CITY OF CATHEDRAL CITY				
ADMINISTRATIVE POLICY		HR-AP 14		
Approved by:	Distributed by	Original Date		Revised
Charles McClendon (Sep 18, 2023 13:59 PDT)	Human Resources	06/08/2022		03/29/2023
Charles McClendon, City Manager				09/07/2023

### **SUBJECT**

#### WELLNESS PROGRAM

#### 1. PURPOSE

The Wellness Program encourages, motivates, and challenges employees to take an active interest in their personal well-being by having access to wellness resources and a personalized wellness plan. This Wellness Program policy establishes reimbursement guidelines for qualified fitness and/or wellness-related expenses to promote employee health and disease prevention.

#### 2. **DEFINITIONS**

Authorized Employees – For the purposes of this policy, "authorized employees" shall include:

- NON-REPRESENTED: Permanent Full-Time and Part-Time Employees (does not include limited term, intern, temporary).
- AFSCME: Permanent Full-Time employees
- CCFMA: Permanent Full-Time employees

#### 3. PROCEDURES

3.1 <u>Process Flow</u>



#### 3.2 EMPLOYEE ELIGIBILITY

An employee is eligible for the reimbursement of qualified fitness and/or wellness-related expenses provided:

- 1. They are a Regular Full-time Employee (FTE) who has completed their probationary period (does not apply to promotions); or
- 2. Six (6) months for at-will employees.

#### 3.3 <u>REIMBURSEMENT</u>

A. Reimbursement maximum total annual amount per employee per payroll year is:

UNIT	<b>REIMBURSEMENT AMOUNT</b>		
AFSCME	\$600		
NON-REP	\$600		
CCFMA	\$300		

- B. Any costs exceeding the maximum total annual reimbursement will be the sole responsibility of the employee.
- C. All purchases for which reimbursement is provided become the sole personal property of the employee.
- D. Reimbursements are deemed taxable by the IRS and must be included in the employee's paycheck.

#### 3.4 QUALIFIED EXPENSES

- 1. Membership to a fitness facility that charges a fee for using the facility and equipment and/or a formal class or instruction designed to improve fitness.
  - i. Examples include gym, aerobics, body toning, fitness boot camp, karate, spinning, yoga, etc.
  - ii. Personal trainer fees from a certified personal trainer or qualified fitness facility.
- 2. Registration in a weight management program such as Weight Watchers, Jenny Craig, or personalized nutrition plan.
- 3. Health and Wellness training course.
  - i. Approved courses will be released by Human Resources.
- 4. Preventive health screenings not covered by medical insurance plans.
- 5. Prescriptions, co-pays, out of pocket medical expenses not covered by your health carrier (prescriptions, general office visits, dental, vision).
- 6. Exercise equipment.
  - i. Examples include elliptical, stationary bike, treadmill, weights (sets or handheld), resistance bands, and resistance training balls.
- 7. Therapeutic massage session (e.g., deep tissue, Swedish, sports, etc.) from a statecertified massage therapist or institution (Memberships to massage service providers, such as Massage Envy, may be covered provided the employee can submit verification that the services received were for the employee).

#### 3.5 EXPENSES NOT ELIGIBLE FOR REIMBURSEMENT INCLUDE BUT ARE NOT LIMITED TO:

- 1. Purchases made through a private party or fellow co-workers are not reimbursable.
- 2. Apparel accessories related to recreational sports/fitness or home workout activities (footwear, kayaks, paddleboards, tennis rackets, bats, balls, yoga mats) are not eligible under the program.
- 3. Membership, registration, or annual fees for participation in extreme sporting competitions and extreme sports.
- 4. Food, vitamins, proteins, and supplements.

#### 3.6 PROCESS OF REIMBURSEMENT

- A. Once a qualified purchase is made, the employee will complete the Wellness Reimbursement Form. Human Resources may request additional information regarding an item and its intended use to determine eligibility for reimbursement.
- B. The itemized receipt/proof of purchase or confirmed delivery of purchase if items are purchased online, must be attached to the Request for Wellness Reimbursement form and submitted on the Employee Self-Service Portal.
- C. Closing the payroll year. The Request for Reimbursement must be submitted by the end of the payroll year as identified on the Wellness Reimbursement form.
- 3.7 The Agency is not responsible or liable for any risks, injuries, or losses the employee suffers.
- 3.8 Falsification of information will result in immediate termination of an employee's participation in the program without reimbursement for any expenses they may have already incurred.
- 3.9 An employee who violates this policy may be subject to disciplinary action.
- 3.10 For the purpose of this policy, the payroll year that payment shall be credited to will be determined by the receipt date.

## 4. **RESPONSIBILITIES**

- 4.1 <u>Employee</u>- Complete the Wellness Reimbursement form (Exhibit A), provide itemized receipt/proof of purchase, and submit a claim on the Employee Self-Service Portal.
- 4.2 <u>Human Resources</u> Administration of the Wellness Program, approval and processing of the employee reimbursements, administration, and periodic review of this policy.
- 4.3 <u>Manager of Human Resources</u> Overall administration, periodic review of this policy, and final approval of employee reimbursements.

# HR- AP 14 Wellness Program\_rev. 09.2023

Final Audit Report

2023-09-18

	Created:	2023-09-18
By:		Eugenia Torres (hr@cathedralcity.gov)
	Status:	Signed
	Transaction ID:	CBJCHBCAABAAsEJCI1oA2yOsBCNuWM_FN7e6B88_gMh7
I		

# "HR- AP 14 Wellness Program\_rev. 09.2023" History

- Document created by Eugenia Torres (hr@cathedralcity.gov) 2023-09-18 - 8:57:09 PM GMT
- Document emailed to Charles McClendon (cmcclendon@cathedralcity.gov) for signature 2023-09-18 8:57:38 PM GMT
- Email viewed by Charles McClendon (cmcclendon@cathedralcity.gov) 2023-09-18 - 8:59:18 PM GMT
- Document e-signed by Charles McClendon (cmcclendon@cathedralcity.gov) Signature Date: 2023-09-18 - 8:59:26 PM GMT - Time Source: server

Agreement completed. 2023-09-18 - 8:59:26 PM GMT