

Cost of coverage

CDI funds the majority of the cost of our benefit plans. **We offer one medical plan at no premium cost for employee coverage.** Employees who participate in the Wellness Program qualify for a \$25 discount on their monthly medical premium for the 2023 plan year. Note: CDI has 26 pay periods per year, but will take deductions out of 24 paychecks only.

Medical Plans - RGA

Premiums per pay period	Your cost		Cascade Designs' cost	
	Traditional Plan	Health Savings Plan	Traditional Plan	Health Savings Plan
Employee	\$50.00	\$12.50	\$278.50	\$278.50
Employee & spouse	\$190.50	\$134.00	\$522.00	\$496.50
Employee & child	\$99.00	\$55.00	\$394.70	\$381.20
Employee & children	\$132.50	\$83.50	\$470.40	\$448.90
Employee, spouse & child	\$239.50	\$175.50	\$637.20	\$600.70
Employee, spouse & children	\$273.00	\$203.00	\$713.90	\$669.90
With Wellness Premium Discount* (\$12.50/paycheck)				
Employee	\$37.50	\$0.00	\$291.00	\$291.00
Employee & spouse	\$178.00	\$121.50	\$534.50	\$509.00
Employee & child	\$86.50	\$42.50	\$407.20	\$393.70
Employee & children	\$120.00	\$71.00	\$482.90	\$461.40
Employee, spouse & child	\$227.00	\$163.00	\$649.70	\$613.20
Employee, spouse & children	\$260.50	\$190.50	\$726.40	\$682.40

*You must complete the RGA health assessment questionnaire online and notify HR by the deadline to qualify for the discounted premium.

- Hired prior to November 1, 2022: Questionnaire due by December 15, 2022.
- Hired on or after November 1, 2022: Questionnaire due within 90 days of your benefit eligibility date.

Dental Plan - Delta Dental of Washington

Premiums per pay period	Your cost	Cascade Designs' cost
Employee	\$5.00	\$16.50
Employee & spouse	\$17.00	\$27.00
Employee & child	\$11.00	\$22.00
Employee & children	\$19.50	\$29.00
Employee, spouse & child	\$23.00	\$32.50
Employee, spouse & children	\$31.50	\$39.50

Vision Plan - RGA

Premiums per pay period	Your cost	Cascade Designs' cost
Employee	\$0.00	\$4.00
Employee & spouse	\$0.00	\$8.00
Employee & child	\$0.00	\$5.80
Employee & children	\$0.00	\$7.10
Employee, spouse & child	\$0.00	\$9.80
Employee, spouse & children	\$0.00	\$11.10