



Health and Wellness Benefit Option Election Form

Date: _____

Applicant/Member Name: _____
(Please Print First and Last Name)

Applicant/Member Birth Date: _____
(Month/Day/Year)

PHP (HMO SNP) members may select either a gym membership from **one** of the individual gyms/gym chains below, **OR** up to \$200 a benefit year for over-the-counter (OTC) pharmacy merchandise (non-prescription drug coverage) fulfilled by AHF Pharmacy for no cost. Please make your selection below. **Members may only choose one option.** See attachment for gym locations.

Anytime Fitness

Pulse Fitness

Youfit

Over-the-counter (OTC) pharmacy merchandise

Limited to \$200 per benefit year. Members who choose the OTC option will order from a list of items such as vitamins, fiber supplements, first aid supplies, sunscreen, tooth brushes and pastes, cold medication, antacids, etc. Members who chose the OTC option will receive merchandise order forms with instructions from the plan. Members may place orders for items any dollar increment through the year up to the annual limit of \$200. Order forms and instructions are available on the plan's website at www.php-fl.org/for-members/otc.

Decline the Health and Wellness Benefit

Declining the benefit will not affect your eligibility for or membership in PHP. If you decline the benefit, you may change your decision anytime. Please call Member Services if you want to activate the benefit at (888) 456-4715 (TTY 711), 8:00 a.m. to 8:00 p.m., seven days a week.

Please read below and initial by each statement to indicate you have read and understand the terms of the program.

_____ I understand that I may choose only one benefit option during the benefit year.

_____ I understand that I may only change my Health and Wellness Benefit option selection once a benefit year from January 1 through January 15 or under certain special circumstances.

_____ I understand that it may take 15 to 45 days for the processing of my Health and Wellness Benefit option selection.

_____ I understand that PHP will contact me by mail with instructions or forms to activate the option I choose.

_____ I understand that the Health and Wellness Benefit option that I select is only valid for and can only be used by me.

_____ I understand that if I choose the gym membership option and I disenroll from the plan, my gym membership will terminate on the same day as my disenrollment effective date.

Applicant/Member Signature: _____

Address: _____
(Street Address, City, State, Zip)

Home Phone: _____ Alternate Phone: _____

PHP is an HMO plan with a Medicare contract. Enrollment in PHP depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits and copayments may change on January 1 of each year. PHP complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-456-4715 (TTY: 711). ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-888-456-4715 (TTY: 711).

If choosing the gym membership option, please refer to the list of gym locations below to help you choose a gym or gym chain whose locations are most convenient for you. Remember, you may only choose one membership from one of these gyms/gym chains. You may only change your benefit option selection, i.e., change gym/gym chain memberships, change from the OTC merchandise option to a gym membership, or change from a gym membership to the OTC merchandise option, once a benefit year from January 1 through January 15. If you need more information about these gyms/gym chains or their locations below, please visit their websites or call.



www.anytimefitness.com

Duval County

Downtown
100 N. Laura St. (2nd Floor)
Jacksonville, FL 32202
Tel: (904) 723-1766

Beach Blvd.
11915 Beach Blvd.
Jacksonville, FL 32246
Tel: (904) 807-9800

Fruit Cove
540 State Rd 13
Fruit Cove, FL 32259
Tel: (904) 770-7941



www.youfit.com

Duval County

3566 Blanding Blvd., #1
Jacksonville, FL 32210
Tel: (904) 899-5470

5289 Norwood Ave. #2
Jacksonville, FL 32208
Tel: (904) 440-2335

9242 Arlington Expy.,
Ste. B
Jacksonville, FL 32225
Tel: (904) 606-4227



pulsefitnesscenterjax.com

Duval County

9726 Touchton Rd., #110
Jacksonville, FL 32246
Tel: (904) 642-1414

PHP is an HMO plan with a Medicare contract. Enrollment in PHP depends on contract renewal. This information is not a complete description of benefits. Contact the plan for more information. Limitations, copayments, and restrictions may apply. Benefits and copayments may change on January 1 of each year. PHP complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-456-4715 (TTY: 711). ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-888-456-4715 (TTY: 711).