KAISER PERMANENTE PLAN

Open Enrollment information and materials start on next page

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**
- 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** 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.

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. 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-office.

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. When you complete Steps 1 and 2 of the Healthy Structures Promise by December 15, you will remain or be enrolled in the lower deductible Premier Plan effective January 1.

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 2025 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 inperson 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.

Resources	Contact Information
Cement Masons Health and Welfare Trust Fund	1-707-864-3300 or Toll Free 1-888-245-5005 Monday through Friday 8:00 AM to 5:00 PM
	Email: nccminfo@hsba.com
Kaiser Permanente Plan	1-800-464-4000 Website: <u>www.kp.org</u>

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)

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 calendar. 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**.

If you choose not to participate in the Promise Program, you will be enrolled in the higher deductible Basic Plan during the entire **2025** 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 thousands of dollars.

Healthy Structures Promise Program Commitments

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

- 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**. In doing
 so, we authorize the Trust Fund Office to receive notification that we completed the online course or inperson 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.

Kaiser Permanente

Participant Contact Information	Spouse Contact Information
Name:	Name:
Street Address:	Street Address:
City, State and Zip code:	City, State and Zip code:
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

Kaiser Permanente

Healthy Structures Promise Election Form

elow a	nd co	omplete the required information:
		Yes I/We agree to the terms of the Program and understand that when I/we meet the requirements, I/we will be enrolled in the Premier Plan with a \$300.00 per person and \$900.00 per family deductible effective January 1 .
A	pe of thi	mplete an <u>online</u> Healthy Lifestyle Program or Total Health Assessment; or attend an in- rson Health Education class by December 15 from Kaiser Permanente. Indicate the date below your online course or in-person class <u>AFTER</u> you have completed the course or class. DO NOT return s form until you have completed the course or class. Please read the enclosed Kaiser Permanente tructions for more information on completing a course or class.
		Yes, I have completed a course or class on (indicate date)
		Yes, My spouse has completed a course or class on (indicate date)
		Yes, I/We understand that by signing below, I/we agree to complete the Healthy Structures Promise Program Commitments as described and within the timelines noted above.
	вот	H you and your spouse MUST sign and date this form; otherwise, it will be returned.
	Pai	rticipant's SSN:

If you wish to participate in the Promise Program and enroll in the lower deductible Premier Plan, check the Yes boxes

<u>If you wish NOT to participate</u> in the Promise Program and be enrolled in the Basic Plan with \$1,000.00 per person and \$3,000.00 per family deductible, you do not have to do anything and understand that by not participating, your next opportunity to participate in the Program will be effective **January 1, 2026**.

Participant's Signature: ______ Date: _____

Spouse's Signature: _____ Date: _____

Return this form to the Trust Fund Office by mail in the enclosed self-addressed envelope to: Cement Masons Health and Welfare Trust Fund, 4160 Dublin Blvd. Suite 400, Dublin, CA 94568

You should make a copy of this form to keep in your files. Contact the Trust Fund Office at 1-888-245-5005 if you have any question about the Healthy Structures Promise Program. Your Trust Fund safeguards the privacy of all participants' individually identifiable health information as required by federal regulations. Unions and Employers cannot access member's individual health information.

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; or

Take an online Health Improvement (Healthy lifestyles program) course at kp.org/healthylifestyles; or

Attend a Kaiser Permanente Health Education

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. * When you're done, you'll receive a customized action plan to help you succeed in creating a healthier lifestyle.

Taking a healthy lifestyle program

To take an online healthy lifestyles program, go to 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 custommade 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.

KAISER PERMANENTE.

^{*}Available in both English and Spanish

^{*} To use these programs for the first time, you'll need to register with kp.org. To do so, just go to kp.org/registernow. Then sign on with your user ID and password.