

# AgeWell Rebate for Seniors

PEHP Medicare Supplement members with medical coverage may earn this rebate.

Questions about how to complete this form?

Call 801-366-7300 or

Toll free 855-366-7300

Mon-Fri (8 a.m. to 4:30 p.m.)

Return completed form to:

PEHP Healthy Utah  
560 East 200 South  
Salt Lake City, UT 84102

Or Fax form to:  
801-328-7300

Or send through Message Center on your PEHP online account at [pehp.org](http://pehp.org)

## Participant Information

NAME (Please Print)	BIRTH DATE	PEHP ID NO.	TODAY'S DATE
EMAIL ADDRESS	PHONE NUMBER	BEST HOURS TO CALL	
PHYSICAL ADDRESS	CITY	ZIP CODE	FAX NUMBER

## AgeWell Rebate (\$50\*)

STEP 1: Select and complete the required activities listed below. Check each box and provide the other requested information.

STEP 2: After completing your selected programs and activities, submit this completed form to PEHP via one of the methods shown above. The form must be signed to process the rebate. Your participation will be verified and rebate will be processed.

STEP 3: Receive your Rebate. Please allow 2-4 weeks for processing.

Eligible members can receive one AgeWell Rebate per plan year. Complete the section below:

**To qualify for a rebate of \$50**, complete the following and submit rebate form after all activities are finished.

For more information on how to register for the activities listed below, visit [www.pehp.org/agewell](http://www.pehp.org/agewell).

Requirements:

1. Watch the "[Healthy Aging](#)" webinar

Date viewed: \_\_\_\_\_

2. Watch one [webinar on mental and emotional well-being](#)

Name of webinar viewed: \_\_\_\_\_

Date viewed: \_\_\_\_\_

3. Participate in [Workout Warrior](#) for at least one month

Month/Year of participation: \_\_\_\_\_

*What is Workout Warrior? Sign up to receive weekly motivational emails, then follow the tips to be more active and report your activity at the end of each month. All ages and ability levels can participate.*

4. Participate in at least one [monthly Wellness Challenge](#)

Month/Year of participation: \_\_\_\_\_

*What is a Wellness Challenge? Sign up to improve your overall well-being by using the practical tips and resources emailed to you weekly. Different wellness themes are presented each month.*

*\*PEHP withholds FICA on all rebates and mails tax documents in January. This rebate may or may not be subject to taxes in your situation. Please consult with your tax advisor.*

### More Wellness Benefits Available

- » Health Coaching
- » Biometric Testing
- » Online Classes
  - › Take Charge for Diabetes Prevention
  - › Diabetes and YOU
  - › Lighten Up
- » Cookbook with healthy recipes

Find these and more wellness resources at [www.pehp.org](http://www.pehp.org)

#### FOR INTERNAL USE ONLY

Verification \_\_\_\_\_

Notes \_\_\_\_\_

Initials \_\_\_\_\_

## **Informed Consent & Release**

### **Confidentiality:**

I understand the information I have provided in this form is confidential. As a participant of PEHP Healthy Utah, I give permission and understand that my records may be reviewed by PEHP Healthy Utah, PEHP employees or their business associates. I further understand that I may be contacted by PEHP Healthy Utah or PEHP staff for follow up education or I may be referred to specialized programs.

### **Assumption of Risk and Release and Waiver:**

I consent to voluntarily participate in PEHP Healthy Utah and fully assume any and all risks associated with my participation. In consideration of the information that I will receive from my participation in the program and for other good and valuable consideration, I waive and release all rights and claims against PEHP and the persons administering PEHP Healthy Utah for any and all injuries, ailments, or other consequences that I may suffer from my participation in PEHP Healthy Utah and other activities, programs, and events sponsored by PEHP Healthy Utah.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_