

NOTICE REGARDING WELLNESS PROGRAM

Foth's Workin' Well is a voluntary wellness program available to all eligible members and their spouses/domestic partners (DP). If you choose to participate in the wellness program you will be asked to:

- Complete a voluntary health risk assessment or "HRA" that asks a series of questions about your health-related activities and behaviors and whether you have or had certain medical conditions (e.g., cancer, diabetes, or heart disease).
- Complete a biometric screening, which will include a blood test for Nicotine (cotinine); Total Cholesterol; LDL Cholesterol; HDL Cholesterol; Chol/HDL Ratio; Triglycerides; Glucose; A1C, Uric Acid; Bilirubin; SGOT (AST); SGPT (ALT); Alk Phos; Protein; Albumin; Globulin; Calcium; LDH; GGT; BUN; Creatinine.

You and your spouse/DP are not required to complete the HRA or to participate in the blood test or other medical examinations. Members and their spouses/DP who choose to participate in the wellness program may receive an incentive. See www.foth.com/benefits for details of available incentives.

If you are unable to participate in the wellness program or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable alternative. You may request a reasonable alternative by contacting nurse@Foth.com.

The information from your HRA and the results from your biometric screening will be used to provide you with information to help you understand your current health and potential risks, and may also be used to offer you services through the wellness program to help improve our benefit offerings and wellness program services.

Protections from Disclosure of Medical Information

We are required by law to maintain the privacy and security of your personally identifiable health information. Although we may use aggregate information the vendor collects to design a program based on identified health risks in the workplace, we will never receive any of your personal information, except as necessary to respond to a request from you for a reasonable accommodation needed to participate in the wellness program, or as expressly permitted by law. Medical information that personally identifies you that is provided in connection with the wellness program will not be provided to your supervisors or managers and may never be used to make decisions regarding your employment.

Your health information will not be sold, exchanged, transferred, or otherwise disclosed except to the extent permitted by law to carry out specific activities related to the wellness program, and you will not be asked or required to waive the confidentiality of your health information as a condition of participating in the wellness program or receiving an incentive. Anyone who receives your information for purposes of providing you services as part of the wellness program will abide by the same confidentiality requirements. The only individual(s) who will receive your personally identifiable health information is Bellin on-site nurse, and HRA providers, such as Healics, Clinical Reference Lab, and other HRA clinics in order to provide you with services under the wellness program.

All medical information obtained through the wellness program will be maintained separate from your personnel records.

You may not be discriminated against in employment because of the medical information you provide as part of participating in the wellness program, nor may you be subjected to retaliation if you choose not to participate.

If you have questions or concerns regarding this notice, or about protections against discrimination and retaliation, please contact HIPAA Privacy and Security Officer, 2121 Innovation Ct, De Pere, WI 54115. (06/29/2018)