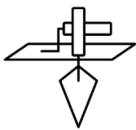


**KAISER  
PERMANENTE  
PLAN**

**Open Enrollment  
information and materials  
start on next page**



**Northern California Cement Masons Funds Administration, Inc.**

100 Crescent Center Parkway, Suite 400, Tucker, GA 30084-7042 • Telephone: (707) 864-3300

**Date: October 20, 2017**

**To: All Active Participants Enrolled in the Kaiser Permanente Plan**

**Re: Enroll or Renew Enrollment in the Kaiser Permanente Premier Plan**

Dear Participant:

Effective February 1, 2013, the annual deductible was increased from \$300 per person up to \$900 per family to \$1,000 per person up to \$3,000 per family. This deductible level is called the “**Basic plan**”.

On November 9, 2012 we introduced The Healthy Structures, “Promise Program”. The Promise Program is designed to bring high quality care to participants and, at the same time, make care more affordable for everyone.

The Promise Program was offered to all Active Participants and their eligible spouses. Those who participated in the new Promise Program were enrolled in the “**Premier Plan**” and by participating, their annual deductible was reduced to \$300 per person/\$900 maximum per family effective February 1, 2013.

Our record indicates that you are either currently enrolled in the higher deductible Basic Plan or enrolled in the lower deductible Premier Plan and must renew your participation in the Promise Program. Your annual opportunity to participate in the Promise Program and enroll in the Premier Plan for the coming January 1, 2018 Plan Year starts today and continues through December 15, 2017. If you and your eligible spouse, if any, complete the requirements for the Promise Program, you will be enrolled in the Premier Plan effective January 1, 2018. If you choose not to participate in the Promise Program, you will be enrolled in the higher deductible Basic Plan during the entire Plan Year of January 1 – December 31, 2018. We hope that you will participate and commit to take certain actions to improve your health and take extra steps as required by the Promise Program.

By participating, we believe that your decision will save you and the Trust Fund thousands of dollars.

**Here’s how to enroll or renew enrollment in the Kaiser Permanente Premier Plan:**

**Step 1: Complete the Promise Program Election Form (“Promise Form:”).** To get started, you and your eligible spouse, if any, should read the enclosed Promise Form. *If you both are agreeable to the commitments outlined in the form, complete, sign and date the form and return it to the Trust Fund Office by December 15, 2017.*

**Important:** Both you and your eligible spouse, if any, must agree to the requirements together and each must complete and sign the Promise Form and return it in order to participate in the Promise Program.

**Step 2: Take an online Healthy Lifestyle Program or Total Health Assessment course or, an in-person Health Education Class.** The course is free. Refer to page 2 for instructions on how to sign up and complete a course. The course must be done no later than December 15, 2017.

**Step 3: Participate in the Promise Program and reduce your annual deductible.** When you and your spouse, if any, agree to the Promise Program, complete the Promise Form and take a health education course by December 15, 2017 you will be enrolled in the lower deductible **Premier Plan**. If you and your spouse, however, decide not to participate or renew participation, you will be enrolled in the higher deductible **Basic Plan** until the next Open Enrollment period.

Please read all the enclosed materials for more information about the Promise Program commitments and what you need to do in order to have the lower deductible **Premier Plan**. If you have questions, contact the Trust Fund Office at 1-888-245-5005.

Sincerely,

**Board of Trustees**

## The Healthy Structures Promise: Focus on Health

The Healthy Structures Promise is based on the idea that when you know more about your health status and understand potential health risks, you'll be able to improve or maintain your health.

### **The Healthy Together Partnership**

We are all in this together.

**When you and your spouse, if any, have read and have agreed to the Promise by signing and dating the Promise Form, you both have committed to:**

1. Complete a health education course by December 15, 2017
2. Keep your contact information up to date.
3. Provide an email address and/or cell phone number as a supplemental way for the Trust Fund Office to contact you with general information about the Promise Program and other Trust Fund Programs.

**When you and your spouse have agreed to the Promise, we agree to:**

1. Provide you with a free health education course.
2. Connect you with resources to help you understand what the results mean and what steps to take to improve your health
3. Enroll you in the lower deductible Premier Plan

**With the right resources and tools, you can better understand your health status, know your health risks and make smart choices about your lifestyle and care. That is the goal of the Healthy Structures Promise Program. We all have a stake in being healthy.**

### **Step 1: Complete the Promise Form**

After you and your spouse, if any, have read the Promise Form, and if you agree to carry out the commitments outlined in the Promise Program, you need to:

1. Complete the form.
2. Sign and date the form.
3. Return your completed form to the Trust Fund Office no later than **December 15, 2017** in the enclosed self-addressed envelope.

You and your spouse are both making a commitment to your health. The Promise Program is completely voluntary and it is your decision to participate. If you do not wish to participate or renew participation in the Promise Program, you will remain or be enrolled in the Basic Plan with the higher annual deductible as described in Step 3 on page 2.

**Promise to Stay Connected.** Keeping you informed of important messages is part of our role in the Promise Program. That is why we need to have current contact information and an additional way to communicate with you and your spouse. So, as part of the Promise Program, we are asking you to provide an email address and/or cell phone number that accept text messages, if you have one.

**Moving? New phone number? New email address?** Part of the Promise Program involves keeping the Trust Fund Office updated with your contact information. Any time there is a change to your home address, phone number, email and/or cell phone number, call the Trust Fund Office at 1-888-245-5005 to request the form on which can update your information. **If you do not keep your contact information updated, it may cause you to lose your enrollment in the Premier Plan.**

## Step 2: Take a Free Online Course or In-Person Health Education Class

As part of the Promise Program, you and your spouse must take a **free online Healthy Lifestyle Program or Total Health Assessment or, attend an in-person Health Education Class by December 15, 2017**. Taking a course or class will help identify any potential health risk factors you or your spouse may have that can lead to chronic illness if not detected early. Knowing this information and then working with your Kaiser Permanente doctor to improve your health can help you live a healthier and more productive life.

### Here's what to do for Step 2:

First, you must be eligible for benefits in the month you complete an online course or in-person class. To confirm eligibility, call the Trust Fund Office at 1-888-245-5005.

Second, read the enclosed "INSTRUCTIONS ON COMPLETING AN ONLINE OR IN-PERSON HEALTH EDUCATION COURSE OR CLASS", follow the step-by-step instructions which is summarized as follows:

- **To take an online Healthy Lifestyle Program or Total Health Assessment**, you must be registered and signed on to Kaiser Permanente's web site, kp.org. Once you have completed the online questionnaire, you will receive a customized action plan to help you succeed in creating a healthier lifestyle. Kaiser offers several Health Improvement online courses but, you only have to complete one course.
- **To schedule an in-person Health Education Class**, you can either call Kaiser directly at 1-800-464-4000 or go to their web site, www.kp.org and access the tab "Health and Wellness" then select "Programs and Classes". If you take this option, you will need to complete Section 1 of the enclosed "Health Education Confirmation Form", have the class instructor to complete Section 2 verifying you attended the class **and return the form to the Trust Fund Office.**

**Will my personal results be shared?** No. Kaiser will only notify the Trust Fund Office that you successfully completed Step 2 of the Promise Program. Your personal health information is confidential and will never be shared with anyone other than you. The Trust Fund Office will only know that you and your eligible spouse, if any, completed Step 2 so that you will be eligible for the lower deductible Premier Plan.

Identifying potential health risks and treating them early can help you feel better, live longer and keep certain conditions from becoming more severe and, as a result, more costly to treat.

### Step 3: Receive or Remain in the Lower Deductible Premier Plan

**Here's what to do for Step 3:** Make sure you complete Steps 1 and 2 by December 15, 2017. When you complete Steps 1 and 2 of the Healthy Structures Promise by December 15, 2017, you will remain or be enrolled in the lower deductible Premier Plan effective January 1, 2018.

*If you decide not to participate in the Promise Program and follow through with the commitments, you will remain in the higher deductible **Basic Plan for the entire 2018 calendar year.***

**Open Enrollment:** In order to remain enrolled in the Premier Plan, you will be required annually, which begins every October, to renew your Promise, complete a Promise Form **and** take an online course or attend an in-person class as described above. If you have decided not to participate in the Promise Program at this time, you will have an opportunity again during the next open enrollment.

<b>Resources</b>	<b>Contact Information</b>
<b>Cement Masons Health and Welfare Trust Fund</b>	1-707-864-3300 or Toll Free 1-888-245-5005 Monday through Friday 8:00 AM to 5:00 PM Email: <a href="mailto:cmeligibility@zenith-american.com">cmeligibility@zenith-american.com</a>
<b>Kaiser Permanente Plan</b>	1-800-464-4000 Website: <a href="http://www.kp.org">www.kp.org</a>

# The Cement Masons Health and Welfare Trust Fund for Northern California

## Promise Program Election Form for Kaiser Permanente

(Complete ALL the information required in this form and return it by December 15, 2017)

Our record indicates that you are either currently enrolled in the higher deductible Basic Plan or enrolled in the lower deductible Premier Plan and must renew your participation in the Promise Program. Your annual opportunity to participate in the Healthy Structures Promise Program and enroll in the lower deductible Premier Plan for the coming January-December 2018 calendar year starts today and continues through December 15, 2017. If you and your eligible spouse, if any, complete the requirements for the Promise Program, you will be enrolled in the Premier Plan **effective January 1, 2018**. If you choose not to participate in the Promise Program, you will be enrolled in the higher deductible Basic Plan during the entire 2018 calendar year. We hope that you will participate and commit to take certain actions to improve your health and take extra steps as required by the Promise Program. By participating, we believe that your decision will save you and the Trust Fund thousand of dollars.

### Healthy Structures Promise Program Commitments

To participate in the Promise Program, you and your spouse agree to take the following actions:

1. I, and my spouse will complete a Kaiser Permanente online Healthy Lifestyle Program or Total Health Assessment; or attend an in-person Kaiser Permanente Health Education class by December 15, 2017. In doing so, we authorize the Trust Fund Office to receive notification that we completed the online course or in-person class. No individual results will be provided to the Trust Fund Office.
2. I will keep the Trust Fund Office up to date at all times of my contact information and that of my spouse including mailing address, email address, home and cell phone numbers by filing the necessary form on which I can update my contact information. I will call the Trust Fund Office at 1-888-245-5005 to request the necessary form. By doing so, I understand that they will be able to keep me informed with general information about the Promise Program and any other Trust Fund programs by text message, if applicable. Please complete the **following information**.

Participant Contact Information		Spouse Contact Information	
Name:		Name:	
Street Address:		Street Address:	
City, State and Zipcode:		City, State and Zipcode:	
Email Address (if you have one):		Email Address (if you have one):	
Home Phone No.:		Home Phone No.:	
Cell Phone No. (that can accept text messages if you have one):		Cell Phone No. (that can accept text messages if you have one):	

**Please read and complete the reverse side**

## Completing online and in-person health education program

Kaiser Permanente participants who want to be placed in the Premier plan will no longer be able to qualify by receiving a biometric screening. Instead, both the member subscriber and spouse must complete one of the following:

- Take the online Total Health Assessment at [kp.org/tha](http://kp.org/tha); or
- Take an online Health Improvement (Healthy lifestyles program) course at [kp.org/healthylifestyles](http://kp.org/healthylifestyles); or
- Attend a Kaiser Permanente Health Education class.
- **For members with a chronic illness, this includes attending our Living with Chronic Illness class.**
- **For pregnant members, this would include attending one of our on-site prenatal classes.**

If you take an on-line Total Health Assessment or healthy lifestyle program, Kaiser Permanente will report your participation to the Trust Fund Office.

If you choose to take a health education class in person, you must (1) complete Section 1 and (2) have the instructor complete and sign Section 2 of the enclosed Health Education Confirmation Form. Mail the completed form to the Trust Fund Office.

### Taking the Total Health Assessment

To start the Total Health Assessment, go to [kp.org/tha](http://kp.org/tha). \* When you're done, you'll receive a customized action plan to help you succeed in creating a healthier lifestyle.

\*Available in both English and Spanish

\* To use these programs for the first time, you'll need to register with [kp.org](http://kp.org). To do so, just go to [kp.org/registernow](http://kp.org/registernow). Then sign on with your user ID and password.

### Taking a healthy lifestyle program

To take an online healthy lifestyles program, go to [kp.org/healthylifestyles](http://kp.org/healthylifestyles)\* and choose the type of healthy change you want to make. Programs include:

**Balance®** — this weight management program includes helpful tools and a personalized plan to help coordinate three areas: mind, food, and body.

**Breathe®** — this award-winning program helps quit smoking for good. Create a personalized quitting plan that includes proven strategies for decreasing dependency and cravings.

**Nourish®** — this program helps create a custom-made nutrition plan and offers personalized strategies for making smart, satisfying food choices to improve health and well-being.

**Relax®** — this program examines sources and symptoms of stress to develop a customized stress management plan.

**Care® for Pain** — this pain management program offers support and strategies to address chronic pain. It teaches self-management and coping strategies to help regain control of life.

**Care® for Diabetes** — this program offers strategies for day-to-day management of diabetes.

**Care® for Your Back** — this program provides chronic back pain techniques and approaches to better manage the condition.

**Overcoming™ Depression** — this self-help intervention has focused strategies and ideas to build motivation to change, as well as relapse prevention strategies.

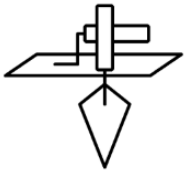
**Overcoming™ Insomnia** — this program offers evidence-based techniques to improve sleep.

### Taking a health education class

For information about health education classes contact Kaiser Permanente:

**1-800-464-4000** or, go to [kp.org/classes](http://kp.org/classes).

KAISER PERMANENTE



# Health Education Confirmation Form

Dear Kaiser Permanente Health Educator

FORM IS REQUIRED ONLY IF THE MEMBER TAKES A CLASS IN PERSON  
INSTRUCTOR MUST SIGN FORM (See Section 2 Below)

Cement Masons Health and Welfare Trust Fund for Northern California members are required to take steps to improve their health in order to qualify for their Wellness Incentive Program. One of their choices is to attend a Kaiser Permanente health education class. If the member presenting you with this form has taken your class, please complete Section 2 by filling in your name, the date, and location of the class.

Thank you.

Zen Dupure, Client Service Manager, Kaiser Foundation Health Plan

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## Section 1: One form each to be completed by the member and their spouse

Dear Cement Masons/Kaiser Permanente Member:

In order to qualify for the lower deductible Premiere Plan under the Cement Masons Health and Welfare Trust Fund for Northern California, you and your spouse (if applicable) must complete one of the following:

- 1) Complete a Kaiser Permanente online Total Health Assessment; or
- 2) Complete a Kaiser Permanente online Healthy Lifestyle Program; or
- 3) Attend a Kaiser Permanente Health Education class. **If you have chosen to attend a health education class in person, you must also submit this completed verification form to the Fund Office.**

Member or Spouse Name: \_\_\_\_\_

Member or Spouse Date of Birth: \_\_\_\_\_

Member SSN or HCID Number: \_\_\_\_\_

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## Section 2: To be completed by the Kaiser Permanente Health Educator

The Kaiser Member or Spouse named above has completed the following health education class:

Date of class: \_\_\_\_\_

Location of class: \_\_\_\_\_

Name of Health Educator: \_\_\_\_\_

Members - Please return this form to:

Northern California Cement Masons Funds Administration,  
Inc.  
100 Crescent Center Parkway, Suite 400  
Tucker, GA 30084-7042  
Phone: 1-888-245-5005  
Email: cmeligibility@zenith-american.com