



*Labor-Management Healthcare Fund is the administrator  
of health, prescription, and dental coverage.  
It is our goal to help ensure your overall satisfaction with our program,  
plans of benefits offered, performance of insurance carriers,  
as well as all customer service conduct.*

## ***LMHF WELLNESS INCENTIVE PROGRAM Part I Summarized***

Beginning January 1 of each year, active employees, along with their spouses, (who are LMHF members) are eligible to participate in Part I of the LMHF Wellness Incentive Program. The program runs January 1 through December 31, at which time, the benefit re-sets and begins tracking the next year's activities.

### **THE FOLLOWING DESCRIBES PART I:**

Employee and/or spouse is required to receive an annual physical by their Primary Care Physician and submit the necessary paperwork to LMHF. **NOTE:** Applicant must be an active LMHF member at the time of his/her annual physical. You can expect to receive a letter of eligibility confirmation upon receipt of Part I forms within two (2) weeks. Please notify the LMHF office if confirmation is not received. When Part I requirements are finalized, member will receive a \$50.00 HRA debit card.

### **Employee Responsibility for Part I**

- 1.) Retrieve a LMHF "Wellness" packet from employee's Human Resources/Personnel Department or LMHF office. All required forms are included in the packet and on our website at [www.LMHF.net](http://www.LMHF.net).
- 2.) Applicant is required to get an Annual Physical provided by his/her Primary Care Physician.
- 3.) Applicant must complete the "Employee Verification" section (page 1). Applicant's physician must complete "Annual Physical Verification" section (page 2).
- 4.) The completed and signed form must be submitted to the LMHF office.

All documents must be submitted no later than **February 15** for the prior year's participation.  
There are no exceptions.

**Please note:** If you terminate your employment or retire, you are required to use the entire balance within 90 days of your termination date, at which time the card will no longer be valid.

***YOUR PARTICIPATION IN OUR WELLNESS INCENTIVE PROGRAM IS GREATLY  
APPRECIATED!***

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