

# 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 LA Fitness/Esporta Fitness, **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.

**LA Fitness / Esporta Fitness membership**

**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](http://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.

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.



**LA | FITNESS**

[www.lafitness.com](http://www.lafitness.com)

**Duval County**

11901 Atlantic Blvd., Ste.  
800  
Jacksonville, FL 32225  
Tel: (904) 596-0080



[www.esportafitness.com](http://www.esportafitness.com)

**Duval County**

985 Atlantic Blvd  
Atlantic Beach, FL 32233  
Tel: (904) 853-2210

3600 University Blvd. West  
Jacksonville, FL 32217  
Tel: (904) 900-6393

6000 Lake Gray Blvd.  
Jacksonville, FL 32244  
Tel: (904) 999-3289

11250 Old St. Augustine  
Rd., Ste. 16  
Jacksonville, FL 32257  
Tel: (904) 512-0551

661 Blanding Blvd., Ste.  
800  
Orange Park, FL 32073  
Tel: (904) 579-2329