started, Find a location."

Once enrolled, use the enclosed "My Wellness Pledge" (bottom portion of the form) to confirm your commitment to yourself in preventing diabetes and the details of your first Healthy Balance™ session. Submit this form, along with the "My Quiz Results" portion to LACERS by **June 30, 2018**. Once received by LACERS, a diabetes prevention program welcome gift will be mailed to you!



Members who complete and submit their Wellness Pledge will earn 5 LACERS Well Passport points for entry into a prize drawing.

### STEP 3

To receive your \$100 reward card, use the enclosed "My LACERS Well Preventing Diabetes Program Session Log" to track your progress. Complete 12 or more Healthy Balance™ sessions and submit your log form to LACERS by **December 17, 2018**.



Members who complete and submit their Preventing Diabetes Program Session Log will earn 10 LACERS Well Passport points.



The first 100 Members to complete and log 12 or more Healthy Balance™ sessions will receive a \$100 reward card

## OPPORTUNITIES TO EARN PASSPORT POINTS FOR PREVENTING AND MANAGING DIABETES

Additional resources are available to help LACERS Members reduce their risk for diabetes or manage their diabetes condition, including:

- LACERS Well Extravaganza: LACERS' annual event with this year's focus on Diabetes Awareness and Prevention will be held in 3 locations during May 2018
- Healthier Living with Chronic Conditions Workshop: A six-week workshop starting in June 2018
- Diabetes Prevention Webinar Series: Valuable information provided online so all Members can participate, starting in July 2018
- American Diabetes Association – National Diabetes Prevention Program: A low-cost, year-long course available to those diagnosed as having prediabetes. Classes address lifestyle changes to prevent the onset of diabetes. For more information, visit [www.cdc.gov/diabetes/prevention/index.html](http://www.cdc.gov/diabetes/prevention/index.html).

For information on these resources or the LACERS Well Preventing Diabetes Campaign, please contact LACERS' Member Service Center at (800) 779-8328 or visit [lacers.org/lacerswell](http://lacers.org/lacerswell).

# CENTERS FOR DISEASE CONTROL (CDC) PREDIABETES SCREENING TEST

## COULD YOU HAVE PREDIABETES?

Prediabetes means your blood glucose (sugar) is higher than normal, but not yet diabetes. Diabetes is a serious disease that can cause heart attack, stroke, blindness, kidney failure, or loss of feet or legs.

Type 2 diabetes can be delayed or prevented in people with prediabetes through effective lifestyle programs. Take the first step. Find out your risk for prediabetes.

## TAKE THE TEST—KNOW YOUR SCORE!

Answer these seven simple questions. For each “Yes” answer, add the number of points listed. All “No” answers are 0 points.

Yes 1 No 0 Are you a woman who has had a baby weighing more than 9 pounds at birth?

Yes 1 No 0 Do you have a sister or brother with diabetes?

Yes 1 No 0 Do you have a parent with diabetes?

Yes 5 No 0 Find your height on the chart. Do you weigh as much as or more than the weight listed for your height?

Yes 5 No 0 Are you younger than 65 years of age and get little or no exercise in a typical day?

Yes 5 No 0 Are you between 45 and 64 years of age?

Yes 9 No 0 Are you 65 years of age or older?

**TOTAL:** \_\_\_\_\_

**IF YOUR SCORE IS 3 TO 8 POINTS** This means your risk is probably low for having prediabetes now. Keep your risk low. If you’re overweight, lose weight. Be active most days, and don’t use tobacco. Eat low-fat meals with fruits, vegetables, and whole-grain foods. If you have high cholesterol or high blood pressure, talk to your health care provider about your risk for type 2 diabetes.

**IF YOUR SCORE IS 9 OR MORE POINTS** This means your risk is high for having prediabetes now.

### AT-RISK WEIGHT CHART

Height	Weight	Height	Weight
4’10”	129	5’8”	177
4’11”	133	5’9”	182
5’0”	138	5’10”	188
5’1”	143	5’11”	193
5’2”	147	6’0”	199
5’3”	152	6’1”	204
5’4”	157	6’2”	210
5’5”	162	6’3”	216
5’6”	167	6’4”	221
5’7”	172		

# MY QUIZ RESULTS

**STEP 1.** Fill out this portion once you have completed your CDC prediabetes screening quiz.

My LACERS insurance is (circle one):



Member or Spouse/Domestic Partner's Name: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Mobile Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

I, LACERS Member or Spouse/Domestic Partner's Name, have completed the enclosed CDC quiz. My quiz score is (please check one box below):

Between 3 to 8 points. My risk is **low** for having prediabetes now.

If you checked this box, **you are done!** Submit this form to LACERS Well to earn 5 Passport to Health Points.

9 points or more. My risk is **high** for having prediabetes now.

If you checked this box, you may benefit from from enrolling in the Healthy Balance™ program.

**Move on to STEP 2 below.**

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# MY WELLNESS PLEDGE

**STEP 2.** Complete this portion if you are enrolling in the Healthy Balance™ program.

I, LACERS Member or Spouse/Domestic Partner's Name, pledge my commitment to the *Preventing Diabetes Campaign* and to the improvement of my health. I acknowledge that with education and hard work, I may reduce my chance of developing Type II Diabetes.

I will put my health first and create goals that will allow me to live the healthiest and happiest life possible.

*I pledge to prevent diabetes because My Health Matters!*

My first Healthy Balance™ program session will be:

\_\_\_\_\_

Date      Session Topic

\_\_\_\_\_

Location

\_\_\_\_\_

Member or Spouse/Domestic Partner's Signature

Date



**SUBMIT THIS FORM:**

Email to:

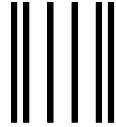
lacers.health@lacers.org

Secure Fax: (847) 890-6273

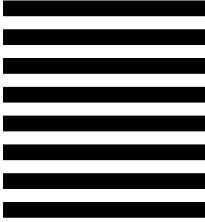
Mail: P.O. Box 512218

Los Angeles, CA 90051-9861





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**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 18 LOS ANGELES, CA  
POSTAGE WILL BE PAID BY ADDRESSEE

ATTN: LACERS WELL  
LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM  
PO BOX 512218  
LOS ANGELES CA 90051-9861



# MY LACERS WELL PREVENTING DIABETES PROGRAM SESSION LOG



Circle your LACERS insurance plan above.

Name: Member or Spouse/Domestic Partner's Name Home Phone #: \_\_\_\_\_ Mobile Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Please log your Healthy Balance™ session information below to qualify for exciting rewards! Once you have completed a minimum of 12 sessions, mail your log to **LACERS Well: P.O. Box 512218, Los Angeles, CA 90051-9861** by December 17, 2018.

Date	Session Topic	Location
_____	1 _____	_____
_____	2 _____	_____
_____	3 _____	_____
_____	4 _____	_____
_____	5 _____	_____
_____	6 _____	_____
_____	7 _____	_____
_____	8 _____	_____
_____	9 _____	_____
_____	10 _____	_____
_____	11 _____	_____
_____	12 _____	_____

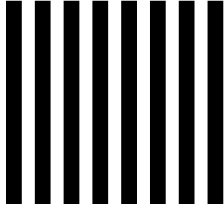
**GREAT JOB! YOU'VE REACHED 12 SESSIONS. KEEP IT GOING!**

_____	13 _____	_____
_____	14 _____	_____
_____	15 _____	_____
_____	16 _____	_____

Questions? Contact LACERS at (800) 779-8328 or at [lacers.health@lacers.org](mailto:lacers.health@lacers.org).



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LOS ANGELES CITY EMPLOYEES' RETIREMENT SYSTEM  
PO BOX 512218  
LOS ANGELES CA 90051-9861

