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BEFORE THE TRADEMARK TRIAL AND APPEAL BOARD

Proceeding	92070467
Party	Plaintiff Health Alliance Plan of Michigan
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Submission	Motion for Summary Judgment Yes , the Filer previously made its initial disclosures pursuant to Trademark Rule 2.120(a); OR the motion for summary judgment is based on claim or issue preclusion, or lack of jurisdiction. The deadline for pretrial disclosures for the first testimony period as originally set or reset: 03/19/2020
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Attachments	HAPPIFY motion for summary judgment.pdf(13950 bytes) BIS HAP MSJ - Redacted.pdf(190084 bytes) Ex A - Wilson Declaration.pdf(774968 bytes) Exhibit 1 - HFHS002479.pdf(185531 bytes) Exhibit 2 - Wayback Machine Pages.pdf(3820260 bytes) Exhibit 4 - HFHS000017.pdf(143643 bytes) Exhibit 5 - HFHS000011.pdf(1124758 bytes) Exhibit 6 - HFHS000027.pdf(3724710 bytes) Exhibit 7 - HFHS000015.pdf(346936 bytes) Exhibit 8 - Blog Articles 3.pdf(6076366 bytes) Exhibit 10 - HFHS002358.pdf(976883 bytes) Exhibit 11 - CD to Happify Inc.PDF(900906 bytes) Ex B - Happify_ Science-Based Activities and Games.pdf(4898713 bytes) Ex C - About The Innovator news.pdf(92592 bytes) Ex D - Startup Of The Week_ Happify - The Innovator news.pdf(1645914 bytes) Ex F - Happify _ Aetna.pdf(650842 bytes) Ex J - Happify Costs.pdf(742345 bytes)

**UNITED STATES PATENT AND TRADEMARK OFFICE
TRADEMARK TRIAL AND APPEAL BOARD**

Health Alliance Plan of Michigan,)	
)	
Petitioner,)	
)	Cancellation No. 92070467
v.)	
)	Registration No. 85550524
Happify Inc.,)	
)	
Respondent.)	

**PETITIONER’S MOTION FOR SUMMARY
JUDGMENT**

Pursuant to Fed. R. Civ. P. 56, Petitioner Health Alliance Plan of Michigan (“HAP”), moves for Summary Judgment as a matter of law, there being no dispute of material facts in this Cancellation, and states:

1. HAP has used its HAP mark continuously in commerce since 1979 for health care related goods and services. As a result, HAP is the owner of several registrations for HAP and HAP-formative marks for health care related goods and services, including U.S. Trademark Registration Nos. 3315932 (registered October 23, 2007); 3322635 (registered October 30, 2007); 3409974 (registered April 8, 2008); 3130855 (registered August 15, 2006); 4318194 (registered April 9, 2013); 4323076 (registered April 23, 2013); 4384950 (registered August 13, 2013); 4384951 (registered August 13, 2013); 4459676 (registered December 31, 2013); 4556962 (registered June 24, 2014); 4827476 (registered October 6, 2015); 4122490 (registered April 3,

2012); 4831846 (registered October 13, 2015) and 4236991 (registered November 6, 2012). These registrations are valid and subsisting, uncanceled, and unrevoked.

2. On February 23, 2012 Respondent Happify, Inc. (“Happify”) filed an application to register HAPPIFY for the following goods and services:

Computer game software for use on computers, mobile phones, portable media players, handheld computers, and other mobile devices; downloadable interactive multimedia computer programs for use in the fields of self-improvement, positive psychology, personal happiness, mental health and wellness for use on computers, mobile phones, portable media players, handheld computers, and other mobile devices; downloadable and non-downloadable virtual and digital goods in Class 9;

Public opinion polling in the fields of self-improvement, positive psychology, personal happiness, and mental health and wellness in Class 35;

Entertainment and educational services, namely, providing a website featuring non-downloadable publications in the nature of articles in the fields of self-improvement, positive psychology, personal happiness, and mental health and wellness; entertainment and educational services, namely, providing a website featuring non-downloadable articles and interactive quizzes and games in the fields of self-improvement, positive psychology, personal happiness, and mental health and wellness; providing a website featuring non-downloadable videos and photos in the field of personal happiness, such information being for entertainment purposes only; Providing a website featuring information in the field of personal happiness, such information being for entertainment purposes only; Providing an interactive website featuring information and advice in the field of personal happiness, such information being for entertainment purposes only; Providing counseling and advice in the field of personal happiness, such information being for entertainment purposes only; entertainment services, namely, providing online computer games in Class 41;

Providing a website featuring non-downloadable videos in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; providing a website featuring information in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; providing an interactive website featuring information and advice in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; consulting in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; Providing counseling and advice in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness in Class 44; and

Providing a website featuring non-downloadable videos in the field of self-improvement; providing a website featuring information in the field of self-improvement; providing an interactive website featuring information and advice in the field of self-improvement;

consulting in the fields of self-improvement; Providing counseling and advice in the field of self-improvement; online social networking services in the fields of self-improvement, positive psychology, personal happiness, mental health and wellness provided via a website in Class 45.

This registration issued on January 27, 2014 and was assigned registration number 4475643.

4. Petitioner's priority date of 1979 for the HAP mark is indisputably earlier than Respondent's 2012 priority date for HAPPIFY.

5. Confusion between Petitioner's HAP mark and Respondent's HAPPIFY mark is inevitable inasmuch as the Respondent uses a highly similar mark for nearly identical goods and services.

6. Because there are no issues of material fact relative to Petitioner's claims, Petitioner is entitled to summary judgment as a matter of law.

Respectfully submitted,

By: /s/ Rebecca J. Cantor
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CERTIFICATE OF SERVICE

I certify that I served:

**PETITIONER'S MOTION FOR SUMMARY JUDGMENT
and BRIEF IN SUPPORT**

on March 18, 2020 by:

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_____ mailing (via First Class Mail)
 X emailing

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Attorney/Agent for Respondent

By: /s/ Rebecca J. Cantor
Rebecca J. Cantor

Attorneys/Agents for Petitioner

**UNITED STATES PATENT AND TRADEMARK OFFICE
TRADEMARK TRIAL AND APPEAL BOARD**

Health Alliance Plan of Michigan,)	
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Petitioner,)	
)	Cancellation No. 92070467
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Happify Inc.,)	
)	
Respondent.)	

**BRIEF IN SUPPORT OF PETITIONER'S MOTION
FOR SUMMARY JUDGMENT**

I. INTRODUCTION

Petitioner Health Alliance Plan of Michigan (“HAP”) filed this Petition to Cancel against Respondent Happify Inc.’s (“Happify”) registration for HAPPIFY—a mark that incorporates Petitioner’s HAP mark in its entirety, in the same color, a similar font, the same lowercase lettering, and is used for identical (or at a minimum closely related) goods and services. HAP now moves for summary judgment pursuant to Fed. R. Civ. P. 56(c).

Summary judgment is warranted because it is indisputable that HAP has priority of use of the HAP mark, and there is no genuine issue of material fact as to the likelihood of confusion created by Respondent’s registration of a highly similar mark for identical or closely related services.

II. BACKGROUND

The origins of HAP began in 1956, when the United Auto Works Union (“UAW”) opened the Metropolitan Hospital in Detroit to provide affordable health care to auto workers. (*See* Ex. A, Declaration of Deborah Wilson (“Wilson Decl.”) at ¶2, Ex. 1¹ at HFHS2480.) In 1960, the UAW sponsored the Community Health Association, which gave patients at Metropolitan Hospital of Detroit and autoworkers access to health insurance through a comprehensive Health Management Organization (“HMO”) in exchange for a monthly prepayment (*i.e.*, a premium). (*Id.*) The Community Health Association became affiliated with Henry Ford Hospital in 1972 and was renamed the Metro Health Plan. (*Id.*) In 1979, Metro Health Plan, Henry Ford Hospital, organized labor and the Detroit automakers announced a new healthcare alliance called Health Alliance Plan or HAP. (Wilson Decl. at ¶2, Ex. 1 at 2481.)

¹ All numbered exhibits refer to exhibits to the Wilson Declaration.

HAP's core business is offering high-quality health care coverage. (Wilson Decl. at ¶3, Ex. 2 at HFHS17.) In order to accomplish this goal, HAP is committed to providing the best combination of coverage, care, service, and quality. (*Id.*) These efforts go beyond merely ensuring that HAP members have a wide network of doctors and hospitals to visit at reasonable prices. (*Id.*) HAP also provides a wide range of services for its members and the community to encourage both physical and mental health. For example, HAP has paired with Weight Watchers® and provided healthy cooking lessons to help its members lose weight and maintain a healthy lifestyle and HAP provides special programs to encourage retirees to stay active and improve their health. (Wilson Decl. at ¶4, Exs. 3 and 4.)


HAP also works hard to make sure its members have access to comprehensive mental health services, including treatment for anxiety, depression, eating disorders, and drug and alcohol addiction. (Wilson Decl. at ¶5, Ex. 5). In particular, HAP operates a Coordinated Behavioral Health Management ("CBHM") team to assist its members in obtaining appropriate mental health treatment. (*Id.*) HAP's CBHM team is fully licensed and has years of experience treating patients with mental health conditions, addictions or both. (*Id.*) HAP's CBHM team offers a number of services to assist members in obtaining licensed, quality mental health treatment, including: (1) finding an appropriate, licensed mental health specialist; (2) monitoring a patient's care while in treatment; (3) ensuring that the patient is taking appropriate medication; (4) finding support groups; and (5) assisting patients in locating inpatient healthcare. (*Id.*)

In addition, HAP provides a blog called HAP Balanced Living that can be accessed by any member of the public and which contains articles related to community health. (Wilson Decl. at ¶6.) A number of these articles are specifically directed to mental health, including articles about smartphone addiction (ex. 6 at HFHS2363), grief (*id.*, at HFHS2365), worries arising from

financial concern (*id.*, at HFHS2373), stress and anxiety (*id.*, at HFHS2378, HFHS2424, and HFHS2456), postpartum depression (*id.*, at HFHS2383, HFHS2543, and HFHS2555), surviving widowhood (*id.*, at HFHS2389), body image (*id.*, at HFHS2396 and HFHS2403), and depression (*id.*, at HFHS2418 and HFHS2568). These blog posts can be found at www.hap.org/blog. (Wilson Decl. at ¶6.)


As a result of these efforts, HAP has become a leading health insurance provider. Indeed, in a survey, HAP customers reported high satisfaction with HAP because, *inter alia*, HAP treats members with “respect, empathy, and patience,” cares about its members’ health, and treats its members like part of the family. (Wilson Decl. at ¶7, Ex. 7 at HFHS2613.) In addition, HAP has received numerous accolades for its outreach efforts such as its HAP Balanced Living blog, including Ragan’s Health Care PR and Marketing Awards in 2017 and 2018, Digital Health Awards in 2017 and 2018, and a Healthcare Communications Award Honorable Mention. (Wilson Decl. at ¶8, Ex. 8.)

Based on the activities described above, HAP has obtained the following U.S. Trademark Registrations:

Registration Number	Mark	Goods	Filing/Registration Date
3315932	HAP	Insurance underwriting in the field of health; administration of health care plans in Class 36 Health care in the nature of health maintenance organizations" in Class 44	Filed: December 21, 2006 Reg.: October 23, 2007
3322635		Insurance underwriting in the field of health; administration of health care plans in Class 36 Health care in the nature of health maintenance organizations in Class 44.	Filed: December 21, 2006 Reg.: October 30, 2007

Registration Number	Mark	Goods	Filing/Registration Date
3409974	HAP PREFERRED	Health care cost containment in Class 35	Filed: January 11, 2007 Reg.: April 8, 2008
3130855	HAP WEIGHT WISE PROGRAM	Promoting public awareness of the need for nutrition and exercise in Class 35 Educational services, namely, conducting seminars in the field of nutrition and exercise and distributing course materials in connection therewith in Class 41	Filed: August 24, 2004 Reg.: August 15, 2006
4318194	HAP PERSONAL ALLIANCE	Insurance underwriting in the field of health; administration of health insurance plans; administration of prescription drug programs; health savings accounts; dental insurance; providing financing discounts on fitness, exercise, weight-loss, healthcare, and wellness programs in Class 36 Providing information on healthcare and wellness via the Internet in Class 44	Filed: December 16, 2011 Reg.: April 9, 2013
4323076	HAP HELPS AT EVERY AGE AND STAGE	Administration of pre-paid health care plans; financial administration of prescription drug plans; underwriting healthcare insurance; administration of dental insurance programs; administration of life insurance; administration of employee benefit plans concerning insurance and finance in Class 36 Healthcare services in Class 44	Filed: March 8, 2012 Reg.: April 23, 2013

Registration Number	Mark	Goods	Filing/Registration Date
4384950	HAP HELPS	Administration of pre-paid health care plans; financial administration of prescription drug plans; underwriting healthcare insurance; administration of dental insurance programs; administration of life insurance; administration of employee benefit plans concerning insurance and finance in Class 36 Healthcare services in Class 44	Filed: March 8, 2012 Reg.: August 13, 2013
4384951	HAP IS HERE TO HELP YOU DO THE BEST FOR YOURSELF AND YOUR FAMILY	Administration of pre-paid health insurance benefit plans; administration of prescription pre-paid drug plans; underwriting healthcare insurance; administration of dental insurance programs; administration of life insurance; administration of employee benefit plans concerning insurance and finance in Class 36 Healthcare services in Class 44	Filed: March 8, 2012 Reg.: August 13, 2013
4459676	WELCOME TO HAP	Administration of pre-paid health insurance benefit plans; administration of prescription pre-paid drug plans; underwriting healthcare insurance; administration of dental insurance programs; administration of life insurance; administration of employee benefit plans concerning insurance and finance in Class 36 Healthcare services in Class 44	Filed: March 8, 2012 Reg.: December 31, 2013
4556962	HAP BALANCED LIVING	Publications, namely, newsletters for use in connection with promoting insurance underwriting in the field of health and administration of health care plans and health care in the nature of health maintenance organizations in Class 16	Filed: March 8, 2013 Reg.: June 24, 2014

Registration Number	Mark	Goods	Filing/Registration Date
4827476	MY HAP WELLNESS	Providing an Internet website portal featuring educational courses of instruction related to health and wellness in Class 41 Providing an Internet website portal featuring health and wellness information in Class 44	Filed: May 13, 2013 Reg.: October 6, 2015
4122490	HAP SENIOR PLUS	Healthcare services in Class 44	Filed: August 4, 2010 Reg.: April 3, 2012
4831846	HAP OnTheGo	Downloadable mobile applications for accessing health information tools in Class 9	Filed: March 11, 2015 Reg.: October 13, 2015
4236991		Educational services, namely, afterschool program to address childhood obesity by teaching children healthy eating habits and food preparation skills in Class 41	Filed: March 15, 2012 Reg.: November 6, 2012

These registrations shall collectively be referred to as the “HAP Registrations.” Copies of the USPTO’s electronic records showing the current status and title of the registration were attached to the Petition to Cancel and have therefore properly been made of record pursuant to 37 C.F.R. § 2.122(d)(1) and TBMP § 528.05(d).²

In July 2018, HAP attended the Michigan Association of Health Plans 33rd Annual Summer Conference at the Grand Traverse Resort in Acme, Michigan. At this conference, HAP’s representatives first became aware of Respondent when they saw a Happify marketing table displaying the HAPPIFY mark for mental health services. (Wilson Decl. at ¶9.) Moreover, Respondent displayed its HAPPIFY mark in lowercase letters, just as HAP displays its well-known

² In its Petition to Cancel HAP also pleaded U.S. Registration No. 4323101 for READY, SET, COOK! A RECIPE FOR WELLNESSHAP. (See 1 TTABVUE.) Since the filing of the Petition to Cancel, that registration has been abandoned. As such, it is not included in the list of HAP Marks set forth herein.

logo, and using a similar font and the same orange color that HAP uses. (*Id.*, *see also* Ex. 9.) The similarities between the two parties' marks are shown in the images below:



(Ex. 11.)

Upon further investigation, HAP learned that Respondent offers mental health services under the mark HAPPIFY. More specifically, on its website Respondent purports to provide “effective, evidence-based solutions for better mental health.” (Ex. B at 1.) Happify does this by offering “activities and games [that] can be used anytime, anywhere.” (*Id.*, at 8) According to Respondent, users of Happify experience a higher level of positive emotions and “86% of frequent users get happier in two months.” (*Id.*, at 9.) Happify, however, does not offer licensed mental health treatment. Indeed, in small type at the bottom of its website Happify warns that “Happify does not provide medical advice, psychiatric diagnosis or treatment.” (*Id.*, at 18.) This is in strong contrast to HAP which, as described above, has a team of licensed mental health professionals to assist HAP members with their mental health problems and ensure these members receive appropriate medical treatment.

HAP also learned Respondent owns a federal trademark registration for the mark HAPPIFY for the following goods and services:

Computer game software for use on computers, mobile phones, portable media players, handheld computers, and other mobile devices; downloadable interactive multimedia computer programs for use in the fields of self-improvement, positive psychology, personal happiness, mental health and wellness for use on computers, mobile phones, portable media players, handheld computers, and other mobile devices; downloadable and non-downloadable virtual and digital goods in Class 9;

Public opinion polling in the fields of self-improvement, positive psychology, personal happiness, and mental health and wellness in Class 35;

Entertainment and educational services, namely, providing a website featuring non-downloadable publications in the nature of articles in the fields of self-improvement, positive psychology, personal happiness, and mental health and wellness; entertainment and educational services, namely, providing a website featuring non-downloadable articles and interactive quizzes and games in the fields of self-improvement, positive psychology, personal happiness, and mental health and wellness; providing a website featuring non-downloadable videos and photos in the field of personal happiness, such information being for entertainment purposes only; Providing a website featuring information in the field of personal happiness, such information being for entertainment purposes only; Providing an interactive website featuring information and advice in the field of personal happiness, such information being for entertainment purposes only; Providing counseling and advice in the field of personal happiness, such information being for entertainment purposes only; entertainment services, namely, providing online computer games in Class 41;

Providing a website featuring non-downloadable videos in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; providing a website featuring information in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; providing an interactive website featuring information and advice in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; consulting in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness; Providing counseling and advice in the fields of positive psychology, health and wellness to bring about personal happiness, and mental health and wellness in Class 44; and

Providing a website featuring non-downloadable videos in the field of self-improvement; providing a website featuring information in the field of self-improvement; providing an interactive website featuring information and advice in the field of self-improvement; consulting in the fields of self-improvement; Providing counseling and advice in the field of self-improvement; online social networking services in the fields of self-improvement, positive psychology, personal happiness, mental health and wellness provided via a website in Class 45.

This registration was assigned number 4475643, was filed on February 23, 2012, and issued on January 28, 2014. This registration will be referred to as the “643 Registration.”

While Respondent claims a first use date of 2012, it appears that for several years Respondent considered itself a “start-up.” In 2019, one of the founders of Happify, Ofer Leidner, participated in an interview with Chris O’Brien at TheInnovator news, a self-described “global publication about digital transformation.” (Exs. C, D.) In this interview, Mr. Leidner stated that Respondent did not launch its service until 2015.³ (Ex. D at 3.) At the time it launched, Happify was only available as a wellness app that could be downloaded from places like the Google Play Store and Apple App Store. (*Id.*)

In 2017, Respondent changed its business plan in an attempt to obtain a larger market. (Ex. D at 3.) In particular, Respondent adopted a two-track strategy which involves Respondent offering its service to health care organizations and health care providers, including insurance companies. (*Id.*) As a result of this approach, Respondent has entered into contracts several insurance providers. For example, in 2017 Respondent entered into an agreement with Humana under which “provides Happify’s platform to patients with chronic conditions.” (*Id.*) At the end of 2017 Happify also entered into an agreement with Aetna. (Ex. E) Pursuant to that agreement, Happify offers its products through Aetna, as shown in the screenshot from one of Respondent’s websites, aetna.happify.com:

³ More specifically, Mr. Leidner stated that the Happify service launched two years after he and the other founders of Happify sold an unrelated company in 2013. (Ex. D at 3.)

Overcome Negative Thoughts, Stress, and Life's Challenges!

Cutting-edge science-based activities and games to stress less and enjoy life more.

(Ex. F.)

In 2018 Happify entered into agreements with Cigna and [REDACTED] (Exs. D at 3 and G.) And in 2019, Happify entered into an agreement with [REDACTED]

[REDACTED]. (Ex. H.) During this time, Happify also significantly increased its attendance at conferences, going from attending only [REDACTED] conference in 2017 to attending [REDACTED] conferences in 2019 and having plans to attend the same number in 2020. (Ex. I.) Upon becoming aware of the '643 Registration, HAP filed this Petition to Cancel on the grounds that allowing Respondent to maintain its registration for a highly similar mark for highly similar if not identical services 1) is likely to cause confusion or mistake within the meaning of Section 2(d) of the Lanham Act, 15 U.S.C. §1052(d), 2) is likely to cause a false suggestion of connection with HAP in contravention of Section 2(a) of the Lanham Act, 15 U.S.C. §1052(a), and 3) is improper given that Respondent is not the rightful owner of the HAPPIFY mark. HAP now moves for summary judgment on its claim of likelihood of confusion.

III. MATERIAL FACTS NOT IN DISPUTE

Pursuant to T.B.M.P. § 528.01, the following material facts are not in dispute:

1. Respondent filed the application that led to the '463 Registration on February 23, 2012 and the registration issued on January 28, 2014 for the goods and services listed above in classes 9, 35, 41, 44 and 45.
2. HAP is the owner of the HAP Marks listed above.
3. Happify attended the Michigan Association of Health Plans 33rd Annual Summer Conference at the Grand Traverse Resort in Acme, Michigan in July 2018.
4. Petitioner's HAP mark is fully incorporated in Respondent's HAPPIFY mark.
5. Both HAP and Respondent stylize their marks using lowercase letters and the color orange.
6. Both HAP and Respondent offer goods and services related to healthcare.

IV. ARGUMENTS

A. Summary Judgment Standard

Under Fed. R. Civ. P. 56(c), summary judgment is proper “if the pleadings, depositions, answers to interrogatories, and admissions on file, together with the affidavits, if any, show that there is no genuine issue as to any material fact and that the moving party is entitled to a judgment as a matter of law.” *See Celotex Corp. v. Catrett*, 477 U.S. 317 (1986). Summary judgment is appropriate in a cancellation where the “[petitioner] has established that there are no genuine issues of material fact remaining for trial with regard to its claims of priority of use and likelihood of

confusion, and that it is entitled to a judgment on these issues pursuant to Section 2(d) of the Trademark Act.” *Venture Out Properties LLC v. Wynn Resorts Holding, LLC*, 81 US.P.Q.2d 1888, 1891 (TTAB 2007). *See also Synergistic Intern., LLC, v. Korman*, 470 F.3d 162 (4th Cir. 2006) (“Summary judgment may be granted in a trademark dispute when the material, undisputed facts disclose a likelihood of confusion.”). There is only a “genuine issue of material fact” if a reasonable fact finder viewing the entire record could resolve the dispute in favor of the nonmoving party. *See Olde Tyme Foods Inc. v. Roundy's Inc.*, 22 USPQ2d 1542, 1544 (Fed. Cir. 1992).

“When the moving party's motion is supported by evidence sufficient to indicate that there is no genuine issue of material fact, and that the moving party is entitled to judgment, the burden shifts to the nonmoving party to demonstrate the existence of specific genuinely disputed facts that must be resolved at trial.” *Venture Out Properties LLC*, 81 U.S.P.Q.2d. at 1890. “The nonmoving party may not rest on the mere allegations of its pleadings and assertions of counsel, but must designate specific portions of the record or produce additional evidence showing the existence of a genuine issue of material fact for trial.” *Id.*

B. HAP Has Priority

Under Section 2(d) of the Lanham Act, 15 U.S.C. § 1052, the party with priority has superior rights to a mark. Here, the question of priority is simple. HAP began using its HAP mark in 1979 and its earliest application was filed in 2004 and issued in 2006. The majority of the other pleaded registrations, including its two registrations for HAP alone, issued prior to Respondent’s February 23, 2012 filing date. Accordingly, HAP has priority in the HAP Marks.

Notwithstanding its prior registrations, however, HAP would still have priority over Petitioner based on its earlier use of the HAP Marks. It is well-settled that the first party to adopt and use a mark in commerce has superior rights to it. *See Hydro-Dynamics v George Putnam &*

Company, Inc., 1 USPQ2d 1772, 1772 (Fed. Cir. 1987) (“[T]rademark rights in the United States are acquired by . . . adoption and use, not by registration.”). In connection with this Cancellation action, HAP has presented evidence of its use of HAP as early as 2000 as well as membership and revenue numbers since 2009. (Wilson Decl. at ¶2, Exs. 2 and 3.) Respondent’s claimed first use date, on the other hand, is July 31, 2012. And Respondent has presented no evidence that it used the HAPPIFY mark in commerce in the U.S. prior to HAP’s use of the HAP Marks. Accordingly, under any standard, HAP has priority in the HAP Marks.

C. There Is No Genuine Issue Of Material Fact As To Likelihood Of Confusion

The Board may cancel a trademark registration that so resembles a registered mark “as to be likely, when used on or in connection with the goods of the applicant, to cause confusion, or to cause mistake, or to deceive.” 15 U.S.C. §1052(d). The likelihood of confusion determination is a question of law, based on underlying factual determinations. *Recot, Inc. v. M.C. Becton*, 214 F.3d 1322, 1326, 54 USPQ2d 1894, 1896 (Fed. Cir. 2000). The factors to be considered by the Board *en route* to determining whether a likelihood of confusion exists are set forth in *DuPont*:

- (1) the similarity or dissimilarity of the marks in their entireties as to appearance, sound, connotation and commercial impression;
- (2) the similarity or dissimilarity and nature of the goods or services as described in an application or registration or in connection with which a prior mark is in use;
- (3) the similarity or dissimilarity of established, likely-to-continue trade channels;
- (4) the conditions under which and buyers to whom sales are made, *i.e.*, "impulse" vs. careful, sophisticated purchasing;
- (5) the fame of the prior mark (sales, advertising, length of use);
- (6) the number and nature of similar marks in use on similar goods;

- (7) the nature and extent of any actual confusion;
- (8) the length of time during and conditions under which there has been concurrent use without evidence of actual confusion;
- (9) the variety of goods on which a mark is or is not used (house mark, "family" mark, product mark);
- (10) the market interface between registrant and the owner of a prior mark;
- (11) the extent to which registrant has a right to exclude others from use of its mark on its goods;
- (12) the extent of potential confusion, *i.e.*, whether *de minimis* or substantial; and
- (13) any other established fact probative of the effect of use.

DuPont, 476 F.2d at 1361. The weight to be given the relevant factors varies from case to case. *Id* at 1362. But, “[a]ny doubts about likelihood of confusion ... must be resolved against [the registrant] as the newcomer.” *Olde Tyme Foods*, 961 F.2d at 205 (citations omitted). Also, the Board may find for petitioner without finding every *DuPont* factor in favor of the petitioner, and it may find a single factor dispositive. *Id* at 1361-62; *Citigroup Inc. v. Capital City Bank Group Inc.*, 637 F.3d 1344, 98 USPQ2d 1253 (Fed. Cir. 2011).

In this case, a reasonable trier of fact would agree that there is likelihood of confusion due to the high degree of similarity between the marks and the fact that the services and trade channels are identical or virtually identical.

1. The Marks Are Highly Similar

The first factor considers the similarity or dissimilarity of the marks in their entirety as to appearance, sound, connotation and commercial impression. *DuPont*, 476 F.2d at 1361. The commercial impression of a trademark includes the mental reaction it evokes. *See Spice Islands, Inc. v. Frank Tea & Spice Co.*, 505 F.2d 1293, 1296 (C.C.P.A. 1974).

Here, the marks—HAP and HAPPIFY—are highly similar as Petitioner’s HAP mark is fully encompassed in Respondent’s HAPPIFY mark. Indeed, the only differences between the marks is the addition of the suffix -ify on the end of Respondent’s mark. In similar circumstances the Board has found two marks to be similar. For example, in *United States Olympic Comm. v. Olymp-Herrenwaschefabriken Bezner GmbH & Co.*, 224 U.S.P.Q. 497, 498 (TTAB 1984) the Board found “OLYMP” and “OLYMPIC” to be similar and that “marks with ‘small suffix’ addition differences comparable to ‘OLYMP’ and ‘OLYMPIC’ have not infrequently been found to produce a likelihood of confusion or mistake when used on similar goods.” *See also In re Pellerin Milnor Corp.*, 221 USPQ 558, 560 (TTAB 1983) (finding that MILTRON is similar to MILTRONICS); *In re Endonetics, Inc.*, Serial No. 75605751, 2002 TTAB LEXIS 298, at *17 (TTAB May 10, 2002) (finding ENDONET and ENDONETICS similar).

Further, the lead portion of the Respondent’s Mark, *i.e.*, the letters HAP, is the sole distinctive feature of the mark and it is identical to Petitioner’s mark. This direct overlap in the distinctive portion of Respondent’s Mark further weighs in favor of finding similarity. For example, in *Presto Prods. Inc. v. Nice-Pak Prods., Inc.*, 9 USPQ2d 1895, 1897 (TTAB 1988) the Board found that the marks KID WIPES and KID STUFF were similar because they contained the same distinctive term. *Id.* In *Presto*, the Board also specifically discussed the importance of the beginning of a mark in determining similarity, stating “[i]t is often the first part of a mark which is most likely to be impressed upon the mind of the purchaser and remembered.” *Id.* *See also Century 21 Real Estate Corp. v. Century Life of Am.*, 970 F.2d 874, 876-77 (Fed. Cir. 1992) (stating that CENTURY LIFE OF AMERICA is similar to CENTURY 21); *In re Joseph Tsiyoni d/b/a Shairon Int’l Trade*, Serial No. 85737897, 2013 WL 6199538, at *5-*6 (TTAB Nov. 14, 2013)

(finding PRIDER similar to PRIDE-THE FIRST NAME IN SCOOTERS and PRIDE MOBILITY PRODUCTS). For the same reasons, the Board should find that HAP and HAPPIFY are similar.

In addition, as described below, the parties' services both relate to health care and services for improving health. Thus, the degree of similarity of the necessary between the marks is reduced. *Century 21*, 970 F.3d at 877; *In re Mighty Leaf Tea*, 601 F.3d 1342, 1348 (Fed. Cir. 2010). This further confirms that HAP and HAPPIFY should be considered similar for purposes of this likelihood of confusion analysis.

Based on the foregoing, HAP and HAPPIFY should be considered similar and, as such, this factor favors HAP.

2. The Services Are Identical

Under the second *DuPont* factor, the Board must consider the similarity and nature of the goods or services as described in an application or registration. *See DuPont*, 476 F.2d 1361. "The goods and services of opposer and applicant need not be identical to find likelihood of confusion under Section 2(d) of the Trademark Act. They need only be related in such a way that the circumstances surrounding their marketing would result in relevant consumers mistakenly believing that the goods or services originate from the same source." *Virgin*, 2007 WL 2344691, at *21 (citing *In re Int'l Telephone & Telegraph Corp.*, 197 U.S.P.Q. 910, 911 (TTAB 1978)).

Here, the services here are identical. While the '463 Registration contains a long list of goods and services, they are all related to providing a mental health treatment online for consumers. (*See* '463 Registration.) As discussed above, HAP provides the same services through its website and its CBHM team. Moreover, several of HAP's registrations are specifically directed to online information and/or education regarding health and wellness. (*See, e.g.*, U.S. Trademark Registration Nos. 3130855, 4318194, 4827476, and 4236991.) And even if the Board finds that

the services are not identical, they are at the very least highly related given that Respondent's services are offered by other health insurance companies as described above. Based on the foregoing, it is indisputable that the parties' services are identical (or at a minimum closely related) that a reasonable consumer could (and, in fact, is likely to) attribute the marks to a single source.

The second *DuPont* factor also weighs in favor of finding a likelihood of confusion.

3. The Trade Channels Are Identical

For the third factor, the Board must consider the similarity or dissimilarity of established, likely-to-continue trade channels. *See DuPont*, 476 F.2d at 1361. Here, there is evidence that the parties using the same trade channels. Indeed, as described above, both parties offer their products through their websites. Moreover, as described above, Respondent's services are offered through other insurance companies such as Aetna, [REDACTED] [REDACTED] [REDACTED] (Exs. D, E, F, G, and H.). As such, there can be not only be no dispute that HAP's and Respondent's services are related, but that they are offered to consumers in the same manner. Further, where, as here, the marks are in effect identical it is presumed that they share the same trade channels. *Interstate Brands Corp. v. McKee Foods Corp.*, 53 USPQ2d 1910, 1913 (T.T.A.B. 2000) ("[L]egally identical [goods] . . . must also be deemed to be sold in the same channels of trade to the same classes of customers."). And when a petitioner and respondent employ the same trade channels, the likelihood of confusion is enhanced. *See Century 21 Real Estate v. Century Life*, 970 F.2d 874, 877, 23 USPQ2d 1698 (Fed. Cir. 1992). This factor therefore weighs in favor of HAP.

4. Target Consumers Cannot be Deemed Sophisticated

Here, both parties offer products at low or no cost and, as such, the consumers are unlikely to be considered sophisticated. With respect to HAP, there is no charge to access HAP's blog or

contact HAP's CBHM team.⁴ Similarly, Respondent's HAPPIFY service is either free or inexpensive. Specifically, Respondent makes a portion of its content free, while charging a nominal fee of \$14.95 per month or \$140 per year to access the remainder of Respondent's content. (Ex. J.) It is settled that "purchasers of inexpensive items generally pay less attention in buying goods, and, accordingly, "are not likely to be sophisticated purchasers." *The Sports Authority, Inc. v. Prime Hospitality Corp.*, 89 F.3d 955, 965 (2d Cir. 1996). As a result, the target consumers would not for purposes of the likelihood of confusion analysis be regarded as sophisticated in the legal sense for a likelihood of confusion analysis. Accordingly, for these purchasers, this factor weighs in favor of HAP.

5. There Is No Evidence Of Third-Party Use

Happify has presented no evidence of third-party usage of HAP for health care services, nor is HAP aware of any such use. Thus, this factor weighs in HAP's favor. *See Kohler Co. v. Baldwin Hardware Corp.*, 82 U.S.P.Q.2d 1100, 2007 WL 117575, at *13-*14 (T.T.A.B. 2007).

6. HAP Uses its HAPPIFY Mark on a Wide Variety of Goods

As discussed above, HAP uses its HAP Marks on a wide variety of services related to healthcare, including health insurance plans and community outreach related to healthcare. The wide variety of health-care related services on which HAP uses its HAP Marks means that consumers "are more likely to believe that the use of the mark has been extended" by HAP to additional goods or services. *Virgin*, 2007 WL 2344691, at *23. As such, this factor favors HAP. *Id.*

⁴ While there are costs associated with becoming a HAP member there are no costs associated with merely contacting CBHM. There may be costs, however, associated with the actual mental health services to which CBHM refers a HAP member.

7. Confusion Is Inevitable

The seventh and eighth DuPont Factors weigh “[t]he nature and extent of any actual confusion” and “[t]he length of time during and conditions under which there has been concurrent use without evidence of actual confusion.” *DuPont*, 476 F.2d at 1361. And the twelfth *DuPont* factor requires the Board to weigh “the extent of potential confusion, *i.e.*, whether *de minimis* or substantial.” *Id.*

It is well settled that it is not necessary for a petitioner to show actual confusion in order to establish likelihood of confusion, because the test is likelihood of confusion and not actual confusion. *See Weiss Associates Inc. v. HRL & Associates Inc.*, 902 F.2d 1546, 1549, 14 USPQ2d 1840 (Fed. Cir. 1990). Therefore, the absence of evidence of confusion in and of itself may not be weighed against the HAP. *Id.* Moreover, the Board may only weigh the absence of actual confusion when there has been a period of concurrent use under circumstances where there were ample opportunities for confusion to occur. *Carefirst of Maryland, Inc. v. Firsthealth of the Carolinas, Inc.*, 77 U.S.P.Q.2d 1492, 1511 (TTAB 2005). Here there has been little opportunity for confusion to occur. As described above, while Respondent claims a first use date of 2012, Respondent did not begin offering its service to consumers until 2015. And until 2017, it appears that Respondent’s use of HAPPIFY was quite limited. It wasn’t until 2017—*i.e.*, a little over two years ago—that HAPPIFY began to expand its use of HAPPIFY. However, for the reasons described herein there can be no question confusion between the HAP’s use of its HAP Marks and Respondent’s use of HAPPIFY is inevitable.

It should also be noted that any potential confusion in this case could significantly harm consumers. More specifically, if a HAP customer is having a mental health crisis and seeks help from Respondent based on the false belief that Respondent is associated with HAP, that customer will not be directed to licensed medical care. Rather, that customer will be directed to a series of

“activities and games” which are specifically disclaimed as not constituting “psychiatric diagnosis or treatment.” It is easy to see how the effects of such a mistake could be disastrous.

Given the high similarity between the marks and the virtually identical nature of the services and the channels of trade, there is substantial potential for confusion as to the source of Respondent’s goods and services. Consumers will undoubtedly assume that Respondent’s goods and services are offered by and/or are associated with or sponsored by HAP. Respondent can hardly deny that confusion is inevitable under these circumstances. This factor weighs in favor of HAP.⁵

In sum, at least six of the relevant *DuPont* factors weigh overwhelmingly in favor of HAP, most significantly because Respondent has applied to register a mark that is substantially similar to HAP’s Marks for the same or closely related services. Therefore, there are ample grounds to find a likelihood of confusion as a matter of law.

V. CONCLUSION

For all of the aforementioned reasons, the HAP respectfully requests that the Board grant its Motion for Summary Judgment in its entirety, enter judgment for the HAP, and cancel the ’643 Registration.

⁵ The remaining factors are neutral. With respect to Factor 5 (fame), where a party does not claim fame, the fame factor does not weigh against the party, but rather is considered to be neutral. *See Kohler Co. v. Baldwin Hardware Corp.*, 82 U.S.P.Q.2d 1100, 2007 WL 117575, at *14 (T.T.A.B. 2007). Factor 10 (market interface) is also neutral given there is no evidence of market interface between the parties. Factor 11 (respondent’s right to exclude) is also neutral. While Respondent has produced some cease and desist letter it has sent to third parties, it has not provided any court or Board decisions affirming its right to exclude third party use. Thus, this factor is either neutral or weighs in favor of HAP.

Respectfully submitted,

By: /s/ Rebecca J. Cantor

Molly M. Crandall

Rebecca J. Cantor

Attorneys/Agents for Petitioner

Date: March 18, 2020

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rcantor@brookskushman.com

EXHIBIT A

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
BEFORE THE TRADEMARK TRIAL AND APPEAL BOARD**

Health Alliance Plan of Michigan,

Petitioner,

v.

Happify Inc.,

Respondent.

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Cancellation No. 92070467

Registration No. 85550524

DECLARATION OF DEBORAH WILSON

I, Deborah Wilson, being over the age of 18 years, competent to testify as to the matters stated herein, based on my own personal knowledge, states as follows:

1. I am the Director of Marketing and Communications for Health Alliance Plan of Michigan ("HAP"). I have been employed in this capacity since June 17, 2019. My job responsibilities include internal and external marketing and communications for all HAP stakeholders. I am authorized to make this declaration on behalf of HAP. I have been designated by HAP to declare the matters herein. The facts stated have been assembled by authorized personnel, including counsel. The facts stated are true to the best of my current knowledge and belief.

2. HAP traces its origins to 1956 when the United Auto Works Union ("UAW") opened the Metropolitan Hospital in Detroit to provide affordable health care to auto workers. In 1960 the UAW sponsored the Community Health Association, which gave patients at Metropolitan Hospital of Detroit and autoworkers access to health insurance through a comprehensive Health Management Organization ("HMO") in exchange for a monthly prepayment or premium. The Community Health Association became affiliated with Henry Ford Hospital in 1972 and was renamed the Metro Health

Plan. In 1979, Metro Health Plan, Henry Ford Hospital, organized labor and the Detroit automakers announced a new healthcare alliance called Health Alliance Plan or HAP. Attached hereto as Exhibit 1 is a true and correct copy of a printout from the HAP website describing the history of HAP. Attached as Exhibit 2 are true and correct copies of printouts from the Wayback Machine (www.archive.org) showing HAP's use of its HAP mark online as early as 2000. Attached as Exhibit 3 is a true and correct copy of a spreadsheet showing HAP's revenue and membership from 2009 through 2019.

3. HAP's core business is offering high-quality health care coverage. HAP is committed to providing the best combination of coverage, care, service, and quality. Further, HAP members have a wide network of doctors and hospitals to visit at reasonable prices. Attached hereto as Exhibit 4 is a true and correct copy of a letter to HAP members discussing HAP's business.

4. HAP also provides additional services to keep our members healthy. For example, HAP has paired with Weight Watchers® to help its members lose weight and maintain a healthy lifestyle. A true and correct copy of an advertisement for this program is attached hereto as Exhibit 5. HAP also provides special programs to encourage retirees to stay active and improve their health. A true and correct copy of an advertisement for this program is attached hereto as Exhibit 6.

5. HAP is also committed to ensuring its members have access to comprehensive mental health services, including treatment for anxiety, depression, eating disorders, and drug and alcohol addiction. In particular, HAP operates a Coordinated Behavioral Health Management ("CBHM") team to assist its members in obtaining appropriate mental health treatment. HAP's CBHM team is fully licensed and has years of experience treating patients with mental health conditions, addictions or both. HAP's CBHM team offers a number of services to assist members in obtaining licensed,

quality mental health treatment, including: (1) finding an appropriate, licensed mental health specialist; (2) monitoring a patient's care while in treatment; (3) ensuring that the patient is taking appropriate medication; (4) finding support groups; and (5) assisting patients in locating inpatient healthcare. Attached hereto as Exhibit 7 is a true and correct copy of an informational sheet for HAP's mental health services.

6. HAP also provides a blog called HAP Balanced Living which can be found at www.hap.org/blog. This blog provides information to help people live a balanced life by providing information about fitness, nutrition, and managing their health. HAP Balanced Living is accessible to everyone; it is not limited to HAP members. On this blog, HAP has published a number of articles relating to mental health. True and correct copies of several of these articles are attached hereto as Exhibit 8.

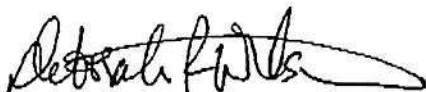
7. In 2011 HAP conducted a Metaphor Study to determine what consumers thought of HAP. A true and correct copy of the results of this survey are attached hereto as exhibit 9.

8. HAP's community outreach efforts have received a number of awards. In particular, HAP Balanced Living has received awards from Ragan's Health Care PR and Marketing Awards in 2017 and 2018, Digital Health Awards in 2017 and 2018, and a Healthcare Communications Award Honorable Mention. A true and correct copy of the page on HAP's website containing these awards is attached hereto as Exhibit 10.

9. In July 2018 HAP attended the Michigan Association of Health Plans 33rd Annual Summer Conference at the Grand Traverse Resort in Acme, Michigan. At this conference, HAP's representatives saw Happify Inc.'s ("Happify") marketing table. A true and correct copy of a cease

and desist letter HAP sent to Happify is attached hereto as Exhibit 11. Contained in this letter is a comparison of HAP's and Happify's conference booths.

I declare under penalty of perjury that the foregoing is true and correct.


Deborah Wilson

Dated: March 18, 2020

EXHIBIT 1

For a quick snapshot of HAP, download our fact sheet.

Download fact sheet (PDF)

History

Proud of our past. Prepared for the future.

Year	Milestone
1956	Organized labor's concerns regarding the need for higher quality standards of medical care and affordable health insurance led UAW President Walter Reuther to open Metropolitan Hospital in Detroit with a group medical practice of physicians who worked on salary. Facing discrimination from other area hospitals, minority medical staff were welcomed at Metropolitan Hospital to reflect the community served.
1960	UAW sponsored the Community Health Association (now HAP) a prepayment (monthly premium) medical plan to give Metropolitan Hospital patients and autoworkers access to health insurance through comprehensive HMO coverage that emphasized preventive care.
1960	Dr. Frederick Mott named Executive Director, CHA.
1961	Dr. James A. Halsted became head of the Department of Medicine at Metropolitan Hospital. His wife, Anna Roosevelt (FDR's daughter), became the public relations director of Metropolitan Hospital and the Community Health Association health plan. The couple owned three acres of property in the Birmingham-Bloomfield area on Halsted Road, which was named after Dr. Halsted.
1967	Enrollment in CHA reached 77,000 after initial 1961 enrollment of 4,000.
1972	Blue Cross Blue Shield acquired Community Health Association, renamed it Metro Health Plan, Inc., or MHP, and contracted with Henry Ford Hospital.
1973	Jim Walworth named President & CEO of MHP.
1978	Ford Motor Company commissioned Kaiser Permanente Advisory Services to study the feasibility of a separate health plan formed by an alliance between auto manufacturers, the UAW and MHP.

1979	As a result of the Kaiser study, MHP separated from BCBS. MHP, Henry Ford Hospital, organized labor and Detroit automakers announced a new alliance: Health Alliance Plan, or HAP.
1982	HAP membership reached 100,000.
1984	Metro Hospital & Health Centers becomes Metro Medical Group, a HAP division; William Alvin is MHHCS Administrative Director; Jim Walworth is president of HAP.
1986	HAP became a subsidiary of Henry Ford Health System.
1986	HAP became the first health plan in southeast Michigan to offer a new HMO alternative to Medicare & HAP Senior Plus .
1986	HAP became the seventh largest HMO in the U.S., with acquisitions of Independence Health Plan and Medical Value Plan.
1991	HAP became one of the first 21 health plans in the U.S. to help establish national quality standards and measure and publicly report quality of care via the National Committee for Quality Assurance HEDIS Report Card project.
1993	HAP earned National Committee for Quality Assurance, or NCQA, Full Accreditation.
1995	HAP membership reached 500,000.
1995	HAP entered the world of computerized claims submissions with the launch of Electronic Data Interchange & also known as EDI.
1996	HAP launched Alliance Health & Life Insurance Company, PPO and POS.

1998	Cleve Killingsworth named President & CEO.
2001	HAP acquired SelectCare HMO and POS, added St. John, Oakwood and Beaumont to system.
2004	Francine Parker named President & CEO.
2005	HAP and Henry Ford Medical Group first in Michigan to launch ePrescribing with UAW and automakers.
2007	HAP and Weight Watchers® announced an unprecedented partnership to offer discounted services to HAP HMO members.
2008	HAP expanded from 9 to 23 counties; regional office in Flint opened.
2008	Members rated HAP® highest in Member Satisfaction among Commercial Health Plans in Michigan,® according to the J.D. Power and Associates U.S. Member Health Insurance Plan Study. HAP went on to win this award for eight consecutive years.
2009	William Alvin named President & CEO.
2009	HAP launched Small Business Solutions for companies with two to 50 employees in 23 counties.
2011	HAP launched educational website to help people cut through the clutter of the health care reform law.
2014	James Connelly named President & CEO.
2014	Midwest Health Plan, acquired by HAP in 2011, changed name to HAP Midwest Health Plan.

2016	HAP and HealthPlus of Michigan merged operations, creating one of the largest health insurers in Michigan.
2016	Terri Kline named President & CEO.
2019	Dr. Michael Genord named Interim President & CEO



Health and wellness programs



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Application receives
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NCQA awards HAP's
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Self Referrals Available to HMO Members

Many of us require special needs from our personal care physicians. SelfDirect allows HAP Members to add control, convenience and choice.



SilverSneakers® Program

Exercise is the key to longevity and a healthier lifestyle. Discover how Seniors can avoid the high costs and inconveniences of fitness club membership.

Provider Directory Now Online!

You can now view the 1999 Fall HAP HMO Provider Directory online. Click the yellow button (above left) for more information.

May is Asthma/Allergy Awareness Month!

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HAP is committed to fighting Diabetes!
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Get to know HAP – our people, our company, and how we're delivering on our commitment to improve health care quality and provide exceptional customer service.



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Get to know HAP Have questions? Find answers... **For Guests**


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<i>Find a personal care physician. View claim status. Request a new ID card...</i> learn more»	<i>How HAP works... referral requests, eligibility, benefits, caring for your patients, bulletins...</i> learn more»	<i>Review our product choices. Manage enrollment. Access your bill...</i> learn more»	<i>Request a quote. Review our product choices. Access our commission schedule...</i> learn more»
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April Topics of the Month



Children's Eye Health and Safety Month



National Cholesterol Education Month



Fruit and Vegetable Month

National Adult Immunization Awareness Week



National Depression Screening Day

Ready to go SOLO?

- > Introducing affordable insurance for individuals and families, including HSAs, available to you directly from hap.org. [Learn More >>](#)



Medicare Beneficiaries

- > The next opportunity to enroll in our Medicare Part D plan is November 15th - December 31st. [Learn More >>](#)



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April Topics of the Month



National Men's Health Week



Sun Safety and Skin Cancer Awareness

Ready to go SOLO?

- > Introducing affordable insurance for individuals and families, including HSAs, available to you directly from hap.org.

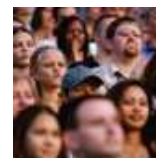
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Health Coverage for Auto-workers Impacted by Buyouts

- > HAP now offers a Health Coverage Continuation Plan created especially for both salaried and hourly employees who have lost their health care benefits due to buyouts from automotive companies and had the option to choose HAP HMO from their employer.

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Topics of the Month

Food Safety

Sun Safety and Skin Cancer Awareness

Weight Management Program

> As of June 1, nearly 16,000 members have lost almost 130,000 lbs using HAP's Weight Management Program

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Health Engagement Program

> HAP Health Engagement Program for Ford Motor Company Salaried Employees.

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> Medicare Advantage Plans, Part D Prescription Drugs and Medicare Supplements.

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[HAP Ranks as No. 1 Big Health Plan](#)

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Ready to go SOLO?

> Flexible, affordable PPO health insurance plans including HSAs

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Health Coverage for Auto-workers Impacted by Buyouts

> A Health Coverage Continuation Plan created for salaried and hourly employees who have lost health insurance due to buyouts and had the option to choose HAP HMO from their employer.

[Learn More >>](#)

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We're going SOLO

New health care coverage for individuals and families.

Topics of the Month

[Men's Health Month](#)
[H1N1 Flu: Questions & Answers](#)

Health Engagement Program

> Save on out-of-pocket costs when you make healthy choices.
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Medicare Beneficiaries

> Medicare Advantage Plans, Part D Prescription Drugs and Medicare Supplements.
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Individual/Family Health Plans

> Flexible, affordable PPO health insurance plans including HSAs
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Chrysler and GM Employees and Retirees

> A message to Chrysler employees and retirees.
[Learn More >>](#)

> A message to GM employees and retirees.
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Weight Management Program

> Since its inception, over 20,000 members have lost over 93 tons using HAP's Weight Management Program
[Learn More >>](#)

Losing Your Group Health Coverage?

> A Health Coverage Continuation Plan created for salaried and hourly employees who have lost health insurance due to buyouts and had the option to choose HAP HMO from their employer.
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> HAP is Southeast Michigan's most experienced health plan, providing health insurance to approximately 2,200 employer groups and more than 500,000 members!
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**Individual
and family
coverage.**[Learn more>](#)

April Topics of the Month

- National Alcohol Awareness Month
- Stress Management

Medicare Beneficiaries

- > Medicare Advantage Plans, Part D Prescription Drugs and Medicare Supplements.

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Health Engagement Program

- > Save on out-of-pocket costs when you make healthy choices.

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Create Your Power Package

- > HAP, Delta Dental and AAA have come together to offer member-to-member solutions to community chambers.

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Considering HAP?

- > HAP is Southeast Michigan's most experienced health plan, providing health insurance to approximately 2,200 employer groups and more than 500,000 members!

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Weight Management Program

- > More than 25,000 HAP members have lost over 115 tons using HAP's Weight Management Program

[Learn More >>](#)

HAP News

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Individual/Family Health Plans

- > Flexible, affordable PPO health insurance plans including HSAs

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Losing Your Group Health Coverage?

- > HAP has options for you!

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Find your balance.

Balanced Living magazine is your customized guide to living a healthy life.

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Introducing the Affordable Healthy Michigan Plan

HAP Midwest Health Plan

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Providers
Get information on becoming a HAP provider. Plus direct access to FAQs, certification forms and more.



Need help finding the right health plan?
Call(855) WITH-HAP.

EXHIBIT 4








<DATE>

Dear [Insert Member Name]:

Thank you for allowing us to provide you with high-quality health care coverage. Providing exceptional coverage to members like you is at the core of what we do each day. Your HAP team is committed to ensuring you have the best combination of coverage, care, service and quality for years to come.

We know it's important that your health care is easy to understand and access so you stay healthier longer and have a better quality of life. One of the ways we make it easier is eliminating the need for referrals to see any specialist in the HAP network, regardless of the network your primary care physician is assigned. HAP also makes it easier by providing a team of Customer Service representatives right here in Michigan. We also make it easy for you to keep your HAP plan. There's nothing you need to do to continue your HAP benefits in 2019.

Other good news is that HAP is offering you telehealth services. Licensed, board-certified doctors are available 24/7 for live, secure online visits thanks to our partnership with American Well®. Visits are affordable, easy and convenient, and you don't need an appointment. Using telehealth for nonemergency illnesses such as colds, sinus infections and other minor conditions can save you money compared to the emergency room or urgent care.

-  **No coinsurance.**
You'll know your out-of-pocket costs ahead of time.
-  **No referrals for specialist visits**
-  **Unlimited PCP and specialist visits**
-  **Telehealth services so you can see a doctor using your mobile phone, tablet or computer**
-  **Award-winning customer service**

For information on all your HAP benefits:

- Visit **hap.org/thankyou**.
- Call a Customer Service specialist at **(800) 422-4641 (TTY: 711)** during the following hours:
Monday-Friday, 8 a.m. to 7 p.m.

We appreciate your trust, and we do our best to give you the exceptional customer service you deserve. We're proud to have your continued membership and wanted to take this time to recognize the role you play in our success. Thank you.

You can count on us to treat you the way we like to be treated – with respect, decency and compassion. We look forward to being your health plan in the years ahead.

Sincerely,



Marc Vanderburg
Vice President, Sales

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EXHIBIT 5



Weight Watchers gives HAP members valuable tools and the support they need to reach their goals. For only \$50, eligible members¹ can lose weight and keep it off with Weight Watchers' 12-week Beyond the Scale program.

Members who join this program must attend at least 10 of the 12 weeks to continue to use this great discount and everything that goes with it. They can enroll in the program, up to five times, for \$50 per sign up.

Now is a great time to take off the extra pounds. Losing weight directly affects your overall health and well-being. Get connected with Weight Watchers through your HAP membership today.

To sign up, have your HAP or Alliance Health and Life Insurance Company® member ID number ready, and call **(888) 335-6746** or visit **hap.org/beyondthescale**.

Participating Weight Watchers meeting locations are in the following counties: Genesee, Lapeer, Livingston, Macomb, Monroe, Oakland, St. Clair, Washtenaw and Wayne.

¹You must be a member of an eligible HAP plan or group to take part in in this special program. Due to program constraints, members of our Medicare Advantage and Medicaid programs are not able to use the offer at this time.

Weight Watchers is offered to HAP members as an added value program. HAP, its affiliates, subsidiaries, agents and assigns, make no representations or warranties regarding the quality, price or effectiveness of the services or products, or the qualifications of Weight Watchers staff.

.org

Individual Group Medicare Medicaid

HFHS000011

EXHIBIT 6





As a Silver&Fit member, you can access a participating fitness center or YMCA membership at no cost*. You can even switch to another participating center monthly.

Silver&Fit includes a wide network of fitness centers and select YMCAs. Choices include:

- Basic fitness centers that include equipment like treadmills, elliptical machines and free weights
- Full fitness centers that include classes like yoga and Zumba® or the official Silver&Fit Signature Series Classes
- Gender-specific fitness centers
- Exercise centers that offer services beyond a standard fitness center, such as lap pools, saunas, yoga or Pilates

The Silver&Fit network includes more than 400 fitness centers in Michigan and more than 13,000 nationwide, including:

- Senior and recreation centers
- Yoga studios

Not all locations participate.

Check by entering your ZIP code in the fitness center search at SilverandFit.com.

To find a fitness center near you, call Silver&Fit at **(877) 427-4788 (TTY 711)** Monday through Friday from 8 a.m. to 9 p.m. Eastern time.



*Some services and features not part of the Silver&Fit program may be available for an added fee.

Can’t travel to a fitness center or prefer working out at home?

No problem. Enroll in the Silver&Fit Home Fitness Program. You can choose from over 20 Home Fitness Kits, which may include a DVD, booklet and a quick start guide. You can choose up to two kits each benefit year. Some examples include the yoga kit, the tai chi beginner kit, and the total body workout kit.

Both programs also give you access to:

- Healthy Aging materials four times a year (available online or on DVD)
- The Silver Slate® newsletter four times a year (available online or sent by email or U.S. mail)
- The Silver&Fit Connected!™ program, a fun and easy way to track your exercise and earn rewards at a fitness center or through a wearable fitness device or app¹
- Other web tools, like a fitness center search, online educational classes, fitness challenges and more at **SilverandFit.com**
- A hotline to answer questions
- The Silver&Fit Rewards program², which offers a collectible hat and pins each time you meet your quarterly reward requirement

Choose the one that’s best for you.

Annual Fitness Center or YMCA Membership or The Silver&Fit Home Fitness Program

The Silver&Fit network includes more than 400 fitness centers in Michigan and more than 13,000 nationwide.



¹Purchase of a wearable fitness device or application may be required and is not reimbursed by the Silver&Fit program.
²Rewards subject to change.

To enroll in the Fitness Center Program or the Home Fitness Program online:

1. Go to **hap.org**. Enter your HAP member ID number and password, then click on *Log In*. If you’re not yet registered, click on *Register Now* and follow the prompts to complete your registration. After you’ve registered, return to **hap.org** to enter your member ID number and password.

2. Once logged in, click on the *Silver&Fit Enroll today* button near the top of the page. This will open the Silver&Fit program site.

3. Click *Enroll* and choose either the Fitness Facility program or the Home Fitness Program.
4. Read and agree to the Medical Attestation Statement.

5. Follow the prompts on the screen to choose your preferred fitness center or your Home Fitness Kit(s).

6. If you enroll in the Fitness Facility program, navigate to the Member Materials page and view the Welcome Letter and Welcome Flier. Take the Welcome Letter to your selected fitness center or YMCA and present it to the fitness center staff.

To enroll in the Fitness Center Program or the Home Fitness Program over the phone:


1. Call Silver&Fit at **(877) 427-4788 (TTY 711)**.

2. Receive the program overview and program options.
3. Enroll in the fitness center or home fitness option.

4. Receive instructions to take the Welcome Letter to the fitness center or YMCA you chose.

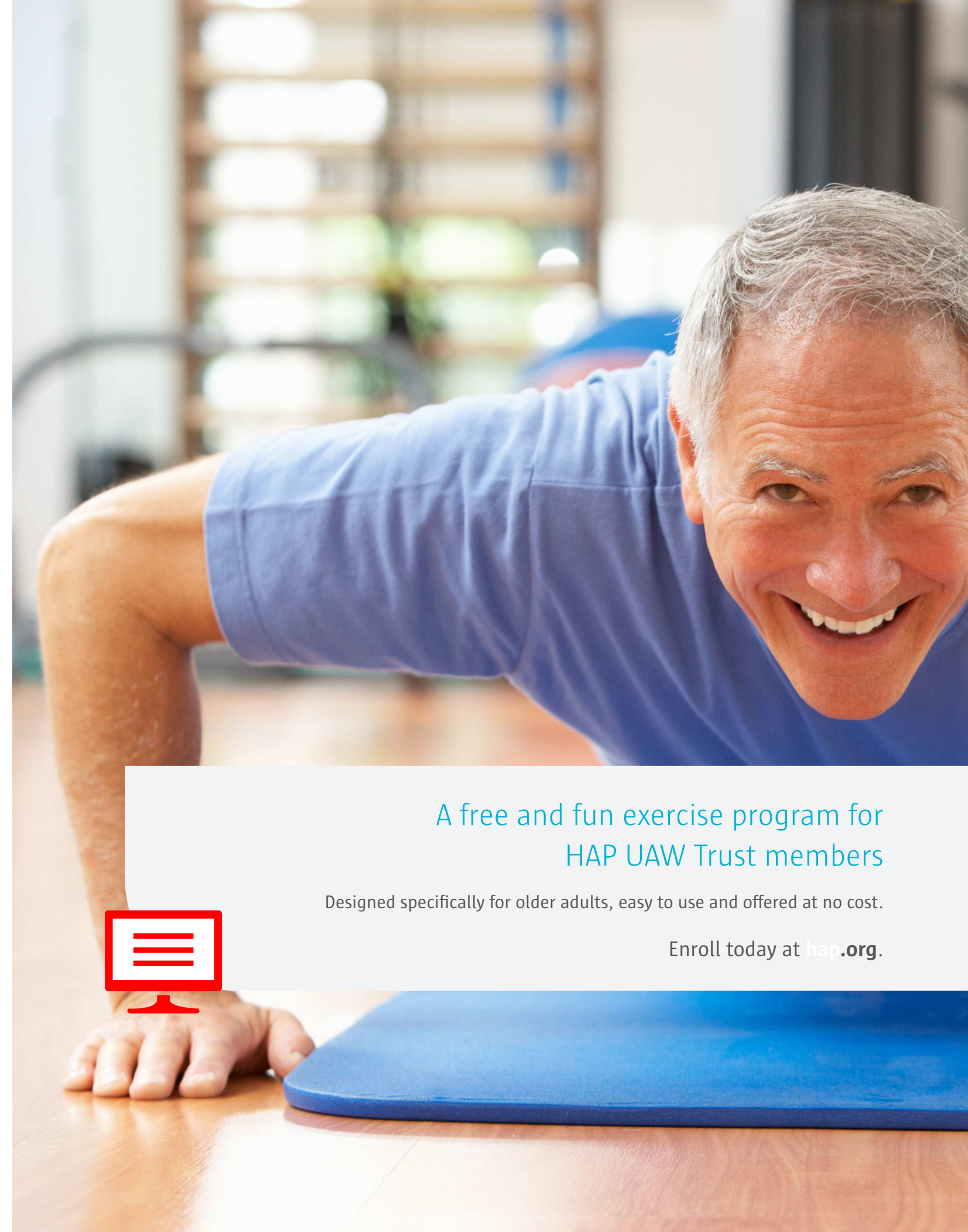
To enroll directly at a participating fitness center or YMCA:

1. Log on to **hap.org** or call Silver&Fit at **(877) 427-4788 (TTY 711)** to search for a Silver&Fit fitness center or YMCA.
2. Write your name and date of birth on the Fitness Card below and take it to the participating fitness center or YMCA of your choice. Show it to fitness center staff to begin your enrollment.

Silver&Fit.	Fitness Card	Member Information
Website: www.hap.org	Member Name: _____	
Silver&Fit Phone Number: Toll-free 1.877.427.4788 (TTY/TDD: 711)	Date of Birth: _____ (month/day)	
Hours: Monday – Friday, 5 a.m. – 6 p.m. Pacific Time		

- 1. If I want to change my Silver&Fit fitness center or YMCA, will I need to pay additional fees?** You don't have to pay additional fees to your fitness center. You may need to sign a new membership agreement, even if you have a current membership agreement or had one in the past.
- 2. How do I change fitness centers or YMCAs?** Go **SilverandFit.com** or call Silver&Fit Customer Service at **(877) 427-4788 (TTY 711)** to change your fitness center.
- You may change fitness centers or YMCAs once per month. The effective date with the new location will be the first of the following month.
- 3. Can I be enrolled in the Home Fitness Program and the fitness center and YMCA membership program at the same time?** You may only be enrolled in one program at a time – the Home Fitness Program or the fitness center and YMCA membership program.
- 4. Can I change between the Home Fitness program and the fitness center and YMCA membership program?** If you'd like to switch programs, call Silver&Fit Customer Service at **(877) 427-4788 (TTY 711)** to enroll in the Home Fitness Program or with a fitness center or YMCA.
- The effective date with the fitness center will be the date after you call. You will no longer receive any unsent kits.
- 5. How can I change my address to ensure my Home Fitness Kit is delivered to the correct location?** To change your address, visit **SilverandFit.com**. Or you can call Silver&Fit Customer Service at **(877) 427-4788 (TTY 711)**.

Silver&Fit		Fitness Center/YMCA Information
Customer Service: 1.877.427.4788 (TTY/TDD: 711) Monday – Friday, 5 a.m. – 6 p.m. Pacific Time The Silver&Fit program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH).		This Silver&Fit fitness card is not transferable. Use of this card by anyone other than the person named herein is prohibited. This card and photo ID must be shown when the Silver&Fit member is admitted into the fitness center or YMCA. This card is the property of ASH Fitness.



A free and fun exercise program for
HAP UAW Trust members

Designed specifically for older adults, easy to use and offered at no cost.

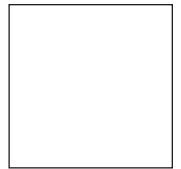
Enroll today at hap.org.



2850 W. Grand Blvd.
Detroit, MI 48202



John Smith
123 Street
City, State ZIP code



Important Plan Information

The Silver&Fit® Exercise & Healthy Aging Program



Your use of the Silver&Fit Connected! program serves as your consent for American Specialty Health Fitness, Inc. (ASH Fitness) to receive information about your tracked activity and to use that data to process and administer available rewards to you under the program.

[#] 7/18 © 2018 American Specialty Health Incorporated (ASH). All rights reserved. The Silver&Fit program is provided by American Specialty Health Fitness, Inc., a subsidiary of American Specialty Health Incorporated (ASH). All programs and services are not available in all areas. Silver&Fit, Silver&Fit Signature Series Classes, Silver&Fit Connected!, The Silver Slate, and the Silver&Fit logo are registered trademarks of ASH. This information is not a complete description of benefits. Not all YMCAs participate in the network. Please check the searchable directory on the Silver&Fit website to see if your location participates in the program.

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Subsidiaries

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Y0076_ALL UAW Trust S&F Wel Kit

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EXHIBIT 7

HAP Can Help You Find Your Way to Better Mental Health



You're not alone and we can help

Nearly 20 percent of people in the United States face some mental, emotional or behavioral challenge in any year.

Anxiety, depression, eating disorders, drug or alcohol abuse and other conditions can make it hard to manage daily life. They can affect thinking, mood and behavior. And they can strain relationships.

Treatment can make it easier

Mental illness and addiction are health conditions. And, like most health conditions, they're treatable. It is possible to feel better.

If you or someone you love is having issues that cause distress or make it hard to function at work or at home, we can help.

Our expert, caring team is here for you

The Coordinated Behavioral Health Management team is here to help you get what you need, including:

- Finding the right specialist
- Monitoring care during treatment
- Ensuring medication is right for you
- Finding support groups

Our staff of experienced and caring mental health professionals includes:

- Social workers
- Limited licensed psychologist
- Psychiatrist

Our fully licensed staff has years of experience in treating patients with mental health conditions, addictions or both.



Call us

Just call **(800) 444-5755** to talk to a member of our Coordinated Behavioral Health Management team. We're available Monday through Friday, from 8 a.m. to 5 p.m. Or leave a message and one of our clinical case managers will contact you.

In the event of an urgent situation, a clinical case manager is available 24 hours a day, seven days a week.

Choosing a specialist

Finding the right specialist is a big step on the road to better mental health. We want to make sure you're working with an expert you like and trust.

Our CBHM team can:

- Explain your behavioral health coverage.
- Tell you if you need a referral or if you can make an appointment with a mental health or substance abuse specialist yourself.
- Help you choose a specialist.
- Help you find an inpatient facility.

You can also use our online tool to choose a mental health or substance abuse specialist or facility. Just go to **hap.org** and click on *Doctors*.

What to do in an emergency

Emergency situations require immediate intervention to prevent serious self-harm or harm to others. In such a case, go immediately to the nearest emergency room. If you need assistance, call 911.

HAP covers treatment in any emergency room if you or a family member needs to be seen right away.

For more information,
visit **.org/cbhm**

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EXHIBIT 8

8 Tips to Help You Through Baby Blues

November 07, 2017 by Sarah Melvin

Share 0 Shares

I knew having a baby wouldn't be easy, but I felt prepared. I had done my research, talked to my friends with kids and made my pregnancy health care checklist. Then on July 4, 2017 my little firecracker, Lucy, entered the world and my plans went out the window.

Having a newborn is HARD. Really hard. My first few weeks postpartum (or after birth) were filled with what felt like a million conflicting emotions. I was so in love with this new member of my family, but I also experienced uncontrollable waves of anxiety, sadness and self-doubt. I was one of the 80 percent of new moms who go through the "baby blues." You may be wondering, what is baby blues? Baby blues is postpartum depression, feelings of sadness that affect many women after they give birth. And even though these feelings are perfectly normal, it's important know the symptoms of postpartum depression and address them. The mental health of a new mom is vital. We need to remember that in order to take care of our families, we must first take care of ourselves. Here are a few tips that helped me get through the infamous fourth trimester and feel like myself again:



Sarah, Josh and Lucy out for a walk.

1. Rest when you can

The old adage "sleep when the baby sleeps" is a great theory. However, it doesn't always work in practice. Sometimes you are so tired and dazed it's hard to flip a switch and sleep in the middle of the day. But even if you aren't catching Z's, it's important to slow down and rest. So, when baby is napping or someone else is able to take care of him or her, lay back and relax. The chores can wait. You will need to conserve any ounce of energy you can in those early

weeks.

2. Set boundaries for visitors

Family and friends are going to want to meet your new bundle of joy. But an influx of people in and out of your hospital room or home can be overwhelming, especially when you're still in pain and trying to bond with your little one. Set clear expectations for when you'd like to accept visitors, and don't feel the need to entertain anyone. People want to see you and the baby, not sit down to a four course dinner, so break out the paper plates and just enjoy the company.

3. Accept help

When you do have visitors, they will often ask if there's anything they can do. Take them up on this offer. Whether it's bringing a meal, throwing in a load of laundry or taking over baby duty so you can sneak a shower or nap, you'll appreciate the extra set of hands. And they'll feel really good about helping, too.

4. Eat well

A balanced diet is key to maintaining the energy you need to take care of yourself and your baby. Spread your meals throughout the day and include lots of fruits, vegetables, lean meats and whole grains. Don't forget to stay hydrated with plenty of water, especially if you're breastfeeding. Eating well will eventually help you fit into your pre-pregnancy jeans, but don't stress too much about losing the baby weight right away. It took you nine months to put it on after all. Cut yourself some slack and allow for the occasional cookie or slice of pizza.

5. Get active

Physical activity is just as good for your mental health as it is for your body. Even if you're not up to going to the gym or a workout class, head out for a walk. During my maternity leave, I loved taking Lucy for a walk around the neighborhood in the stroller to clear my head and break up the day. Now that I'm back to work we try to go on family walks in the evening. It's a great time for my husband and me to take a break from the whirlwind of new parenthood and reconnect as a couple.

6. Do something for yourself

Take some time that's just for you and don't feel guilty about it. Get a manicure or a haircut. Buy a new pair of shoes. Take a magazine to a coffee shop. These little outings can totally reset your outlook on life and make you feel like a human again.

7. Cry it out if you need to

It's not always the babies who cry in those first days after the birth. Childbirth is a traumatic experience, and your hormones will be going wild for a while. Sometimes the demands of your new life will pile up and you will break down. And that's ok. Just make sure your baby is in a safe place, then go ahead and let it out.

8. Know when to see a doctor

If your baby blues don't go away after a few weeks, you lose pleasure in everyday activities, or you have trouble bonding with your baby, it may be time to seek baby blues help from a professional. These symptoms could be signs of postpartum depression. The CDC reports that about 1 in 9 women who give birth experience postpartum depression, but many do not get treatment. Your doctor will ask you questions to screen for postpartum depression during your first postpartum visit, but you should reach out any time you feel like you cannot manage your feelings on your own. Being in tune with the signs of postpartum depression and getting the proper diagnosis and treatment plan can help you take better care of yourself and your baby.



If you need help managing your physical or emotional well-being after giving birth, contact HAP's Coordinated Behavioral Health Management Department at (800) 444-5755.

Read more maternity stories:



Your Pregnancy Resource Center: Essential Articles for Parents-to-Be

1 <https://www.cdc.gov/reproductivehealth/depression/index.htm>

Photo credit: Inner Circle Photography

Categories: Get Healthy, Get To Know Your Plan

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You may also like...



Back on Their Feet: Women Find Hope, Healing and Happiness on the Dance Floor



A sign posted in Bloomfield Hills' [Fred Astaire Dance Studio](#) shows an inspiring quote. "Life isn't about waiting for the storm to pass, it's about learning to dance in the rain."

Since their husbands died, three metro Detroit women - Michelle Allen, Uda Shallop and Barb Stawick - have taken the life philosophy to heart. All have found increased emotional and physical wellness, as well as a community of strength and support, on the dance floor.

Moving Through Grief

0891 Dancing Inscr

The three were among those assembled at the studio for a recent three-hour boot camp with Tony Danza of "Dancing with the Stars." "How many of you love music?" the dance pro asked at the start of the class. All hands shot up. "I'm going to make you part of the music," he promised, as a large, silvery disco ball twinkled and turned overhead. Soon, everyone was shuffling side to side, giggling and swiveling their hips in time to the music.

Shallop (in green), who began dancing socially when her husband was alive, was just one of the many enthusiastic students. "He was a great dancer, and I really enjoyed it," she says of her late husband, who passed away in 2007.

She started dance classes in 2015 and found that dance was one of the few things that made her feel strong and happy. She was also pleased to see that the extra activity helped her stay in shape and keep her weight in check. "If you don't do anything, you tend to put on a few," she says.

Today, the Bloomfield Hills resident still dances five or six days a week and even participates in competitions. She says dancing has given her newfound self-confidence. "It's a great feeling when I finally figure out what the right step is and can do it. Dancing has changed my life, all for the better," she says. "I started living again not just existing."

<https://www.hap.org/blog/2019/10/back-on-their-fee>

Allen (above in stripes), of Grosse Pointe Park, says she became interested in ballroom dancing as a child watching Fred Astaire and Ginger Rogers movies but didn't start ballroom dancing until her late 30s. It was something she and her first husband did together.

When he passed away in 2012, Allen stopped dancing for almost two years. Eventually, a friend encouraged Allen to attend a senior ballroom class, but she showed up on the wrong day.

Serendipitously, she struck up a conversation with another student, a widower whose wife had passed away a few months after Allen's husband.

"We exchanged phone numbers, he called that evening and the next day we met for coffee," Allen says. "He took my hand, kissed me on the cheek and we couldn't stop smiling."

Allen says dancing has brought her many things, including "an overall feeling of physical strength and emotional contentment." It also brought her something totally unexpected: "I gained a wonderful husband to enjoy life with again," she says. Today, she dances at least once a week and looks forward to her favorites: waltz and the bolero.

Newfound Confidence

In 2014, Stawick was dealt two devastating blows: her son and husband both passed away. In the aftermath, the Bloomfield resident decided to take up dancing. "I wanted to do something that would bring me joy," she says. "I was anxious at first, but the teachers and students were so welcoming and fun."

Today, she participates in five weekly group classes, as well as a variety of individual lessons, listing waltz, East Coast swing and the hustle among her favorite dances.

Stawick says dancing has brought much to her life, including "joy, freedom, confidence, poise and drama."

It has also brought new friends "that I would never have met outside of dance, the confidence to perform in an activity that I would not have thought possible years before and great health benefits, including keeping my weight down and strengthening my legs," she says. "Physically, I am in far better shape and condition than I was 20 years ago."

All three women say lessons have inspired them to be more active and try new things other than dance. "I started working with a trainer," Stawick adds.

Allen agrees, and says that dancing has helped her enjoy living again. "You can't dance and not smile," she says. "It just makes you happy."

0831 Member Exclusive Type

HAP members can get 50 percent off of the introductory dance package at Fred Astaire Dance Studio. [Learn more about discounts here.](#)

Looking Forward

People cope with grief in different ways, says Buff Donovan, HAP's director of behavioral health. "It's an individual process," she says. "There are no rules or timetables. The most important thing is to give yourself permission to grieve."

Classes, such as dancing and other exercise, can help the healing process. "There's the social connection but also the feel-good endorphins that activity brings," she says. Not a dancer? No sweat; find something that interests you.

"You have to create your own life and rebuild," Donovan says. "Find something that brings you joy."

Is Your Body Image Hurting Your Health? How Eating Disorders Affect Both Men and Women

February 01, 2018 by HAP Balanced Living

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Here's a fact you likely never saw coming: Among all mental health issues, eating disorders are the most deadly.

Every 62 minutes, someone dies as a result of an eating disorder.

About 30 million people of all ages and both men and women have eating disorders, says the National Association of Anorexia Nervosa and Associated Disorders. Roughly one in five women struggle with either an eating disorder or disordered eating. When someone is diagnosed with an eating disorder, they have to meet certain criteria defined by the American Psychiatric Association. Disordered eating is some sort of issue with eating that is dysfunctional and causes physical, mental challenges or both, says Dr. Darren R. Jones, licensed clinical psychologist. Part of the reason why eating disorders are so harmful is they touch the whole body. They can cause dehydration, heart issues and endocrine (gland) irregularities. People with eating disorders often suffer from depression, anxiety or personality disorders as well.

The common link with all eating disorders is they are influenced by today's culture of thinness. "With more focus than ever on bodies, particularly expectations shaped by social media, it's important to remember that many of the pictures we see are heavily edited. If you are struggling with negative thinking and body image issues, reach out for support," says Claire Mysko, CEO of the National Eating Disorders Association.

About two times more females have eating disorder than males.

"We have evidence that eating disorders are increasing in the male population," says Dr. Jones.

In the U.S., 10 million men will struggle with an eating disorder at some point in their lives.

The risk of death is slightly higher in men than in women, says Mysko. "Eating disorders for men carry a strong stigma, so rates of males who struggle with eating disorders are underreported. But more men are seeking help and sharing their stories," she says.

Mental health experts have defined three unsafe eating patterns as clinical psychiatric disorders: anorexia nervosa, bulimia nervosa and binge eating disorder. Here's what you need to know about each one:

Anorexia Nervosa

About 1 percent of the female population in the U.S. meet the full criteria for anorexia, which is a refusal to eat that leads to low body weight for a person's height and build. People with anorexia have a strong fear of gaining weight. There is a lot of obsessing and checking weight and trying to appear very thin.

"There's a [brain-body] component to how and why people develop eating disorders," says Dr. Jones. "Brain issues and brain chemistry play a role. For example, most people sit down to eat if hungry and look forward to it. For a person with anorexia, eating is a horrible experience. They are flooded with thoughts compelling them to avoid eating."

Bulimia Nervosa

Influenced more by culture, bulimia is a bit more common than anorexia, says Dr. Jones. Bulimia may be as high as 3 or 4 percent of the population in females. Persons can be underweight, overweight or normal weight. You can't tell from looking at them that they have. There are moments of binge eating, often followed by behaviors to stop weight gain, such as vomiting, use of laxatives and diuretics, extreme exercising and repeated fasting. These behaviors need to happen at least once a week for a few months to meet the medical criteria.

many cases, the start of an eating disorder follows stress, trauma or a major life change. "In most cases, if a person in their 30s or 40s [has an eating disorder], they likely have been dealing with it for a long time. And they go through a lot to hide their behaviors," says Dr. Jones. "Some people can handle it enough so no one notices."

Binge Eating Disorder

According to the National Association of Anorexia Nervosa and Associated Disorders, 2.8 percent of American adults will suffer from BED during their lifetimes. It's only slightly more common in females than males. A BED diagnosis requires three or more of these behaviors: eating more quickly than normal, eating until you feel uncomfortably full, eating large amount of food without being hungry, eating alone because of feeling embarrassed by how much you're eating and feeling disgusted with yourself, depressed or very guilty after eating.

Treatment and recovery

Eating disorders are treatable and people can and do get better. Before starting treatment, it's important to talk to an eating disorders specialist. A broad approach to treatment is important because...approximately 50 percent of the people with eating disorders relapse.

Treatment is usually based on how severe the symptoms are and may involve a number of approaches, including individual or group talk therapy, nutritional counseling and medication. Sometimes inpatient treatment is needed. With severe anorexia, a person may need a hospital stay to get his or her weight up to a healthier level.

There are common contributing factors to eating disorders:

1. Pop culture, which idealizes thinness and prizes will power.
2. Brain chemicals interacting with genes and hormones.
3. Major life changes and painful events.
4. Traits like perfectionism, impulsivity, self-critical thinking, and problems controlling emotions.

disorders with a support system,” says Dr. Jones.

“I see hope every day.”

Surprising things people don't realize about eating disorders

1. There are common beliefs that eating disorders only happen to wealthy women or younger people. But they happen to all age groups and types of people.
2. You cannot tell if someone has an eating disorder just by looking at him or her. Eating disorders can be harmful even for people who appear to be in good health.
3. Eating disorders are not choices. It may seem that the person just has good self-control around food and simply wants to keep his or her figure. But these disorders are really about a lack of control over one's thoughts about food.



Are you suffering from body image issues? Visit hap.org/behavioralhealth to find a provider and get started on your road to recovery. Or talk to a counselor by contacting our Coordinated Behavioral Health Management department at (800) 444-5755.

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Body Issues Aren't Just for Women

December 27, 2016 by HAP Balanced Living

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It's no secret that many women feel pressured by TV, movies and magazines to possess the "perfect" body. But it might surprise you that men struggle with body image, too.

Some guys might not even recognize that they battle, and obsess over, negative feelings about their bodies.

"Many men view the muscular body as the ideal," says Dr. Lisa Matero, senior staff health psychologist at Henry Ford Health System. "Some men believe that women are attracted to a very muscular body, but many women actually do not prefer this."

Ask Brian Cuban, a former lawyer and current mental health advocate based in Dallas. He spent a large chunk of each day in the gym, trying to pack on muscle. His obsession with his body left him feeling out of control.

"I could be in there for six hours," he says. No doubt, his muscles grew, but Cuban still felt like he didn't measure up.

Men and women with low self-esteem can be especially vulnerable to feeling bad about their bodies. So can people who routinely compare themselves to the perfect bodies they see in the media.

For men, it's not always just a quest for bulging biceps. Like women, they can develop eating disorders that make them excessively thin. "We don't hear nearly as much about male anorexia or male bulimia," Matero says. "But men do suffer from these."

Taking Charge of the Problem

Reversing these negative feelings takes time, Matero warns. "Just as the body doesn't change overnight, neither does the mind – it usually takes a lot of work, and possibly therapy, before you can see results," she says.

"You can also have relapses where you're successful for a while and then find those old habits coming back. But if you have a long-term commitment to overcoming the problem, your chances of getting better improve."

Cuban, the author of "Shattered Image: My Triumph Over Body Dysmorphic Disorder," says a support group has helped drive his recovery. "It helps to have someone say, 'Hey, Brian, are you obsessing a little too much here?'"

His struggle has led Cuban to adopt a mantra that he thinks can help others. "I tell myself 'You are enough'," he says. "No matter what you look like, no matter what people tell you – you are enough."

Matero acknowledges that girls and women are more likely to be dissatisfied with their bodies than men, but they're also more likely to seek treatment. "Men feel that it's a weakness to get help," she says. "They shouldn't."

As for Cuban, he's optimistic about the future. He's planning a wedding with his fiancée. And he's made important strides from the days when he couldn't stand to look in a mirror.

He no longer lifts weights but remains committed to fitness, attending an indoor spinning class called Flywheel. "You don't need to be muscular to be loved," he says. "Exercise can make you feel good. It just becomes a problem if you're compulsive about it."

Do you struggle with your body image? Visit hap.org/behavioralhealth to find a provider and get started on your way to recovery.

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Men, It's Time to Get Real About Depression: Signs, Symptoms and Treatment Options

May 04, 2017 by **HAP Balanced Living**

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Hear the word depression and you might conjure an image of a supreme sadness. In truth, men tend to experience depression differently from this typical image.

Women may be twice as likely as men to experience depression, according to the Mayo Clinic. But men are four times more likely to commit suicide than women, according to a study published in Social Psychiatry and Psychiatric Epidemiology. Men are also quicker to act on suicidal thoughts and are less likely to show warning signs.

There are other differences as well. Compared to women, men suffering from depression are less likely to talk about how they're feeling or even appear sad. "Our society dictates that men need to be strong. They have to always be in control and if you express feelings, it's more of a female trait," explains Buff Donovan, a licensed social worker and HAP's director of behavioral health. This means that men are more likely to delay treatment, allowing depression to worsen and become more difficult to treat.

Depression in men is unique in other ways as well. Among depressed men, the typical warning signs include:

- **Anger.** Feelings of irritability, becoming short-tempered or overly sensitive, picking fights and even acting emotionally or physically abusive toward others.
- **Recklessness.** Engaging in high-risk activities such as road rage, unsafe sex and compulsive gambling as well as self-medicating by excessive drinking, use of drugs, overeating, and marathon television viewing.
- **Losing yourself in your work.** An inability to disengage from work.
- **Withdrawing from others.** Spending more time alone and not participating in activities you typically enjoy.
- **Physical symptoms.** Back pain, headaches, digestive problems, sleep problems and sexual difficulties can all occur with untreated depression.

- **Extreme fatigue.** Trouble sleeping or sleeping too much. Problems with focus and concentration may also occur.

You Don't Have to Feel Like This

Remember, depression is a medical illness. Just like you can't recover from cancer by toughing it out, the same is true of depression. It's also not something to be ashamed of. Many celebrated men (including Bruce Springsteen) are stepping forward to share their struggles. Start by talking with your doctor to rule out other conditions that mimic depression. You can also ask for a referral to a mental health professional or call HAP's Coordinated Behavioral Management Department at (800) 444-5755.

Here are some tips to get you on the road to recovery:

- **Talk with a professional.** Therapy can help you learn to work through situations or relationship issues that trigger or worsen depression.
- **Pace yourself.** Don't take on too much while you're working on feeling better.
- **Challenge negative thoughts.** Replace negative thoughts with positive ones to get your brain on a more positive track.
- **Embrace a healthy lifestyle.** Eliminate foods that bring you down such as sugary drinks and fast food and focus on eating a healthier diet. Spending time outdoors and exercising (even a 10-minute walk) will help boost the feel-good chemicals in your brain.
- **Take time for yourself.** Make a point of putting the demands of the week on hold and regularly taking part in activities you enjoy.
- **Tell others how you're feeling.** It's especially important that you don't keep thoughts of suicide to yourself. "A history of attempts, along with certain changes in behavior (including feelings of hopelessness, increasing anxiety and panic attacks, and worsening substance abuse) may predict that someone is thinking of suicide," cautions Dr. Kanchana Madhavan, medical director in HAP's Coordinated Behavioral Health Management department.
- **Monitor your medication.** Antidepressants do work but it may take several weeks before you notice improvement. So give them a chance to work. Although they can have side effects, these tend to lessen over time. In rare cases, they can cause suicidal thoughts. If this happens, let your doctor know immediately.

My loved one or friend is depressed. What should I do?

Encourage him to talk about his feelings. Be careful not to ignore such comments as "You'd be
<https://www.hap.org/blog/2017/05/depression>

Let's go,' " recalls Donovan. Opening up the dialogue was enough to get his friend talking about how down in the dumps he was feeling, she adds. With her husband's encouragement, his friend agreed to see a therapist.

The storm will pass

Recognize that a bad day does not equal a bad life and feelings of hopelessness will not be with you forever. "Treatment is very effective," stresses Dr. Madhavan. "With so many advances in pharmacology and technology," she adds, "there are treatment approaches that can fit any person seeking help."

If you need help, contact HAP's Coordinated Behavioral Management Department at (800) 44-5755.

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Stressed? Unhappy? Don't Use Food to Cope

August 17, 2018 by HAP Balanced Living

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Have you ever wanted to eat a candy bar because your boss was upset with you? And did that chocolaty goodness melt away some of the sting of that interaction? If so, you're familiar with the soothing power of emotional eating.

Many people – knowingly or unknowingly – use food to make themselves feel better in response to certain emotional situations.

"It tends to be more common with stress, but other emotions that people might eat in response to are sadness, anger and boredom," says Dr. Lisa R. Malero, senior staff health psychologist with Henry Ford Health System in Detroit. "Celebratory excitement is another common one. It's really the urge to eat in response to any sort of emotion that someone may experience."

Emotional eaters don't reach for carrots and celery. They tend to seek out carb-heavy foods that are sweet, salty or high in fat because those snacks release the "feel-good" brain chemical dopamine.

"It gives us pleasure," Dr. Malero says. "That's what triggers that dopamine response, which then makes people feel better."

An occasional bout of emotional eating may not be concerning, but the habit can become a problem if you reach for food whenever you experience strong emotions or boredom. Excessive emotional eating can lead to weight gain and low self-esteem – as well as relationship problems if you swallow your feelings instead of talking through your troubles. Additionally, if you overindulge, emotional eating can trigger strong feelings.

"You experience what I call 'food guilt,'" Dr. Malero says. "That can actually make you feel worse and then take you down the path to eating even more poorly over time."

Fortunately, you can break free from unwanted emotional eating habits.

"Recognition is the first step," Dr. Matero says. "The second step, once you identify that you are an emotional eater, is identifying which emotions you're eating in response to. And once that's identified, then the third step is to find strategies other than food to help deal with that emotion."

Try these techniques

Outlast a craving

Many emotional eaters crave specific foods, such as salty chips or sugary sweets, even when they aren't hungry. Cravings are different from true hunger, which may be satisfied by any type of food. Cravings tend to fade after 15 or 20 minutes, while true hunger gnaws at you until you're nourished. If you've got an emotionally induced food craving, waiting it out can help.

"I usually tell people to find things to do for anywhere from 10 to 20 minutes," Dr. Matero says. "Doing something with your hands can be helpful because that takes away the ability to eat. That could be polishing your nails, cleaning, reading a book, or playing with a child or pet. Also, finding ways to keep your mouth busy: chewing gum. Brushing your teeth is a really popular one because once you brush your teeth, you might not want to eat afterwards."

Eat mindfully

When you're triggered to eat by strong emotions, you may devour your food quickly without paying much attention to what, or how much, you're eating. You might reverse the habit by becoming a mindful eater. Instead of inhaling food while you stare at the television, sit at your table and concentrate on every aspect of what you're eating. You'll enjoy your food more and should realize when you're full.

"Focus on the taste, how it looks, how it smells," Dr. Matero says. "There is research to show that people who eat mindfully consume fewer calories."

Create welcome distractions

Often, realizing you're reaching for food instead of dealing with your emotions isn't effective enough to get you to step away from the refrigerator. You'll have greater success if you have

you.

"One strategy might work in one situation but then it might not be helpful in another," Dr. Matero says. "Having a variety of different techniques for someone to use is most helpful."

Still hungry? Check out our guide to healthy snacking



If you're craving sweet, crunchy or fatty foods, here are 28 ideas for smarter snacking.

Categories: Get To Know Your Plan, Get Healthy

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Stressed Out? Make a Personalized Plan to Take Care of You

February 28, 2019 by **HAP Balanced Living**

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Work, family, money, health, current events: all these things can cause stress. We may not be able to predict what will happen in our lives, but we can prepare for how we'll take care of ourselves when it happens. Print and fill out the document below. Hang it up in a visible spot so you can remind yourself to take care of yourself. You don't have to wait until a crisis. You can practice self-care all the time.



MY FEEL-GOOD LIST

Life can get stressful with all its responsibilities. It helps to have a plan for when it feels overwhelming. Print this list and write down what stresses you out. Then answer each question below with the simple things that make you happy. They don't even have to cost money. We have a few thoughts to get you started but we know everyone is unique. Remember to do something for yourself every day and especially when you feel stressed. Because we all know that stress happens.

WHAT ARE MY STRESSORS?

1. _____

2. _____

3. _____

4. _____

NOTE TO SELF

ASK THE FOLLOWING WHEN I FEEL STRESSED AND OVERWHELMED:

WHAT CAN I DO TO HELP MY BODY?	WHAT CAN I DO TO HELP MY MIND?	WHAT CAN I DO TO HELP MY RELATIONSHIPS?
1. Sleep at least 7 hours.	1. Meditate for 5 minutes. Try ours at hap.org/mindful	1. Have a healthy conversation even with conflict at hap.org/conversation
2. _____	2. _____	2. _____
3. _____	3. _____	3. _____
4. _____	4. _____	4. _____
5. _____	5. _____	5. _____
6. _____	6. _____	6. _____
7. _____	7. _____	7. _____

FOR HELP WITH STRESS OR OTHER LIFE ISSUES, CONTACT HAP'S COORDINATED BEHAVIORAL HEALTH MANAGEMENT DEPARTMENT AT (800) 444-5155.

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Support for New Moms: How to Handle Postpartum Depression and Anxiety

January 29, 2019 by **HAP Balanced Living**

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Having a baby is exciting and overwhelming. You've added a new member to your family. You've also become the caretaker of a demanding newborn, who sleeps sporadically, cries often and arrived without an instruction manual. You're sleep-deprived, unsure whether you're doing a good job, and your overactive hormones make everything feel worse. It's no wonder that one in five women develop postpartum depression or anxiety. Read on to get the facts – and some help.

Baby blues or postpartum depression?

Within a week of having a baby, many new moms feel a dip in mood, called the “baby blues.” They may cry often, feel overwhelmed, lose their appetites or have trouble sleeping. Typically, the feelings fade within a week or two.

“It’s often due to shifts in hormones and sleep deprivation and a major lifestyle change,” says Sara Mertz, a midwife at Henry Ford West Bloomfield Hospital.

Postpartum depression and anxiety tend to develop later and last longer. Treatment can help resolve them more quickly, so it's important to seek help.

“The onset will be anywhere from one to six months after delivery, up to a year,” Mertz says. “Most women start feeling better by a year after delivery, but it's hopefully much sooner than that, with proper care.”

Besides experiencing changes to their eating or sleeping habits, women with postpartum depression may feel sad and hopeless, and lose interest in friendships, favorite activities or caring for the baby.

"It's a general feeling of hopelessness and not feeling like this is going to get better," Mertz says. She adds that very few new moms think about hurting themselves or their babies, but these thoughts occasionally happen.

Women with postpartum anxiety may worry constantly, feel impending doom or have intrusive thoughts such as a fear of kidnapping or of the stroller rolling away.

"It's something that women struggle to bring to the attention of their OB-GYN provider or primary care provider," Mertz says. "They don't want people to think they're thinking that something could happen."

If you've had depression or anxiety or if the conditions run in your family, you're at greater risk of postpartum depression or anxiety. Having a high-risk pregnancy, losing a previous pregnancy or experiencing trauma may increase your risk.

You may also experience postpartum depression or anxiety if the baby needs to be hospitalized or is admitted to the neonatal intensive care unit, Mertz says.

Getting help

Some women notice a problem but don't seek help, so it's important for others to be vigilant. To identify issues early, many pediatricians at well-baby visits ask new moms about their mental health. Family members also are key to recognizing problems.

"Partners or relatives will be open and say, 'Something's just not right – why don't we go and talk to somebody?'" Mertz says. "It's a physiologic event that a woman can't control."

If you have a behavioral health specialist, make an appointment. If not, see your OB-GYN or primary care provider, who can rule out other problems, make referrals and prescribe medication. You can also talk with HAP's Coordinated Behavioral Health Management team.

Counseling helps, and medication may be necessary. Your health care provider should discuss the importance of ample sleep, self-care and social support. It's also wise to identify three people you can confide in.

"I always tell my patients, 'I want you to tell those three people today what you're struggling with,'" Mertz says. "Because when you're having a really bad day, that's not when you want to call [your] best friend and say, 'I haven't told you any of this, but...' Share with people what you're struggling with and allow them to support you."

For help, contact HAP's Coordinated Behavioral Health Management at (800) 444-5755.

How to be a supportive partner

Be present for your partner to help identify or ease postpartum depression or anxiety symptoms:

- **Talk about feelings.** Don't just ask whether your partner needs anything from the supermarket; ask whether she's had symptoms of depression. "It's a lot easier for somebody to answer, 'Yes, I'm having these issues' than to come and admit to it," Mertz says. "It's the most common complication of childbirth. Recognizing that this is something that can happen to anybody is really important."
- **Take charge.** Instead of asking how you can help, choose something and do it. "Oftentimes, [postpartum depression sufferers] don't know what they need – that's a very overwhelming question," Mertz says. "Just say, 'I'm going to fix dinner for us tonight,' or 'Why don't you go to bed early? I'm going to take the baby for a walk.'"
- **Be present.** If you can, take time off from work during the first few weeks or months. "The increase in the number of dads who are able to take paternity leave now is very helpful," Mertz says. "It's a lot less stressful on the family."

Read more maternity stories:



Your Pregnancy Resource Center: Essential Articles for Parents-to-Be

Being pregnant can be overwhelming, but we're here to help.

Categories: Get Healthy, Get To Know Your Plan

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<https://www.hap.org/blog/2019/01/new-moms>

Losing Ramona – Pregnancy and Loss

October 03, 2018 by Sarah Melvin

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Since my daughter was born in July 2017 I have shared stories and offered advice to help other expectant parents feel prepared. But what happens when those plans are shattered and the baby you expected to bring home is lost to miscarriage, stillbirth or other causes? While I have not lost a baby myself, my niece, Ramona, was born still on Christmas Eve 2013. My brother, Kyle, sister-in-law, Michele, and other parents who suffer the tragedy of losing a child experience a kind of grief that most people simply can't comprehend. Below, Michele shares her story in hopes that other families mourning their babies feel a little less alone.

Michele's Story

On December 23, 2013, my husband Kyle and I drove to the hospital at 11 p.m., giddy with the expectation that shortly we'd be holding our newborn baby girl, Ramona, in our arms. I was 40 weeks and 3 days pregnant, three days away from a scheduled induction if baby didn't come before then. Luckily for me, I thought, labor started the day before Christmas Eve. Earlier that same day my best friend, Jessica, had delivered her own baby girl by emergency C-section at 32 weeks pregnant. I spent the afternoon visiting Jessica, her husband Lloyd, and baby Savannah in the hospital, anticipating a return to the hospital later that evening to deliver my own little girl.

When we arrived at the hospital, I was wheeled to triage and went through the check-in process. I settled into the hospital bed while the nurse tried to position the fetal heart rate monitor, and I watched her smile tighten as she moved it around. I heard a nurse in the hallway tell someone, "Get her doctor, now." Even then, I had very little idea how our lives were about to be turned upside down. After searching for a heartbeat, our OB reached

<https://www.hap.org/blog/2018/10/pregnancy-and-loss>



across my lap, grabbed my hands and said, "I'm so sorry." Our baby had died, and now I would have to deliver her, stillborn.

October 15th is National Pregnancy and Infant Loss Awareness Day. Bereaved families light candles at 7pm in every time zone to create a "wave of light" for the entire day to honor their babies.

Three days later I received the news Jessica and Lloyd's baby girl, Savannah, had also died. Ramona and Savannah shared the same death date: December 24, 2013.

The days, weeks, and months that followed were the most difficult we have ever known. The intense physical pain, indescribable grief, and what I would later learn was trauma, consume us. In the locked nursery across the hall, I was equipped with every tool to take care of my newborn baby. I had painstakingly picked out the best swaddles, stroller, car seats, and video monitor. On the car ride home on Christmas morning, as Silent Night played over the radio, I realized I had nothing to help me get through the days to come. No one had given me an "In Case Your Baby Dies" handbook. I felt helpless, hopeless and utterly unprepared.

Fortunately, I connected with many loss parents, joined a support group, found a therapist, and over time have been able to return the support I was given to newly bereaved parents. Looking back, these are the things I wish I'd known when Ramona died.

1. You did the best you could at the time

My OB and nurses were very supportive, but not very hands-on once I had delivered Ramona. To this day I have regrets about how much time we spent with her in the hospital, not taking our own photos, and not dressing her in the clothes we had brought. I remind myself that I did the best I could at the time. I had expected an entirely different outcome and had no idea what could or should do in our situation. No one hands you a handbook after your baby's death. After years of therapy and support group meetings, I am convinced Ramona knew nothing but love while she was alive, and I did the best I could for her in death.

2. Your partner might grieve differently

Communication with your partner will help, but it's important to remember that even if they don't show it, they are still grieving. My husband Kyle felt like he needed to be strong for me, so he kept a lot of emotion inside. He also had the responsibility of telling our family and friends Ramona had died, and that took a huge emotional toll. While I needed to discuss my feelings a day, every day, he needed quiet introspection. Five years later, I still attend our grief support

3. There is no timeline for grief

There is a common misconception that once a person "gets through" the stages of grief, they will be fine. Grief is not a linear timeline, nor are the stages of grief meant to be experienced and never revisited. I had many people tell me when I was angry that they didn't want me to get "stuck" in the anger phase, like the sooner I got out of it, I could move on to the other stages and get back to my old self. After four years of therapy, I have developed skills that help me cope with my anger and uncover the emotions masked by anger, but I will never be my "old self." Losing a baby changes you, sometimes in small ways, sometimes in profoundly life-changing ways. Grief never goes away, but it ebbs and flows and becomes manageable over time. Trauma and grief are different. Both need care and attention.

Recognizing the trauma of pregnancy and infant loss and treating trauma is so important. Ten months after Ramona died, I was not doing well. I was crying for literally hours a day, experiencing severe anger issues and constantly reliving the days of her death and birth. Once the shock of her death had worn off, I was left with overwhelming emotions that made it difficult to function in everyday life. I realized I needed help that no one else was equipped to give me.

I found the number to a counseling center near my house and made the call. I met my therapist a few days later and the relief I felt was immediate. I wish I'd tried therapy sooner. Therapy isn't about being 'fixed,' it's about learning tools to help you through the hard moments in life. I learned so many coping skills with therapy that help me to this day, and not just with my loss.

I like having an objective person to pour my heart out to who doesn't judge me, and who validates my feelings. I was lucky and clicked with my therapist on our first visit, but don't be afraid to try someone different if you aren't comfortable. My therapist reassured me if after a few visits I didn't feel comfortable with her, the office would find someone else for me and she wouldn't be upset. She still asks me if I'm comfortable from time to time, and it's been four years.



Mental health coverage is offered by all HAP plans. We can help you find a behavioral health specialist to talk to about treatment. Call (800) 444-5755 or speak with a HAP managed care specialist.

4. It's OK to step away from family and friends

triggered and back to square one. This was especially true around all the babies born in the short time after Ramona and Savannah. Baby showers, children's birthday parties and gender reveals were completely off the table.

Some people understood and supported me no matter what. Some people did not. I read a quote in the early days of my grief, "Hard times will always reveal true friends." I have found that to be very true. Protecting my heart was a risk I was willing to take, but it still hurt when people I was previously close to didn't understand why I needed space. Thankfully there were many family and friends who gave us unconditional support.

Once I was able to put into words why I needed to keep my distance, it made it easier to turn down invitations to baby showers, birthdays, and other events I knew I wouldn't feel comfortable attending. Over time, I have been able to attend a couple of baby showers and seeing a child Ramona's age doesn't affect me like it used to, but I still set limits for my own peace of mind.

5. Support groups are important even if you think you have good support.

My best friend Jessica and I attended our first support meeting with Metro Detroit Share two months after our daughters died and it was so helpful. Metro Detroit Share is the local chapter of National Share, a support network whose mission is "to serve those whose lives are touched by the tragic death of a baby through pregnancy loss, stillbirth, or in the first few months of life."

Angie Winton founded the Metro Detroit chapter of Share after feeling like there was nowhere to turn when her daughter Brooke Marie was stillborn in 2005.

"I desperately wanted to talk to someone, anyone, who could tell me things like 'I won't feel like this forever, that there is hope after loss,' and to validate any 'crazy' feelings I had," Winton said.



Family and friends support us each year at the annual Walk for Remembrance and Hope.

Winton believes connecting with others who have experienced a similar loss creates an invaluable network for parents and other family members.

"I believe the support group also gives you that extra 'family' that remembers your child with you and understands that you will never 'get over this,'" Winton said.

In addition to monthly support meetings, Winton also founded the Walk for Remembrance and Hope, an annual event that honors the lives of babies gone too soon.

The 10th Annual Walk for Remembrance and Hope will be held Sunday, October 7, 2018 at Heritage Park Sheridan Pavilion 12111 Pardee Road, Taylor, Michigan at 12 p.m. Contact Angie Winton at (313) 492-1172 for more information. Monthly support meetings are held the third Wednesday of each month at VFW Post 44227 11590 Pine Street, Taylor, Michigan at 7 p.m.

Contact Michele Caruso at (313) 850-5523 for more information on meetings and the walk is also available on the Metro Detroit Share website.

Every loss is different, and my hope is every person experiencing miscarriage, stillbirth, or infant loss gets the support they deserve.

Read more maternity stories:



Your Pregnancy Resource Center: Essential Articles for Parents-to-Be

Being pregnant can be overwhelming, but we're here to help.

Categories: Get Healthy

SAD No More: How to Beat Winter-Weather Blues



For many Michiganders, winter is a season filled with activities. Bitterly cold mornings? Grab your skates! Gray, overcast skies? There's a snow day in the future. A gloom that settles in like an unwelcome houseguest? OK, maybe we do sometimes feel a bit down after a stretch of cold, cloudy days.

But for those who suffer from Seasonal Affective Disorder – SAD – winter's arrival is anything but wonderful. The dreary weather clouds their moods, and resets their energy levels as low as the wind chill. If that description makes SAD sound like a serious mental health issue, that's because it is.

If you suffer from SAD, know treatment can make a difference.

"Seasonal affective disorder is a variant of major depressive disorder," says [Dr. Philip Lanzisera](#), a clinical psychologist, who works at Henry Ford Hospital in Detroit. "It has the hallmarks of major depression, like major disturbances in mood or pleasure, energy [level], sleep and appetite." What makes SAD different from typical depression is that it occurs predominantly during the fall and winter, when there's less sunlight.

Living in a northern state, like Michigan, makes you more likely to experience SAD than your cousins in, say, Florida or Texas, who get a steadier stream of sunlight in the winter. You're also more likely to have SAD if you're a woman; are between the ages of 15 and 55; and if you or your family have a history of depression, bipolar disorder or SAD.

Sometimes called "winter depression," people typically notice symptoms starting in late fall or winter, only to see their condition improve with the arrival of longer, sunnier days, says Buff Donovan, a licensed social worker and HAP's director of Coordinated Behavioral Health Management. People with SAD tend to sleep and eat more than usual.

SAD affects people to different degrees. With mild SAD, you may have to push yourself but you're able to do what you normally do. With moderate SAD, you have some difficulties accomplishing day-to-day activities. With more severe cases of SAD, you're unable to do what you normally would and lose interest even in your favorite things. All you may want to do is eat, sleep and be left alone.

<https://www.hap.org/blog/2018/01/sad>

How to Beat SAD

Resist the urge to isolate yourself and hit the snooze button over and over again, says Donovan. Keeping a regular schedule, eating healthy and getting the right amount of sleep can help alleviate mild cases of SAD. Exercise – even a brisk walk – can help lift your mood and boost your energy. If these lifestyle changes don't ease your symptoms, talk to your doctor about other treatments, like light therapy, counseling and medication.

Light therapy is a go-to treatment for SAD. It's effective and relatively simple – you use a "light therapy box" to replace the sunshine you're missing. (See sidebar, above.) Your doctor may also suggest antidepressant medication to ease your symptoms. One-on-one counseling with a therapist can help in more severe cases.

If you notice a worrisome change in your outlook and behavior as winter looms, keep a "mood diary" to track your emotions. If serious symptoms last more than two weeks, talk to your doctor. He or she can suggest a treatment plan to help you embrace, not dread, winter.

"Except for winter sports enthusiasts, nobody likes winter terribly much," admits Dr. Lanzisera. "The sky is gray. It's cold outside. It's icy. It's miserable. But SAD is not just 'I don't like winter.' It's a true disorder that impairs function." Don't try to tough it out, he adds. "Stay active, stay engaged, and don't let yourself fall into the trap of withdrawal," he says. If you or someone you love suffers from SAD, treatment can help. And keep in mind that winter, like any season, does end. The arrival of springtime blossoms will also likely bring a brighter outlook.

Other symptoms of SAD include:

- Irritability
- Anger
- Lack of energy
- Feeling "blue"
- Loss of interest in activities you usually enjoy
- Craving carbohydrates such as bread and pasta
- Difficulty concentrating

Light therapy boxes can bring sunshine inside

You know how a warm, sunny day brightens your mood? When you have Seasonal Affective Disorder, an occasional bright day isn't enough to offset your symptoms. A light therapy box gives you your own source of sunlight – with most of the skin-damaging UV rays filtered out.

ing. This simple treatment may make a big difference this winter in how you feel.

To talk to a counselor about SAD or any other issue, contact our [Coordinated Behavioral Health Management](#) department at (800) 441-5755.

Are You Addicted to Your Smartphone?



In the '90s, pioneering New York psychiatrist Ivan Goldberg jokingly published the first description of what he called "Internet Addiction Disorder." The symptoms, which he described as staying online longer than you expected and finding it hard to resist the urge to log in, may have seemed bizarre at the time, but today, mental health professionals have acknowledged that tech addiction is real and widespread – specifically when it comes to our smartphones.

Just take a look around the next time you're in public. People are so focused on their devices that they lose sight of the world around them. Like other addictions, it can be difficult for someone who is addicted to identify that they have a problem.

So, how do you tell if you're spending too much time with your screen?

Psychiatrist [Greg Mahr](#), interim division head of Consultation Liaison Psychiatry at Henry Ford Hospital, says an action is an addiction if it's interfering with other parts of your life.

"It's out of control, and you're doing it in spite of bad consequences," he says. "The underlying issue is usually not being properly centered in your life and not having priorities in the right place – and possibly not having enough purpose. Without these things, we easily can look for gratification elsewhere," Mahr says.

Karen Sobel-Lojeski, a professor in the department of technology and society at Stony Brook University in New York, says technology provides that gratification in spades.

"Phones are designed to feel good in your hands," she says. "They can almost feel perfect. If some apps feel like they're sucking you in again and again, it's because they are designed to do just that. Your phone buzzes when you get an email. It really doesn't matter what it's about. That email could be a company trying to sell a new vacuum cleaner. It plays to your feeling of being needed, being wanted, that you're important."

Addictive activities can mess with your mind, prompting a release of the feel-good brain chemical called dopamine. But that's not the biggest problem. The more important bottom line is that the device – and whatever is

<https://www.hap.org/blog/2016/10/addicted-to-tech>

on it – becomes too meaningful. It takes too high a priority, and that's the most difficult thing to put into perspective, Sobel-Lojeski says.

“Knowing you're addicted is one thing, but dealing with the issue is another. Talking to other people who struggle can give you strength in numbers,” Mahr says. “You realize you're not alone.”

Sobel-Lojeski recommends being responsible enough to cut off your access to technology that can break your concentration.

“If you're working on an important document at the office, consider closing all other windows on the screen, turning off your phone and not even letting yourself have access to email so you're not sidetracked from doing this important thing,” she says.

Setting time limits on using technology can also work, but Sobel-Lojeski says use a real alarm clock.

“Don't have the reminder be an alarm from your phone,” she says. “Otherwise, you're still connected to technology, and it defeats the purpose.”

If you stay committed, Sobel-Lojeski says setting goals to deal with technology can help.

“It has to be a priority for you, or you'll likely end up back in the same old habits,” she says. “You have to want a better life and recognize changes in your use of technology can make it better.”

A close-up, profile view of an older woman with short, light-colored hair and glasses. She is looking out of a window, with soft, natural light illuminating her face. The background is slightly blurred, showing what appears to be a window frame and some foliage outside.

Anticipating Grief

March 16, 2017 by **HAP Balanced Living**

Share

Death awaits us all, even if we avoid thinking about it. When diagnosed with a life-threatening disease or illness, however, we're forced to acknowledge our own mortality.

"We're faced with a new normal," says Kathleen M. Wade, Ph.D., director of Social Work at the University of Michigan Health System and assistant dean for Hospital Social Work Services at the University of Michigan's School of Social Work. Wade teaches about death, grief and loss. "With a serious illness, we begin to talk in terms of our own mortality."

Some patients see this as a wake-up call, Wade says, a reminder to "prioritize what you do and who you spend your time with." Others react with serious anxiety, sometimes spiraling into depression and grief.

Previous losses, lack of financial or social support and juggling multiple health conditions can make a new diagnosis especially difficult, Wade says.

Coping

The older we get, the more losses we've likely faced, Wade says. A new illness can trigger anxiety and depression in people who have experienced life-threatening conditions before, either their own or those of family or friends. Patients and their loved ones face a complex mix of emotions: the pain and possible devastation of illness, financial stress, the loss of independence and changes in relationships.

Patients who fare the best are those who get necessary care, maintain strong support and continue many of the same activities. Sadly, not all patients have that support, putting them at higher risk for isolation or neglect.

Support can be as simple as visiting a senior center or connecting with others online. People with depression, or those who have stopped taking care of themselves, need medical and psychological intervention. The first step is calling a primary care physician.

A matter of respect

To maintain the patient's morale, it's essential that they be allowed to make decisions about treatment and how they live, Wade says.

"Show respect for the other person's beliefs and values," she says. "Don't just swoop in with your own ideas."

This is especially important with painful treatment, such as chemotherapy. Ensure that all health care professionals directly involve the patient and family in discussions and planning.

"Loss of control is a huge fear," Wade says. "It leads to feelings of helplessness and hopelessness."

Be specific

"Serious illness creates both an opportunity and a challenge," says Wade. It gives you a chance to get closer to your loved ones, but the trick is how to ask for — and give — help. Wade's advice to friends: Be specific in your offers of help.

- Offer to take your loved one to the doctor. Stop at the drugstore for medicine. Find resources such as support groups or financial counseling. Or just provide good company.
- If your spouse is sick, your roles will likely change, and you'll need to figure this out together. "Be understanding and acknowledge that this is a new challenge for you too," Wade says.
- If you need help, don't try to go it alone. "Remember that it makes others feel good to help you," Wade says.

If grief and worry feel like too much to handle, HAP's Coordinated Behavioral Health Management team can help. A clinical case manager is available 24/7 at (800) 444-5755.

Advance directives

Plan for a medical emergency with an advance directive. Michigan has two kinds: the Durable

Are Money Worries Making You Sick?

August 11, 2016 by **Mark Reed**

Share 0 Shares

Worrying about money can affect you in more ways than you think. Financial stress is linked to a greater risk for diabetes, heart disease, ulcers, sleep disorders and depression, according to a recent study published by the American Psychological Association. Financial concerns are literally making us sick, and many people don't realize its impact or how it happens.

How does stress impact your health?

When you're under stress, it has immediate short-term effects on your body, and you go into fight-or-flight mode. Stress causes the release of cortisol, which has many negative effects, including:

- Increased heart rate
- Higher blood pressure
- Faster breathing
- Reduction in metabolism

Any one of these health conditions or symptoms can stem from stress and also lead to more stress. According to a recent study by the American Psychological Association, financial concerns are Americans' top cause of stress.

Stress management is key

Financial stress can be a heavy burden, with long-term health effects. Managing it requires not just sound money management but also successful stress management. For anyone experiencing severe psychological distress, a counselor can help deal with stress on an ongoing basis. But one of the most effective ways to manage stress is to exercise.

"You should exercise three to four times a week for at least 30 minutes," said Tom Spring, HAP's director of Wellness and Community Outreach. "Exercise releases brain chemicals called endorphins, which makes you feel good. It can also lower your blood pressure and reduce the symptoms of depression. Just be sure to check with your doctor before you start any kind of exercise program."

Research also indicates people avoid healthy behaviors when under significant financial stress, but healthy activity could mitigate the effects of the pressure. There are several other ways to help you better manage stress, including:

- Deep breathing
- Meditation
- Maintaining a healthy diet

We've partnered with GreenPath Financial Wellness to increase the fiscal fitness of HAP employees and people covered by HAP insurance through their employer.

"We know very well how financial concerns can affect people's overall health," explained Tom Spring, HAP's director of Wellness and Community Outreach. "So, we wanted to partner with strong financial resource to reduce those concerns. By being proactive and addressing money management issues in advance, we can help people avoid potential long- and short-term health problems."

Here are just a few of the many topics covered in HAP Financial Fitness:

- Saving to achieve your goals
- Credit reports and scores
- Preparing to buy a home

Categories: Get Healthy

Search blog

Stressed Out? Anxious? Add Some Art Therapy to Your Self-Care Tool Kit

December 04, 2018 by **HAP Balanced Living**

Share 0 Shares

When you feel anxious or sad, remember to take care of yourself. You can start with the basics of getting enough sleep, eating right and exercising. You can also write in a journal, watch something funny or hang out with friends. But have you ever thought about trying art therapy? To put it simply, art therapy is using creativity to express yourself and then looking at the art for clues about what you're feeling. And, you can do it right at home.

Watch our video to see ways you can incorporate art therapy into your life, whether it's through drawing and painting, working with modeling clay or creating a collage from materials you already have. Try it!

HAP Balanced Living – Get the Mental Health Benefits of Art Therapy at Home



Categories: Get Healthy

Search blog

EXHIBIT 10

About us

This blog, or digital magazine, is your guide to living a balanced life. HAP Balanced Living is filled with the latest health and wellness news, tips and answers to your questions by HAP experts, as well as helpful ideas to improve your well-being. HAP Balanced Living is separated into four main areas:

- *Get moving.* Whether you need help to simply take more steps in the day or want to learn how to train for a 5K, HAP Balanced Living helps you get moving.
- *Get healthy.* HAP helps you get healthier, whether it be integrating more healthful foods, reducing different types of stress in your life or providing tactics to improve your mental well-being.
- *Get involved.* Join us in the community or learn about HAP member-exclusive events.
- *Get to know your plan.* Learn about HAP plans, member-exclusive discounts and other perks to help you get the most out of your health care dollars.

You'll also hear from actual HAP members and members of our local community who will share inspirational stories about their personal health triumphs.

Award-winning content



Ragan's Health Care PR and Marketing Awards, 2017

Honorable mention for best blog



Ragan's Health Care PR and Marketing Awards, 2018

Do You Know the Signs of a Stroke? Winner, Visual design



Ragan's Health Care PR and Marketing Awards, 2018

Fitness Power Couple: Why You Should Pedal, Sweat and Savor the Ride, Honorable mention



Digital Health Awards, 2017

Active TV Time - **Bronze award**

Doctor's Office Checklist - **Bronze award**



Digital Health Awards, 2018

Spring

HAP Balanced Living Blog - **Silver award**

How Our Pets Keep Us Healthy - **Silver award**

4 Reasons to Get Screened for Breast and Colon Cancer - **Merit award**

Your Pregnancy Resource Center: Essential Articles for Parents-to-Be - **Merit award**



Fall

Sitting all day? Get Moving Instead - **Bronze award**

Do You Know the Signs of a Stroke? - **Merit award**

Hungry? Here are 28 Ideas for Smarter Snacking - **Merit award**

Healthcare Communication Awards, 2018



Your Pregnancy Resource Center: Essential Articles for Parents-to-Be -
Honorable mention

If you have questions or comments, we'd love to hear from you. Email us at balancedliving@hap.org.

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EXHIBIT 11



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December 11, 2018

*Via E-Mail: inquiries@happify.com
And Courier*

Mr. Tomer Ben-Kiki
Co-Founder and CEO
Happify Inc.
821 Broadway, 5th Floor
New York, NY 10003

**Re: Objection to Trademark(s) HAPPIFY
In the name of Happify Inc.
Our File No.: HFHS0194OC**

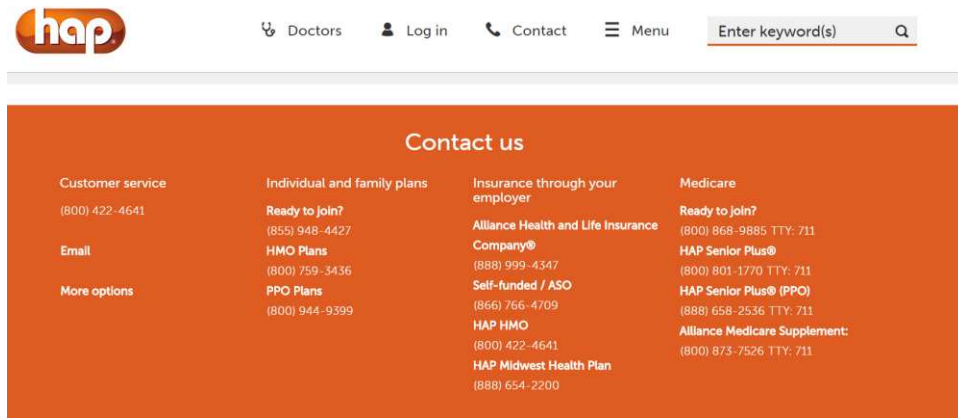
Dear Mr. Ben-Kiki,

We represent Health Alliance Plan of Michigan ("HAP") in certain intellectual property matters.

HAP owns registered and unregistered trademark rights in the name HAP in connection with a variety of goods and services in the health care field. This includes two incontestable U.S. trademark registrations for the mark HAP (word and design) for health care in the nature of health maintenance organizations, insurance underwriting in the field of health, and administration of health care plans. See U.S. Reg. Nos. 3315932 and 3322635, excerpts from USPTO website attached. HAP's word mark registration in Reg. No. 3315932 is for the standard character word mark "HAP" and the registration is not limited to a specific stylization, font, or color. HAP's design registration in Reg. No. 3322635 is for the lowercase letters "hap" inside an orange oval and the colors orange and white are claimed as a feature of the mark shown below.

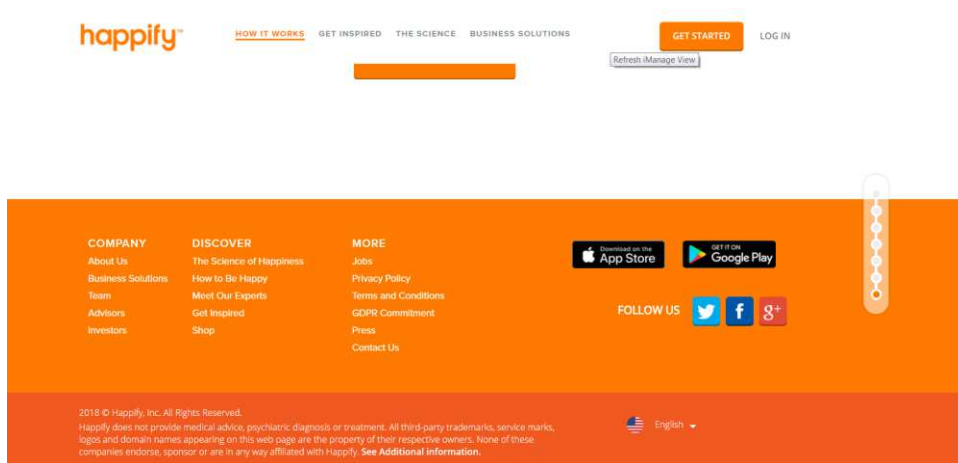


See the attached for a full list of HAP's HAP and HAP-formative US trademark registrations. Further, you can find HAP's use of the name HAP in connection with its goods and services on its website at www.hap.org. As you can see on www.hap.org, the color orange is a prominent element of HAP's trademark and trade dress. See a sample screenshot from its website here:



HAP first used the HAP name, and the color orange in its trade dress, in connection with health care services at least as early as 1979. As shown on the attached list, HAP has a family of HAP marks in the health care field. HAP has invested enormous resources in the HAP brand and name, and the mark represents tremendous goodwill to HAP. Given this longtime use of various HAP marks, with the color orange, the public has come to recognize the HAP mark with the color orange as uniquely and unmistakably pointing to HAP's identity and persona.

HAP recently learned that Happify Inc. is using and has registered the marks HAPPIFY and HAPPIFY HEALTH in connection with health and wellness-related goods and services. See US Reg. Nos. 4475643, 5546023, and 5565951, copies of USPTO TESS Records attached. You are operating a website for health and wellness-related goods and services at www.happify.com, which displays the name "HAPPIFY" in lowercase letters in the color orange with an overall orange color theme. Excerpts from the website are attached and a sample screenshot is below.



Further, your use of HAPPIFY in lowercase lettering and the color orange was seen at The Michigan Association of Health Plans 33rd Annual Summer Conference from July 18 – 21, 2018, "Enhancing the Consumer's Journey" at the Grand Traverse Resort in Acme, MI. This is further evidence of your use of the confusingly similar name for the same and related goods and services in the same market and channels of trade and to the same consumers as my client. See attached picture evidence and image below.



Below and attached are sample pictures of my client's HAP booths at various healthcare-related conferences and events.





As you can see, your use of HAPPIFY and HAPPIFY HEALTH appears to be a blatant infringement of my client's trademark and trade dress. The name HAPPIFY incorporates the registered HAP mark in its entirety and uses the suffix "IFY" to create a verb meaning "to become, be made" into HAP. Thus, the term HAPPIFY could be viewed as a verb form of my client's name HAP – for example, to "Happify" is to become a client of "HAP." Further, you are using the name HAPPIFY in virtually identical lower-case orange lettering with an overall orange color theme. Your use of this confusingly similar name is in connection with the same and/or related health-related goods and services as my client. This suggests a connection, association or affiliation with HAP, which does not exist. See the attached evidence of this use from www.happify.com.

Happify also is affiliated with Cigna, a global health service company, which further suggests that Happify's goods and services are related to HAP's goods and services, and that they travel in the same channels of trade. Moreover, Happify is using HAPPIFY in connection with scientific research and development in connection with healthcare at some of the same universities where HAP is conducting healthcare research and development. See attached evidence of this use.

HAP believes that Happify's use and registration of the marks HAPPIFY and HAPPIFY HEALTH for health and wellness-related goods and services in this manner is likely to cause confusion, mistake, or deception among consumers, and/or is likely to lead to the mistaken belief that Happify is somehow affiliated with, endorsed by, or authorized by HAP. Such use constitutes trademark infringement under 15 U.S.C. Secs. 1114 and 1125(a), Sections 32 and 43(a) of the Lanham Act. Further, Happify's mark is a close approximation of HAP's identity or persona, such that when Happify's mark is used in connection with its health and wellness-related goods and services, a connection with HAP would be assumed.

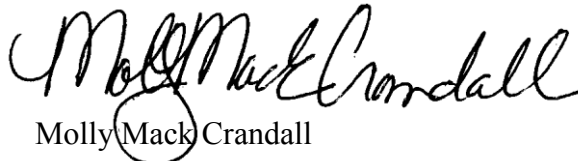
As such, HAP requests that you immediately:

1. Cease and desist any and all use of the name HAPPIFY (and/or any confusingly similar name, including any name containing HAP and/or HAP), including (without limitation) in your business name, domain name, on the internet, on your website, on any and all social media platforms, and in any advertising, signage, banners, promotional materials, booths for conferences and events, and business documents and forms;
2. Voluntarily expressly cancel US Reg. Nos. 4475643, 5546023, and 5565951, and agree not to use, register, or seek to register any HAP, HAP, and/or HAP-formative marks, including but not limited to HAPPIFY and HAPPIFY HEALTH in connection with any healthcare-related goods and services in the future;
3. Transfer ownership of the Domain Name www.happify.com to HAP, which you may do by unlocking the domain and providing me with the transfer authorization code;
4. Acknowledge my client's rights in the HAP mark, and stop giving the false impression that you are connected with, affiliated with, licensed by, and/or authorized by HAP; and
5. Agree to refrain from further infringements in the future.

We request a written response on or before December 21, 2018. You may contact me at mcrandall@brookskushman.com. Nothing in this letter is intended to waive any rights, remedies, defenses, claims, or causes of action of HAP, all of which are expressly reserved.

Very truly yours,

BROOKS KUSHMAN P.C.


Molly Mack Crandall

Attachments

EXHIBIT B

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New Habits

How you feel matters! Whether you're feeling sad, anxious, or stressed, Happify brings you effective tools and programs to help you take control of your feelings and thoughts.

Our proven techniques are developed by

[Skip to main content](#)

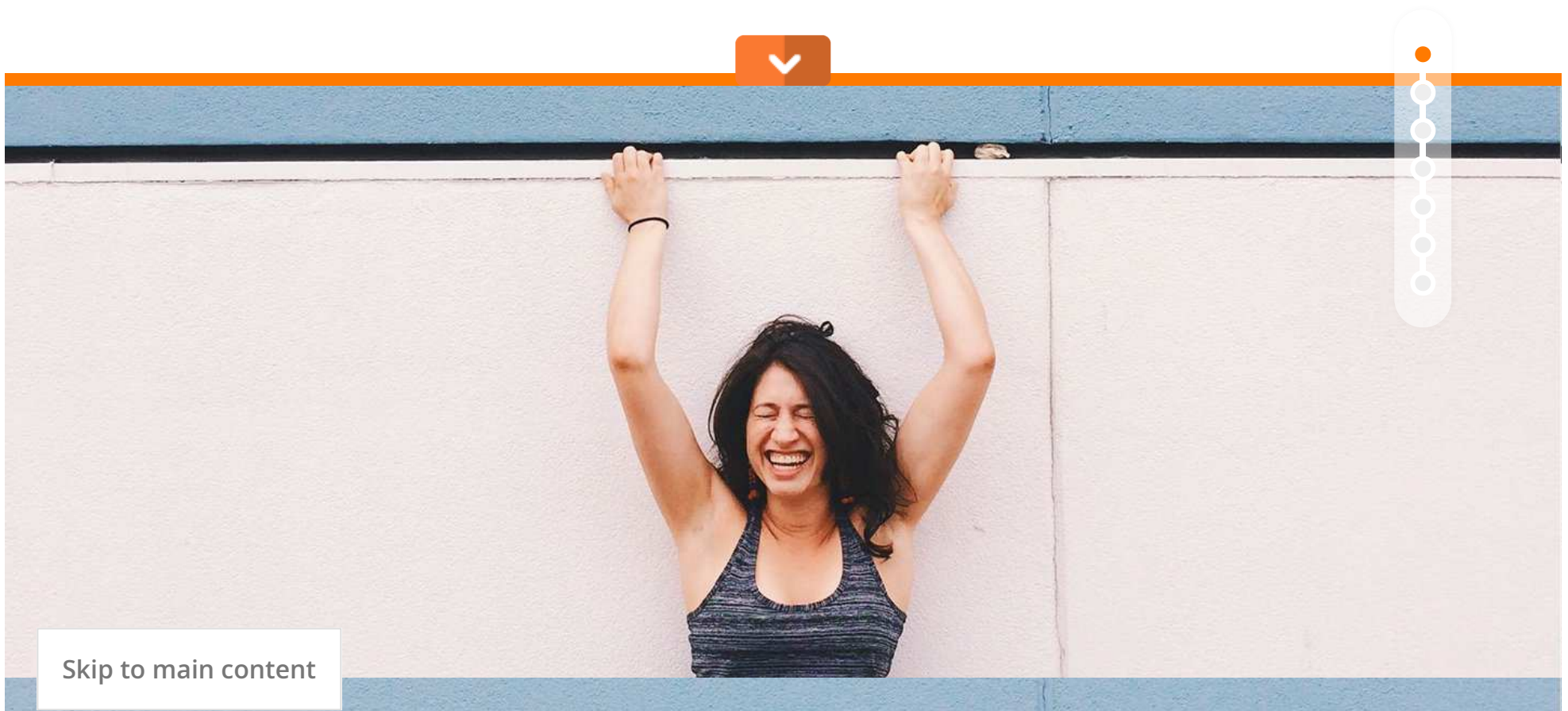




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in the fields of
positive psychology,
mindfulness, and
cognitive behavioral
therapy for decades.



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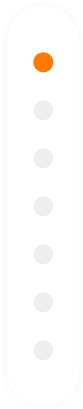
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you need to make the changes you want. It takes some work, but you'll be surprised at how soon you'll start feeling a positive change. Our easy, effective exercises give you no excuses for not participating!





Fits into Your Life. And

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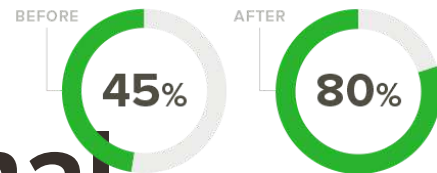
Our engaging activities and games can be used anytime, anywhere on your smartphone, tablet or computer. Small slices of time can make big-time changes.

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POSITIVE EMOTIONS



86% OF FREQUENT USERS GET HAPPIER IN 2 MONTHS

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happiness score and start improving it today.

These results come directly from people who are experiencing the same issues as you. Complete a few activities each week to start seeing meaningful improvement in your life satisfaction and your ability to fight back against negativity. Millions of Happify members have experienced this shift. So can you.

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User Testimonials

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"I've learned to

Stress? Bring it on! Happify gave me the tools I need to keep a handle on my core values, a

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The Science

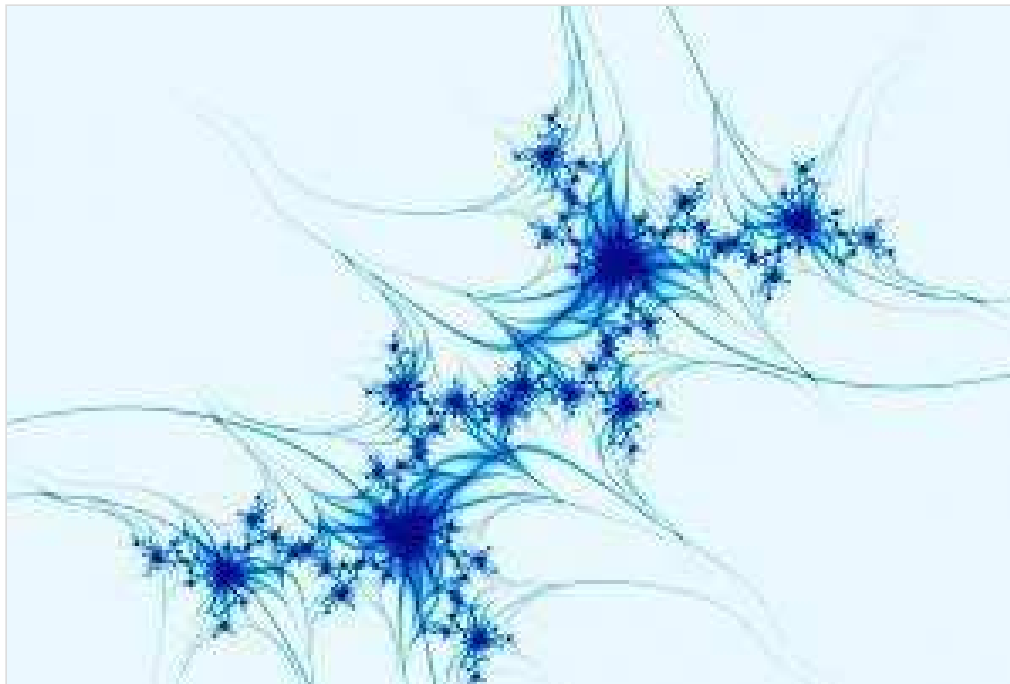
The most important findings from the latest research on positive psychology, CBT, and mindfulness. All in one place, for the first time.

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What *is* happiness and what is it not? People have agonized over this question for centuries, but only recently has science begun to weigh in on the debate.

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Positive psychology is often referred to as the science of happiness, or the study of what makes humans flourish. Learn how it can change your life.

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What's the key to lasting happiness? A decade's worth of research has confirmed that you can practice certain skills that will increase your happiness in life.

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EXHIBIT C



ABOUT

The Innovator news

Connecting Business with Technology

NOTE FROM THE EDITOR

The Innovator is a global publication about digital transformation

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Simon Luling

EXHIBIT D

Startup Of The Week: Happify



Chris O'Brien

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May 19, 2019 · 4 min read



Happify Co-Founder and President Ofer Leidner

Happify has developed a platform that combines the latest science on treating depression and anxiety with the underlying mechanisms of basic video games to create a self-care service. Via its own app and partners such as Humana, Cigna and drug maker Sanofi, Happify offers science-based activities and games that focus on resilience and mindfulness.

The startup's services are the latest example of how as digital tools are intersecting with traditional medicine and therapies to create treatments that can potentially reach more people by being more effective and less expensive.

When you can deliver targeted, personalized therapy, that's a new frontier, says Happify Co-Founder and President Ofer Leidner, who attended the Viva Technology conference March 16-18.

Happify's platform starts by asking users a series of questions to evaluate their state of mind. It can offer to establish goals that promote positive mindsets such as gaining more confidence. Users then play simple games, or quizzes, or participate in activities that requires just a few minutes. By regularly reinforcing positive thinking, the idea is to turn a positive mindset into a daily habit, Leidner says.



The story of Happify began with a casual gaming company founded by essentially the same team. In 2003, they founded Oberon Media, which made basic games like FreeCell, Hearts, and Solitaire for companies like Microsoft or Acer to include on their devices or operating systems. While such games can seem rudimentary, they involve a series of mechanics and game play designed to essentially become addictive, Leidner says.

The games collectively were generating 21 billion hours of game play a year and had over 60 million players. Those are ridiculously outstanding stats, Leidner says. But what they had done was optimize the platform for addiction. And that led us to think: Is there a different way we can master this and get people addicted to doing things that are healthier and to taking better care of themselves?

founders Tomer Ben-Kiki and And Parsons, decided to start over by applying those behavioral lessons to create Happify. The team began looking at the potential to address mental health issues, and the need and opportunity quickly became clear. About 70% of people suffering mental health issues such as depression or anxiety go undiagnosed or untreated, Leidner says. There's a global need, she says. And technology has a role to play here.

The founders brought in a group of eight designers and researchers to build the service. Happify launched two years later, starting initially as a consumer wellness app, downloadable from places such as the Google Play store and Apple app store. Progress was steady, but the team ultimately decided it could gain a larger market by shifting to a B2B model, Leidner says. That strategy, launched in 2017, now follows two tracks.

The first involves offering Happify as a third-party service to companies or health care organizations under the label of a self-care solution. Companies can offer the service, for instance, via their human relations portal. We want to make the service available and remove the stigma around mental health, Leidner says.

Happify also began working with health care providers. For instance, in 2017 the company signed a deal with Humana, one of the United States' leading health and well-being companies. Under the partnership, Humana provides Happify's platform to patients with chronic conditions. The idea is that improved emotional and mental health can lead to better physical outcomes for people undergoing treatments for critical illnesses. Late last year, Happify signed a wide-ranging deal with insurance giant Cigna, which has been expanding its use of digital tools and apps.

At Viva Tech, French pharmaceutical giant Sanofi announced a partnership with Happify to study how its platform might be used to help patients with depression and multiple sclerosis.

The next step is for Happify to gain the approval of the U.S. Food and Drug Administration under the category of software as a Medical Device. The FDA created a series of regulations a couple of years ago designed to facilitate the development and approval of new types of digital treatments. For instance, in 2017 it approved the first microchip to be placed on a pill, a system developed by Proteus. Indeed, European drug

tune the product, Leidner says.

We're very excited about the mission of this company, Leidner says. This is one of the best places to be in tech.

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TODAY

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Created with Leading Experts

The science of happiness is as real, substantiated, and evidence-citing as other areas of science that are changing our lives for the better. Our tracks were created with the best and brightest minds—experts, researchers, scientists, and practitioners—who are passionate about improving people's lives.



Barbara Fredrickson, Ph.D.
Positive Emotions
Scientist &
Author of *Love 2.0*



Sonja Lyubomirski, Ph.D.
Positive Psychologist &
Author of *The How of Happiness*



Shaoh Achior
Author of
The Happiness Advantage



Acacia Parks, Ph.D.
Positive Psychology
Researcher



Rick Hanson, Ph.D.
Neuroscientist &
Author of *Hardwiring Happiness*



Derrick Carpenter, MAPP
Positive Psychology
Coach



Kabena Blankson, M.D.
Doctor and Medical
Consultant



John Gottman, Ph.D.
Marriage Researcher
& Author of
The Seven Principles for Making Marriage



Sharon Salzberg
Meditation Teacher &
Author of
Real Happiness



Roberta Lee, M.D.
Author of
The Superstress Solution



Scientifically Designed

Happify's activities and games are based on breakthrough research from leading academic institutions. Our program is

designed to train people to disrupt patterns of negative thinking, manage stress, and build skills to overcome life challenges.

**STOP NEGATIVE
THOUGHTS**

**REDUCE STRESS
AND ANXIETY**

**BUILD OPTIMISM
AND MINDFULNESS**

**GAIN CONFIDENCE
AND SELF-ESTEEM**



Fits into Your Life. And Transforms It.

Our cheerful games and activities are effective. And they can be accessed anytime, anywhere on your smart phone, tablet or computer. Small slices of time can make big-time changes.



Who You'll Love Happify



Vivian P.

Kuala Lumpur, Malaysia

"I'm more motivated and productive"

The skills that I have learned on Happify have helped me deal with challenges in a different way. I also feel more motivated in my work, and I am thinking in a more positive way, which has increased my confidence.

Stress Less. Enjoy Life More.

[START MY JOURNEY](#)

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EXHIBIT J

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Our highest priority is to provide you with an amazing user experience while protecting your privacy. At the same time, we make part of our content free because we believe it's important to make it available to everyone. Charging a premium for full access allows us to do both—while remaining 100% ad-free.


FEATURES	GUESTS	HAPPIFY PLUS
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Your Character Strengths	✓ Top 3 strengths	✓ Top 5 strengths & full 20-page report
Guided Meditations	20+	300+
Unlimited access to activities & games outside your track		✓
Support and feedback from the Happify Community	✓	✓
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"Happify is perhaps the most sophisticated positive vibes app available now."
– Kit Eaton, *New York Times*

"It's a happiness app based on science."
– Katie Couric, *Yahoo World 3.0*



"I gave it a shot for 5 weeks...it works!"
– Mara Schiavocampo, *ABC World News*

"The most positive app I've used! Life coach, therapist, and motivational community all in one."
– Mario Armstrong, *TODAY Show*



"“I've learned to reframe my negative thoughts.”"

"Stress? Bring it on! Happify gave me the tools I need to keep a handle on my work stress. I've learned to reframe my negative thoughts, focus on my core values, and be grateful for the small stuff!"

– Lori N.



"Happify gives me perspective"

"Happify has given me perspective on what has the biggest impact on happiness. It makes it easy to reflect on the great people and parts of your life."

– Pierre E.



"Helped me change my outlook on life"

"The biggest thing I've learned is how to change my outlook, especially when it comes to stressful experiences. When I started, I was a total pessimist. Now I've learned how to look for and find the possibility of good in negative situations. It's been both empowering and calming."

– Angela W.