



Dear Provider:

RE: Your patient's participation in the *Chicago Lives Healthy* wellness program

The reverse side of this form must be completed if a person who otherwise must participate in the City of Chicago's employee wellness program in order to earn the associated incentive wishes to have participation requirements waived based on a medical condition. Please read the activities listed below and provide specific information as to what specific medical condition(s) would prevent participation in the program, or make it unreasonably difficult or medically inadvisable. Please be aware that an individual's preference to not participate or opposition to the program on philosophical grounds alone is not a sufficient basis for a participation waiver. Likewise, the existence of an on-going physician-patient relationship alone is not a sufficient basis for waiver.

The requirements for participation in the *Chicago Lives Healthy* wellness program include:

- Obtaining a **biometric screening** with a finger-stick blood test to measure cholesterol, triglycerides and glucose. Height, weight, waist circumference, blood pressure and BMI are also recorded during the screening. Screenings can be performed at the participant's doctor's office or at scheduled community and work locations.
- Completing a **Health Assessment** which is a series of confidential questions that assesses life and environmental factors that are critical to the participant's health, well-being and the ability to improve both. The assessment can be completed on-line or on paper and typically takes less than 15 minutes to complete.
- Meeting **ongoing quarterly participation** requirements. A participant does not have to engage in physical activities or meet specific health goals like losing weight, reducing blood pressure or changing lipid profiles. The participant will meet participation requirements by engaging in telephonic coaching, meeting with a pharmacist in face-to-face meetings or using a combination of computer based tracking activities in concert with telephonic coaching sessions to support weight loss or smoking cessation.

Please complete the form on the reverse of this page. Thank you for your assistance.

The *Chicago Lives Healthy* Wellness Program

