

Wellness Target Form

The deadline to upload your wellness form into Workday is October 28th, 2024

-Participant to complete-

I, _____, authorize my Doctor to complete this
(Employee or Retirees Name - Please Print)
form and I am responsible for returning this form to Human Resources.

Name of Physician: _____
(Please Print)

-Physician to complete-

The wellness incentive is no longer outcome based. If the patient has been checked for the wellness targets listed on page 3, **please check the box below**. They City doesn't require the number of targets that were achieved as it is no longer outcome based.

Pass- My patient completed the biometric screening which includes the blood draw or a fingerstick and I have discussed the outcome of the targets with the patient.

Physician Signature: _____
By my signature I certify the screening results.

Federal Tax Id #: _____

Date: _____

It is the responsibility of the patient to upload this form into Workday by October 28th, 2024, to receive the wellness credit for next year.

How do I upload my Wellness form into Workday?

1. Navigate to "Requests" app
2. Select "Create Request"
3. Select "**Wellness Incentive Program Completion**" for Request Type, then select "Okay"
4. On the next screen, answer required question and attach form, then select "**Submit**"

**Do not send test results or the reverse side of this form*

Late submittals cannot be accepted – no exceptions



To: Doctor's Office

The City of Sarasota's 2024 benefit program includes wellness incentives for an employee or a retiree only. These incentives are based on completion of this form.

Four of the measures can be determined by a lab draw and the other two measures can be determined by an office visit.

Once a total of the measurements is completed on the form below, please complete the reverse side of this form **and return it directly to the patient**. Please contact the Human Resources office at 941-263-6333 if you have any questions on this program or this form.

Wellness Targets

Measurement	Targets	Achieved	Not Achieved
<u>Weight Measurement</u> a. Waist Circumference OR b. Body Mass Index	Men - 40" or less Women - 35" or less 25 or Less		
Tobacco Use	No Use Detected		
Blood Sugar	Less than 100 mg/dl		
Triglycerides	150 mg/dl or less		
Blood Pressure	Systolic-130 or less Diastolic-85 or less		
Total Cholesterol	200 mg/dl or less OR Cholesterol/HDL ratio of 4 or less		
	Total Achieved:		

Members may achieve any or all targets to receive the wellness incentive.

Wellness Forms need to be completed and uploaded into Workday by October 28th, 2024

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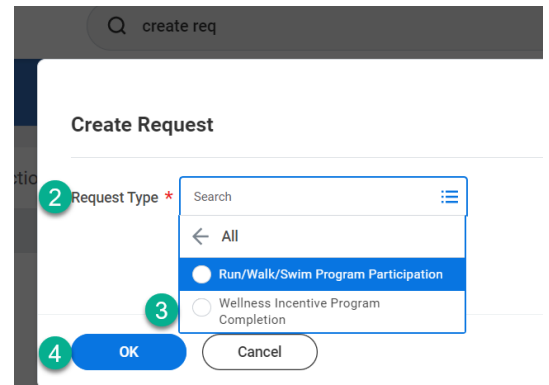
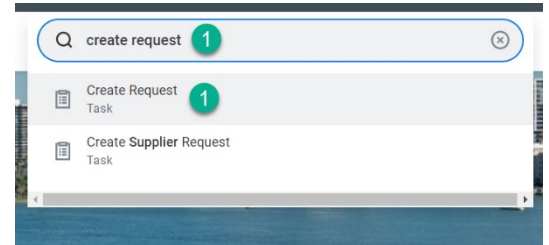
HOW TO

Submit Wellness Form *Instructions for Employee*



Complete Create Request task.

1. In the **Search Bar**, type **Create Request** and click the **Task** from the drop down.
 - a. If you click enter on your Keyboard, click the Create Request task in the new screen.
2. In the **Pop Up window**, click into **Request Type** .
3. Select **Wellness Incentive Program Completion**.
4. Click **Ok**.
5. Review the information about the program.
6. **Answer the question** accordingly.
7. If you answer yes, you will have an **attachment field** pop up.
8. **Upload** your signed Physician Form.
9. Click **Submit**.
10. Your form will route to Benefits for review.
11. If there are any issues with what you submitted, Benefits will be in contact.



Wellness Incentive Program Completion

5 Submit your Wellness Incentive Program information to Benefits. Your lump sum payout will be paid to your HRA or HSA Account and will be depend on the following coverage amounts:

- Single Coverage: \$200/year
- Plus One Coverage: \$300/year
- Family Coverage: \$500/year

***Please do not enter your name in the "Submit of behalf of" box.

6 Have you met all the criteria for completion of the wellness program? (Required)

Yes
 No

7 A signed Physician Form is required for proof of completion. Please upload the signed Physician Form here. (Required)

Drop files here
or
8 Select files

9 Submit Save for Later Cancel

