

CASCADE DESIGNS®

Open enrollment announcements for 2021

Open enrollment: Nov. 9 – 20, 2020

Open enrollment is your opportunity to review your options and select the health benefits that will meet your needs in 2021. This is the only time that you can make enrollment changes unless you have a status change. Please read this newsletter carefully – there is a lot of important information about benefit changes and what you need to do during open enrollment.

Each year we analyze our plans, the overall cost to CDI, and your premium contributions. As you may already know, we self-insure our health plans, which means that CDI pays the medical, prescription drug, dental, and vision claims submitted by our plan participants. Our plan costs have been somewhat volatile over the past five years. CDI is projected to reach over \$2.6 million dollars in health plan costs in 2021, an 8.3% increase from 2020.

After careful analysis we have decided on several positive changes for our Reno based employees. The current Reno plan will end Dec. 31, 2020 and Reno employees will be offered the same two medical plans that are already offered in Seattle. For the Traditional Plan, this change will lower the employee contribution from \$118/month to \$90/month for an individual. Contributions for all other levels of coverage will also be reduced. The annual deductible will be lowered from \$1,500 to \$1,000 for individuals (family deductibles will also be reduced), and there will be lower copays for medical and pharmacy. Reno employees will now have the option of a Health Savings Plan which offers even lower employee contributions. See all the details below.

What's changing?

The following changes will take effect on Jan. 1, 2021.

Medical plan changes

The current medical plan will terminate. You will have two new medical plans to choose from (these are the plans offered to employees in Seattle):

1. Traditional Plan
2. Health Savings Plan

What will stay the same?

- The medical and vision provider network with RGA (Regence BlueCard network)
- The pharmacy network with CVS Caremark
- The services, procedures, and prescription drugs covered under the plan

What will be different?

- How much you pay in premium per paycheck
- How much you pay for covered services (e.g. copay, deductible, coinsurance)

The next page outlines the basic features of the plans. Please refer to pages 6-9 of the 2021 Benefit Guide for a detailed description of how the two plans works.

Medical plans at a glance

Medical In-network ¹	Regence Group Administrators (RGA)	
	Traditional Plan	Health Savings Plan
Provider network	Regence BlueCard network	Regence BlueCard network
Employer HSA contribution² <i>Per calendar year</i>	N/A	Employee-only coverage: \$600/year Employee + one or more dependents coverage: \$1,200/year
Deductible <i>Per calendar year</i>	\$1,000 / individual \$3,000 / family	Employee-only coverage: \$2,000 Employee + one or more dependents coverage: \$4,000
Out-of-pocket maximum <i>Per calendar year</i>	\$3,600 / individual \$10,800 / family Includes medical and prescription drug copays/member cost-share, deductible and coinsurance. Once met, benefits subject to maximum will be paid at 100% for remainder of year.	\$4,000 / individual \$8,000 / family
Office visits	Preventive: Deductible waived, you pay 0%; the plan pays 100% Primary care: You pay \$25 copay/visit, deductible waived Specialist: You pay \$50 copay/visit; deductible waived	Preventive: Deductible waived, you pay 0%; the plan pays 100% Primary care: After deductible, you pay 10% Specialist: After deductible, you pay 20%
Prescription In-network ¹	CVS Caremark	
	Traditional Plan	Health Savings Plan
Prescription drugs <i>30-day supply, retail pharmacy</i>	Preventive Generic: \$10 copay, deductible waived Generic: \$10 copay, deductible waived Preferred Brand: \$35 copay, deductible waived Non-Preferred Brand: \$70 copay, deductible waived Specialty: \$110 copay, deductible waived (must be filled through CVS Specialty Pharmacy) Generic and brand medications also available for 90-day supply through CVS Home Delivery Program. Refer to the 2021 Benefit Guide for applicable cost-shares. Specialty medications must be filled through CVS Specialty Pharmacy. Specialty is not covered under the 90-day mail order program.	Preventive Generic: Deductible waived, you pay 0%; the plan pays 100% Generic: After deductible, you pay 20% Preferred Brand: After deductible, you pay 20% Non-Preferred Brand: After deductible, you pay 20% Specialty: After deductible, you pay 20% (must be filled through CVS Specialty Pharmacy)

¹ Out-of-network benefits are only covered for urgent and emergency care, massage therapy, mental health, and substance use disorder.

² You must meet the IRS eligibility requirements to receive HSA contributions. Refer to the 2021 Benefit Guide page 8.

HIV PrEP covered at 100%

Pre-exposure prophylaxis (PrEP) antiretroviral therapy is now considered preventive medication that must be covered under the Affordable Care Act (ACA) at no cost to high-risk members. PrEP is a way for people who do not have HIV but who are at very high risk of getting HIV to prevent HIV infection by taking a pill every day. Only those members who meet the criteria will receive a \$0 copay at point of sale, while claims for members who do not meet the criteria will process at a standard cost-share.

Cost of coverage changes

The employee premium contributions will be different. Please refer to page 5 of the Benefit Guide for the 2021 cost of coverage.

Employees who participated in the Cascade Designs Wellness Program qualify for a \$20 discount on their monthly medical premium for the 2021 plan year.

What you need to do

All forms must be completed and returned to HR by Friday, Nov. 20. Your FSA participation will end if you do not re-enroll.



Employee Benefit Enrollment/Change Form

All employees must complete this form – even if you aren't making any changes or are waiving coverage.



Dependent Eligibility Verification

If you enroll a spouse and/or child(ren) in the health plans for the first time, you must provide proof that they are an eligible dependent. Please refer to the list of required documents in the Benefit Guide.



Flexible Spending Accounts (FSAs)

- To enroll in the health care and/or dependent care FSA, you must complete the Allegiance FSA Enrollment Form, even if you are currently participating.
- Health Savings Plan participants who wish to enroll in a health care FSA must elect the *limited purpose* FSA, using the Allegiance Limited Purpose FSA Enrollment Form. The limited purpose FSA may only be used for vision and dental expenses.

Note: If you enroll in a health care FSA and your spouse has a Health Savings Account (HSA), your health care FSA enrollment will disqualify your spouse from making and receiving pre-tax HSA contributions.



Life and Accidental Death and Dismemberment (AD&D) Insurance

If you want to purchase more life insurance, in addition to what CDI provides to you, you can enroll in Optional Life/AD&D coverage with Prudential.

- If you are currently enrolled in Optional Life/AD&D, during open enrollment you may increase your coverage amount by as much as \$50,000 without providing Evidence of Insurability. You must complete the Prudential Annual Optional Employee Term Life Increase Request Form. This

Benefit enrollment forms available in fillable PDFs online!

cascadebenefits.com

Email completed forms to Isela.Torres@cascaledgedesigns.com.

option is not available if you have previously been denied coverage. Increasing your coverage over the guarantee issue amount of \$200,000 will require Evidence of Insurability.

- Increasing your spouse’s coverage will require Evidence of Insurability. Your spouse must complete a Prudential Evidence of Insurability Form. Increasing your child’s coverage will not require Evidence of Insurability.
- If you are enrolling for the first time now (after your initial eligibility period has ended), you must complete a Prudential Enrollment Kit and Evidence of Insurability Form.

You can obtain the required paperwork during the Open Enrollment meetings, from HR, or on the CDI benefit website.

If you need to change your beneficiary, please update the beneficiary section on the Employee Benefit Enrollment/Change Form.

ID Cards

RGA – Medical/Rx	HealthEquity – HSA Visa Debit Card	Delta Dental of Washington - Dental
Everyone will receive a new ID card from RGA.	If you enroll in the Health Savings Plan you will receive an HSA Visa debit card from HealthEquity in early January.	If you enroll in the dental plan for the first time you will receive a Delta Dental of WA ID card.

ID cards will be mailed to your home address in December. Please start using your new ID card on Jan. 1, 2021 – show it to your doctor, hospital, pharmacy, etc. and let them know you have new insurance.

Questions?

We want to make sure you have all the information you need to make the right decisions about your benefits. If you have questions, please contact HR or the AssuredPartners MCM Employee Service Center at 1-888-343-3330 or mcm.esc@assuredpartners.com.

Summary of Material Modifications (SMM): This letter describes changes to the Cascade Designs, Inc. Welfare Benefits Plan and is intended to serve as a Summary of Material Modifications (SMM). The SMM supplements the Summary Plan Descriptions (SPDs) for the Cascade Designs, Inc. Welfare Benefits Plan. The effective date of these changes is January 1, 2021. You should read this SMM very carefully and retain this document with your copy of the SPDs.