



ACC Wellness-Tier Log

Print Name: _____ Last four SSN: _____

Department: _____ Division: _____

Report Activities:

Date of Behavioral Activity: _____

Describe/Name Activity: _____

Signature: _____ Date: _____

WELLNESS TIER REQUIREMENTS:

- Complete a Health Risk Assessment (HRA) form
- Blood work (minimum of lipid panel and glucose)
- One behavior change activity from the list below, or other pre-approved option

Behavioral Activity Options (suggestions)	
Fitness	Nutrition/Other
1. Exercise Class	1. Health Improvement Program – BCBS
2. 5K/10K (marathon)	2. ACC Risk Reduction Program
3. Sports League	3. Tobacco Cessation Class
4. Meet with Wellness Coach to develop a workout plan	4. Weight Watchers
5. Exercise log for one quarter	5. Annual Screening (mammogram, colonoscopy, PSA, PAP)
	6. Nutrition logs for one quarter

Note: DEADLINES TO COMPLETE ACTIVITIES:

- August 1, 2008: Complete HRA, blood work; sign Wellness Tier Agreement form
- December 20, 2008: Complete one (1) Educational Activity or one (1) Behavior Activity
- April 20, 2009: Complete one (1) Educational Activity or one (1) Behavior Activity

Failure to complete the first activity by December 20th will result in the insurance premium reverting back to the regular rate as of January 1, 2009. Failure to complete the second activity by April 20th will result in the insurance premium reverting back to the regular rates as of May 1, 2009.