

# Declaration of Tobacco Use or Non-Tobacco Use Form

## INFORMATION ABOUT THE TOBACCO PREMIUM PROGRAM

As part of its efforts to support the overall health and wellness of UT SELECT and UT CONNECT Medical plan members, University of Texas System has implemented a tobacco premium program surcharge to discourage the use of tobacco.

Members enrolled in the UT SELECT or UT CONNECT Medical plans will pay a monthly surcharge in addition to the premium normally charged for UT SELECT and UT CONNECT Medical plans coverage of \$30 per month if they use tobacco. All members will be required to provide a declaration regarding their tobacco use as a condition of enrollment in UT SELECT or UT CONNECT. New members who use tobacco will begin to pay the additional charge on the first of the month following enrollment. The Tobacco Premium Program surcharge will be added to the UT SELECT and UT CONNECT premium that is deducted from your paycheck. All subscribing members are required to submit a declaration with regard to themselves and all of their covered dependents regardless of whether they use tobacco or not.

Premium surcharges are based on three categories: Member \$30 per month; Spouse \$30 per month, and Child(ren) \$30 per month. The premium surcharge for a family where any covered dependent child uses tobacco is \$30 regardless of whether other covered dependent children do not use tobacco. The maximum premium surcharge is \$90 per family per month.

Members must declare if they are tobacco users. A "tobacco user" is defined by as a person who has used tobacco products within the past sixty (60) days. The sixty days are from the day this declaration is signed. Members who declare they are non-tobacco users must not have used tobacco products within the pasty sixty (60) days from the day this declaration is signed.

All types of tobacco products are included as part of the Tobacco Premium Program, including, but not limited to: cigarettes, cigars, pipes, all forms of smokeless tobacco (chewing tobacco, snuff, dip, or any other product that contains tobacco), clove cigarettes and any other smoking devices that use tobacco such as hookahs. E-cigarettes, which contain nicotine, are also included under the tobacco premium program.

More information is available about this program at [www.utsystem.edu/offices/employee-benefits/insurance/tobacco-premium-program](http://www.utsystem.edu/offices/employee-benefits/insurance/tobacco-premium-program)

*Please Continue and Sign on page 2 >*

## DECLARATION OF TOBACCO USE OR NON-TOBACCO USE

**By signing this form, I understand and agree that:**

- "Tobacco Products" includes but is not limited to: cigarettes, cigars, pipes, all forms of smokeless tobacco (chewing tobacco, snuff, dip, or any other product that contains tobacco), clove cigarettes and any other smoking devices that use tobacco such as hookahs. E-cigarettes are also included. "Tobacco User" is defined by UT System Office of Employee Benefits as a person who has used tobacco products within the past sixty (60) days. The sixty days are from the day this certification is signed.
- It is my obligation to submit an amended declaration if I or anyone else declared on this form to be a Non-Tobacco User uses Tobacco Products. I also understand that failure to do so is a violation of the UT SELECT and UT CONNECT Medical plans rules and UT System policy.
- I understand that all premium surcharges charges as a Tobacco User will be prospective. I further understand that if I or a dependent subsequently cease to be a Tobacco User, and I submit an amended declaration changing a Tobacco User to a Non-Tobacco User, I will not be refunded any part of the Tobacco User premium surcharges I have already paid.
- By signing this statement, I acknowledge under the penalties of perjury, that the above are true and accurate statements.

**The undersigned submits the following information about him or herself and any of his or her dependents enrolled in the UT SELECT or UT CONNECT Medical plans:**

**Tobacco User Declaration:**  No Tobacco Users  Subscriber  Spouse  Child(ren)\*

\* If any dependent child 16 years of age or older uses tobacco, check "tobacco user". The tobacco premium surcharge is the same regardless of how many children in the household use tobacco.

<b>PRINT SUBSCRIBER'S NAME</b> (Last, First, Middle)	<b>EMPLOYEE ID / BENEFITS ID (BID)</b>
<b>SUBSCRIBER'S SIGNATURE</b>	<b>DATE</b>

*Please Continue to Instructions on page 3 >*

## INSTRUCTIONS

*This form must be signed and submitted to the subscriber's institution HR/Benefits Office.*

### UT ARLINGTON

Office of Human Resources  
P.O. Box 19176  
Arlington, TX 76019  
(817) 272- 5554  
Fax: (817) 272-6271  
benefits@uta.edu

### UT AUSTIN

Human Resources  
1616 Guadalupe St., Suite 1.408  
Austin, TX 78701  
(512) 471-4772 or  
Toll Free: (800) 687-4178  
Fax: (512) 232-3524  
HRSC@austin.utexas.edu

### UT DALLAS

Office of Human Resources  
800 W Campbell Rd, AD 10  
Richardson, TX 75080-3021  
(972) 883-2221  
Fax: (972) 883-2156  
benefits@utdallas.edu

### UT EL PASO

Human Resources Services  
Administration Building, Rm 216  
500 W University  
El Paso, Texas 79968  
(915) 747-5202  
Fax: (915) 747-5815  
benefits@utep.edu

### UT HEALTH SCIENCE CENTER HOUSTON

Human Resources  
7000 Fannin, Suite 150  
University Center Tower (UCT)  
Houston, TX 77030  
(713) 500-3935  
Fax: (713) 500-0342  
hr@uth.tmc.edu

### UT HEALTH SAN ANTONIO

Office of Human Resources  
7703 Floyd Curl Drive  
San Antonio, TX 78229  
(210) 567-2600  
Fax: (210) 567-6791  
ben-admin@uthscsa.edu

### UT HEALTH EAST TEXAS (TYLER)

Office of Human Resources  
11937 U.S. Highway 271  
Tyler, TX 75708  
(903) 877-7784  
Fax: (903) 877-5394  
benefits@uthct.edu

### UT MD ANDERSON CANCER CENTER

Human Resources Benefits  
(713) 745-6947  
Fax: (713) 745-7167  
MyHR@mdanderson.org  
Physicians Referral Service (PRS)  
(713) 792-7600  
Fax: (713) 794-4812  
prsfacbensrvs@mdanderson.org

### UT MEDICAL BRANCH AT GALVESTON

Employee Benefits Services  
2200 Market St., Suite 1.100  
Galveston, TX 77550  
(409) 772-2630, Option "0"  
Toll Free: (866) 996-8862  
Fax: (409) 772-2754  
benefits.services@utmb.edu

### UT PERMIAN BASIN

Human Resources  
4901 East University  
Odessa, Texas 79762  
(432) 552-2752  
Fax: (432) 552-3747  
personnel@utpb.edu

### UT RIO GRANDE VALLEY Brownsville

Office of Human Resources  
2395 West University Blvd.  
Brownsville, Texas 78520  
(956) 882-8205  
Fax: (956) 882-6599  
benefits@utrgv.edu

### Edinburg

Office of Human Resources  
1201 West University Drive  
Maryalice Shary Shivers  
Building room 2.126  
Edinburg, Texas 78539  
(956) 665-2451  
Fax: (956) 665-3289  
benefits@utrgv.edu

### UT SAN ANTONIO

Human Resources  
1 UTSA Circle  
San Antonio, Texas 78249  
(210) 458-4250  
Fax: (210) 458-7890  
benefits@utsa.edu

### UT SOUTHWESTERN MEDICAL CENTER

Human Resources Benefits Division  
5323 Harry Hines Blvd.  
Dallas, TX 75390-9023  
(214) 648-9830  
Fax: (214) 648-9881  
benefits@utsouthwestern.edu

### UT SYSTEM ADMINISTRATION

Office of Talent & Innovation  
210 W. 7th Street  
Austin, TX 78701  
(512) 499-4587  
Fax: (512) 499-4395  
grp-hrsp@utsystem.edu

### UT TYLER

Office of Human Resources  
ADM 108  
3900 University Blvd.  
Tyler, Tx 75799  
(903) 566-7234  
Fax: (903) 565-5690  
humanresources@uttyler.edu