

## Earn a \$30 reward

### Diabetes dilated or retinal eye exam

### Complete an eye exam and earn a \$30 reward.

Diabetes is a disease that can impact many areas of your body, including your eyes. It increases your risk for eye conditions, such as glaucoma and cataracts. Diabetes can also damage the blood vessels in your eyes, and even lead to vision loss. That's why it's important to maintain safe blood sugar levels and have your eyes checked every year. You should also have a blood glucose (A1C) and urine protein test. These tests help your doctor detect signs of damage to your heart, blood vessels, nervous system or kidneys.

Find out what other rewards you may be eligible for — sign in or create an online member account at **member.ucare.org**. Once you're signed in, go to Health & Wellness, then Wellness, Rewards & Allowance. For more information, call the customer service number on the back of your EssentiaCare member ID card.

#### Terms and conditions

- · Limit one reward per program, per calendar year, for eligible members with diabetes
- Member must be enrolled in an eligible EssentiaCare plan at the time of the exam, test or screening and at the time of redemption
- Date of service must be completed during the plan year listed on the voucher and submitted within 120 days of the exam, test or screening
- Members must have a provider complete and sign the voucher prior to returning it
- · Incomplete or ineligible vouchers will be denied, and you will be notified by mail
- Reward dollars will be loaded on your Healthy Benefits+ Visa® card
- Reward dollars on your Healthy Benefits+ Visa card will expire 365 days from the date of deposit. If your plan is terminated, all funds on your Healthy Benefits+ Visa card will expire.
- Rewards are subject to change. EssentiaCare reserves the right to deny rewards for any reason.

#### Statement of Nondiscrimination

EssentiaCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 612-676-3200/1-800-203-7225 (TTY 612-676-6810/1-800-688-2534).

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 612-676-3200/1-800-203-7225 (TTY 612-676-6810/1-800-688-2534).



# \$30 reward

## Diabetes dilated or retinal eye exam

Voucher must be mailed to EssentiaCare within 120 days of the date of service.

Please use black ink. All fields required.

To	be	comp	leted	by mem	ber:
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EssentiaCare member ID number	Member date of birth
Member name	
Mailing address	
City, state, zip	
To be completed by doctor/clinic staff:	
Dilated or retinal eye exam documented in the patient medical record?	P □ Yes □ No
Diabetic condition documented in patient record?   Yes   No	
Exam date, type and result sent to the patient's primary care provider?	☐ Yes ☐ No
2025 date of eye exam	
Clinic name	
Clinic phone	
Doctor/clinic staff signature	
Allow 4 – 6 weeks for reward delivery.	

Mail to:

ATTN HEALTH PROMOTION UCARE ESSENTIACARE PO BOX 52 MINNEAPOLIS, MN 55440-9682