

Fitness FirstSM & More Reimbursement Form

FOR INDIVIDUAL PRODUCT MEMBERS

Name _____

Address _____

City _____ State _____ Zip Code _____

Member ID Number:

Person Code

ACTIVITY FOR REIMBURSEMENT (CHECK ALL THAT APPLY)

Fitness First

Name of Participating Fitness First Health Club

\$ _____

Amount You Paid For
Your Membership

Health Education Class

Class Name

\$ _____

Amount Paid for Class

Facility

Date(s) of Class

Instructor's Signature

This student had 75%
or better attendance

Community Supported Agriculture (CSA)

Name of FairShare CSA Coalition Member Farm

\$ _____

Amount You Paid For Your Share

Integrative Medicine / Healing Choices

\$ _____

Amount Paid for Service

SERVICE:

- Acupuncture
- Feldenkrais®
- Healing Touch
- Massage / Therapy and Bodywork

RECEIVED MY INTEGRATIVE MEDICINE SERVICE AT:

- UW Health Integrative Medicine
- Unity Fitness First Health Club _____
Name of Health Club
- Unity Healing Choices Vendor _____
Name of Vendor

Weight Management

\$ _____

Amount Paid

Number of Consecutive Months Attended if Participating in
Weight Watchers® Meetings

TO RECEIVE YOUR REIMBURSEMENT, COMPLETE THE FOLLOWING STEPS:

1. Review the rules and dates for reimbursement on page two and fill out the reimbursement form
2. Attach your itemized receipt(s) or required documentation

3. Mail the reimbursement form and the itemized receipts and / or required documentation to:
Unity Health Insurance
Attn: Fitness First & More
840 Carolina Street
Sauk City WI 53583

secure upload: login to MyChart to access the upload form
or email to: fitnessfirstadmin@unityhealth.com
or fax to: (608) 643-2564



Rules for Reimbursement

FOR INDIVIDUAL PRODUCT MEMBERS

Fitness FirstSM & More reimbursements are paid on a quarterly basis. All services received in a calendar year count toward that year's maximum reimbursement. To receive your reimbursement, you will need to submit your reimbursement form to us by the end of the quarter prior to the reimbursement date. All 2017 requests must be received by January 15, 2018 to be valid.

Fitness First Reimbursement Requirements

- Purchase a membership from a Fitness First participating health club (list is available at unityhealth.com)
- Be a Unity member at the time of purchase and when the activity is completed
- Complete the Fitness First & More reimbursement form for individual product members
- Upload, email, fax, or mail the completed reimbursement form and one of the following proofs of payment to Unity –
 - Itemized receipt from the participating health club
 - A copy of your cashed check or credit card receipt
 - To securely upload your Reimbursement Form and documentation, login to MyChart and select *Personal Wellness Portal*, then *Fitness First & More* to find the Fitness First & More ONLINE Submission form.

Health Education Classes

Classes must be held at one of the Unity Health Insurance participating hospitals or clinics or other approved vendors and fall into one of the following categories –

- Pregnancy and parenting
- Nutrition
- Weight management
- Special activities, e.g. yoga and Pilates
- CPR and First Aid
- Stress and Anxiety Management (e.g. mindfulness and meditation)
- Tobacco use cessation

You may also receive reimbursement for membership in the Children & Adults with Attention-Deficit / Hyperactivity Disorder (CHADD[®]) program.

Requirements for reimbursement –

- Attend 75% of the classes of an approved program or if purchased an unlimited pass you must attend at least 10 classes in one month.
- Be a Unity member at the completion of the class
- Complete the Fitness First & More reimbursement form for individual product members and have the instructor sign it
- Submit the completed reimbursement form to Unity upon finishing the class

* For the CHADD[®] program you will also need to submit the pre and post surveys as well as a copy of the welcome letter from CHADD[®].

Community Supported Agriculture (CSA) Reimbursement Requirements

- Purchase a produce share from a FairShare CSA Coalition member farm

Submission and payment dates for 2017 are the following:

	Unity Receives Request by:	Unity's Payment Date:
First Quarter	March 31, 2017	May 19, 2017
Second Quarter	June 30, 2017	August 18, 2017
Third Quarter	September 30, 2017	November 17, 2017
Fourth Quarter	December 31, 2017	February 17, 2018

- Be a Unity member on the date of purchase
- Complete the Fitness First & More reimbursement form for individual product members
- Upload, email, fax or mail the completed reimbursement form and one of the following proofs of payment to Unity in the same calendar year it was purchased –
 - Itemized receipt from the farm
 - Copy of an email from the farm acknowledging your purchase (must include the amount you paid for your share and date of purchase). *Please Note: The date the email was sent to you does not constitute the date of purchase.*
 - A copy of your cashed check or credit card receipt

(If you are splitting a produce share, be sure your name is included on the proof of payment. Also, indicate the amount you paid for your portion of the share on the reimbursement form.)

Integrative Medicine Reimbursement Requirements

- Receive one of the following eligible integrative medicine services –
 - Acupuncture
 - Feldenkrais[®]
 - Healing Touch
 - Massage Therapy and Bodywork
- Receive the service from an eligible provider
 - UW Health Integrative Medicine
 - Unity Fitness First Participating Health Club
 - Unity Healing Choices Vendor
- Be a Unity member on the date of service
- Complete the Fitness First & More reimbursement form for individual product members
- Mail the completed reimbursement form and your itemized receipt to Unity upon receiving the service. The itemized receipt must include your name, the provider's name, address, telephone number, license number, description of service received, date of service and the amount paid. *Tips, gratuities and gift certificates are not reimbursable.*

Weight Management Reimbursement Requirements

- Participate in Weight Watchers[®] meetings or Weight Watchers[®] online for three consecutive months or participate in all Diet-Free or Winning Weighs[®] meetings
- Be a Unity member at the completion of your participation
- Complete the Fitness First & More reimbursement form for individual product members
- Mail the completed reimbursement form and receipt of payment to Unity

All 2017 requests for reimbursement must be received at Unity Health Insurance by January 15, 2018.

Your health plan is committed to helping you achieve your best health. Rewards for participating in a wellness program are available to members*. If you think you might be unable to meet a standard for a reward under this wellness program, you might qualify for an opportunity to earn the same reward by different means. Contact us at (800) 362-3310 and we will work with you (and, if you wish, your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

*Members must be 18 or older to participate in the Fitness FirstSM & More program. BadgerCare Plus and PPO members are not eligible to participate.