

SCORE CARD

HOW WELL DID YOU DO?

Use this score card for your convenience to determine your incentive results.

Additional communication regarding your status will be provided by St. Peter's Wellness Services and sent to the email address you supplied when you registered for your screening.

Step 1: Find your numbers on your lab sheet and fill in column #2.

Step 2: Compare column #2 with column #3.

Step 3: Did you meet the requirement?
Refer to the back of this card for more information.

Step 4: Keep this form and your lab results for your records.

Helena School District



Requirement	My Score	The score needed to meet the requirement	I met the requirement?
Refrained from tobacco/nicotine?	yes no	Must refrain from use of all forms of tobacco for 3 months	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> BMI – or – <input type="checkbox"/> Waist measurement (check one)		BMI is ≤ 27 – or – Waist Circumference is ≤ 40 (men) ≤ 35 (women)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Blood pressure		$\leq 130/85$ (measured individually)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Blood Sugar Level (Glucose)		Glucose is ≤ 110	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Total Cholesterol – or – <input type="checkbox"/> Ratio		Total Cholesterol is ≤ 200 –or– Ratio ≤ 5 (m) ≤ 4.5 (w)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>see back →</i>

- ✓ If you answered YES to all five of the requirements, congratulations! You have satisfied all the requirements for this year's incentive and will receive the full \$400 reward towards your health premium (Please contact your benefits department to determine specifics regarding the incentive reward that will begin in 2020).

- ✓ If you answered NO to any of these questions please see the following:
 - To receive the initial \$100 reward towards your health premium, you must review your lab results with a Primary Care Provider (PCP) and the PCP Follow-Up form must be received from your provider's office via fax.
 - If the PCP Follow-Up form is received, you'll receive email notification from St. Peter's Wellness. You can then work towards the goals listed on front of card (for those values that did not meet the criteria) to remain eligible for the remaining incentive reward.
 - Any abnormal values must be re-assessed by the SPH Wellness Department (by appointment only) or you can provide official medical documentation of improved values if the medical record values are dated after your screening. If goals are satisfied you will receive the additional \$300 reward towards your health premium.
 - All reassessments/medical record documentation must be completed/received no later than June 26, 2020.



St. Peter's Health
WELLNESS SERVICES