

CAPE COD MUNICIPAL HEALTH GROUP

c/o Group Benefits Strategies
15 Midstate Drive, Ste. 110
Auburn, Massachusetts 01501

August 25, 2011

Mr. Timothy Carroll
Executive Secretary
Town of Chilmark
P.O. Box 119
Chilmark, MA 02535

Re: Participation in Cape Cod Municipal Health's Group FY12 Work Site Wellness Programs

Dear Mr. Carroll:

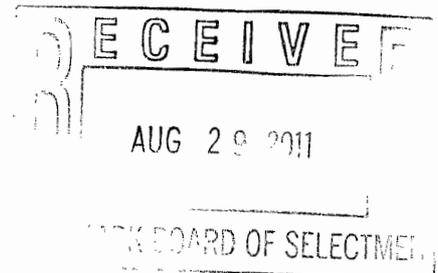
The Cape Cod Municipal Health Group ("CCMHG") is pleased to announce the continuation of its successful work site wellness programs for the upcoming fiscal year. This year's wellness programs, describe in detail in Attachment A, will once again be offered primarily at your work site.

The CCMHG has elected to continue these programs because we believe that wellness initiatives are one of the most cost effective ways to combat rising health care costs for our employees. Implementation of these initiatives requires both your permission and support. **We are requesting that you indicate which programs you will participate in this upcoming fiscal year by completing Attachment B, Wellness Participation Agreement, and returning it to either Deanna Desroches for all Cape Cod Units OR Judith Jardin for all Martha's Vineyard Units. Their respective contact information is listed below.** Your participation will authorize your employees to participate in the programs as defined in Attachment A.

Deanna Desroches
Wellness Consultant for all Cape Cod Units
92 Homers Dock Road
Yarmouth Port, MA 02675
Email: dldesroches@comcast.net
Phone: 508-362-6106

OR

Judith Jardin
Wellness Consultant for all Martha's Vineyard Units
P.O. Box 357
Chilmark, MA 02535
Email: jmjardin@verizon.net
Phone: 508-645-9274



We sincerely hope that you will support these wellness initiatives and will authorize your employees to participate in the programs as described in Attachment A. If you have any questions about the programs or would like to discuss the programs or other ideas you may have for programs within your Unit, please contact CCMHG Wellness Committee Co-Chair's Maggie Downey (508-375-6636) or Marie Buckner (508-833-8061).

Sincerely,



Margaret T. Downey
Wellness Co-Chair
Barnstable County Representative



Marie Buckner
Wellness Co-Chair
Town of Sandwich Representative

Enclosure

cc: CCMHG Board Member
Benefit Administrator

Attachment A

Cape Cod Municipal Health Group FY12 Wellness Programs FOR MARTHA'S VINEYARD UNITS

- **Work Site Screenings** – Hold prevention/screening clinic at the work site. Attendance is voluntary for employees and employers would allow employees to attend “on the clock.” Screenings offered include:
 - * Blood Pressure
 - * Cholesterol and Glucose
 - * Skin Cancer
 - * Hearing

- **Go RED for Women**

- **Unit Wellness Grants** – Each CCMHG unit will be eligible for a wellness grant. Grant funds are to be used for employee wellness initiatives. The amount of the grant is based on the number of employees in each CCMHG participating unit as follows:

NUMBER OF EMPLOYEES	GRANT AMOUNT
0-50	\$150.00
51-150	\$250.00
151-300	\$400.00
301-600	\$600.00

In order to receive the grant, Units must complete a Grant Application and submit it to Marie Buckner, CCMHG Wellness Committee Co-Chair at mbuckner@townofsandwich.net. Please contact her directly to receive the FY'12 Grant Application. Grant requests can be submitted between September 1, 2011 and May 1, 2012.

Attachment B
FY12 Wellness Participation Agreement
FOR MARTHA'S VINEYARD UNITS

The _____ will participate in the Cape Cod Municipal Health Group Wellness Programs identified below

- Work Site Screenings**
- Unit Wellness Grant**
- Go RED for Women**

The _____ (Governmental Unit Name) agrees to do the following:

1. Identify a key contact person for Wellness in your organization. The contact person shall be _____
(please include email and telephone contact information).
2. Disseminate information (enrollment forms, brochures etc...) to employees via payroll stuffers, organizational-wide emails, employee bulletin boards, or some other appropriate means of communicating with employees.
3. Collect and submit all enrollment forms for wellness programs.
4. Work with wellness consultant to schedule all wellness events held on your job site.
5. Set-up the rooms for the work site screenings consistent with the room lay out design provided by the wellness consultant.

The Cape Cod Municipal Health Group Wellness Consultant shall be responsible for the following:

1. Provide wellness program information (enrollment forms, brochures, etc...) to the organization in both electronic and hard copy format at least 30 days prior to the start of all events.
2. Respond to questions from the organization via email/telephone.
3. Coordinate scheduling events with the designated contact.
4. Provide a room lay out plan to the town for the work site screenings.
5. Coordinate all work site screenings for the organization; including arranging for all vendors to be at various locations as specified by the organization.
6. Track participants and other required reporting information on behalf of the organization.

_____, 2011
Signature of Authorized Representative

**PLEASE GET THIS FORM TO JUDIE JARDIN, WELLNESS CONSULTANT BY
SEPTEMBER 16, 2011**