



WELLBEING REWARDS SUBMISSION FORM

I am an employee on a 2018 Gustavus medical plan and am submitting documentation for the following service(s):

- Preventive Care exam
- Gustavus Health Services exam or lab draw
- Doctor on Demand visit

Service credit is applicable for anyone covered by a Gustavus medical plan. This submission reflects care for:

- Myself
- Spouse/Partner
- Child

Employee Name

Gustavus ID#

Employee Signature

Date

Details for Submission

Please attach **one** of the following items to document each service conducted in 2018:

- A signed note from your doctor/provider verifying a qualifying service
- A receipt of service, such as from Doctor on Demand
- A copy of the Explanation of Benefits form with service highlighted

Note: *Employee or covered partner/spouse/child are qualified to submit, but only one submission per category is accepted. Employee privacy is important. Please share only information verifying a qualifying service, no additional information is necessary.*

Submissions Due

May 10, 2018

September 10, 2018

December 19, 2018

HRA or HSA Deposit

June 2018

October 2018

December 2018