

**How to Enroll  
in the  
Capital Health Plan Healthy Lifestyle Rebate Program**

Thank you for your interest in the Small Group Healthy Lifestyle Rebate Program. Capital Health Plan is offering a rebate to groups who demonstrate that their employees have improved or maintained a healthy lifestyle during the year. The healthy lifestyle measurements are based on body mass index (BMI) and/or smoking status.

To qualify for any payment under this rebate program, the employer must report to us the healthy lifestyle status of over 50% of CHP covered employees. The employer will receive a rebate as follows:

1. **Smoking Cessation:** \$50 rebate for each participating CHP covered employee who stops smoking in the program calendar year.
2. **Weight Reduction:** \$50 rebate for each participating CHP covered employee who demonstrates a BMI reduction of 15% if he/she is in the obese category (see the enclosed BMI Table), **OR**, \$50 rebate for each participating CHP covered employee who demonstrates a BMI reduction of 10% if he/she is in the overweight category.
3. **Combination:** \$100 rebate for each participating CHP covered employee who accomplishes both 1 and 2 above.
4. **Healthy Lifestyle:** \$25 for each participating CHP covered employee who has remained a nonsmoker for the entire program year **and** has maintained a healthy weight (based on enclosed BMI Table) at both the beginning and end of the calendar year.

**How to enroll:**

1. The enclosed *Healthy Lifestyle Rebate Enrollment* form must be completed in its entirety, signed, and returned to our office by **May 31, 2007**. (When we receive your completed form, we will register your company as a participant in the rebate program.)
2. At the end of the year, you will need to complete the *Healthy Lifestyle Rebate Request*, recording all pertinent results for your employees. This form must be returned to our office by **January 31, 2008**; forms received after that date will not be considered. If your company is applying for a rebate based on improvement or maintenance of healthy BMIs, the *Rebate Request* needs to be signed by a health care professional.
3. As a courtesy, we have included a sample employee health status verification form that you may find convenient for capturing the individual results you need to keep on file. This form is for your files and for audit purposes; it is not submitted to CHP.

Please follow closely all instructions on the *Rebate Enrollment* form. Incomplete and/or inaccurate forms will delay the enrollment or may disqualify your company from participation in the Healthy Lifestyle Rebate Program. Submitting late forms will disqualify your company from participation and/or receipt of rebate.

All forms and correspondence about this program should be sent by U.S. mail to: **Capital Health Plan, Healthy Lifestyle Rebate Program, Attention: Compliance Officer, Post Office Box 15349, Tallahassee, FL 32317-5349**. No correspondence or forms by any electronic means (e.g., facsimile, email, etc.) will be accepted for this program.

Participation in this program is entirely voluntary, and will have no impact on your employees' health care coverage with CHP. If you have any questions about the Small Group Healthy Lifestyle Rebate Program, please call 850/523-7333 (Monday through Friday, 8 a.m. to 5 p.m.).