



# Earn Your 2026 Wellness Incentive

Complete your well-visit with your primary care physician to reduce your employee contribution by **\$520 annually!**

Employees who complete the steps below will receive the wellness savings incentive for the upcoming benefits year:

1

## VISIT YOUR WELLNESS PORTAL

[www.kapnickstrive.com/christmanco](http://www.kapnickstrive.com/christmanco)

First-time user: click "Sign Up"  
Repeat user: click "Log In"

2

## COMPLETE YOUR HEALTH RISK ASSESSMENT

The Health Risk Assessment (HRA) immediately pops up for completion when you log in to your portal for the first time in 2025.

3

## COMPLETE YOUR ANNUAL WELL-VISIT

Complete your annual well-visit with your primary care physician and have them sign the well-visit physician form.

**Well-visits must be completed between 12/15/2024-12/12/2025.**

4

## SUBMIT YOUR COMPLETED FORM TO YOUR PORTAL

Scan or take a photo of your signed physician form and submit it on your Kapnick Strive wellness portal **between 12/15/2024-12/12/2025.**

Find the Well-Visit Physician Form on the homepage of your Kapnick Strive Wellness Portal or in your ELP Gateway!



**Kapnick Strive® Well-Visit Physician Form**

<b>Participant instructions:</b> Complete the top section of this form and take it to your physician to complete the bottom section. Be sure to upload a copy of this form to your record.		Exam date (mm/dd/yyyy)
Participant last name	Participant first name	
Daytime telephone number	Date of birth (mm/dd/yyyy)	
Participant signature	Participant email address	

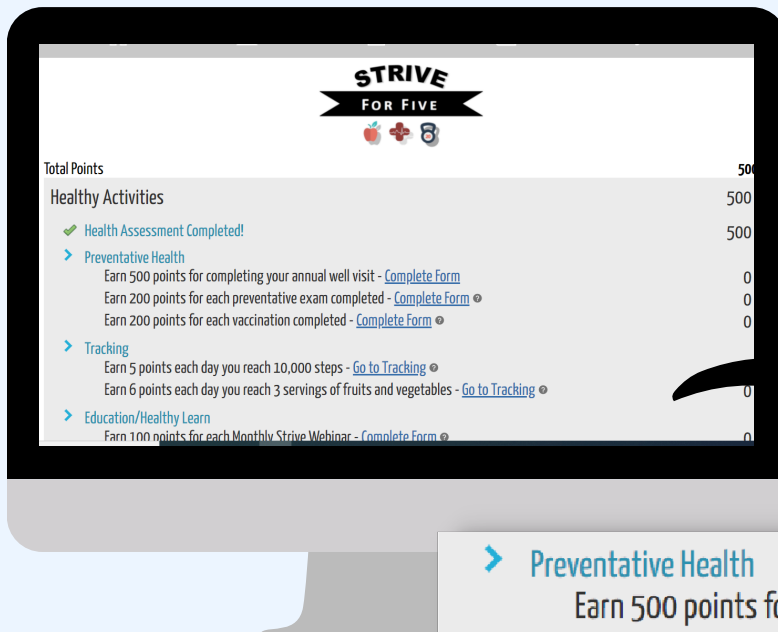
Physician signature: I verify that I completed this exam for the patient listed above.

<b>Physician instructions:</b> Please complete the information below.		
Physician last name	Physician first name	Medical license ID
Physician signature	Physician telephone number	Date (mm/dd/yyyy)

**QUESTIONS? CONTACT**  
**CHRISTMAN-BUILDWELLNESS@CHRISTMANCO.COM**

# How to Submit Your Annual Well-Visit Form

1. Go to [kapnickstrive.com/christmanco](https://kapnickstrive.com/christmanco) and log in or create an account.
2. Scroll down on the homepage until you see the points program.



3. Go to **"Earn 500 Points for Completing Your Annual Well Visit"** and click on **"Complete Form."**

➤ **Preventative Health**  
Earn 500 points for completing your annual well visit - [Complete Form](#)  
Earn 200 points for each preventative exam completed - [Complete Form](#)  
Earn 200 points for each vaccination completed - [Complete Form](#)

4. Click "Complete Form", fill out the required information, submit your completed well-visit form signed by your physician under "Required: Please upload your annual well-visit form" and hit "Finish." **Well-visits must be completed between 12/15/2024-12/12/2025 to be accepted.**

A screenshot of a computer monitor displaying the 'Annual Physical Proof of Completion Form'. The form has a title bar with icons for home, user, calendar, and a person. The main heading is 'Annual Physical Proof of Completion Form'. Below the heading, it says 'Please complete the below information in order to earn your Annual Physical points'. The form contains several fields: 'Annual physical date:' with a calendar icon, 'Name of physician:' with a text input field, and 'Required: Please upload your annual well visit physician form' with a 'Select files...' button and a 'Drop files here to upload' area. At the bottom, there is an 'Acknowledgement' section with a checkbox and the text 'By checking this box I acknowledge that I have completed my annual physical'.

# Build Wellness Reimbursement

## Important Reminders:

Follow the steps below to earn up to a **\$250 reimbursement** annually for exercise equipment and programs! Build Wellness reimbursements must be submitted to the ELP Gateway by December 12, 2025.

- 1** Complete the health risk assessment (HRA) within the [Kapnick Strive portal](#) and complete your annual well-visit with your physician. Upload your completed well-visit physician form to the portal.
- 2** Complete the Wellness Reimbursement form.
- 3** Visit the ELP Gateway:
  - Click Employee Tools, then click Expenses
  - Click New Expense Item
  - Complete the required fields, add Jessica Laverick as the approver, charge to #61215.0001
  - Upload Wellness Reimbursement form and your receipts
  - Click Save and Close
  - Please note: Be sure that the expense request was submitted and is not in the "Items Pending Submission" section



**Your purchase MUST be dated after your eligibility requirements have been met.**

# Have You Been to the Doctor Lately?

Get back on track by scheduling regular preventive care visits!

- Annual well-visit
- Dental cleanings
- Eye exam
- See all recommended screenings by age below:

Female	Age 18-39	Age 40-49	Age 50-64	Age 65+	Male	Age 18-39	Age 40-59	Age 60+
Self breast exam - every month	✓	✓	✓	✓	Sigmoidoscopy		Every 5 years (45+)	Every 5 years
Pelvic exam - every year	✓	✓	✓	✓	Cholesterol, blood sugar, blood pressure - every year	✓	✓	✓
Pap test every 1-3 years	Start at age 21	✓	✓		STI Screening - every year per risk	✓	✓	✓
Mammogram		Yearly	Every 2 years	Every 2 years	HIV - every year per risk	✓	✓	
STI Screening - every year per risk	✓	✓	✓	✓	Colonoscopy		Every 5 years if low-risk (45+)	Every 10 years if low-risk
Cholesterol, blood sugar, blood pressure - every year	✓	✓	✓	✓	Annual physical and skin exam	✓	✓	✓
Colonoscopy		Every 10 years if low-risk (45+)	Every 10 years if low-risk	Every 10 years if low-risk	Prostate cancer/rectal exam and PSA		Speak with Doctor (55-59)	Speak with Doctor (60-69)
Annual physical and skin exam	✓	✓	✓	✓	NOTE: For all preventive screenings, speak with your doctor about your personal risk factors & the pros and cons of screening.			
Bone Density Scan - ask provider			✓	✓				