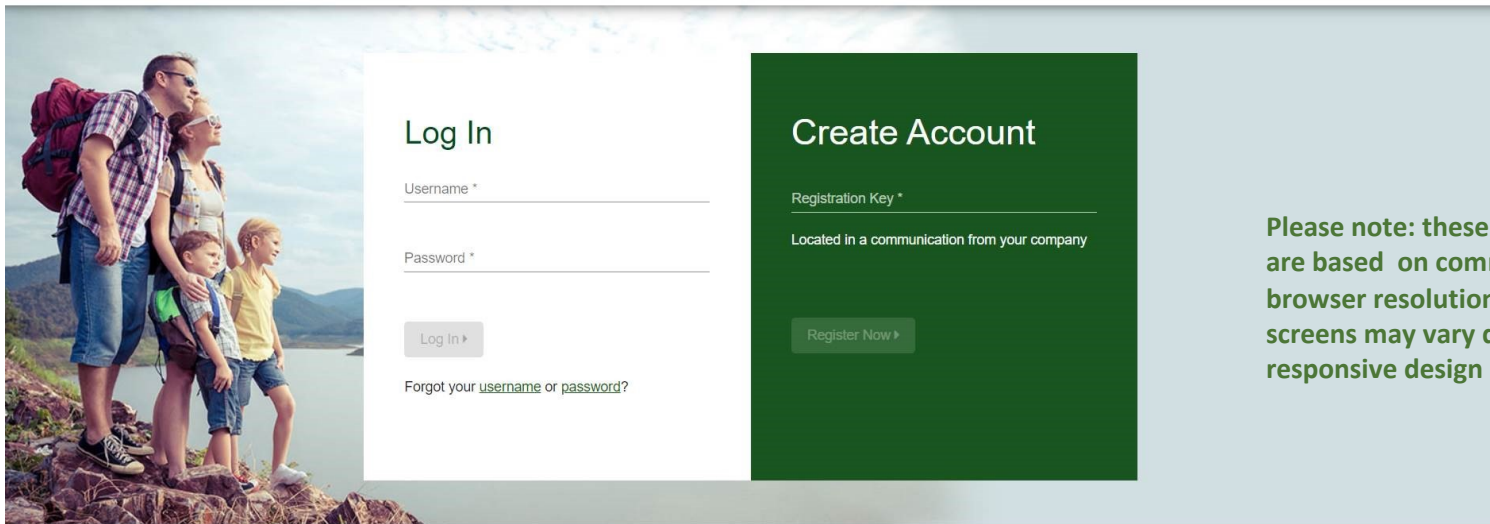


How to register on My.QuestForHealth.com

- Visit My.QuestForHealth.com
- 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
- If you've never registered on the site to establish an account, use the **Create Account** area, enter the registration key provided by your employer (DFA2021), and select the **Register Now** button



Log In

Username *

Password *

Log In ▶

Forgot your [username](#) or [password](#)?

Create Account

Registration Key *

Located in a communication from your company

Register Now ▶

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

Transform your health

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



Contact

Terms and Conditions

1. 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.

2. 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 for the purposes of the wellness screening program as described in paragraph 3 below. If you are a spouse or dependent of another participant in the wellness screening program, you are also authorizing and consenting to the use of your genetic information, which 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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- Under **Confirm Your Eligibility**, enter your Unique ID, Date of Birth, and relationship to the organization
 - Your Unique ID is the last 5 digits of your SSN + Your DOB in MMDDYY format
 - For example if my last 5 of SSN is 56789 and my DOB is 1/1/1990, I would enter 56789010190 in the Unique ID field
 - Your relationship should be either **Employee** or **Non-Employee**
- Select the green **Continue** button



Contact

1 Confirm Your Eligibility — 2 Create Account — 3 Enter Your Information

Confirm Your Eligibility

Please enter your Unique ID (which is your employee ID) and date of birth

Employee ID *
123456789A

Birth Date *
02/15/1979

Example: 01/25/1980

Relation *
Employee

Continue ▶



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- 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

1 Confirm Your Eligibility — 2 Create Account — 3 Enter Your Information

Create Your Account

Username *

SampleParticipant123!

Password *

.....

Confirm Password *

.....

8 Characters, Number or Special Character, Uppercase, Lowercase

Continue ▶

- 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
- Select the green **Save** button

Progress bar: 1 Confirm Your Eligibility 2 Create Account 3 Enter Your Information

Enter Your Information

First Name * Last Name *

Preferred Name (Nickname) Birth Date Self-Identified Gender *

Example: 01/25/1980

Phone * Email Address *

Mailing Address

Address Line 1 * Address Line 2

Country * City * State * Postal Code *

Communication Preferences

I would like to receive appointment reminders from Quest Diagnostics Health & Wellness.

- After registering, you will arrive at the dashboard
- Under the **Why You Should Participate** section, you will see any program-specific information from your employer, if applicable
- Under the **Wellness Screening** section, you will see the screening options applicable to your employers' program.

Why You Should Participate

Completing a screening gives you the knowledge you need to identify your health risks and transform your health.



Wellness Screening

To get started, select an appointment method below.

Patient Service Center

Schedule a screening at a nearby Quest Diagnostics location.

[Schedule a Screening ▶](#)

At an Event

Attend a wellness event at work or a location designated by your organization.

[Make an Appointment ▶](#)

Physician Results Form

Download a form that your health provider completes with your recent test results.

[Order Form ▶](#)

Self-collection

Complete your self-collection

[Order Materials ▶](#)