



San Diego Transit IBEW Local 465
HEALTH & WELFARE SECURITY FUND

Health Risk Assessment Incentive Program

Begin *your route to healthy living* by completing an online Health Risk Assessment questionnaire with your medical provider and receive \$50. The Health Risk Assessment questionnaire can only be submitted for reimbursement from the Trust Fund once every two years. Responses are confidential and can only be viewed by your health care providers.

How to Qualify for Reimbursement

1. Create a login on Kaiser’s website.
2. Complete the online Health Risk Assessment questionnaire and print proof of completion between March 1, 2018 and February 28, 2019.
3. Return proof of completion to the Trust Fund Administrator with this completed form on or before March 31, 2019.

-----*Section to be completed by Employee*-----

IBEW 465 Reimbursement Amount: _____

Program _____

Dependent Name (if applicable) _____

Employee Name _____ Employee ID# _____

I certify the request for reimbursement complies with the entire reimbursement program Rules, Terms and Conditions on the reverse side of this form.

Employee Signature _____ Date _____

Trust Fund Wellness Coordinator _____	Date _____
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Resources to Complete your Health Assessment:

Kaiser Permanente kp.org

- Create a username and password – or login if already created
 - You will now be on your personal homepage
- Place your cursor on “Health & wellness (top of page) and select “Programs & classes”
 - Under “Total Health Assessment” (left side of screen)
 - Click on “Take a Total Health Assessment”
 - Click on “Start a Total Health Assessment Now” (middle of screen)
 - Complete Assessment
 - When done, print out the proof of completion

Rules, Terms and Conditions:

- The Health Risk Assessment can only be submitted for reimbursement from the Trust Fund once every two years.
- Employee and/or eligible dependent(s) qualify to receive \$50 from the Trust Fund once every two years for submitting a Health Risk Assessment.
- Employee and/or dependent(s) must be enrolled in health insurance through the Trust (Kaiser) to qualify for reimbursement.
- Employee must be actively employed when the reimbursement from the Trust Fund is processed to qualify.
- Maximum reimbursement from the Trust Fund is \$50.
- Requests must be accompanied by proof of online health risk assessment.
- All forms must be submitted on or before March 31, 2019.
- Please do not submit medical or otherwise confidential information along with your reimbursement request.
- Reimbursements are made directly from the Trust Fund. Reimbursements will be processed as quickly as possible and reimbursement checks will be distributed to employee.
- Please note, any monies received by you through the wellness program are taxable. If you have any questions, you should consult your tax advisor.