

Physician Wellness Screening Results Form



Kickoff June 1, 2026 - October 31, 2026

Dear Participant,

Foster Farms is working with Navigate to help you learn about your current health AND give you a way to save on what you pay for medical insurance in 2027. As an employee or covered spouse of Foster Farms, you have the opportunity to participate in your company's Wellness Program administered by Navigate. Participation is easy!

Important: Please complete the following steps to ensure your results are received by 10/31/2026.

1. Schedule an annual preventive exam appointment with your Primary Care Physician to ensure there is enough time for you to be seen and your lab work processed and returned prior to program deadline. Remind your provider that the screening should be coded as a "preventive care" visit. Make sure the provider you see is in your benefit plan network or you may incur an expense.

*If your annual preventive exam falls between **November 1, 2025 – October 31, 2026**, your results may be used to fulfill the requirement. Please have your healthcare provider fill out the enclosed Physician Form and return to Navigate.*
2. Complete the "Participant Information" section of the enclosed Physician Form prior to your health screening and sign and date the form. The remainder of the form is for the provider to fill out.
3. Remember to fast 10 to 12 hours prior to your appointment. Nothing to eat or drink except water. Take medication as prescribed, and if you are unable to fast due to a medical condition, please follow your doctor's orders.
4. Take the Physician Form to your appointment. Ask your physician to fill out the "Biometric Screening Results" section of the form with your physical results. This information is time sensitive and must be completed, signed by your physician and uploaded **by 10/31/2026**. Physician signature must be present to process results. **An incomplete form may result in nonparticipation status.**
5. It is your responsibility to upload your Physician Form to www.FosterFarmsWellness.com.
 - a. To upload the completed form: Scan it to create a digital copy or take a picture on your smartphone, then return to the portal and select Complete Form from the menu next to Annual Preventative Exam.
 - i. Upload your completed form in the space provided. Your status will change to "Pending" after the form has been uploaded.
 - ii. Once your form has been reviewed, your status will update to "Complete" and your biometric results will be available for review.
6. Results are typically available within 10 business days. Knowing your numbers and areas of risk is an important part of enhancing your health and wellbeing! Remember to log back in to your Navigate account to view your information.

Physician Form

Participant Information (Completed by patient - please print)

Team Member ID: _____

LAST NAME:

MIDDLE INITIAL:

FIRST NAME:

SEX: ☐ Male ☐ Female ☐ Other
☐ Prefer not to answer

PHONE NUMBER: - -

BIRTH DATE: / /

STREET ADDRESS:

CITY:

STATE:

ZIP CODE:

EMPLOYER NAME: Foster Farms

EMAIL:

PARTICIPANT'S SIGNATURE (REQUIRED): _____ DATE: _____

PARTICIPANT'S NAME (PLEASE PRINT): _____

Biometric Screening Results (Completed by physician)

EXAMINATION DATE: / /

HEIGHT:

BLOOD PRESSURE mmHg:

FT. IN.

/

WEIGHT (LBS):

BODY FAT %:

TOTAL CHOLESTEROL:

WAIST CIRCUMFERENCE (INCHES):

A1C:

TRIGLYCERIDES:

LDL:

N/A

BMI:

COTININE:

HDL:

FASTING GLUCOSE:

N/A

PHYSICIAN'S SIGNATURE (REQUIRED): _____ DATE: _____

PHYSICIAN'S NAME (PLEASE PRINT): _____