

## Instructions for the Physician Results Report Form

One of the steps to earn the Rural Metro Wellness Incentive for the 2013 plan year is to have your Wellness Screening results submitted to Quest Diagnostics. Participants will be able to go to a Quest Diagnostics Patient Service Center or come to an on-site screening later this year. Or, if you have visited your own physician, you may use the lab test results if they were done after **1/3/2013**.

### What do you need to do?

Print the form, complete the “Participant Information” section and take it with you to your physician. Ask your physician to complete the form and return a copy to you.

Fax the completed form to the confidential Quest Diagnostics fax number on the form. Quest Diagnostics staff will not confirm receipt of your form so keep a copy of your fax confirmation statement. Quest will not accept forms after **5/31/13**.

Allow two weeks for Quest staff to enter your data into the Blueprint for Wellness site.

Please register on the Quest Diagnostics website at [my.blueprintforwellness.com](http://my.blueprintforwellness.com) and provide your e-mail address. That way, you’ll be notified when your results are ready to be viewed online. Otherwise, look for your results in the mail within three weeks (two to enter the data and a week of mail time).



## Physician Result Form

**Completed form must be faxed to 855-794-1391**

Patient's Employer Wellness Program Information	
Account	QLS Number (provided by Quest)

Wellness Participant Completes			
Wellness Participant Name (Last, First, Middle Initial)		Email Address	
		Date of Birth (MM/DD/YYYY)	Phone
Address			
City		State	Zip Code
Wellness Participant Signature			Date

**The information provided on this form will be kept confidential.**

Physician Office Completes					
Date of Testing	Testing and measurements must have been completed between these dates:				
Biometric Screening Measurement	Screening Values				
	Enter NG for any result not available for reporting.				

Physician Office – Below Information Must Be Complete to Process		
Physician or Physician Designee's Signature		Date
Physician's Name (please print)	UPIN/NPI	Phone Number

**Wellness Participant Information:**

- Physician Results Collection Form option is available for those participants who cannot participate at an on-site event or Patient Service Center. By submitting this form, you are requesting your physician to report laboratory and biometric results to Quest Diagnostics for your Health Risk Screening.
- You are responsible for ensuring your doctor returns this form by the deadline. Your results will not be processed if your form is received after
- For an individual participant only **one** physician form can be submitted.
- Physician results **cannot** be combined with or used to override any actual measured results by Quest Diagnostics.

For questions please contact the Blueprint for Wellness Customer Support Center by email at [wellness@questdiagnostics.com](mailto:wellness@questdiagnostics.com) or by calling 866-908-9440 available (Monday – Friday 7 a.m. – 8:30 p.m. CST and Saturday 7:30 a.m. – 4 p.m. CST).