

Lighten Up! JIB Medical's New Weight Management Program



Interested in achieving lifelong weight loss for better health?

The Lighten Up! Program is here to help you!

- Realistic weight loss goals you can achieve
- Nutritious and balanced meal plans that take the guesswork out of your diet
- Behavior change plan to help you stay motivated and succeed!
- All done in the comfort of your home

What is Lighten Up!?

Lighten Up! is an effective online weight management program based on 30+ years of medical research.

Our benefit plan, PHBP, has made this program available to all covered members and staff 18 years and older. Lighten Up! was created by Dr. Louis Aronne, Founder and Director of the Comprehensive Weight Control Center (CWCC at Weill Cornell). He is a leading expert in weight management.

- Regular meetings with a live Registered Dietician via phone
- Educational sessions, videos and resources
- Secure collaboration tools including text, email and video conferencing
- Behavioral and activity tracking for nutrition and exercise
- Visits with a weight management specialist doctor, as needed



The program has successfully been utilized by many of our Plan participants and is now an ongoing weight management program.

Are you ready to Lighten Up!?



To qualify: Your BMI should be 30+ or over 27 with serious health problems such as diabetes.



Lighten Up!

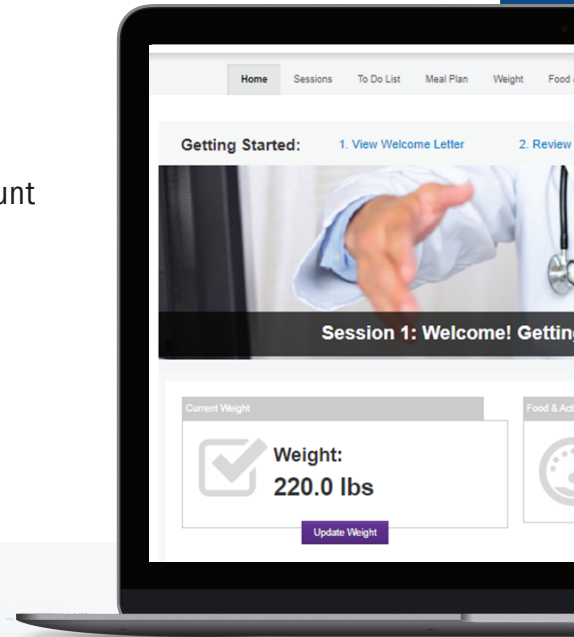
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Lighten Up!

How it Works

After submitting your application to JIB Medical

1. You will receive an email to set up your personalized online account
2. You will receive a call from your assigned dietitian
3. Your dietitian will guide you through the program and follow your progress, via phone calls, e-mails, text, and group conferences
4. No visit to JIB Medical is required



Lighten Up!PLUS+

To participate in Lighten Up!PLUS+, your BMI should be 30+ and require medical intervention, such as medications to help with weight loss and/or surgery.

Lighten Up!PLUS+ includes everything in Lighten Up! but you also receive the benefit of seeing Dr. Redmond via telehealth.

Dr. Redmond is a weight management expert. Dr. Redmond sees patients whose weight and health concerns are more severe and immediate and who might need medications, changes in medicines for diabetes that may be contributing to weight gain, and/or bariatric surgery (surgery to help reduce weight) to help control their weight and its consequences.

How to submit your application

Hand Deliver JIB Wellness Program, 2nd floor
158-11 Harry Van Arsdale Jr. Ave, Flushing, NY 11365

Email wellness@jibei.com

Call 718.591.2000, ext. 1408

Fax 718.820.0292



Lighten Up! is accessible from any smartphone, tablet or computer anywhere with Internet access



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Please note: All information requested is needed so that participants are placed in the best Tier for their needs. Information is completely confidential and will be used only for the Lighten Up! Program. Where necessary, we may request your doctor complete a referral form that we will provide you.

Disclaimer: Please be advised that communications via email are not always secure. Although it is unlikely, there is a possibility that information you include in an email can be intercepted and read by other parties besides the person to whom it is addressed.

Lighten Up! Application Form

Name _____

Date of Application ____/____/____ Male ____ Female ____ Date of Birth (mm/dd/yyyy) ____/____/____

Weight in pounds _____ lbs Height _____

BMI _____ (Participants must have minimum BMI of 30 or 27 with serious health problems)

BMI Calculators available via Google search

Reasons for requesting to join the LightenUp! Program (check all that apply)

_____ I have a BMI of _____ and feel I want to get healthier by losing weight

_____ I want to look better

_____ My doctor has urged me to learn healthier nutrition and lower my weight

_____ I have these medical issues

_____ Diabetes or prediabetes _____ High blood pressure _____ High cholesterol

_____ Sleep apnea _____ Fatty liver Disease _____ Chronic kidney disease

_____ Heart disease, coronary artery disease, or other circulatory disease

_____ Other _____

I request the following tier, checked below

_____ Lighten Up! Please indicate best times for dieticians to call _____

_____ Lighten Up!PLUS+

The reason I chose the above tier

_____ I would like to request a Spanish-speaking dietitian

I understand the program and my requirements to participate. I understand that, if I do participate, the program will include a HIPAA policy information sheet, which will cover access to only that information needed for the purposes of this program and for staff that help run the program:

Name (Print Clearly) _____ Signature _____ Date _____

Street Address _____

City _____ State _____ Zip _____

Email (Required) _____ Cell Phone _____ Home Phone _____



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