



**Baptist
Health**

How to Submit Your Annual Preventive Visit Form

01

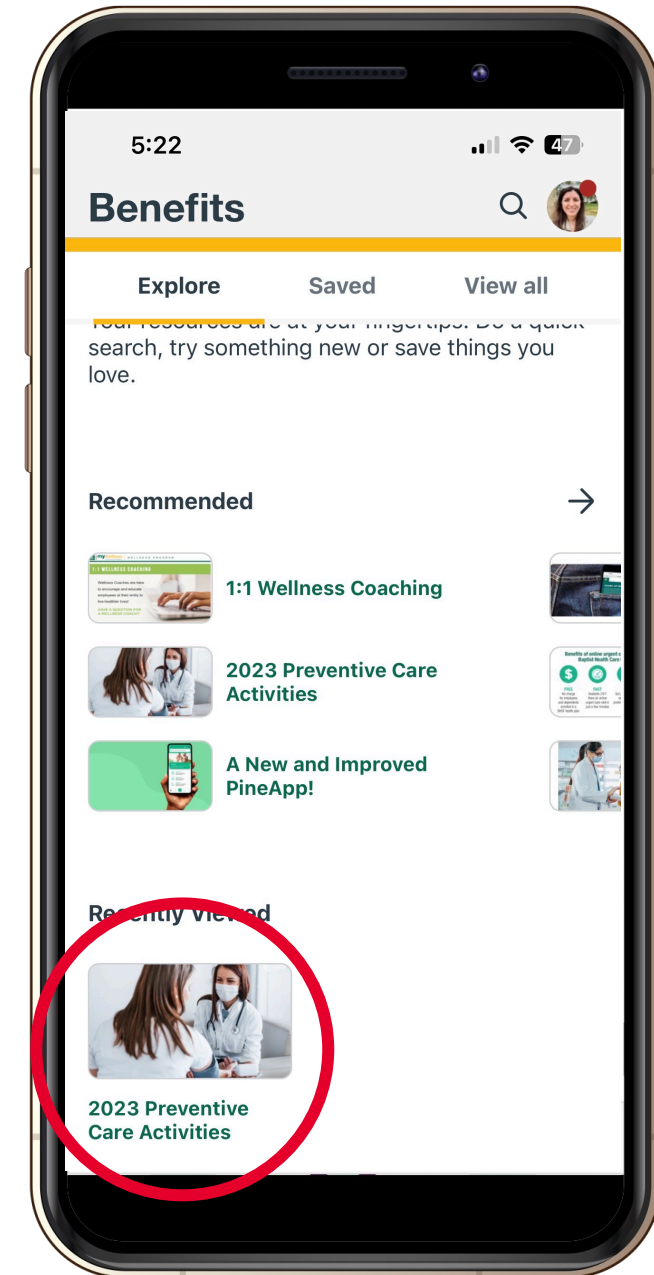
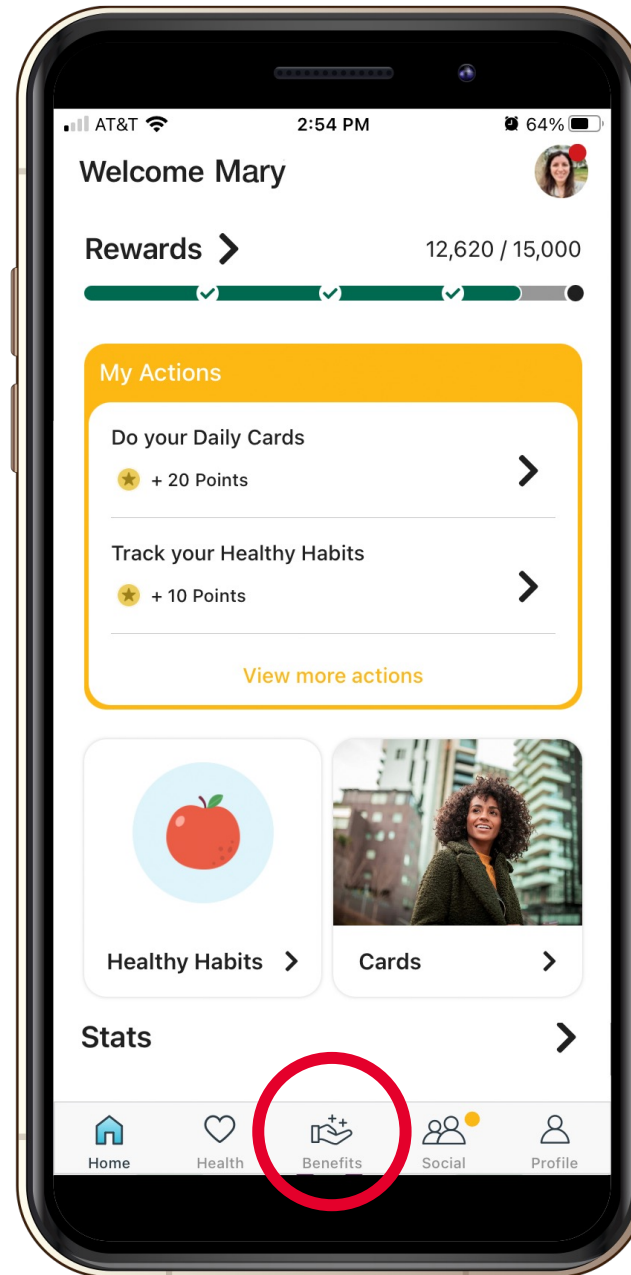
Open the Virgin Pulse / My Wellness Advantage app on your phone or computer

02 (Phone)

- Select the **Benefits** tab
- Select **Preventive Care Activities**

03

Select **Upload your Completed Annual Preventive Care Visit Form** link




02 (Desktop)

- Select **Benefits**
- Select **Preventive Care Activities**

03

Select **Upload your Completed Annual Preventive Care Visit Form** link

Baptist Health Home Health **Benefits** Social More Support 

Rewards 🌟 3,310 / 15,000 Points ▼


BENEFITS

Explore Saved View All Search


Let's dive in

Your resources are at your fingertips. Do a quick search, try something new or save things you love.

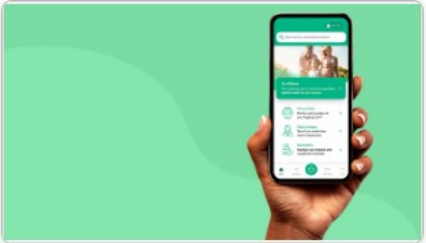
Recommended →



1:1 Wellness Coaching



2023 Preventive Care Activities



A New and Improved PineApp!



ANNUAL PREVENTIVE VISIT FORM INSTRUCTIONS

Employees and Covered Spouses:

Employees and Covered Spouses can earn a \$500 deductible credit for their Pineapple Premier (Aetna) health plan by submitting their Annual Preventive Visit form completed by a Primary Care Physician (\$300 Annual Preventive Visit + \$200 Biometric Results).

In order for the form to be accepted and the deductible credit applied:

- Only results from November 1 through October 31 will be accepted.
- The form must include the provider signature and printed name or stamp.
- You must upload your Annual Preventive Visit form by clicking the "UPLOAD DOCUMENT" button.
- Using the results reported on your Annual Preventive Visit form, complete the fields below.
- When complete, click **SUBMIT** button.

You will receive an email confirming your submission. If you do not receive it, please contact Wellness Advantage at 786-596-2387 (8:30 a.m. - 4:30 p.m.) or email wellnessadvantage@baptisthealth.net.

NOTE: Wellness Advantage must receive this form by October 31 in order for you to receive credit for these wellness activities. It is **your responsibility** to ensure delivery before this deadline.



05

To upload your Annual Preventive Visit Form completed by your physician, follow these steps:

- Scan or take a picture of the completed form.
- Click **Upload File**.
- Click **Choose File** and find your (saved) document.
- Click **Upload File**.

1) Please upload the completed form below.

* must provide value

 Upload file


Upload file



Please upload the completed form below.* must provide value

Select a file then click the 'Upload File' button

Choose File No file chosen

 Upload file

Max file size: 1 MB



06

Complete fields 2-20 with required information from your Annual Preventive Visit form and click the **Submit** button at the bottom of the page.

2) Please select one
* must provide value

☐ EMPLOYEE
☐ SPOUSE OF BAPTIST HEALTH SOUTH FLORIDA EMPLOYEE

Name of **PROVIDER** completing Annual Preventive Visit

3) First Name of the PROVIDER
* must provide value

4) Last Name of the PROVIDER
* must provide value

5) Credentials of the PROVIDER
* must provide value

☐ MD
☐ PA
☐ ARNP
☐ D.O.
☐ Healthy Hub RN
☐ Other

6) Date of Annual Preventive Visit or Date of Biometric Screening:
* must provide value

7) Employee or Spouse First Name
* must provide value

8) Employee or Spouse Last Name
* must provide value

9) Date of Birth
* must provide value

10) Employee or Spouse ID #:
* must provide value

Spouse ID = Employee ID + S (no space; case sensitive, i.e. 1234S)

reset

11) Best contact number
* must provide value

12) Provide e-mail address
* must provide value

13) Are you pregnant?
* must provide value

☐ Yes
☐ No

14) Are you a tobacco user?
* must provide value

☐ Yes
☐ No

15) Enter Systolic Blood Pressure (Upper)
* must provide value

16) Enter Diastolic Blood Pressure (Lower)
* must provide value

17) Enter height in inches
* must provide value

i.e. , 5 ft = 60"; 6 ft = 72"

18) Enter weight in pounds
* must provide value

19) Total Cholesterol
* must provide value

20) Blood Glucose (non-fasting)
* must provide value

Submit

You will receive an email confirming your submission.

