



2020 Annual Wellness Exam Incentive Program

Dear: Healthcare Provider / Participant: *The City of Billings health insurance plan is promoting a voluntary wellness exam incentive for employees and spouses (if applicable) on our medical plan.*

PARTICIPANT Acknowledgment, section: I will complete this entire section, read the FAQ's and take this form to my appointment to present to my provider to sign the confirmation and return to me at that time. I will keep the original for my records and either will email a copy to LinternL@billingsmt.gov , if I want confirmation of receipt -OR- will get a copy to Human Resources.

Participant's name (printed): _____ Phone #: _____

Yes, I am a spouse on the City medical plan as a dependent of employee name: _____.

Department of employee: _____ Date of WELLNESS EXAM: _____

EBMS ID card number (for tracking): _ _ _ _ -- _ _ -- _ _ _ _ _

FAQ on this program

Q. What is an Annual Wellness Exam?

A. An Annual Wellness Exam is primarily focused on preventive care, health screening and wellness planning. It gives you an opportunity to have a conversation with your Healthcare Provider about your health status, goals and then create a plan to help you meet those goals and maximize your well-being. Your Healthcare Provider will determine what preventive care you need based on your age and gender. When scheduling your appointment, state it is for an "annual wellness exam". A healthcare provider means a Doctor of Medicine (M.D.), Doctor of Osteopathy (D.O.), Naturopathic Doctor (N.D.), OBGYN, Physician Assistant (PA), and Family Nurse Practitioner (FNP).

Q. Why did the city rename the program for 2020?

A. This incentive program is for an annual wellness exam with your primary Healthcare Provider to examine your overall wellness. This incentive is not just to get, for example, flu immunization, mammogram or colonoscopy annually.

Q. How will claims process?

A. The city is incenting you to have an annual wellness exam with your primary Healthcare Provider, the claims associated will process according to your city medical insurance plan and how your Healthcare Provider codes those claims.

Q. Who is eligible for this incentive program?

A. Active Employee and spouse (if applicable) enrolled in the City of Billings medical plan. This program does not apply to Retirees or COBRA participants.

Q. What is required to receive the \$100 gift card incentive and how are they processed?

A. It is the participant's responsibility to take this form to your exam and have your provider confirm at that time. **Keep your original completed form for your records and email a copy to: LinternL@billingsmt.gov** I will respond to the email confirming receipt of the form. You can also interoffice a copy or drop one off to HR. The form is available on the city website under Human Resources, Forms and Resources. All gift cards are processed quarterly, is always issued to the employee, and is subject to fringe benefit payroll taxes. For example, typically 1st quarter gift cards will be issued by the end of April.

The validity of the provider's signature and exam date may be verified for authenticity. Intentional falsification of information will be subject to disciplinary action consistent with employee guidelines up to and including termination of employment.

HEALTHCARE PROVIDER Confirmation, section: Please complete this section as confirmation that the patient listed above had their annual *Wellness Exam for 2020* and return the form to the patient at the time of the appointment:

Healthcare Provider's Name (Printed): _____

Healthcare Provider's Practice: _____ Practice Phone #: _____

Healthcare Provider's Signature: _____ Today's date: _____

HR only: Incentive issued with payday: ____/____/____