

Instructions for Receiving Your Health Screening With Your Personal Physician

Employees have the option to visit their personal physician if they cannot attend the onsite Villanova health screenings.

We are pleased that you are participating in the health screenings this year. **Participation in the health screening is confidential.** Please review these instructions to ensure that your information is complete and sent to the correct location.

See your primary care physician

- 1. Call your physician to schedule an appointment for your screening OR if you already have lab results from your physician visit dated between June 1, 2013 and February 28, 2014, you may ask your physician to submit those results.
- 2. Fill out Section 1 AND 2 on page two of this document & bring it to the screening.
- 3. Leave the Data Form with your doctor.
- 4. Let the clinic/doctor know that the completed form must be faxed by **February 28, 2014** to:

Wellness Corporate Solutions Attn: Information Management

SECURE FAX: 888-972-5192

Instructions to Complete the Personal Health Assessment

<u>Purpose</u>: Employees should use these instructions to complete their Personal Health Assessment when they do not need to utilize a health screening appointment (i.e., using the primary care physician form, walk-in at a screening appointment).

- 1. Log into the NOVAfit! Wellness Portal: Accessible via the "Quick Links" section of the Human Resources website.
- 2. Go to the *Schedule Your Appointment: Take Your Personal Health Assessment* page, accessible from the "What Do You Want To Do?" action center on the right side of the screen.
- 3. Choose "No Screening/Offsite Voucher" option
- 4. Take the personal health assessment.

Questions? Contact villanovauniversity@livehealthier.com

Note: In order to earn the \$150 incentive towards 2014 medical premiums, you must complete both the health screening (onsite or by visiting your primary care physician) and online personal health assessment. Participation in the health screening and online personal health assessment is voluntary.

wellness

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DATA FORM FOR HEALTH SCREENING WITH YOUR PERSONAL PHYSICIAN

INSTRUCTIONS:

PARTICIPANT: Complete Sections 1 & 2

 PROVIDER: Complete Section 3 and then FAX to Wellness Corporate Solutions at 888-972-5192 BY February 28, 2014



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PLEASE FAX COMPLETED DATA FORM TO: WELLNESS CORPORATE SOLUTIONS, SECURE FAX: 888-972-5192