



2023 Tobacco & Marijuana User Status Certification

Please check one (1) box in each section and return this form to HR **by the end of Open Enrollment: 5:00 PM on December 16, 2022.**

Failure to return this form by that deadline will result in defaulting your and your spouse's (if applicable) user status to "user" and forfeiture of the premium reduction for the 2023 plan year.

Employee Status: (Check 1)	<input type="checkbox"/>	I certify that I meet the following definition of a Non-Tobacco/Non-Marijuana User: I HAVE NOT used ANY tobacco or marijuana products (including, but not limited to, cigarettes, chewing tobacco, and electronic cigarettes) on or after July 1, 2022.
	<input type="checkbox"/>	I certify that I DO NOT meet the above definition of non-user.

Spouse Status: (Check 1)	<input type="checkbox"/>	I certify that my spouse meets the following definition of a Non-Tobacco/Non-Marijuana User: They HAVE NOT used ANY tobacco or marijuana products (including, but not limited to, cigarettes, chewing tobacco, and electronic cigarettes) on or after July 1, 2021.
	<input type="checkbox"/>	I certify that my spouse DOES NOT meet the above definition of non-tobacco user.
	<input type="checkbox"/>	N/A: I do not have a spouse.

My signature confirms that I have read and understand this policy. I understand the criteria required to be considered a non-tobacco/non-marijuana user. I understand that completion of this form is required to receive the premium incentive. I further understand that falsification of either my or my spouse's (if applicable) tobacco-user status will be considered a violation of the Company's Employee Conduct Policy. If it is determined I have falsified this information, I will be required to forfeit the premium incentive and pay the higher premium rate. This includes repaying any premium reductions I received based on false information. I will also be subject to disciplinary action, up to and including termination.

****BEFORE SIGNING** Please make sure you have checked the appropriate boxes above.**

You should have checked one (1) box in the Employee Status section and one (1) box in the Spouse Status section.

If no boxes are checked, you/your spouse will be defaulted into tobacco-user status.

Employee Printed Name:		Clock #:	
Employee Signature:		Date:	