

Earn rewards for healthy behaviors

When you and your family are Tufts Health Together (MassHealth) members, you can earn these rewards for getting services that help you stay healthy.

After you complete a healthy behavior, follow these steps to request your reward:

1. Make sure you are a Tufts Health Together (MassHealth) member when you receive services.
2. Fill out the Member Information section of the form on the next page.
 - If you are filling out the form for a child, use the child’s name and Tufts Health Plan Member ID #.
 - Fill out one form for each member.
3. Check the service you received and fill in the date.
4. Mail or fax us the completed form below to the address on page 2.

We will begin processing your request when we receive the completed form. You should get your reward 6–8 weeks later.

Healthy Behavior	Eligible Members	Reward
Child immunizations and screenings Get these immunizations by second birthday: • 4 DTaP • 3 IPV • 1 Hep A • 3 Hep B • 4 Hib • 2 influenza • 1 varicella • blood lead screening • 3 Rota • 1 MMR • 4 PCV	Child, age 2 or younger	\$25 supermarket gift card
Adolescent immunizations Get all of the following immunizations by 13th birthday: • 1 meningococcal vaccine • 1 TDap • 2-dose or 3-dose schedule of the HPV vaccine	Child, age 13 or younger	\$10 department store gift card
Annual wellness visit — child: Have an annual wellness visit	Child, ages 3–9	\$25 supermarket gift card
Annual wellness visit — teen: Have an annual wellness visit	Teen, ages 10–17	\$10 department store gift card
Annual wellness visit — adult: Have an annual wellness visit	Adult, age 18 and older	\$25 supermarket gift card
WIC Visits Visit WIC twice during pregnancy	New mothers	\$25 supermarket gift card

Healthy Behavior	Eligible Members	Reward
Postpartum visit Visit provider between 21 and 56 days after delivery	New mothers	\$25 supermarket gift card
Asthma action plan Complete an asthma action plan	Those with asthma	\$25 supermarket gift card
Diabetes screenings Complete 5 routine diabetes screenings in 1 calendar year: 1 eye exam, 2 blood sugar (HbA1c) tests, 1 protein test and 1 cholesterol (LDL) test	Those with diabetes	\$25 supermarket gift card

EXTRAS may change. Please visit tuftshealthplan.com/TogetherExtras for the most up-to-date EXTRAS and eligibility information.

Today's date ___/___/___

Member Information (to be filled out by member)

Name _____

Tufts Health Plan Member ID # _____

Address _____

City _____ State _____ ZIP _____

Phone _____ - _____ - _____ Email _____

Healthy Service Received	Date of Service
<input type="checkbox"/> Immunizations and screenings – child, age 2 or younger	___/___/___
<input type="checkbox"/> Immunizations and screenings – adolescent, age 13 or younger	___/___/___
<input type="checkbox"/> Annual wellness visit – child, age 3–9	___/___/___
<input type="checkbox"/> Annual wellness visit – teen, age 10–17	___/___/___
<input type="checkbox"/> Annual wellness visit – adult, age 18 and older	___/___/___
<input type="checkbox"/> WIC visits (2) during pregnancy	___/___/___ & ___/___/___
<input type="checkbox"/> Postpartum visit	___/___/___
<input type="checkbox"/> Asthma action plan	___/___/___
<input type="checkbox"/> Diabetes screenings	___/___/___

Members, please mail this form to:

Tufts Health Plan
 Attn: Claims Department
 P.O. Box 524
 Canton, MA 02021

Or fax to: 857-304-6300

Questions? Call us at 888-257-1985
Monday–Friday, 8 a.m.–5p.m.