



CITY OF LAREDO
Human Resources Department
Employee Health and Wellness Division
Wellness Incentive Checklist FY 2024-2025



The City of Laredo is excited to continue the Wellness Incentive Program for eligible regular full-time City employees that have completed a 12-month probationary period to receive two (2) wellness days and a free 1-year membership to all City of Laredo Recreation centers, upon the completion of **ten (10)** wellness activities for fiscal year 2024-2025.

| CHOOSE FOUR (4) ACTIVITIES FROM THE FOLLOWING LIST (MANDATORY) | |
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| | Buena Vida Panel completed at the Employee Health and Wellness (EHW) clinic on/after October 1, 2024 with results provided by a (EHW) staff member. |
| | Provide proof of Primary Care Physician (PCP) (Family Medicine or Internal Medicine only) by employee with an office visit. Must have been performed within the last 12 months from the start of Fiscal year 24-25. (Accepted proof: Explanation of benefits or medical documentation/letter provided from PCP by employee for verification). |
| | Minimum of (4) blood pressure health screenings completed within the fiscal year, once per week, and (1) counseling session by a EHW staff member. (Health stations located at City Hall, Public Works, Health, Solid Waste, City Hall Annex, Police, Utilities, Building, Fire or Parks). |
| | Attend one (1) Health & Benefits training. |
| | Annual Physical for employee or spouse covered under the City of Laredo Medical Plan (must be coded as annual physical). Must be completed by PCP. (Explanation of benefits or medical documentation/letter provided by employee from their PCP for verification that was performed within the last 12 months from the start of Fiscal year 24-25.) |
| | Preventative exams for employees or spouse covered under the City of Laredo Medical Plan (PAP, Mammogram, or Colonoscopy). Must have been performed within the last 12 months from the start of Fiscal year 24-25. |
| | Return iFOBT kit (Immunological Fecal Occult Blood Test) to EHW clinic. |

| CHOOSE FOUR (4) ACTIVITIES FROM THE FOLLOWING LIST (MANDATORY) | |
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| | Attend one (1) one-on-one Nutrition Services consultation. |
| | Attend one (1) Risk Management training. |
| | Attend one (1) Employee Assistance Program training provided by the City's EAP provider. |
| | Attend one (1) Nutrition Services group class. |
| | Attend one (1) Physical Activity class provided by the Parks & Recreation Department. |
| | Flu shot administered by Employee Health & Wellness clinic only. |

| CHOOSE TWO (2) ACTIVITIES FROM THE FOLLOWING LIST (Optional) | |
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| | Complete an InBody test at EHW clinic. |
| | Provide proof of Annual Dental cleaning (employee only). |
| | Provide proof of preventative Routine Eye Care exam and/or an eye vision exam performed within the last 12 months from the start of Fiscal year 24-25 on or after October 1, 2024 (employee only). (Acceptable proof: explanation of benefits or medical documentation) |
| | Complete the 2024 mandatory Benefit Enrollment during first week of July 22, 2024 to July 28, 2024. |

Participation/ attendance of events requires prior approval of your supervisor and/or department director
 *** All activities must be completed within FY2024-2025; last day to submit documentation is August 31, 2025***

For more information, please contact our office at (956) 727-6470
Wellness Incentives for FY 2024-2025