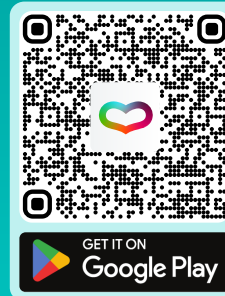




2025-2026 Wellness Program

Download the Mobile App

Access your wellness program information, submit forms, and track your progress — all in one place. Connect with our wellness team and stay on top of your goals, right from the app.



Need Support or Have Questions?

For questions about your Wellness Program, including your status or deadlines, select Contact Us on the Portal homepage or in the Wellworks For You Mobile App.



Need Live Assistance?

Chat Live:
Monday to Friday 9:00 am ET to 5:00 pm ET

Our “Chat Live” feature will give you access to chat with one of our helpful representatives during our regular business hours to answer any questions and guide you on a path towards wellness.

Phone Support:
Monday to Friday 8:30 am ET to 7:00 pm ET

You can also call 800.425.4657 to reach the Wellness Team during our regular business hours.



2025-2026 WELLNESS PROGRAM Requirements

REQUIREMENT

DEADLINE

1

Proof of Annual Physical Form

Complete an annual physical exam with your physician between **October 1, 2025** and **September 30, 2026**. Take this packet with you to your appointment and have your doctor complete and sign the Proof of Annual Physical Form. It is the **participant's responsibility** to return the form as part of the completed packet by **September 30, 2026**.

- **Have you already received your annual physical within the above timeframe?** Take or send the Proof of Annual Physical Form to your physician's office to have it signed and completed.

If you **do not** have a doctor, you can select a doctor within the **City of Hibbing** health benefit plan network. If you need assistance in finding a physician, please go to **www.AmeriHealthAdministrators.com**. Little clinics and minute clinics do not qualify as Primary Care Visit completion.

September 30, 2026

2

Submit Your Completed Form

For submission methods, please refer to page 5 of this guide.

PLEASE NOTE: Submission via Wellness Portal or Wellworks For You Mobile App, will result in an immediate confirmation that your form was received. Any other means of submission requires you to log into your Wellness Portal or Wellworks For You Mobile App to confirm your form was processed.

September 30, 2026



Eligibility

Medically enrolled employees can complete steps 1-2 above by September 30, 2026, to receive a \$50/month Premium Differential effective January 1, 2027.

Your new program details are outlined in this guide.

IMPORTANT! New Hire Requirements

- If you are eligible for benefits before July 1, 2026, you must complete the Proof of Annual Physical Form by September 30, 2026 in order to receive the \$50/month Premium Differential in 2027.
- If you are eligible for benefits on or after July 1, 2026, you are not required to complete the Proof of Annual Physical Form and will automatically receive the \$50/month Premium Differential in 2027.



Log in to the Wellness Portal

To track your participation, you must be registered under the City of Hibbing Portal. Follow the steps below to log in.

Your account has been created for you.

1. Go to www.wellworksforyoulogin.com
2. Select **Login**
3. Accept the terms of the Consent Form
4. Fill in the required information

	Employee
Username Format	COHEmployeeID
Password Format	Birthdate in MMDDYYYY
Example	UN: COH1234 PW: 05151988



Please Note:

Use the temporary password only for your first login—you'll be prompted to set a new one. If you've logged in before, use your existing password.



Retrieve Your Password or Username

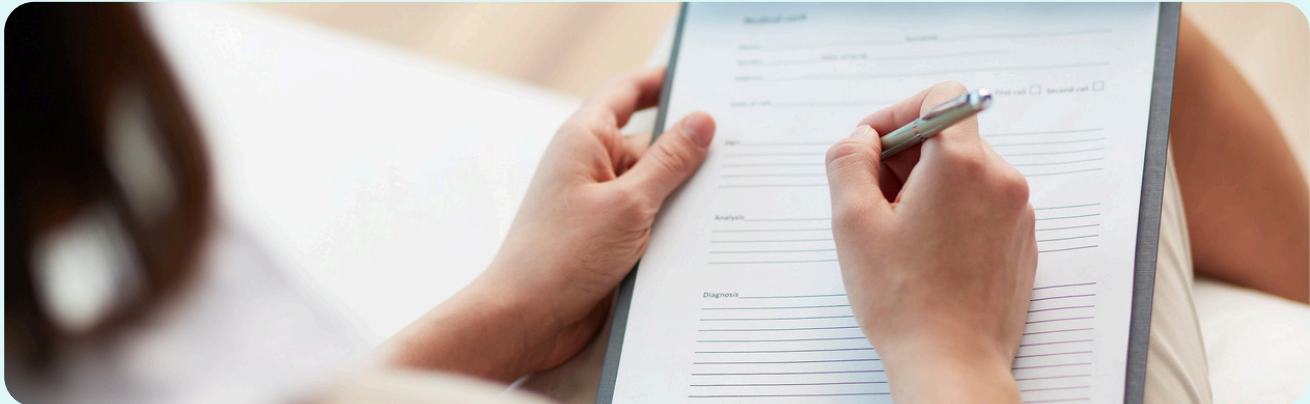
FORGOT YOUR USERNAME OR PASSWORD?

1. Click the link **Forgot Username** or **Forgot Password**
2. Follow the instructions to retrieve your username or reset your password
3. If issues persist, please contact Wellworks For You at **800.425.4657**

In accordance with HIPAA confidentiality laws, your individual data is accessible only to you and the third-party vendor, Wellworks For You.



2025-2026 WELLNESS PROGRAM Form



Wellworks FOR YOU **HIBBING** FOR NEW OFFICE USE ONLY: 80075_01_00004

ANNUAL PHYSICAL PROOF OF VISIT FORM

Take this form with you to your scheduled doctor's visit to be completed and signed by the attending physician. It is the participant's responsibility to submit the Annual Physical Proof of Visit Form as part of the wellness program to be returned to Wellworks [Egg](#). You are advised below, by September 30, 2026.

PATIENT CONTACT INFORMATION

COMPANY NAME: City of Hibbing

FIRST NAME: _____ LAST NAME: _____

DATE OF BIRTH: _____ ☐ MALE ☐ FEMALE EMPLOYEE ID: _____

PHONE: _____ EMAIL: _____

PHYSICIAN INFORMATION

PHYSICIAN OFFICE/NAME: _____

OFFICE PHONE/ADDRESS: _____

This Annual Physical Proof of Visit Form confirms that the patient named above received the following preventive care between October 1, 2025 and September 30, 2026.

GENERAL

☐ Annual Preventive Exam
(physical performed by Primary Care Physician)

Physician

I certify that the patient listed above received an annual physical on: 10/1/2025

Physician Signature: _____ Date Signed: _____

SUBMIT YOUR COMPLETED FORM BY SEPTEMBER 30, 2026

All forms should be submitted to the Wellworks Forms Department. Submit your completed forms in one (1) of the following ways.

- **Upload to Portal:** Click the **Upload a Form** tile from the homepage, select the event title from the dropdown and upload your form to the portal. This will be securely emailed for processing. Users are limited to **one (1) file** per email.
- **Upload to Mobile App:** Use your smartphone to take a photo of your completed form. Open the Wellworks [Egg](#) You Mobile App, navigate to **Home** > **Upload a Form**, tap **Click to Upload**, select the appropriate Wellness Event from the dropdown, and click **Upload to submit**.
- **Email:** forms@wellworksforu.com

PLEASE NOTE: Wellworks [Egg](#) You requires [at least 72 hours](#) for processing and participation to be updated in the Wellness Portal.

For form submissions, please submit via a method listed above. For additional support chat with us live on the wellness portal (not available on the mobile app).

Wellworks FOR YOU

Proof of Annual Physical Form

[Download Form](#)



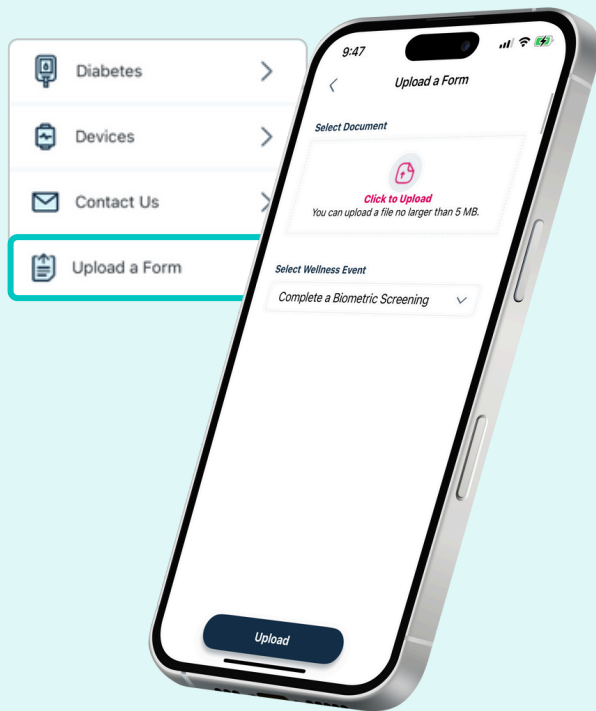
2025-2026 WELLNESS PROGRAM Form Upload

Instructions

Find all forms and documents in the Wellness Locker, accessible from the Portal menu or homepage. Download, complete, and submit them to the Wellworks Forms Department.

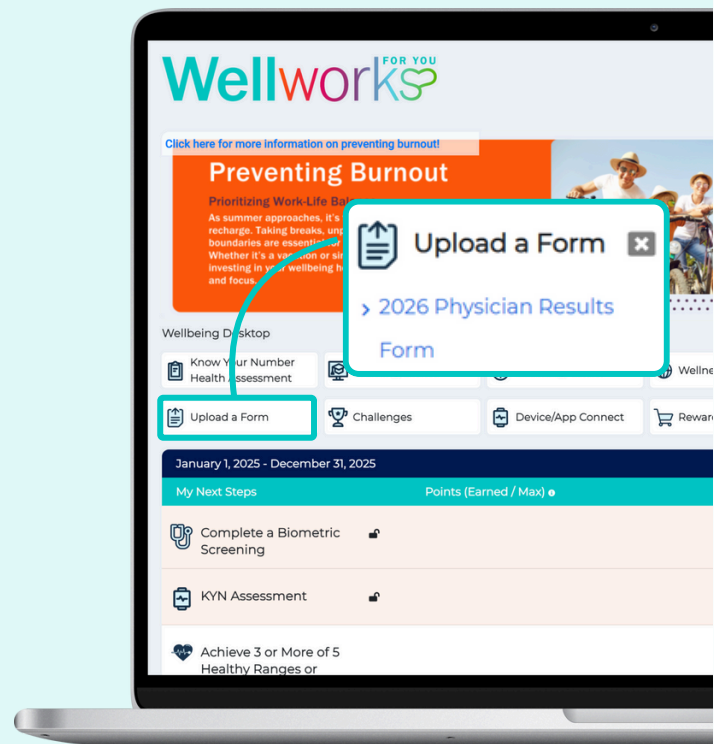
Upload via Mobile App

Take a photo of your form using your smartphone and upload it via the Mobile App. Go to the **Upload a Form** tab in the top left menu, select **Click to Upload**, and choose the relevant event from the Select Wellness Event drop-down. Users are limited to **one (1)** file per submission.



Upload to Portal

Click the **Upload a Form** tile from the homepage. Select the event title from the dropdown and upload your form to the portal. Users are limited to **one (1)** file per submission.



Please Note:

Wellworks For You requires 7–10 business days to process submitted forms and update your Wellness Portal. It is your responsibility to submit all required documents, and we recommend keeping a copy for your records.