

# Wellness Incentive Edit Instructions

To edit your Wellness Incentive selections follow the steps below

1) Go to [CUSD External](https://cusdexternal.cusd80.com/EmployeeVerifications)

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## Human Resources Department

**Wellness Incentive**

**PURPOSE:**  
To empower employees to take charge of their health, leading to improved overall well-being. CUSD is committed to fostering a culture of wellness by promoting healthy habits, proactively managing health risks, and supporting the monitoring of medical conditions. Prioritizing employee health creates a ripple effect of positive outcomes, contributing to a healthier, more productive workforce and a stronger community.

**REWARD:**  
CUSD offers a **\$400 wellness incentive** to employees who meet program requirements and are enrolled in a CUSD health insurance plan. Covered spouses who meet the requirements are also eligible for an additional **\$400 wellness incentive**.

**ELIGIBILITY REQUIREMENTS:**  
Enrolled in CUSD medical insurance on or before **January 1, 2025**.

**ACTIVITY TIMELINE:**  
Fulfill your **2024-2025 employment contract** and remain enrolled in a CUSD medical plan through **June 30, 2025**.

**WELLNESS INCENTIVE PAY:**  
Your incentive will be paid depending on the plan elected for the 2025-2026 benefit enrollment.

**REQUEST TO PARTICIPATE AND REQUIRED DOCUMENTATION MUST BE RECEIVED BY MAY 25, 2025**  
For detailed information, please [click here for the wellness incentive pamphlet](#).

Only one submission per school year.

Start A New Submission

Submitted Date	Employee Approved	Spouse Approved	Status	Action
			Unsubmitted	<a href="#">Edit</a>

2) Click on Edit button

3) Make necessary changes

Or attach documents.

Is the employee participating? No  Yes

Please choose either a physical annual exam with lipid panel and A1C or a biometric screening held by CUSD and upload your file.  
*Documentation must be from healthcare provider OR have [Proof of Participation](#)*

Physical Annual Exam w/ Lipid Panel and A1C  Choose Files No file chosen   
A file upload is required.

Please choose either a physical annual exam with lipid panel and A1C or a biometric screening held by CUSD and upload your file.  
*Documentation must be from healthcare provider OR have [Proof of Cancer Screening](#)*

Prostate Exam  Choose Files No file chosen   
A file upload is required.

**Must click on Save** for changes to be updated. If you click on Exit changes are not saved.

4) Once final updates have been made and required documents are attached click on Save and Submit.

**MUST click on Save and Submit to finalize the process.**

Upon submission an email informing you know that your submission was received will be sent. Please allow 24 hours to receive the email. If you do not receive an email please log into your Wellness Incentive portal and confirm submission. If submitted please contact the Benefits Department.

**REMINDER:**

**APPROPRIATE DOCUMENTS MUST BE ATTACHED. SUBMISSION CANNOT BE MADE IF DOCUMENTS ARE NOT ATTACHED**