

# Franklin County Cooperative

## Notice of Employer Sponsored Wellness Program

**ThriveOn** is a voluntary wellness program available to all benefit-eligible employees and benefit-enrolled spouses/domestic partners. The program is administered according to federal rules permitting employer-sponsored wellness programs that seek to improve employee health or prevent disease, including the Americans with Disabilities Act of 1990, the Genetic Information Nondiscrimination Act of 2008, and the Health Insurance Portability and Accountability Act, as applicable, among others. If you choose to participate in the wellness program you will be asked to complete a voluntary health risk assessment or "HRA" that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease). You will also be asked to complete a voluntary biometric screening, which includes a blood test that screens for health concerns including but not limited to, diabetes and high cholesterol. You are not required to complete the HRA or to participate in the biometric screening or any other medical examinations.

However, employees and spouses/domestic partners who choose to participate in the wellness program will receive a cash incentive on their paycheck for completing certain activities and/or a reduced deductible on the health plan for completion of other activities. Although you are not required to complete the HRA or participate in the biometric screening, only employees and spouses/domestic partners who do so will receive the corresponding incentives. For more details, please refer to the ThriveOn incentive brochure ([click here to download the 2024 Incentive Brochure](#)).

Additional incentives of up to \$200 for Well-Being Activities and \$150 per quarter for gym membership reimbursement may be available for employees and spouses/domestic partners who participate in certain health-related activities. Please refer to the ThriveOn incentive brochure for specific details regarding activity choices ([click here to download the 2024 Incentive Brochure](#)). If you have any questions about the ThriveOn program or incentives, please contact ThriveOn directly at [thriveon@franklincountyohio.gov](mailto:thriveon@franklincountyohio.gov) or 614-525-5268.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks and may also be used to offer you services through the wellness program, such as health coaching, chronic disease education, and mental health resources. You also are encouraged to share your results or concerns with your own doctor.

## Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although ThriveOn and the Franklin County Cooperative may use aggregate information to design a program based on health risks in the workplace, ThriveOn will never disclose any of your personal information either publicly or to the employer, except as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment or benefit eligibility.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who could receive your personally identifiable health information are a registered nurse or a health coach in order to provide you with services under the wellness program.

In addition, all medical information obtained through the wellness program will be maintained separate from your personnel records, information stored electronically will be encrypted, and no information you provide as part of the wellness program will be used in making any employment decision. Appropriate precautions will be taken to avoid any data breach, and in the event a data breach occurs involving information you provide in connection with the wellness program, we will notify you immediately.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact Cheryl Henney, Program Compliance Specialist, at 614-525-4534 or [Cheryl.henney@franklincountyohio.gov](mailto:Cheryl.henney@franklincountyohio.gov).