

# 2024 Employee Wellness Program

January 1, 2024 – December 1, 2024



## Welcome to JCUFit (Fitness, Involvement, Total Well-Being)!

John Carroll University is proud to bring you JCUFit - our wellness program that promotes healthy lifestyle choices, encourages a holistic philosophy and balance to life, and combines a pro-active, positive approach to healthy living that emphasizes the whole person! We recognize that good health is more than the absence of illness, but rather a robust state of well-being that acknowledges the importance and inseparability of the mind-body relationship.



### TO JOIN

<https://join.virginpulse.com/skywell>

Registration required only once




### TO LOGIN

<https://member.virginpulse.com>



For the app experience, download the **Virgin Pulse** app!

If creating an account on the app, **Sponsor is Skywell.**

Level	Points Needed	Requirements	Reward
Level 1	6,000	Earn 6,000 points.	 <b>2oz Hand Sanitizer Spray</b> Stay germ-free on the go (made and filled in the USA)
Level 2	15,000	Earn 9,000 more points	 <b>Soup Mug and Spoon</b> Holds up to 12oz of delicious, warm soup and comes with a matching spoon.
Level 3	25,000	Earn 10,000 more points	 <b>JCUFit T-Shirt</b> Show your JCUFit pride with a branded 60/40 cotton/poly JCUFit / Medical Mutual logo branded T-Shirt
Level 4	40,000	<p>Earn 13,000 more points and complete:</p> <p><b>Online Health Assessment 1000 points</b> – located on the portal under <b>Health → Surveys</b></p> <p><b>Biometric Screening* 1000 points (within 12/2/23-12/1/24):</b> Measures height, weight, BMI, blood pressure, cholesterol &amp; glucose. Ask your provider or attend the JCU benefits fair in October &amp; points will be uploaded for you</p> <p>*requires submitting verification form (2<sup>nd</sup> page) to <a href="mailto:skywell@metrohealth.org">skywell@metrohealth.org</a></p>	<p><b>Prize TBD</b></p> <p><b>Raffled to 20 individuals at the end of the year.</b></p>
<b>DEADLINE TO COMPLETE - DECEMBER 1, 2024</b> For questions please email <a href="mailto:skywell@metrohealth.org">skywell@metrohealth.org</a> or call 440-592-1121			

# 2024 EMPLOYEE VERIFICATION FORM



As a participant of the JCUFit wellness program, I have the opportunity to earn points by engaging in healthy behaviors. I am requesting credit for the selected services and wish to release my information for verification.

By signing this form, I hereby grant permission for Skywell to verify the service(s) selected below.

- ☐ **I have attached supporting documentation** (Explanation of Benefits (EOB) from my insurance company, MyChart printout, after-visit summary and/or signed provider verification) for services for which I am requesting credit. **Only the date of service, type of visit and your name are needed. You may mark out any personal health information.**

Print Name

Signature

Date of Birth

## Health Exams & Screenings - PROOF OF VISIT REQUIRED FOR ALL

### Biometric Screening within 12/2/23 - 12/1/24

1000 points

MUST include all of the following:

- ☐ Body Mass Index (BMI), Height, Weight Value for each: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- ☐ Blood Pressure Value: \_\_\_\_\_/\_\_\_\_\_
- ☐ Total Cholesterol, HDL, LDL, Triglycerides Value for each: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
- ☐ Glucose Value: \_\_\_\_\_

### ☐ Primary Care Provider (PCP) Well Visit within 1/1/22 - 12/1/24

1000 points

A PCP may be a Physician or Nurse Practitioner in Internal Medicine, Family Practice or OB/GYN.  
A PCP well visit is a routine check-up to assess your overall health.

### Preventive Service(s) within 12/2/23 - 12/1/24

500 points each (max 8)

- ☐ Bone Density Screening ☐ Dental Exam ☐ Skin Cancer Screening ☐ Colonoscopy/FIT Test
- ☐ Hearing Test ☐ Mammogram ☐ Vision Exam ☐ Prostate Screening
- ☐ Pap Test / GYN Exam ☐ Immunization (flu/covid/shingles/pneumonia, etc.)

### Chronic Condition Management Program within (1/1/24 - 12/31/24)

Applies if you enrolled before 2024 but are currently attending

- ☐ Asthma ☐ High cholesterol
- ☐ Diabetes management ☐ Weight management
- ☐ High blood pressure ☐ Smoking cessation
- Can be done 3x within year

500 points  
each (max 3x  
per year)

**\*\*Please allow up to 4 weeks for processing before you see your credit on the wellness portal.\*\***

Questions? 440-592-1121 or [skywell@metrohealth.org](mailto:skywell@metrohealth.org). Thank you for your participation!

# HOW TO SUBMIT WELLNESS VISITS

Earn credit for your preventive services, primary care provider visit & biometric screening.

## Fill out the verification form.

**You must have a portal account to earn credit.**

**1**

Create a portal account at [join.virginpulse.com/skywell](https://join.virginpulse.com/skywell)

Or download the **Virgin Pulse** app

If creating account on app, sponsor is Skywell



**2**

Provide supporting documentation such as explanation of benefits, after-visit summary, receipt, a screenshot of your MyChart or any other proof of the visit.

Only your name, date of service and type of service are needed. You may mark out any personal health information.

**3**

Email the verification form and supporting documentation to our secure email at [skywell@metrohealth.org](mailto:skywell@metrohealth.org)  
Photos of the documents are accepted.

**Please allow up to 4 weeks to process.**

Questions? 440-592-1121 or  
[skywell@metrohealth.org](mailto:skywell@metrohealth.org)