



How register on My.QuestForHealth.com

- Visit <u>My.QuestForHealth.com</u>
- All PCS Employees will need to create a new account (even if you've been a patient at Quest before).
- If you've never registered on the site to establish an account, use the **Create Account** area, enter the registration key: **PCSB**, and select the **Register Now** button
- If you've already established an account, use the Log In area to enter your username and password and select the green Log In button
 - If you've forgotten your login information, use the username link to retrieve your username or the password link to reset your password



PCS Employees: Registration key: **PCSB**

Please note: these screenshots are based on common browser resolution; actual screens may vary due to responsive design

Transform your health

Biometric screening results can provide powerful insights into your health and risks you may not currently recognize. Register and complete your screening to know your numbers, transform your health, and write the story of your life.

A A A A

- Read through the Quest Diagnostics Terms and Conditions
- Scroll to the bottom and select the Accept & Continue button



Terms and Conditions

Terms of Service: Quest Diagnostics Health & Wellness represents health benefit management programs with policies in place to maintain the confidentiality of your information consistent with Quest Diagnostics Notice of Privacy Practices, which may be found at QuestDiagnostics.com/home/privacy-policy/online-privacy.html Our Privacy of Protected Health Information (PHI) policy requires that we"must obtain, maintain, use and disclose patient protected health information in a manner that protects patient privacy and complies with all state and federal laws." Though this is a voluntary program, should you choose not to accept these Terms and Conditions, you will not be able to participate.
By participating in the wellness screening program(s) you acknowledge, and consent to, Quest Diagnostics Health & Wellness' disclosure of the data and outcomes of your Health Questionnaire and test results in accordance with the requirements of the Health Insurance and Portability and Accountability Act (HIPAA) and any other applicable laws. If you are providing family medical history or other genetic information through a Health Questionnaire or test results, you are also authorizing and consenting to the use of such genetic information may include blood pressure, BMI, and blood work results such as cholesterol, glucose, and triglycerides, in your spouse's data. Your employer will not receive your results in any form that may match the data to you, though your employer may receive de-identified, aggregated data from the entire population of participating employees.

Accept & Continue >

Download Terms and Conditions



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- · If custom consent is required for your program, you will need to read through the consent and select I accept
- Then select the green Continue button



ABC Consent

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Sed sit amet euismod tellus, in ultricies leo. Sed maximus dignissim dolor, vitae porttitor est semper sit amet. Cras tempor ac dui vel bibendum. Lorem ipsum dolor sit amet, consectetur adipiscing elit. Praesent libero lacus, sagittis vitae auctor quis, tempor quis elit. Ut lacinia egestas lorem, in auctor metus faucibus in. Vivamus nec vehicula velit. Mauris consequat ligula sed dolor viverra, eu vulputate ex fringilla. In ac volutpat ex.

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○ I accept ○ I decline

Continue

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- Under Confirm Your Eligibility, enter your Unique ID, Date of Birth, and relationship to the organization
 - Your Unique ID: Aetna WID#
 - · Your relationship should be either employee or spouse/domestic partner
 - Only spouses on a 2 Board Family medical plan can participate in the Quest Wellness Screenings. Spouses who are not employees of PCS cannot participate in the screenings.
- select the green **Continue** button

1 Confirm Your Eligiblity	2 Create Account	3 Enter Your Information
Confirm Your Elig	bility	
Please enter your Unique ID and date of	pirth.	
Uid * Birth Exam	Date * 💼	
Relation *		



- Create a username and password to log in to your account
 - The password must be at least 8 characters long, include a number or special character, and include at least 1 uppercase and 1 lowercase letter
- select the green **Continue** button

Confirm Your Eligiblity	2 Create Account	Bnter Your Information
Create Your Acco	unt	
Usemame * SampleParticipant123!		

- Verify/complete all of the information under Enter Your Information
 - Please note that an email address is required and will be used in a case where you need to retrieve your username or reset your password
- Verify/complete all of the information under Mailing Address
- Select if you would like to receive appointment reminders from Quest Diagnostics Health & Wellness
- select the green Save button

Quest			Hello,		
		Schedule an Appointment	My Account	Contact	Log Off
My Account					
Enter Your Information					
First Name Sample	Last Name Participant				
Birth Date Gender * 02/15/1979 Female	Phone * 913.555.5555				
Example: 01/25/1980 Email Address *					
sampleparticipant@sample.com					6
Mailing Address					
Address Line 1 * 10101 Renner Blvd	Address Line 2				
Country * City *	State * KS - Kansas	Postal Code *			
Communication Preferences					
I would like to receive appointment reminders from Quest E	Diagnostics Health & Wellness.				
Save > Cancel					

- After registering, you will arrive at the dashboard
- Under the Why should you participate section, you will see any program-specific information from your employer, if applicable

