

# Employee Health Clinic

The Wayne County Employee Health Clinic opened in August 2019 to help make acute and preventative care more available and affordable. The Wayne County Employee Health Clinic has partnered with Everside Health, the leading provider of onsite health clinics, workplace wellness programs, and health management solutions for companies and their employees. Everside Health acts as a third party to manage the Wayne County Employee Health Clinic, providing a Nurse Practitioner.

## Goals of the Wayne County Employee Health Clinic:

- Help make acute and preventive care more available and more affordable.
- Early detection of potential health risks to improve quality of life.
- Engage employees, spouses and dependents on the health plan in health promotion, prevention and health risk management activities, resulting in a healthier population.
- Lower the cost of primary care with an on-site Nurse Practitioner.
- Assist in the reduction of healthcare cost you pay and Wayne County pays each year.

## Why Participate?

- **BE HEALTHIER** – Easily access Primary Care services to improve your health.
- **LIVE LONGER** – Engaging in health promotion, disease prevention and health risk management activities can increase life expectancy and quality of life.
- **SAVE MONEY** – PREVENTIVE VISITS ARE FREE. Non-preventive visits are \$20 for those on the High Deductible plan and FREE for those on the PPO plan. Medications carried in stock are FREE for the first 30-day supply through the clinic. The cost to see the Wellness Nurse is FREE.
- **SAVE TIME** – Pre-scheduled appointments to eliminate long waits.

Employees, spouses and dependents aged 2+ currently on the Wayne County Health plan may access the Wayne County Employee Health Clinic.

**Scope of Services: Case management, colds/flu/strep throat, disease management, dispensation of certain medications at the point of care, first aid, flu shots, health programs, lab work, phlebotomy services, physicals, referrals to PCPs and specialists, screenings, sinus infections, stress management, tobacco cessation, UTIs, weight loss, and wellness initiatives.**

The Wayne County Employee Health Clinic is staffed with a Nurse Practitioner (NP) and Registered Nurse (RN). The NP is licensed in the State of Ohio to diagnose, treat and prescribe/dispense medications. Misty White, RN and Wellness Nurse, will continue to be available to take your vitals, draw blood, act as a case manager, and assist the NP.

If you have a Primary Care Physician (PCP), you are encouraged to maintain your relationship with him/her. The Wayne County Employee Health Clinic coordinates care and shares results with your PCP, with your permission. You can use the Wayne County Employee Health Clinic for lab services at a lower cost.

The Wayne County Employee Health Clinic will be able to dispense certain medications at the point of care. These medications MUST be prescribed by the NP during a visit. The dispensary cannot fill prescriptions from outside providers. Formulary includes top utilized medications and the medications used most commonly for diagnosis in a Primary Care Office. NARCOTICS OR CONTROLLED SUBSTANCES WILL NOT BE STOCKED. If the NP cannot supply the medication you need, she will write a prescription for you to take to your pharmacy and you will be billed at rates through the Health Plan.

You may schedule an appointment with the NP for a sick and/or preventive service or with the Wellness Nurse/RN for wellness services, Know Your Numbers and lab draws. Schedule with the NP when you feel sick or are ready for your annual and preventative exams. Schedule with the Wellness Nurse to have labs done, participate in the Know Your Numbers program or any other Wayne County Wellness Service.

### **Scheduling Instructions**

To schedule with the Nurse Practitioner or Wellness Nurse:

1. Call the Wayne County Employee Health Clinic at 330-287-5487
2. Email the Wayne County Employee Health Clinic at [clinic1@wayneohio.org](mailto:clinic1@wayneohio.org)
3. Use your online patient portal to schedule with the Nurse Practitioner after your first clinic appointment

### **Location and Hours of Operation**

428 W. Liberty Street, Wooster, OH 44691 on the Main Floor of the Administration Building

### **NP Hours**

Monday - 7 a.m. to 11:30 a.m., 12 p.m. to 2:30 p.m.

Wednesday - 7 a.m. to 11:30 a.m., 12 p.m. to 2:30 p.m.

Friday - 7 a.m. to 10:30 a.m.

### **Wellness Nurse/RN Hours\***

Monday - 7 a.m. to 3 p.m.

Tuesday - 7 a.m. to 3 p.m.

Wednesday - 7 a.m. to 3 p.m.

Thursday - 7 a.m. to 3 p.m.\*\*

Friday - 7 a.m. to 3 p.m.

***\*Wellness Nurse will be available for blood draws from 7 a.m. to 1 p.m. on Monday/Wednesday/Friday\****

***\*\*Please note the Wellness Nurse does normally work one day a week remote - she is available via the clinic phone during those times.***

# Consumer Incentive (High-Deductible Plan)

This Consumer Incentive has been set up as an incentive for taking steps to either maintain or obtain a healthy lifestyle. Taking healthy actions and becoming a better consumer of your healthcare has its rewards.

Qualifying individuals who choose the Wayne County High-Deductible Health Plan will get \$400(single)/\$800(family) deposited into a Health Savings Account (HSA). In addition, you will also have the opportunity to earn *extra* dollars into your designated HSA\*\* through wellness incentives. COBRA members on the high-deductible plan are not eligible for employer HSA cash contributions or wellness incentives. *Example (single): You are on the plan January 1 but leave on April 30. The last deposit made to your account would be the money you earned from the March Wellness Incentives plus \$33.34 for your April cash contribution.*

To earn *additional* dollars, you will need to meet with the Wellness Nurse four (4) times per year and perform various tests. Passage of these tests will place dollars into your HSA! The \$500(single)/\$1,000 (family) Wellness Incentive is earned quarterly and paid quarterly following the end of the month of the quarterly incentive opportunity (i.e. Wellness Incentive opportunity will be March, June, September and December).

Below is a breakdown of these tests:

Wellness Incentives	Requirement	Reward	Quarter Tested
Waist Measurement	Women $\leq 35$ ; Men $\leq 40$	\$25.00	Quarter 1, 2, 3, 4
Blood Pressure	$\leq 130/85$	\$25.00	Quarter 1, 2, 3, 4
LDL	$\leq 99$	\$50.00	Quarter 1*, 3*
Blood Sugar	Fasting $\leq 99$	\$50.00	Quarter 1*, 3*
Urine Tobacco	Negative test <i>If negative 1<sup>st</sup> quarter, you may sign a waiver for second quarter test.</i>	\$50.00	Quarter 1, 3

\*If your first lab values are within normal range, we will use the numbers from those labs and you will not need them drawn again until the next draw year which runs on a 3-year cycle. If the blood sugar or LDL is out of normal range, you will still have the opportunity on the draw quarters to have the test that was out of range redrawn for free. If your doctor needs labs, provide us with a copy of the order, and we will draw what your doctor orders. (You will have a \$20 copay for labs from your doctor).

### **Important Things to Know:**

Once you have opened a Health Savings Account (HSA) at the bank of your choice, notify your Payroll Department of your account number, and they will begin depositing directly into this HSA account. You may also request a debit card from your bank. This account can only be used for health reasons, such as doctor's appointments, prescriptions, etc.

The Wellness Nurse will send quarterly reminder letters the month prior to the Wellness Incentive to all eligible plan members.

In the event a member/spouse would become pregnant during the benefit year, the last BMI and the last lipid (LDL) numbers will be used to determine the reward amount. The blood pressure, blood sugar, and urine test will still be done and subject to the reward requirements as per current policy. However, due to the lipid panel not being accurate during pregnancy and the BMI also not being validated, we will use the numbers from the last quarter the BMI and lipids were obtained prior to the pregnancy, and they will be used to justify the reward and or lack of reward due to requirements. If the member/spouse has not been tested in the last year or is new to the program, he/she will not be eligible for the lipid (LDL) or BMI rewards until after the pregnancy.

*\*\*The annual contribution must be deposited into an HSA account. However, earned dollars may go into an HSA account – or an account other than an HSA. Please keep in mind that any account other than an HSA will be subject to tax.*

### **Questions?**

Contact the Wellness Nurse at [330-287-5487](tel:330-287-5487) or [wellnessnurse@wayneohio.org](mailto:wellnessnurse@wayneohio.org).

*Updated 12/30/23*

# Health First Wellness Incentive (Low-Ded Plan)

The Health First Wellness Incentive has been set up as a reward for taking steps to either maintain or obtain a healthy lifestyle. Taking healthy actions and becoming a better consumer of your healthcare has its rewards.

When you complete five (5) wellness incentive activities and update your HRA before November 15th, you will be eligible to earn the Wellness Incentive of lower co-pays, lower deductibles and lower co-insurance for the next year.

## **Are You New To The Insurance Plan?**

If you are new to the insurance plan, you must complete your HRA within the first thirty (30) days of being insured in order to earn the Health First Wellness Incentive for the current year. In order to do this, you must have current lipid panel numbers, blood sugar number, and your current blood pressure reading. If you already had these done by your healthcare provider, you may use those numbers – but you will need to provide those numbers to the Wellness Nurse for verification. It is your responsibility to contact the Wellness Nurse to perform this necessary testing, which is free of charge.

If you are an employee that is pregnant when joining the plan or is joining the plan due to the qualifying event of giving birth, you must complete the HRA within the first thirty (30) days of joining the plan and schedule a blood draw for 4-6 weeks after the baby's birth. After the blood draw is done and your HRA has been completed, your plan will be changed to the incentive plan effective the date that your HRA was completed.

The Wellness Incentive is always earned one year ahead, so if you wish to be eligible for the incentives in the next year, you will need to earn points based on your first day of being insured (see dates below). Keep in mind that the Wellness Incentive is always optional; you may choose to not participate in the current year (by not completing your HRA in the first 30 days), but may choose to earn incentive points and complete the HRA for the next calendar year. Without the Wellness Incentive, you will be on the Base Plan Without Incentive and will pay higher co-pays, higher deductibles and higher co-insurance.

## **Follow this chart in order to be eligible for the incentive:**



- November 16 through June 30 – Five (5) wellness points\*
- July 1 through August 31- Three (3) wellness points\*
- September 1 through September 30 – Two (2) wellness points\*
- October 1 through November 15 – Zero (0) wellness points\*

**\*In addition to the above points which must be earned, you must also submit verified labs and complete/update your HRA by the November 15th deadline.**

	Plan Start Date			
	Jan 1 – June 30	July 1 – Aug 31	Sept 1 - 30	Oct 1 – Dec 31
<b>First 30 Days</b> <i>Earns for current calendar year</i>	<b>Appointment:</b> Get verified labs at the Health Clinic <b>HRA:</b> Complete a Health Risk Assessment using your labs	<b>Appointment:</b> Get verified labs at the Health Clinic <b>HRA:</b> Complete a Health Risk Assessment using your labs	<b>Appointment:</b> Get verified labs at the Health Clinic <b>HRA:</b> Complete a Health Risk Assessment using your labs	<b>Appointment:</b> Get verified labs at the Health Clinic <b>HRA:</b> Complete a Health Risk Assessment using your labs
<b>By Nov 15<sup>th</sup> of current year</b> <i>Earns for next calendar year's insurance</i>	<b>5 Wellness Points Verified Labs:</b> Complete draw or have on file at the Health Clinic <b>HRA:</b> Complete or update your Health Risk Assessment	<b>3 Wellness Points Verified Labs:</b> Complete draw or have on file at the Health Clinic <b>HRA:</b> Complete or update your Health Risk Assessment	<b>2 Wellness Points Verified Labs:</b> Complete draw or have on file at the Health Clinic <b>HRA:</b> Complete or update your Health Risk Assessment	<b>0 Wellness Points</b> Must have completed requirements for First 30 days.
<b>Nov 16<sup>th</sup> - Nov 15<sup>th</sup> every year</b> <i>Earns for each following calendar year</i>	<b>5 Wellness Points Verified Labs:</b> Complete draw or have on file at the Health Clinic <b>HRA:</b> Complete or update your Health Risk Assessment	<b>5 Wellness Points Verified Labs:</b> Complete draw or have on file at the Health Clinic <b>HRA:</b> Complete or update your Health Risk Assessment	<b>5 Wellness Points Verified Labs:</b> Complete draw or have on file at the Health Clinic <b>HRA:</b> Complete or update your Health Risk Assessment	<b>5 Wellness Points Verified Labs:</b> Complete draw or have on file at the Health Clinic <b>HRA:</b> Complete or update your Health Risk Assessment

### Yearly Incentive Opportunity

Every year after this, you must earn the full five (5) points, in addition to completing/updating your HRA!

Remember, we work one year ahead on points, so even if you do not have to earn points for the first full year of being an eligible member on the plan, you will need to earn points for the second year (if you want the incentive).

Points are earned between November 16th of one year and November 15th of the next year. For example, in order to be eligible for the incentive in the calendar year of 2025, you need to earn your five (5) points and update your HRA between November 16, 2023 and November 15, 2024.

## **How to Earn Incentive Points**

Please refer to the wellness point chart for the specific requirements and limitations for each point. Below is a general listing of point options you may qualify for:

### **Preventative Health Check-Ups**

Log on to the wellness website for the appropriate forms you'll need to take to your appointment:

- Routine physical exam
- Certain cancer screenings (based on age)
- One (1) Dental check-ups in 365 days
- Eye exam
- Flu shot
- And MORE!

### **Exercise**

Join a league sport, take exercise or dance class, or simply log your daily activities – each will earn you wellness points!

### **Weight Management**

Programs throughout the year with the Wellness Nurse or provided by your healthcare provider may qualify.

### **Wellness Education**

- Attend on-site or off-site informational programs (example: brown bag or lunch and learn)
- Online learning opportunities
- Participate in the “Know Your Numbers” program (requires you have your blood drawn and the results reviewed with the Wellness Nurse) and the “Healthy Now” program (having BMI, blood sugar level, blood pressure, triglycerides and cholesterol levels within recommended ranges and being tobacco free earns extra points during the KYN program). These programs run May 1<sup>st</sup> through October 1<sup>st</sup> of each year. Your spouse **MUST** earn at least one (1) point but **MAY** earn a second point towards your incentive.

### **Changes For A Healthier Life**

Earn wellness points when you achieve specific health goals. Becoming tobacco-free is one example. See the wellness point chart (at the back of this section or on the wellness website) for a complete listing.

### **Diagnosed Conditions**

If you are diagnosed with diabetes, high cholesterol, high blood pressure or asthma, you can earn up to three (3) wellness points by focusing on your condition. You must notify the Wellness Nurse before following this option.

If you have further questions, contact the Wellness Nurse at 330-287-5487 or [wellnessnurse@wayneohio.org](mailto:wellnessnurse@wayneohio.org)





# Learn About Your Health Risks

When it comes to your health, knowledge is the key. By taking a simple, 15-minute online Health Risk Assessment (HRA), you take a snapshot of your current health condition and then you are able to look at your current health risks and decide goals to help you either maintain or obtain a healthy lifestyle.

## Here's How To Register To Take Your HRA:

1. You must have current verified blood draw numbers. These can be obtained for free with the Wellness Nurse at the Wayne County Employee Health Clinic.
2. Register on my.Cigna.com by creating a User ID and Password. You will need to enter your Social Security Number or Member ID from your ID card (it starts with "U") as part of the verification process.
3. Login to my.Cigna.com using the new User ID and Password.
4. There are two ways to get to the Health Risk Assessment (HRA). You can scroll to the bottom of the Home page and click on the box that says Take Health Assessment, or you can click on the Wellness tab and select Health Assessment from the drop down options.
5. Read the Health Assessment Privacy Notice and click "I agree" to accept.
6. Answer each question and section in the assessment. (You cannot move to the next section if you leave a blank). Once at the end, you will see an option to see your score. You can email a copy of the confirmation number to yourself for your records. Please write your name, confirmation number, and date at the top of the HRA Completion Verification form. Please make sure you name is included on all forms! Without a name, the Wellness Nurse will not be able to process your paperwork. Follow the instructions on the HRA Completion Verification Form on how to submit completed form to the Wellness Nurse. If this form is not submitted or is received without a name, it will not count.

**You can easily finish this in about 15 minutes.**



# Engage In Your Health

## LAB SAVINGS PROGRAM

Lab orders obtained from your doctor can be faxed to the Wayne County Employee Health Clinic at **330-262-2054** (this is a secure line). Once labs are received, we will schedule your appointment for a blood draw. Please include contact information with lab orders. If a lab order is needed immediately, please call the Wayne County Employee Health Clinic at **330-287-5487**.

At the Wayne County Employee Health Clinic, we utilize LabCorp to provide you a reliable, inexpensive option that will save you money, as well as save money in our self-insured health care plan. Please note, any lab work through our Clinic will be at zero cost. If you choose to utilize Wooster Community Hospital or any other lab including LabCorp draw centers, there will be a co-pay. Once a lab order is received and reviewed, you will be advised on what preparation will be needed for your appointment.

**Important! If you have labs done by anyone other than our Wellness Nurse, always check to determine if those labs are sent to an in-network or out-of-network facility. Even an in-network doctor may choose to send labs to an out-of-network facility, costing you additional dollars!**

### Questions?

Contact the Wayne County Employee Health Clinic at 330-287-5487 or email the Clinic Nurse at [wellnessnurse@wayneohio.org](mailto:wellnessnurse@wayneohio.org). To schedule a lab draw with your doctor's order, email the Clinic Receptionist at [clinic1@wayneohio.org](mailto:clinic1@wayneohio.org). The Wayne County Employee Health Clinic is located on the main level of the Administration Building.



# Wellness Website

**<http://www.wayneohio.org>**  
**(Click on “Wellness Entrance”)**

This site is designed to be a place for you to keep up-to-date on your wellness benefits. This is a secure website which you can access 24/7, from the comfort of your home or office. You will need to register for this site. However, once you are registered, you can find educational information and work on earning your wellness incentives right from your personal computer.

## **Here’s What You Will Find On The Wellness Website:**

- News from the Wellness Nurse
- Articles and Flyers
- Wellness Point Credits Information and Forms
- Current Program Information
- Online Tests to Earn Wellness Points (only a few – once utilized it will not be an option for future use)
- Individual Point Tracking (found under *Employee Account Info*)
- Health Risk Assessment Link
- Health-Related Web Sites
- Summary Plan Description

## **How To Register For The First Time OR To Log In To Your Account:**

1. Visit <http://www.wayneohio.org>
2. At the bottom of the screen, click on *Wellness Entrance*.
3. Click *Log In*.
4. If logging in for the first time, use your Employee Number for BOTH your User Name and Password. This number needs to be 10 digits in length, so you will need to add zeros in front of your number to make it 10 digits. In other words, if your employee number is 4 digits, you will need to enter 6 zeros in front of it to make it a 10-digit number. If your employee number is 2 digits, you will need to enter 8 zeros in front of it to make a 10-digit number. For employees on the Wayne County payroll system, your employee number is 4 digits and is located on your paystub. If you are a sub-group participant, you can contact your payroll person, the Wellness Nurse or the HR Manager to get your employee number, if you do not already know it.

5. **Please change your password once you have logged in for the first time, for security purposes.**  
To change your password, click *Employee Account Info* at the top of the web page, enter your current password, then your new password and then you will need to confirm/re-enter your new password.
6. Click *Save* at the bottom of the screen.

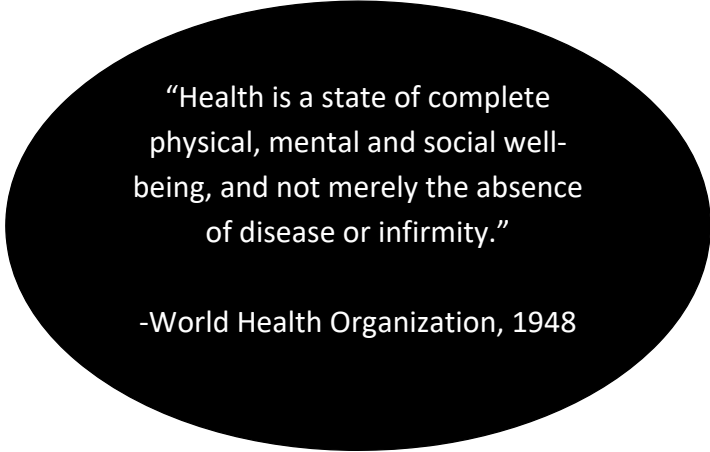
### **How To Find Your HRA Status, Verified Labs, and Your Points:**

Once you are on the Wellness home page, click on *Activity Tracker* at the top of the screen, then click on *Current Employee Points*. You will be able to see your name, as well as:

- Your HRA Date – If the HRA date is blank or has a date from a *prior year*, this means you have *NOT* completed and turned in your HRA for this year. If you see a date for the *current year*, this means the Wellness Nurse has received your completion page and you are up to date on your HRA for the incentive program.
- Verified Labs – Labs are drawn every three (3) years. If you see a date under the Lab section, this means you have verified labs on file for the current incentive period.
- Your Points – The web site will list the date which the point was completed and the point value that you earned. It will also show you the total points you have in the system.
- ***IMPORTANT!*** *If you think that the points listed are more than or less than what you think you have earned, please do not panic! Call the Wayne County Employee Health Clinic to help get things straightened out.*

### **Questions?**

Contact the Wayne County Employee Health Clinic at 330-287-5487 or [wellnessnurse@wayneohio.org](mailto:wellnessnurse@wayneohio.org)



“Health is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity.”

-World Health Organization, 1948

# Forms



**The following pages contain frequently used forms for your convenience!**

**Forms not contained in this section can be found at:**

**<https://www.wayneohio.org/employee-portal/health-benefits-manual/>**

**Please photocopy all forms, keeping the originals in your binder, so that you can continue to use in future years.**







# POINT CHART for WELLNESS PROGRAM

Written Proof Required – Forms Available Through Wellness Web Site



To earn the wellness incentive, you must earn and turn in (5) Wellness Points plus complete or update your HRA. (If you have a spouse on your plan, please read the spouse mandate below). Please note the following:

- Wellness Points must be earned and turned in between the dates of November 16 and November 15 to be on the incentive plan for the following calendar year.
- HRA must be updated by November 15 of each year with numbers from the Wellness Nurse. You must receive these numbers from the KYN program or by verifying numbers, received by your doctor, with the Wellness Nurse ahead of time. Labs are drawn/re-verified every 3 years. Next draw year is 2025.
- For new employees or those with special circumstances, please contact the Wellness Nurse.

**Point Value**

**Track Your Points!**

## Spouse Mandate

If a spouse is on an employee's medical plan, in order for the family plan to be considered on the incentive, that spouse must earn 1 of the 5 points that are necessary for the incentive plan. The spouse may earn up to 2 points, but 1 point is required for the incentive plan. This means either 1) the spouse will earn one point and the employee will earn 4 points and complete the HRA, or 2) the spouse will earn two points and the employee will earn 3 points and complete the HRA. If an employee earns 5 points and his/her spouse earns zero points, they will not be eligible for the incentive plan and will remain or be transferred back to the basic plan. Again, this rule only applies to those employees who have a spouse on their plan. The four ways which spouses can earn points are as follows:

Eye Exam (one per year)	1	
Dental Checkup (one per year)	1	
Physical (one per year)	1	
Know Your Numbers (KYN) Program completion (Program runs May 1 – October 1; on draw years, runs January 1 – October 1) <i>see below for details</i>	1	
COVID Vaccination (complete the series) (boosters do not count for additional points at this time)	1	

## Preventive Health Check-Ups (as age appropriate and recommended by Aetna)

Be sure to check your insurance coverages so that you are aware of any charges for which you may be responsible

Whole Body Skin Check by Dermatologist (one per year)	1	
Bone Density baseline screening for women (once after menopause then every 3-5 years as recommended by your physician for women without Osteopenia) (does not include health fair or public screenings)	1	
Colonoscopy (age 45 or over to get a baseline colonoscopy) (one per year; insurance only pays every 5 years)	1	
Dental Checkup (one per year)	1	
Eye Exam (one per year)	1	
Flu Shot (one per year – ½ point outside the clinic; 1 point at the clinic)	½ -1	
Mammogram (every 1-2 years for women over age 35)	1	
PAP Test or GYN Exam (recommended for women who have been sexually active and have a cervix) (one per year)	1	
Physical (one per year)	1	
Prostate Exam (yearly for males over age 50)	1	
COVID Vaccination (complete the series) (boosters do not count for additional points at this time)	1	

## Wellness Education (up to two points per year for educational events)

Brown Bag Lunch attendance	½	
Health Education Event attendance – contact Wellness Nurse in advance to verify event's qualification. Minimum of 30 minutes in length and proof of attendance via signature of speaker or notes taken are required.	½	
Learning Opportunity on the Wellness website (scoring 75% or higher on a test provided afterwards)	½	
Wellness Program completion (example – walking program) (points to be determined for each program)		
Discovery of a Billing Error which results in reimbursement to the Wayne County Health Plan	1	

## Weight Management

Food Diary completion for 3 months (up to two per year)	1	
Weight Loss Goal attainment set by Weight Loss Consultation with a Health Professional (one per year)	1	
Weight Watchers Member or similar program (one per year)	1	

## Exercise

Exercise Class attendance – 5-week session minimum (up to two per year). 5 weeks of Dance class is acceptable; however, attending regular dances do not count. Must have an instructor.	1	
Exercise Log completion for 3 months (exercising beyond normal daily routine) (up to two per year). You may include in your log: mountain climbing, dancing, bicycle riding (not motorcycle), swimming, golfing.	1	
Sleep Log (completion for 3 months, up to two per year) Questions? Call the Nurse.	1	
League Sport Participation (up to two per year) (subject to approval by Wellness Nurse; some are excluded like golf, dart, corn hole and bowling leagues to name a few).	1	

## Changes for a Healthier Life

Tobacco Products – Quit Use of or Remain Free of use for 6 months after initial test (urine test required as proof)	1	
Know Your Numbers (KYN) Program completion (program runs May 1st through October 1st) The Wellness Nurse can draw your blood for a lipid panel/cholesterol test anytime during the year for free. However, you will only earn point(s) during the KYN Program. If you have a medical reason why the Wellness Nurse cannot draw your blood for the lipid panel and have pre-approved the issue with the Wellness Nurse, you will still need to finish the other screenings in the KYN Program to earn point(s).  Receive points for achieving or maintaining: 1) Waist Measurement: females <35", males <40' 2) Blood Pressure < or = 130/85, 3) Blood Sugar Fasting < or = 110, 4) LDL < or = 130, 5) Triglycerides < or = 150 and 6) Tobacco Free (negative urine test required). Points are awarded depending on the results; see the Wellness Nurse for details. Testing is offered in conjunction with the KYN Program.	1-3	

**Diagnosed Conditions** – If diagnosed with one or more of the following health conditions (you must provide proof), you have an opportunity to earn 1 wellness point, per condition, focusing on that condition (with the exception of Diabetes and Hypertension, which only has a total point award of 1). Details are below:

Diabetes – Quarterly Blood Pressure Checks with your doctor or the Wellness Nurse (if by the doctor, a signed form is required)	1	
Hypertension – Monthly Blood Pressure Checks with your doctor or the Wellness Nurse (if by the doctor, a signed form is required)	1	
Asthma – Yearly Peak Flow Testing	1	
High Cholesterol – Yearly Lipid, drawn by the Wellness Nurse	1	

All Future Programs and Point Values will be determined after being reviewed by the Health & Wellness Committee. If you have a point rejected by the Wellness Nurse, you may ask her to take it to the Committee for appeal. All decisions from the Committee are final.

For any medical procedures completed, with the exception of a physical or dental visit, employees can use the basic Wellness Point Credit Form (located at <http://www.wayneohio.org>) and have the doctor or technician sign the form. Another option is to attach an Explanation of Benefits (EOB) or similar form of proof. You do not need to send blood work or any test results with the form.

*Revised 10/5/2023*



# HRA Completion Verification Page

Name: \_\_\_\_\_

(Please Print-First and Last Name)

**I have logged on to my.Cigna.com and completed the Health Assessment**

Confirmation # \_\_\_\_\_

Date completed \_\_\_\_/\_\_\_\_/\_\_\_\_

I have verified labs on file in the clinic:

I had my labs drawn with the Health and Wellness Nurse between 11/16/2021- 11/15/2024

**OR**

I am turning in a copy of my lipids and blood sugar, drawn by another source. (If you choose this option, no points are issued nor can you participate in the KYN program offered through the Wellness program)

**How to take your Health Assessment at my.Cigna.com:**

**Step 1: REGISTER on my.Cigna.com by creating a User ID and password.**

**You will need to enter your SSN or member ID from your ID card (it starts with "U") as part of the verification process.**

**Step 2: LOGIN to my.Cigna.com using the new user ID and password.**

*What if I try to register, but my identity is not validated? We maintain high security standards. That means the registration information you provide must exactly match the information we have on file for you. Please try to register again. If you receive a Validation Data error, please call Cigna's Online Customer Service 1.800.853.2713 and we'll help you register.*

**Step 3: There are two ways to get to the Health Assessment. You can scroll to the bottom of the Home page and click on the box that says take Health Assessment, or you can click on the Wellness tab and select Health Assessment from the dropdown options.**

**Step 4: Read the Health Assessment Privacy Notice and click "I agree" to accept.**

**Step 5: Answer each question and section in the assessment. (You can't move to the next section if you leave a blank). Once at the end, you will see an option to see your score. You can then email a copy of the confirmation number to yourself for your records. Please write the confirmation number at the top of this form.**

**Step 6: Return this form to Nurse Misty.**

**This must be done every year! Turn it in when completed!**

***\* If you are a new to the plan, you only have 30 days to get the verified labs and HRA completion page turned in to earn the incentive.***

*You can fax, email, or interoffice mail the form:  
Wayne County Employee Health Clinic - Attn: Misty White  
428 West Liberty Street Wooster, Ohio 44691  
330-287-5487 Phone/ 330-262-2054 Fax*

[wellnessnurse@wayneohio.org](mailto:wellnessnurse@wayneohio.org)

**Nurse use only:**

- Date received \_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_
- Entered WS \_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_
- New employee as of \_\_\_\_/\_\_\_\_/\_\_\_\_
- MS Notified \_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_



# Wellness Incentive Credit Form

*This form is not for Dental, Eye, Covid or Physical Points.  
Please submit those using the proper forms.  
They can be found in your Red Notebook or on the wellness website.*

*(Please Print and Complete Entire Top of Form)*

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number you can be contacted: \_\_\_\_\_

Doctor's Name (if used to earn point): \_\_\_\_\_

What you have done for wellness point (Have person verifying the procedure or point sign this form or attach any documents required to this form):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date point completed: \_\_\_\_\_

Signature of person verifying procedure (or attach proof): \_\_\_\_\_

Office Use Only:  
Date approved \_\_\_/\_\_\_/\_\_\_  
# \_\_\_-1 pt earned approved by\_\_\_  
Entered into WS  
\_\_\_/\_\_\_/\_\_\_ by \_\_\_

For wellness point credit.  
Completed form must be returned to  
Misty White, RN – Wayne County Employee Health Clinic – 330-287-5487  
428 W. Liberty St., Wooster, OH 44691 or faxed to 330-262-2054  
by the November 15<sup>th</sup> Deadline

# Preventative Exam Incentive Credit Form

(form for Employees and **physicals only for Spouses**)

Please Print and fill out top of form completely



Name: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If completing as a Spouse, list the full name of the Employee, so their incentive account can be updated: \_\_\_\_\_

## Please check mark all items examined at visit

(Check list based on 2023 USPSTF recommendations)

*This form is intended for use as a preventative guide and not directions for care by the employer or health care insurer.*

- Weight**
- Waist circumference**
- Blood pressure**
- Review individuals medical and social history**
- Review of individuals for screenings/risk factors for:**
  - Hypertension** - B/P screening recommended for individuals 18 yo or older
  - High Cholesterol** - lipid profile recommended every 5 years starting at age 35 for men and 45 for women.
  - Blood Sugar** - screening recommended for type 2 diabetes in asymptomatic adults with sustained blood pressure (either treated or untreated) greater than 135/80 mm Hg.
  - Cardiovascular risk profile** (smoking, sedentary lifestyle, obesity).
  - Breast cancer** - mammogram is recommended every 1-2 years for females 35 yo or older.  
\_\_\_ Mammogram completed today or on \_\_\_/\_\_\_/\_\_\_ for employee only. (if verified by someone else other than doctor) please sign \_\_\_\_\_
  - Cervical Cancer** - screening pap is recommended for cervical cancer in women who have been sexually active and have a cervix.  
\_\_\_ Pap/pelvic exam completed today or on \_\_\_/\_\_\_/\_\_\_ for employee only. (if verified by someone else other than doctor) please sign \_\_\_\_\_
  - Colon Cancer** - screening colonoscopy recommended for individuals 45 yo or older.
  - Prostate Cancer** - screening PSA- recommended for males 50 yo or older. (Please note: the county offers a free PSA blood draw yearly)  
\_\_\_ PSA and/or Digital Exam completed today or on \_\_\_/\_\_\_/\_\_\_ for employee only (if verified by someone else other than doctor) please sign \_\_\_\_\_
  - Immunizations** (see current CDC/ACIP recommendations).
  - Behavioral health screenings** (verbal screenings for depression, alcohol abuse, substance abuse).
- Review of individual's quality of daily living**
- Counseled patient during visit as needed (some USPSTF recommended areas):**
  - Smoking cessation
  - Weight loss
  - Stress management
  - Physical activity
  - Other areas as needed
- Review blood work as appropriate**
- Review current medications**
- Pneumococcal vaccine offered as appropriate** (recommended for patients 65 yrs or older).
- Flu shot recommended as appropriate** (Please note: the county offers employee/family flu shots at no charge starting every October)
- Discussed Health Plan**

GYN visit only, please check here  
Mammogram only, please check here

**NOTE:**  
The County has a discounted lab program, please send a doctor's order with your patient or fax it to the nurse and they can arrange to have it done with the Wayne Co Clinic Nurse. (If you have questions- please call the nurse 330-287-5487)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature of Physician Date

Office Use Only:	
___ #1 Physical	Date approved ___/___/___
___ #2 GYN	
___ #3PSA	_____points earned approved by _____
___ #4 Mammo	Entered into WS
___ #39 Spouse Physical	___/___/___ by _____

For wellness point credit:  
Completed form must be returned to Misty White, RN - Wayne County Employee Health Clinic - 330-287-5487 - 428 W. Liberty St., Wooster, OH 44691 or faxed to 330-262-2054 by the November 15th Deadline.



# Wellness Incentive COVID vaccine Credit Form

(This form is not for Dental, Eye, or Physical Points. Please submit those using the proper forms. They can be found in your Red Notebook or on the wellness website.)

(Please Print and Completely fill out this form)

Name: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Email: \_\_\_\_\_

Phone Number you can be contacted: \_\_\_\_\_

- I received the original COVID vaccine series and attached a copy of both the vaccines by attaching a copy of the vaccine card. (The initial Johnson and Johnson one dose vaccine will be accepted as well) *Note: Boosters are not required and have no point value.*
- I am receiving the vaccine for the first time, not a booster  
(new vaccine as of 09/2023)
- Date original series/1<sup>st</sup> time vaccine was completed: \_\_\_/\_\_\_/\_\_\_
- Copy of completed COVID vaccination card attached

Office Use Only:	
___ #42 Covid	Date approved ___/___/___
___ #43 Spouse	
___ confirmed not used before	1 pt earned approved by ___ Entered into WS ___/___/___ by ___

For wellness point credit.  
 Completed form must be returned to  
 Misty White, RN – Wayne County Employee Health Clinic – 330-287-5487  
 428 W. Liberty St., Wooster, OH 44691 or faxed to 330-262-2054 by the  
 November 15<sup>th</sup> Deadline



# Preventative Eye Exam Incentive Credit Form

(For Employees and/or Spouses)

(Please Print and fill out this form completely)

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_

Phone Number you can be contacted: \_\_\_\_\_

If completing this as a Spouse: Please list the full name of the Employee, so their incentive account can be updated \_\_\_\_\_

---

Eye Doctor's Name: \_\_\_\_\_

As of \_\_\_\_/\_\_\_\_/\_\_\_\_, the patient named above had a complete annual eye exam.

Ophthalmologist or Optometrist/  
Office staff Signature confirming: \_\_\_\_\_  
(office stamp also permitted)

---

Office Use Only:

___ #5 Eye	Date approved ____/____/____
___ #38 Spouse	1 pt earned approved by ____
	Entered into WS
	____/____/____ by ____

For wellness point credit: Completed form must be returned to Misty White, RN – Wayne County Employee Health Clinic – 330-287-5487 – 428 W. Liberty St., Wooster, Ohio 44691, or fax to 330-262-2054 by the November 15<sup>th</sup> deadline



# Preventative Dental Check Incentive Credit Form

(For Employees and/or Spouses)

(Please Print and fill out this form completely)

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email: \_\_\_\_\_

Phone Number you can be contacted: \_\_\_\_\_

If completing this as a Spouse: Please list the full name of the Employee, so their incentive account can be updated \_\_\_\_\_

---

Dentist Name: \_\_\_\_\_

As of \_\_\_\_/\_\_\_\_/\_\_\_\_, the patient named above had a preventative dental visit.

Dentist or Office Staff Signature to confirm: \_\_\_\_\_

(office stamp also permitted)

---

Office Use Only:

\_\_\_ #6 Dental

\_\_\_ #22 Spouse

Date approved \_\_\_\_/\_\_\_\_/\_\_\_\_

1 pt earned approved by \_\_\_\_\_

Entered into WS

\_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_\_

For wellness point credit: Completed form must be returned to  
Misty White, RN – Wayne County Employee Health Clinic –  
330-287-5487 – 428 W. Liberty St., Wooster, Ohio 44691, or  
fax to 330-262-2054 by the November 15<sup>th</sup> deadline









# Health Savings Account (HSA):

## New or Change Request for employees on CDHP Plan only

This form must be completed and uploaded for all HSA changes. Additionally, if you are adding or changing your financial institution, routing number or account number, you must submit proof of your routing number and account number. This may be in the form of a screenshot, voided check, deposit slip, or bank document.

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Date of Change (please allow 2 weeks): \_\_\_\_\_

Please indicate which of the following you are requesting:

For HSA contributions from Wayne County ONLY

For HSA contributions from Wayne County AND for HSA deductions to be deducted from my pay (County employees only). Deposit Amount (per pay): \$ \_\_\_\_\_

It is the responsibility of the employee to make sure all earned, given and personal contributions do not exceed IRS maximum limits. Annual limits can be found at: <https://www.irs.gov/pub/irs-pdf/p969.pdf>.

I hereby authorize Wayne County Auditor to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my account listed below.

Financial Institution Name: \_\_\_\_\_ Routing #: \_\_\_\_\_  
Checking Account Savings Account Account #: \_\_\_\_\_

Terms:

- I agree to notify the County Payroll Department two (2) weeks in advance before closing a bank account which I have indicated as a direct deposit account.
- I take full responsibility for any mis-direction of funds due to changes in bank account information such as, closing of an account, incorrect account numbers, incorrect routing number, etc.
- This authority is to remain in full force until Wayne County has received written notification from me of any changes in such timely manner as to afford Wayne County and their Financial Institution a reasonable opportunity to act on it.

I have fully read and agree to the above terms of this HSA Direct Deposit agreement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DOCUMENTATION MUST BE UPLOADED BEFORE THIS CHANGE REQUEST WILL BE APPROVED.**

*Updated 1/1/23*