

Body Mass Index (BMI) Tracking Summary

Employees on TeamHealth medical insurance are eligible to receive a \$25 health insurance discount for each one-point BMI reduction they achieve.

Original BMI (October 1, 2006 or later) _____

Present BMI _____

Difference _____



I certify that the information contained on this sheet is accurate. I understand that falsification of information is a violation of Company policy, which is subject to disciplinary action up to and including termination of employment.

Signature

Date

Printed Name (please print clearly)

Employee Number*

Email Address

*Employee number can be found on paycheck (6 digits)

Fax to 865-560-8926 (confidential fax number)**

**Please note that this form is confidential and access to it will be limited to the Wellness Program only.

This summary can be resubmitted as many times as an employee reduces his/her BMI. However, previous submissions will be taken into account for summaries that have been turned in more than once. For example, the present BMI from a previous submission will serve as the original BMI when the form is resubmitted.

The \$25 health insurance discount will appear on the employee's paycheck. Please allow 3-4 weeks for discount to appear once form is submitted.