



HANCOCK COUNTY GOVERNMENT 2022 WELLNESS PROGRAM ANNUAL PHYSICAL EXAM CERTIFICATION

EMPLOYEE/PATIENT INFORMATION:

Employee Name: _____ Last 4 SS#: _____
(please print)

Patient Name: _____ DOB: _____
(please print)

PHYSICIAN STATEMENT:

As the attending physician, I attest the individual listed above (as the patient) has completed an annual wellness checkup on _____ (date of exam). This signed form will serve as eligibility to receive the wellness credit.

Physician Name

NPI#

Physician's Signature

Date

Exams performed between October 1, 2021 and October 1, 2022 will be applied to your Annual Physical Exam-Wellness Program for the 2023 plan year.

Forms are required for employee and dependent spouse covered under the medical plan. Forms are not needed for dependent children covered under the medical plan.

Please return completed form to Mary McCoy, Payroll/Benefits Administrator.

If not received by October 1, 2022, the Wellness credit will not be given for 2023 plan year.

Forms may be emailed to mmccoy@hancockcoingov.org or mailed to 111 American Legion Pl, Ste 217, Greenfield, IN 46140 or dropped-off in person. Please keep a copy for your records.

Please direct questions to Mary McCoy, Payroll/Benefits Administrator at 317-477-1105, ext. 1284 or email questions to mmccoy@hancockcoingov.org.