



 Wellness Program

You must complete all steps in order for your annual award to be processed.

Please submit this form to Lithia's Benefits Department and allow 4 weeks for processing.



2019 Preventative Focus Form

Form being filled by: *Please check one.*

Employee Spouse*

SECTION 1: To be completed by Lithia Medical Plan Member (Employee or Spouse)

First Name

Last Name

Employee Number

Contact Phone

Email

Location

SECTION 2: To be completed by Provider

Provider Name

Provider Telephone

Wellness Exam / Counseling Completed or this member is up to date on their preventative exams and screenings based on recommended guidelines

Yes No

Provider Signature

Date

SECTION 3: How to return to your Benefits Department

Fax: [541] 864-1710

Scan: benefits@lithia.com

Mail: 150 N Bartlett Medford OR, 97501

**Spouses, please include your spouses Employee Number to insure your PFA gets processed in a timely manner.*