



This form is due: **September 30, 2025**

Health and Wellness Non-Nicotine (Tobacco) Program Affidavit		
X or ✓ your choice for each below. (Please read carefully)		
Yes	No	1. I am Nicotine Free and am considered a Non-Nicotine(Tobacco) user¹ as I do NOT use Nicotine or Tobacco. I understand that maintaining this status will allow me to earn a 15% incentive amount to go toward my medical insurance premiums.²
Yes	No	2. I understand that I can earn a 15% incentive amount to go towards my medical insurance premiums by submitting an HRA Form that my primary care doctor signs off on proving that I had my preventative care screening complete with my biometrics done between October 1, 2024 and September 30, 2025.³
Yes	No	3. I understand that my participation in the City of Branson Employee Wellness Program is voluntary. I further understand that no employment decision will be taken based on my participation, or the lack thereof, in the Employee Wellness Program.
Yes	No	4. Finally, I have been instructed on where to find the text of the document for the 2025 Employee Wellness Program online, and all requisite forms, and I have been given adequate opportunity to ask Human Resources representatives any questions I have for clarification before signing this affidavit.⁴
Print Name:		
Signature:		Date:

1 As defined by the Patient Protection and Affordable Care Act; Health Insurance Market Rules: Rate Review guidelines: Federal Register, Vol. 78, No. 39, Part 147 § 147.102 (1) (iv) 1.5:1; *“Use of tobacco on average four or more times per week within no longer than the past six (6) months. This includes all tobacco products, except that tobacco use does not include religious or ceremonial use of tobacco.”*

2 I can earn this discount if I complete a nicotine (tobacco) cessation class before the deadline of September 30, 2025.

3 If I am a New Hire that was hired after May 1, 2025, this will be waived until the next Wellness year that begins October 1, 2025.

4 All Health and Wellness forms are available on the intranet listed under the Forms and Files Tabs in the Human Resources Section of that webpage.

WELLNESS PROGRAM IMPORTANT DATES

Wellness Plan Year October 1, 2024 – September 30, 2025
HRA - Primary Care Physician Completion Dates October 1, 2024 to September 30, 2025
Nicotine Coaching: Latest start date August 1; Latest Completion Date: September 30, 2025
Medical Insurance Plan Year affected by this program: January 1, 2026 to December 31, 2025

Determining Tier Level for Medical Insurance Discounts



BransonMo.gov

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Did you sign the affidavit stating that you are Nicotine free OR did you complete cessation coaching*?	Did you turn in your Health Risk Assessment form with your primary care physician's signature into HR?	If your answers all correspond to a set of responses in a horizontal line below, you qualify for that Tier level	Your additional discount for 2026 employee only medical insurance is...
Yes	Yes	Tier 1	30%
Yes	No	Tier 2	15%
No	Yes	Tier 2	15%
No	No	Tier 3	0%
<p>*Employees who confirm the utilization of nicotine for three consecutive years, will not be able to earn the being nicotine-free incentive level that third year.</p> <p>Human Resources will have Tiers Determined by October 31, 2025</p>			

NOTICE REGARDING WELLNESS PROGRAM

The City of Branson Health and Wellness program is a voluntary wellness program available to all employees.

Employees who choose to participate in the wellness program will receive an incentive of up to a 100% discount on the employee-only portion of the medical insurance premiums for calendar year 2026 for the Base Medical Insurance plan. Although you are not required to complete the HRA or participate in the biometric screening, only employees who do so will receive discounts of up to 100%.

Additional incentives of up to “a de minimis value” may be available for employees who participate in certain health-related activities or achieve health outcomes like walking challenges or water consumption tracking.

If you are unable to participate in any of the health-related activities or achieve any of the health outcomes required to earn an incentive, you may be entitled to a reasonable accommodation or an alternative standard. You may request this by contacting Human Resources at hr@bransonmo.gov.

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. You also are encouraged to share your results or concerns with your own doctor.

If there are extenuating circumstances, employees can submit an appeal to the Human Resources Department by October 15, 2025 to be reviewed and considered for additional options in obtaining the discounts available through this program.