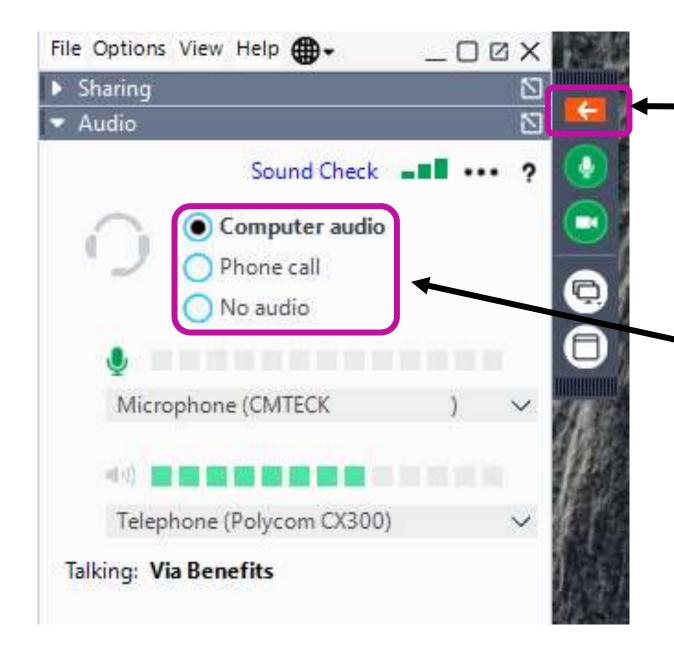
Helping You Prepare for Your Upcoming Healthcare Marketplace Enrollment

Northwest Carpenters Trusts Pre-Medicare Retirees

August 28, 2024







Select the White Arrow to expand the control panel if it isn't already expanded

Audio Challenges?

- Toggling from Computer audio to No audio and back, typically resets your computer audio
- If still unsuccessful, please choose Phone Call and the # and Dial-In Code will be revealed



Retiree Coverage Transition

RP



STRUSTS

Retiree Coverage Ends 12/31/2024

- ✓ Medical
- ✓ Prescriptions
- ✓ Life Insurance
- ✓ Dental-Vision

ENROLLMENT PERIOD BEGINS 11/1/2024

For insurance effective 1/1/2025, enroll in a replacement plan from the Marketplace before your last day of coverage

Subsidy Programs End 12/31/2024

WASHINGTON

Service-Based Subsidy

Retiree rates are subsidized by contributions paid on behalf of participants who worked or are working under collective bargaining agreements.

WASHINGTON

Retiree Health Reimbursement Account

Established 1/1/2009 with a one-time allocation from the Retiree Health Reserve Fund, which was established with employer contributions. Benefits are not guaranteed. No participant, retiree, or dependent has an accrued or vested right to RHRA benefits.

OREGON

Retiree Premium Credits

Provided under the Oregon-SW Washington Carpenters-Employers Health and Welfare Plan. No additional accruals allowed beginning 9/1/2021.

Background

- Only 1 out of 12 retirees has Retiree Coverage
- Many more options available because of the Affordable Care Act
- Federal subsidies and tax credits also available to lower the cost of Marketplace coverage
- Northwest Carpenters plan is folding under the Southwest Carpenters plan, which does not offer retiree medical coverage

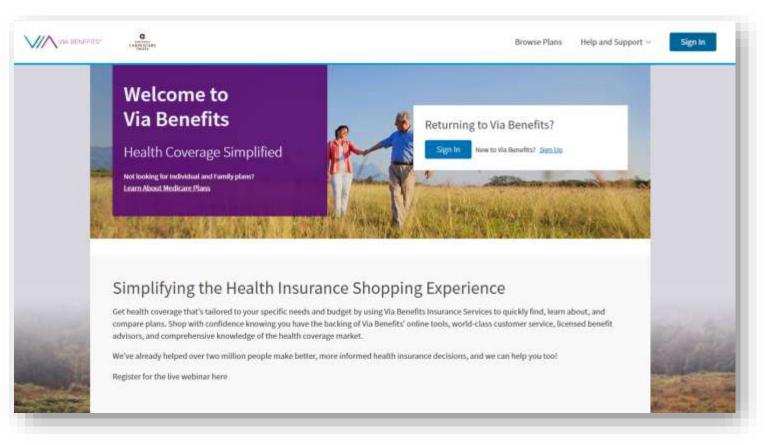
Options for Replacement Coverage

- 1. Spouse's employer plan (if applicable)
- 2. Private insurance
- 3. Health Insurance Marketplace

marketplace.viabenefits.com/NWcarpenters

Online tools Personal assistance Licensed advisors Award-winning service Free to use





Know What You Have Now

Review the Summary of Benefits and Coverage



	WA	OR
w/ Dental-Vision	\$1,298	\$704
w/o Dental-Vision	\$1,231	\$634

Summary of Benefits and Coverage: What this Plan Covers & What You Pay For Covered Services Northwest Carpenters Health and Security Medical Plan: Retiree Coverage (Non-Medicare) Coverage Period: 10/01/2023 – 09/30/2024 Coverage for: Individual and Eligible Family | Plan Type: PPO

The Summary of Benefits and Coverage (SBC) document will help you choose a health <u>plan</u>. The SBC shows you how you and the <u>plan</u> would share the cost for covered health care services. NOTE: Information about the cost of this <u>plan</u> (called the <u>premium</u>) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, go to https://regence.com or call 1 (866) 240-9580. For general definitions of common terms, such as <u>allowed amount</u>, <u>balance billing</u>, <u>coinsurance</u>, <u>copayment</u>, <u>deductible</u>, <u>provider</u>, or other <u>underlined</u> terms see the Glossary. You can view the Glossary at healthcare.gov/sbc-glossary or call 1 (866) 240-9580 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible?	\$200 individual / \$400 family per calendar year.	Generally, you must pay all of the costs from <u>providers</u> up to the <u>deductible</u> amount before this <u>plan</u> begins to pay. If you have other family members on the <u>plan</u> , each family member must meet their own individual <u>deductible</u> until the total amount of <u>deductible</u> expenses paid by all family members meets the overall family <u>deductible</u> .
Are there services covered before you meet your <u>deductible</u> ?	Yes. Certain preventive care and those services listed below as " <u>deductible</u> does not apply* or as "No charge."	This <u>plan</u> covers some items and services even if you haven't yet met the <u>deductible</u> amount. But a <u>copayment</u> or <u>coinsurance</u> may apply. For example, this <u>plan</u> covers certain <u>preventive services</u> without <u>cost sharing</u> and before you meet your <u>deductible</u> . See a list of covered <u>preventive services</u> at healthcare.gov/coverage/preventive-care-benefits/.
Are there other <u>deductibles</u> for specific services?	No.	You don't have to meet deductibles for specific services.
What is the <u>out-of-pocket</u> limit for this <u>plan</u> ?	In- <u>network</u> : \$2,500 individual / \$5,000 family per calendar year. Out-of- <u>network</u> : Not Applicable.	The <u>out-of-pocket limit</u> is the most you could pay in a year for covered services. If you have other family members in this <u>plan</u> , they have to meet their own <u>out-of-pocket limits</u> until the overall family <u>out-of-pocket limit</u> has been met.
What is not included in the out-of-pocket limit?	Premiums, balance-billing charges, and health care this plan doesn't cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a <u>network provider</u> ?	Yes. See https://regence.com/go/WW/Preferred or call 1 (866) 240-9580 for a list of <u>network providers</u> .	This <u>plan</u> uses a <u>provider network</u> . You will pay less if you use a <u>provider</u> in the <u>plan's</u> <u>network</u> . You will pay the most if you use an <u>put-of-network provider</u> , and you might receive a bill from a <u>provider</u> for the difference between the <u>provider's</u> charge and what your <u>plan</u> pays (<u>balance billing</u>). Be aware, your <u>network provider</u> might use an <u>out-of-network provider</u> for some services (such as lab work). Check with your <u>provider</u> before you get services.
Do you need a <u>referral</u> to see a <u>specialist</u> ?	No.	You can see the specialist you choose without a referral.

Know What You Have Now

Review the Summary of Benefits and Coverage

Summary of Benefits and Coverage: What this Plan Covers & What You Pay for Covered Services

Coverage Period: 01/01/2024-12/31/2024

KAISER PERMANENTE. : Northwest Carpenters Health and Security Plan - - Custom Deductible Plan

Coverage for: Individual / Family | Plan Type: EPO

All plans offered and underwritten by Kaiser Foundation Health Plan of the Northwest

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage see www.kp.org/plandocuments or call 1-800-813-2000 (TTY: 711). For definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms see the Glossary. You can view the Glossary at http://www.healthcare.cov/sbc-glossary or call 1-800-813-2000 (TTY: 711) to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall <u>deductible</u> ?	\$500 Individual / \$1,500 Family	Generally, you must pay all of the costs from providers up to the <u>deductible</u> amount before this <u>plan</u> begins to pay. If you have other family members on the <u>plan</u> , each family member must meet their own individual <u>deductible</u> until the total amount of <u>deductible</u> expenses paid by all family members meets the overall family <u>deductible</u> .
Are there services covered before you meet your <u>deductible?</u>	Yes. Preventive care and services indicated in chart starting on page 2.	This <u>plan</u> covers some items and services even if you haven't yet met the <u>deductible</u> amount. But a <u>copayment</u> or <u>coinsurance</u> may apply. For example, this <u>plan</u> covers certain <u>preventive</u> services without <u>cost-sharing</u> and before you meet your <u>deductible</u> . See a list of covered <u>preventive services</u> at https://www.healthcare.gov/coverage/preventive-care-benefits/.
Are there other deductibles for specific services?	No.	You don't have to meet deductibles for specific services.
What is the <u>out-of-pocket limit</u> for this <u>plan</u> ?	\$5,000 Individual / \$10,000 Family	The <u>out-of-pocket</u> limit is the most you could pay in a year for covered services. If you have other family members in this <u>plan</u> , they have to meet their own <u>out-of-pocket limits</u> until the overall family <u>out-of-pocket</u> limit has been met.
What is not included in the <u>out-of-pocket limit</u> ?	Premiums, health care this plan doesn't cover, and services indicated in chart starting on page 2.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Will you pay less if you use a network provider?	Yes. See <u>www.kp.org</u> or call 1-800- 813-2000 (TTY: 711) for a list of Participating Providers.	This <u>plan</u> uses a <u>provider network</u> . You will pay less if you use a <u>provider</u> in the <u>plan's</u> <u>network</u> . You will pay the most if you use an <u>out-of-network provider</u> , and you might receive a bill from a <u>provider</u> for the difference between the <u>provider</u> 's charge and what your <u>plan</u> pays (<u>balance billing</u>). Be aware your <u>network provider</u> might use an <u>out-of- network provider</u> for some services (such as lab work). Check with your <u>provider</u> before you get services.

KAISER PERMANENTE®

	OR
w/ Dental-Vision	\$673
w/o Dental-Vision	\$603

Funding Options (non-Medicare)

- 1. Premium Tax Credit
- 2. Premium Reimbursement HRA

1. Premium Tax Credit

- Credit amount based on income and household information reported on application
- Claim your tax credit when you file federal income taxes or choose advance payments to your insurer to reduce your monthly premium
- If you use <u>more</u> credit than you qualify for, pay the difference on federal tax return
- If you use <u>less</u> credit than you qualify for, the difference is credited back to you
- 9 out of 10 marketplace enrollees qualified for premium tax credits in 2024
- Not available to retirees/dependents who accept HRA premium reimbursement

2. Premium Reimbursement HRA

BEGINS 1/1/2025

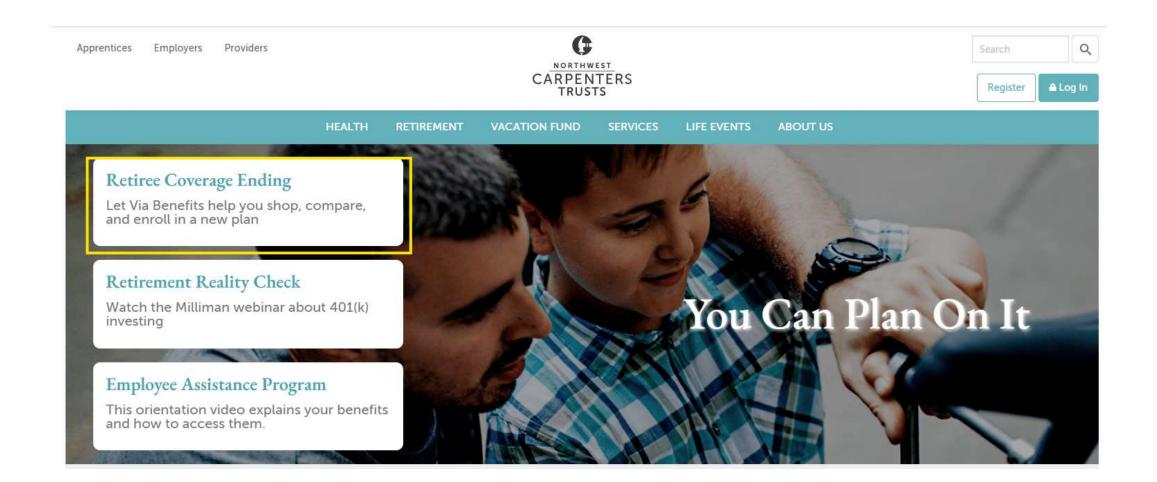
- Reimburses up to \$500 per month <u>per person</u> (participant and dependent) for coverage purchased from the Marketplace
- Limited to the purchase of health insurance. Proof of payment is required.
- Reimbursements end December 31, 2030, or earlier if an individual...
 - 1. Receives 36 months of reimbursements after January 1, 2025; or
 - 2. Attains Medicare eligibility
- Each person limited to 36 months of reimbursements, federal subsidies, tax credits
- If you take a federal subsidy or a premium tax credit in lieu of HRA reimbursement but return to the HRA program prior to exhausting 36 months of eligibility, you may reenroll in the HRA program for the remaining months.

2. Premium Reimbursement HRA

QUALIFICATIONS

- 1. Retired, withdrawn, refrain from employment in building-construction industry
- 2. Not receiving or eligible for Medicare benefits
- 3. Covered as a retiree or active participant in the Northwest Carpenters Health and Security Plan as of December 2024
- 4. Covered at least 12 of the last 18 months in the Northwest Carpenters Health and Security Plan or Southwest Carpenters Health and Welfare Plan
- 5. Have at least 10 years of credited service in the Northwest Carpenters Retirement Plan (or predecessor or successor plan)
- 6. Receiving a pension from the Northwest or Southwest plan (or predecessor or successor plan)

www.CarpentersBenefits.org



Replacing Retiree Coverage

NORTHWEST CARPENTERS HEALTH AND SECURITY PLAN

Medicare Meeting Slides Medicare Webinar 7/9/2024 Pre-Medicare Letter 8/6/2024 (Spanish) Regence Booklet — Medicare Regence Booklet — Pre-Medicare Regence Summary — Pre-Medicare

Regence Summary – Medicare

Kaiser Summary

Self-Pay Rates

Marketplace Subsidy Calculator

Medicare Retirees and Dependents Coverage ends August 31, 2024

Via Benefits will help you obtain replacement coverage from the health insurance marketplace. Use the website or phone to shop, compare, and enroll.

https://my.viabenefits.com/NWCarpenters

Use the video library to learn about the Via Benefits website, how to create a profile, and update your email preferences. Also watch and learn about...

- Advantages of using Via Benefits
- · The parts of Medicare
- · Reasons to sign up for Medicare Part B
- Preparing for new Medicare coverage
- Using Via Benefits to shop and email

1-855-219-0548 (TTY: 711) Monday - Friday 5 a.m. - 4 p.m. Pacific Pre-Medicare Retirees and Dependents Coverage ends December 31, 2024

Via Benefits will help you obtain replacement coverage from the health insurance marketplace. Use the website or phone to shop, compare, and enroll.

https://marketplace.viabenefits.com/NWCarpenters

Let the video library show you how to sign in to the Via Benefits website, create a profile, and update your email preferences. You can also get answers and information about...

- Advantages of using Via Benefits
- · Individual and family plans
- Preparing for new individual coverage
- Using Via Benefits to shop and enroll

1-855-219-0549 (TTY: 711)

Monday - Friday 5 a.m. - 4 p.m. Pacific We won't be stopping for any questions during the presentation; but you'll find that we will address most of your questions directly in the presentation.

All individual questions should be called in to the Via Benefits Service Center.

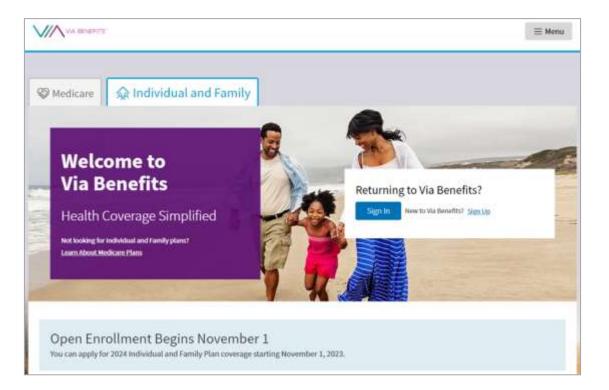


Today's Presentation is Available Ongoing

marketplace.viabenefits.com/NW Carpenters

As you scroll down this Welcome Page you'll see the link for this live webcast recording.

Give us some days to process this live webcast but you'll eventually be able to watch and re-watch as often as you'd like.

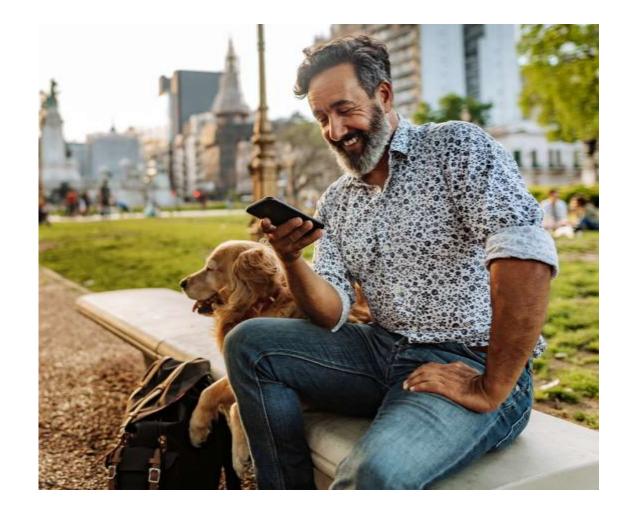




Planning for Your Future Health Benefits

Here is what we will cover:

- Introducing Via Benefits
- Setting Up Your Account & Profile
- Lowering Your Costs
- How to Shop for a Plan
- Preparing for Enrollment
- Scheduling Your Consultation
- Questions & Answers

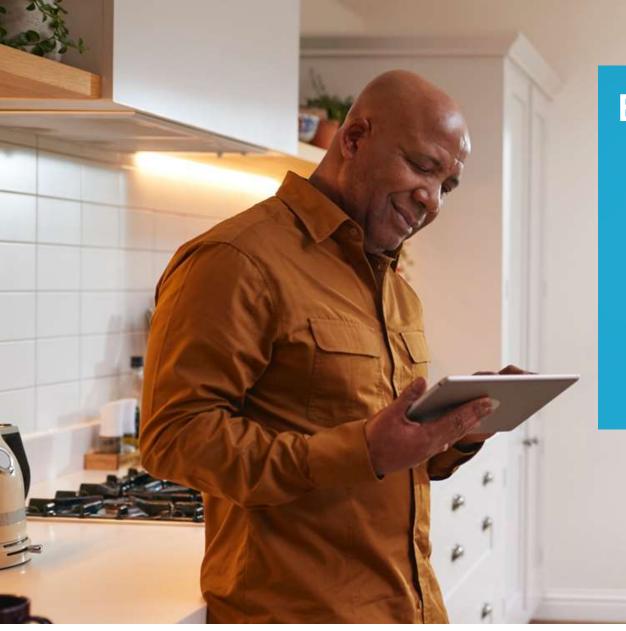




Introducing Via Benefits



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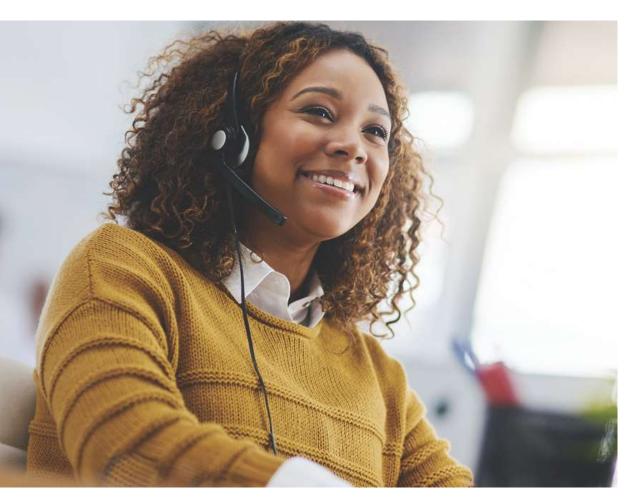
Experience That Counts

- Leading Healthcare marketplace
- Now in our 20th Enrollment Season
- We've helped over 2 million people
- 98% of people felt they chose the most effective plan using Via Benefits





Via Benefits Care Team



Our benefit advisors are objective, unbiased and based in the United States

- All benefit advisors are licensed health insurance agents
- Your benefit advisor will be knowledgeable in Medicare and non-Medicare
- Benefit advisors are trained to help you find the plan that meets your individual or family needs









Consultative Process



Simplified Selection

Ongoing Advocacy

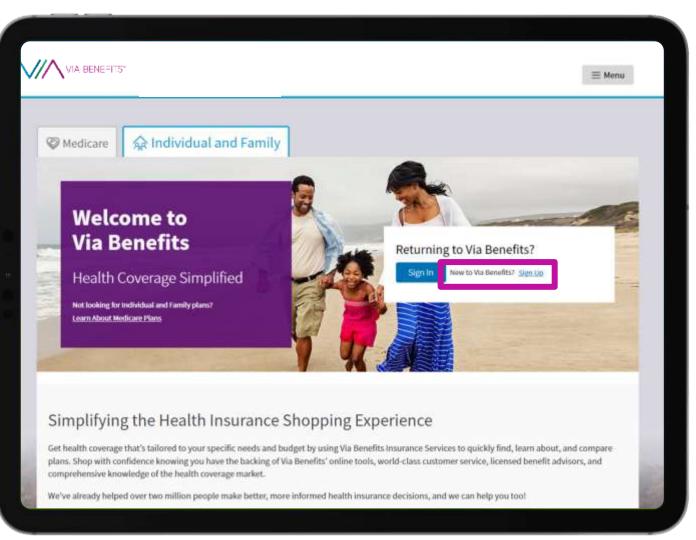


Setting Up Your Account and Profile

24

Set Up Your Online Account

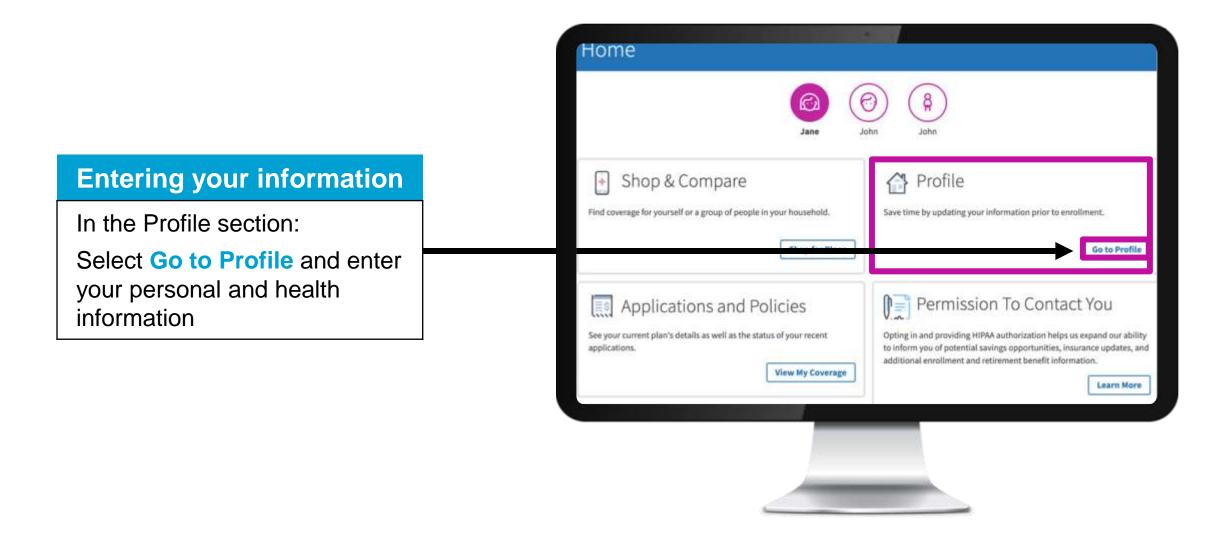
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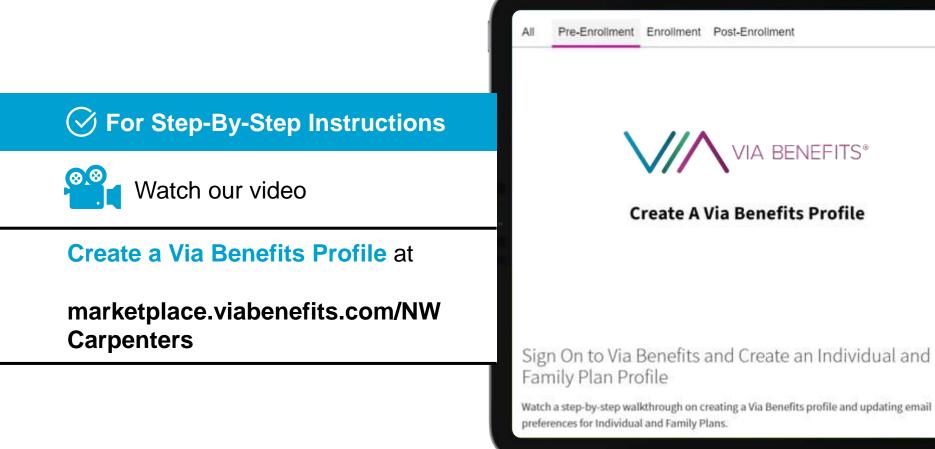


Go to Profile





Create a Via Benefits Profile





IA BENEFITS®



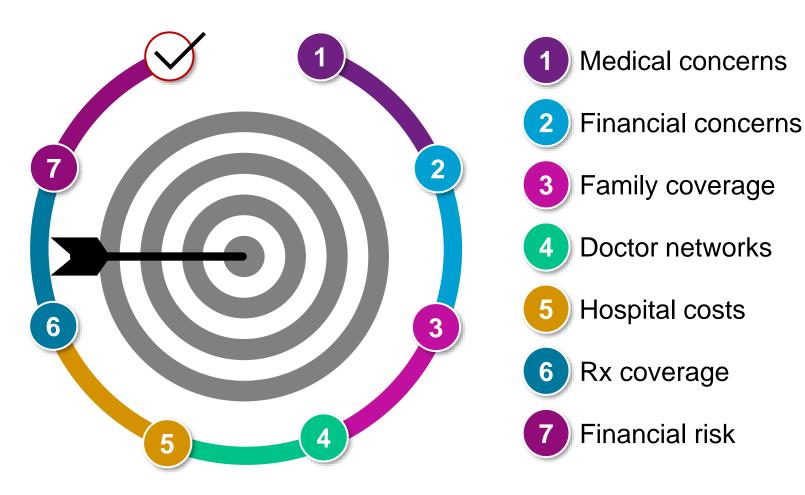
How to Shop for a Plan

28

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Assessing Your Needs

Consider what you need in the 2025 calendar year







Plan Categories

There are four categories of Individual and Family Plans:

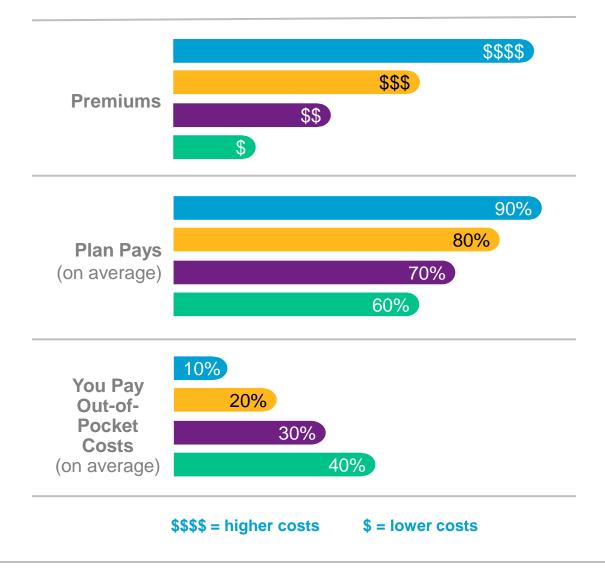


These plans differ based on how you and the plan share the costs of your care, but not on the amount or quality of care you receive.

Not all plan levels are available in every area.

Via Benefits will help you discover what plans are available in your location.

Platinum Sold Silver Bronze





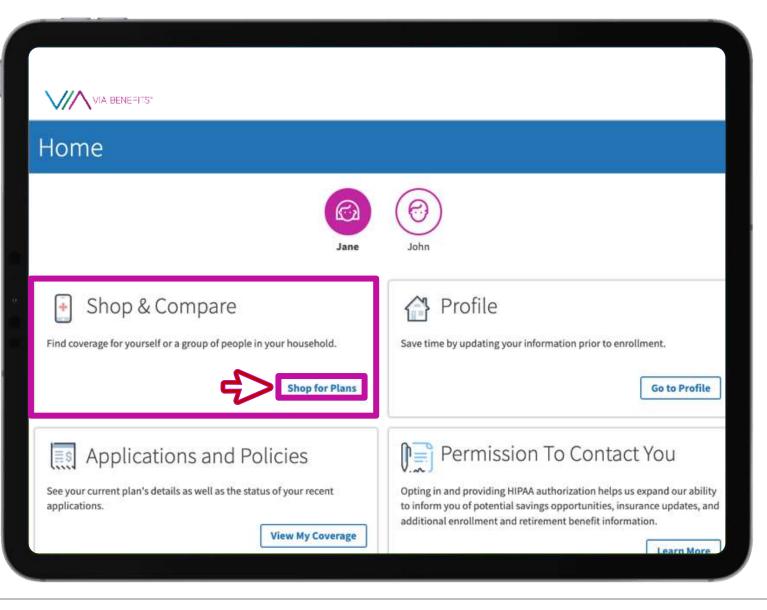
Shop & Compare

Shop & Compare

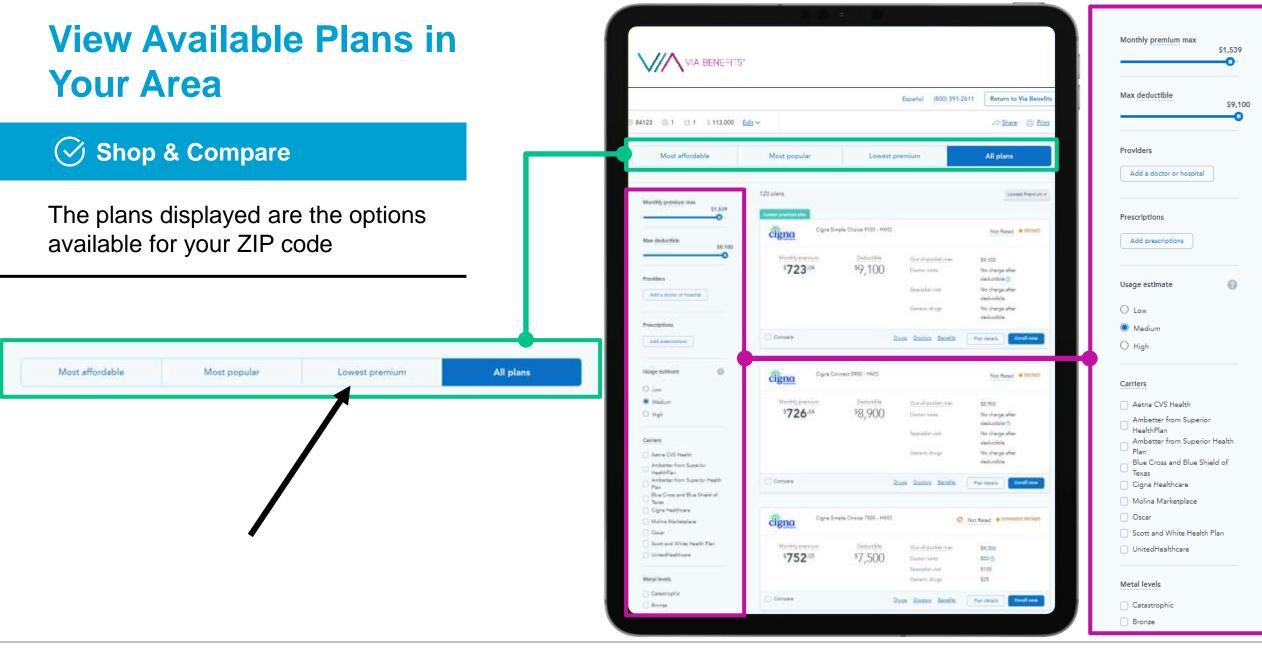
Explore health plans available in your area

Select plans that match your requirements

Compare up to 3 plans side-by-side









View Plan Details to Understand the Full Cost

See what plans have been found for you

Study, explore, and compare plan details such as:

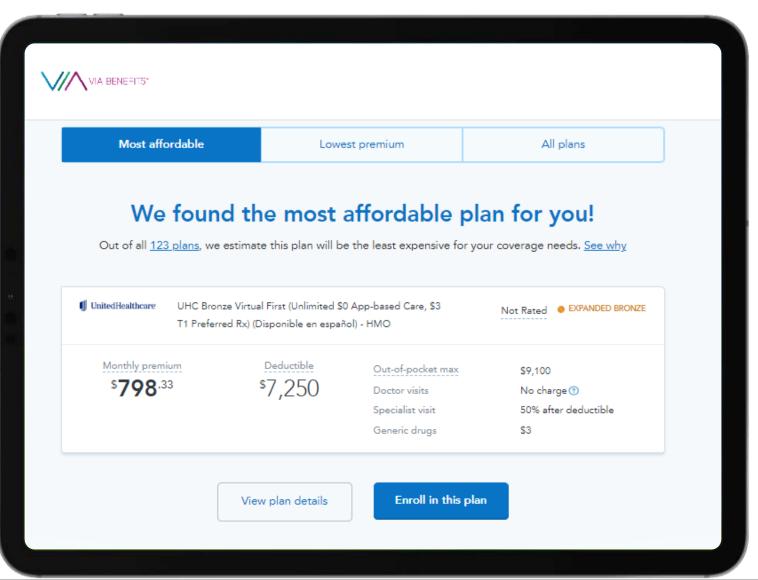
Deductibles

Out-of-pocket limits

Copays

Check if your doctors are in the network

And much, much more





HMOs vs. PPOs

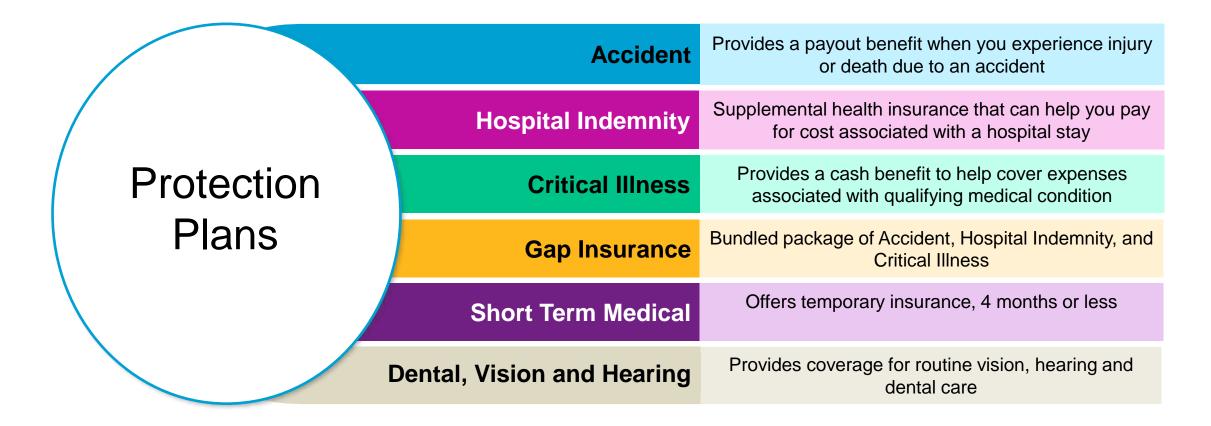
HMO – Health Maintenance Organization	PPO – Preferred Provider Organization
 In-network coverage only Typically, lower premiums Must choose primary care physician Referral needed to see a specialist 	 In- or out-of-network coverage Higher premiums Don't need to choose primary care physician No referral needed to see specialist
 Urgent Care and Emergencies would be covered at in-network rates even if provider is out-of- network Routine care – must use network provider (might not be available out of service area) Dependents outside the service area can be added to the application in many states but not all. 	 Limited availability in some areas Urgent Care and Emergencies would be covered at in-network rates even if provider is out-of- network Routine care outside the service area may be covered but at higher out-of-network rates Dependents outside the service area can be added on the same application in many states but not all.

Call the Via Benefits Care team for specific details.



Optional Protection Plans

Guard against unexpected health costs and add coverage where you need it





Optional Short-Term Medical Plans



Consider a short-term medical plan if you are:

- Generally, in good health
- Looking for lower-cost coverage



- Not eligible for Premium Tax Credits (PTC) or Cost Sharing Reduction
- Not guaranteed issue (you may be charged more or denied coverage based on your health)



Not a substitute for major medical plans

Speak to a benefit advisor about short-term medical plans



Bottom Line: Protection and peace of mind



Federal Subsidies

Possibly a Way to Lower Your Healthcare Costs

Your Funding Options (if applicable)

Federal Subsidies

Service based reimbursement program for eligible health care premium costs There are options to help you pay for your new medical plan Government-provided assistance that lowers what you pay for medical plan premiums and/or out-of-pocket costs

NW Carpenters Program

- By law, you cannot accept both the NW Carpenters Premium Reimbursement and the federal subsidies; you'll need to choose one or the other
- NW Carpenters program is administered by NW Carpenters. Via Benefits does not have access to it. We can help you understand your federal subsidies options to make a decision that makes the most sense for you
- Let's take a look at the federal subsidies



What Are Federal Subsidies?

Government-provided assistance that lowers what you pay for medical plan premiums and/or out-of-pocket costs

What is a Premium Tax Credit (PTC)?



A tax credit that lowers the monthly premium you pay for health care coverage. It is based on both household income and family size and is paid by the government directly to the health insurance carrier

What is a Cost Sharing Reduction (CSR)? Image: Cost Sharing Reduction (CSR)?

An additional subsidy you may qualify for that lowers the amount you have to pay for deductibles, copayments, and coinsurance. If you qualify, you can get these extra savings, but only if you enroll in a plan from the Silver category



Do You Qualify for a Federal Subsidy?

Eligibility for a federal subsidy is dependent on your income

Qualifying Income Ranges for 2025:

INDIVIDUALS \$15,060 -\$60,240



Family of Two \$20,440 – \$81,760



Family of Four \$31,200 – \$124,800



If your Income is:



HIGHER than these amounts... You will probably not qualify for a PTC or CSR*

WITHIN these amounts... You may qualify for a PTC or CSR*

LOWER than these amounts...

You may be eligible for other government programs, like Medicaid or the Children's Health Insurance Program (CHIP) for your children

* The American Rescue Plan and Inflation Reduction Act expanded eligibility for PTCs through 2025, so you may still qualify if your income is above these ranges!

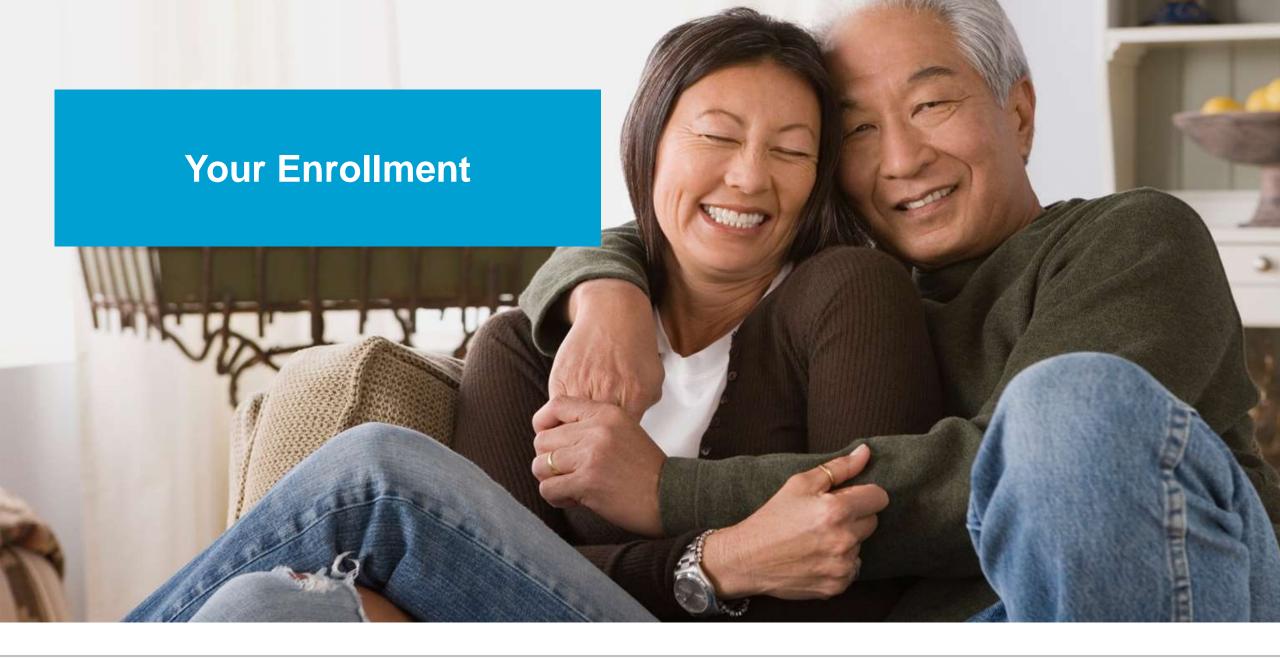


Documenting Your Funding Decision PTC?

	VIA BENEFITS	ᢕ ᠳ ŒMenu
Select Your Funding Decision	Home	
Sign into your online account	Joe Jane	
Select Manage Decision beneath Your Funding Decision on the Home page	S Funds and Reimbursements Request reimbursement, view balances and reimbursement statuses, manage banking information, find Help Center responses, and more.	Your Funding Decision Opt in or opt out of the Reimbursement Arrangement used to reimburse you for eligible health care expenses by accepting or declining your funds. Manage Decision
Compare costs with the PTC and without.	Personal Profile Save time by updating your information prior to enrollment. Go to profile	See your current plan's details as well as the status of your recent applications.

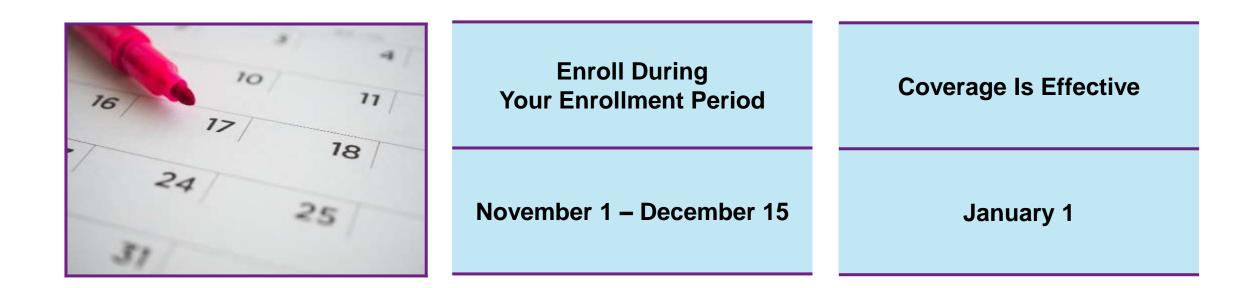


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Your Enrollment Period



Plan information for 2025 will be released Nov. 1^{st.}



Special Election Periods (SEP)



A 60-day period when you can enroll in a new plan or make a change to your current coverage

Certain qualifying future events may allow you to change plans outside of the annual Open Enrollment Period. Documentation may be required.



Marriage or divorce



Moving out of the area your current plan covers



Change in your household



Plan termination



Scheduling Your Consultation



Before You Call

We recommend participants have the following information on hand:



Names of primary care physician as well as any specialists or facilities



Social Security numbers for all in household covered by the plan



W-2s and/or tax return (only for federal subsidies)



Current prescription information (name, dosage, amount)



Conduct a Pre-Enrollment Assessment

We recommend contacting Via Benefits before Open Enrollment to start evaluating your options. You can conduct a Pre-Enrollment Assessment by speaking with our Care Team. During this assessment, you will:

- Schedule an Enrollment Appointment
- How plans share costs, e.g., deductibles, copays, coinsurance
- How protection plans can guard you from unexpected costs
- If you qualify for funding, options to lower your costs

Call the Via Benefits Care team to start your journey





Introducing Via Benefits

Your Guide to Enrolling in Individual and Family Plans

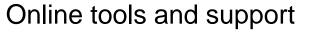
Information on the Via Benefits marketplace:



Introductions to our services

How we help you shop, choose and enroll







Your Guide to Individual and Family Health Plan Options

VIA BENEFITS[®]

CARPENTERS TRUSTS

marketplace.viabenefits.com/NWCarpenters



Helpful Resources

Videos





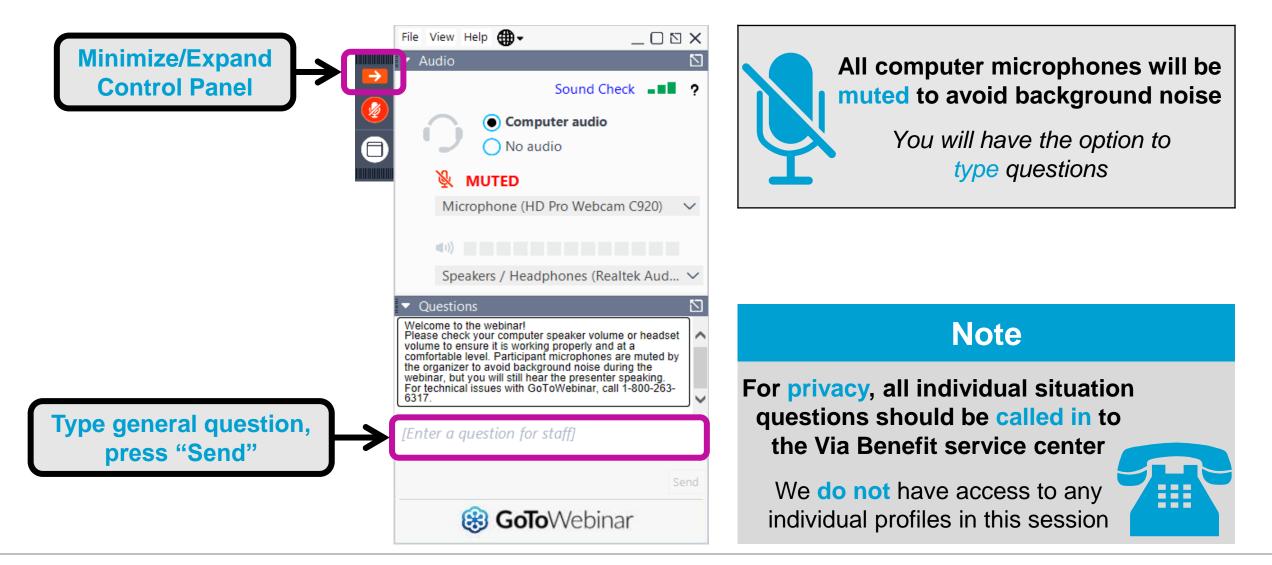
Helpful Resources

Via Benefits has produced a collection of videos to assist you in finding the answers you need. View our <u>full video library</u> to access this additional guidance and information.

Start Watching



GoToWebinar Questions Panel





VIA BENEFITS®

Thank you!

Go online now to set up your profile and schedule your enrollment appointment

marketplace.viabenefits.com/NWCarpenters

1-855-219-0549

Monday through Friday 5:00 AM – 4:00 PM Pacific



