



**CASCADE**  
CHRISTIAN SCHOOLS

## **Classified Staff**



# **EMPLOYEE BENEFIT GUIDE**

January 1, 2025, through December 31, 2025

**If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please refer to the Medicare Part D Notice section of this Guide for more details.**

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## WHO IS ELIGIBLE

Full time employees are eligible to participate in benefit plans on the **first day of the month following or coinciding with their date of hire**. Full time employment is defined as working a minimum of **30 hours** per week. Your eligible dependents include your **spouse, State Registered domestic partner, and dependent children**. Dependent children are eligible to age 26.

## HOW TO ENROLL

Eligible employees will receive information from their HR Department with detailed instructions for how to enroll for benefits.

**If you do not complete your enrollment during your designated window, you may not be able to enroll or make changes unless you experience a qualifying event, or until the next open enrollment period.**



## MID-YEAR CHANGES

**Unless you have a qualifying event, you cannot make changes to the benefits you elect until the next open enrollment period.** If you experience a qualified "change in status," you must make any associated enrollment or benefit changes within 30 days of the event except for a Medicare or Medicaid entitlement event, in which case you must make changes within 60 days of the event.

### Qualified changes in status include:



- Change in legal marital status (marriage, death of spouse, divorce, legal separation)
- Change in number of dependents (birth, death, adoption, ceases to satisfy eligibility requirements, child support order)
- Change in employment status
- Loss of certain other health coverage
- Medicare or Medicaid entitlement
- Significant cost or other coverage changes
- Family Medical Leave Act (FMLA) leave of absence, reduction of hours
- Exchange/Marketplace enrollment

**Important!** Please note that there are several conditions and/or limitations that apply to the events listed above. Please contact Human Resources if you have any questions or believe that you may qualify for an election change.

## WELCOME TO YOUR BENEFITS

**During the annual open enrollment period, you may make changes to your benefit plan elections and/or the family members you cover. Changes can only be made *outside of the annual enrollment period* if you experience a qualified family status change that permits changes in your plan election.** So now is the time to carefully review your plan options. On the next page is an overview of the offerings for the 2025 plan year. Elections you make during open enrollment will become effective January 1, 2025.

## WHAT'S OFFERED FOR 2025



At Cascade Christian Schools, we offer you and your eligible family members a comprehensive and valuable benefits program. We encourage you to take the time to educate yourself about your options and choose the best coverage for you and your family. You may choose to opt out if you have other coverage which you would like to keep.

<b><u>Plans</u></b>	<b><u>Carriers</u></b>
<b>Medical / RX</b>	<b>Remodel Health</b>
<b>Health Savings Account (HSA)</b>	<b>HealthEquity</b>
<b>Dental</b>	<b>Premera Blue Cross</b>
<b>Vision</b>	<b>Ameritas – VSP &amp; EyeMed</b>
<b>Flexible Spending Accounts</b>	<b>HealthEquity</b>
<b>Employee Assistance Program (EAP)</b>	<b>Principal / Magellan Healthcare</b>
<b>Life/AD&amp;D</b>	<b>Principal</b>
<b>Voluntary Life/AD&amp;D</b>	<b>Principal</b>
<b>Voluntary Long Term Disability</b>	<b>Principal</b>
<b>403b Retirement Savings Plan</b>	<b>Barron Financial Services</b>

**If you (and/or your dependents) have Medicare or will become eligible for Medicare in the next 12 months, a federal law gives you more choices about your prescription drug coverage. Please refer to the Medicare Part D Notice section of this Guide for more details.**

## QUESTIONS?

Because the world of healthcare and insurance can be confusing and hard to navigate, we are pleased to introduce your team at Brown & Brown Insurance who will be able to assist you with all things related to your benefits. Brown & Brown will be working in conjunction with the Human Resources Department so that benefit needs are addressed in a timely fashion.

 <b>Brown &amp; Brown</b>		 <b>CASCADE</b> CHRISTIAN SCHOOLS
Daniel Smith Employee Benefits Consultant 253.396.5507 <a href="mailto:daniel.smith@bbrown.com">daniel.smith@bbrown.com</a>	Nayeli Ruiz Account Manager 253.396.5613 <a href="mailto:nayeli.ruiz@bbrown.com">nayeli.ruiz@bbrown.com</a>	Tiffany Wakefield Director of Human Resources 253.841.1776 <a href="mailto:tiffany@cascadechristian.org">tiffany@cascadechristian.org</a>

Additionally, the carriers below may be able to assist.

Plan	Carrier	Phone	Website
Medical / Rx	Remodel Health	844.748.3240	<a href="http://app remodelhealth.com">app remodelhealth.com</a>
Health Savings Account	HealthEquity	866.348.5800	<a href="http://www.healthequity.com">www.healthequity.com</a>
Dental	Premera Blue Cross	800.722.1471	<a href="http://www.premera.com">www.premera.com</a>
Vision	Ameritas	800.659.2223	<a href="http://www.vsp.com">www.vsp.com</a> <a href="http://www.eyemed.com">www.eyemed.com</a>
Flexible Spending Account	HealthEquity	877.924.3967	<a href="http://www.healthequity.com">www.healthequity.com</a>
EAP	Magellan Healthcare	800.450.1327	<a href="http://www.magellanascend.com">www.magellanascend.com</a>
Life/AD&D	Principal	800.986.3343	<a href="http://www.principal.com">www.principal.com</a>
Voluntary Life/AD&D			
Voluntary Long-Term Disability			

# EMPLOYEE PAYROLL DEDUCTIONS

Below are the monthly plan costs.



Remodel Health			
Login to Remodel Health Portal to see your cost by plan			

Voluntary Delta Dental PPO Base			
	Total Cost	Employer Cost	Your Monthly Cost
Employee Only	\$39.57	\$0.00	\$39.57
Employee & Spouse	\$85.08	\$0.00	\$85.08
Employee and Child(ren)	\$87.07	\$0.00	\$87.07
Employee and Family	\$130.58	\$0.00	\$130.58

Voluntary Premiera Dental PPO Buy Up			
	Total Cost	Employer Cost	Your Monthly Cost
Employee Only	\$48.51	\$0.00	\$48.51
Employee & Spouse	\$104.30	\$0.00	\$104.30
Employee and Child(ren)	\$106.71	\$0.00	\$106.71
Employee and Family	\$160.08	\$0.00	\$160.08

Voluntary Ameritas VSP Choice & Eye Med			
	Total Cost	Employer Cost	Your Monthly Cost
Employee Only	\$5.76	\$0.00	\$5.76
Employee & Spouse	\$11.52	\$0.00	\$11.52
Employee and Child(ren)	\$12.36	\$0.00	\$12.36
Employee and Family	\$19.76	\$0.00	\$19.76



# MEDICAL PLAN OFFERING



## Individual Plans

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### Who is Remodel Health?

Powered by our proprietary software and backed by a team of licensed health benefits experts, we provide individualized health benefits solutions tailored to businesses of all sizes, nonprofits, educational institutions, and beyond. Our unwavering commitment to exceptional customer service ensures every client experiences the best in the industry.

### What is an ICHRA?

Individual Coverage Health Reimbursement Arrangements (ICHRA) allow an employer to provide untaxed dollars to their employees to spend on individual plans. Very similar to the change from pension plans to 401(k)s for retirement benefits—the employer provides a contribution, and the employee gets to decide how to spend it.

With an ICHRA, you as the employee have personal choice in your medical benefits, and will be able to enroll in a plan that best fits your household's needs. ICHRA's allow your employer to customize employee health benefits to meet the individual needs of all employees and provide more ownership of the policy to you, the employee.

### What type of plans are available?

Instead of your employer choosing one health policy for everyone, you now have the freedom to shop for health insurance coverage that best suits your needs. With the support of Remodel Health and our licensed health benefits advisors, you can select a plan that fits your preferred network, doctors, and health insurance premium. Below are a few considerations as you explore options:

**High Deductible Health Plans (HDHP):** These plans have higher deductibles, or initial costs for healthcare expenses, but lower premiums. Typically, the higher the deductible, the lower the premium. In many cases, you can utilize a health savings account with these plans.

**Co-Pay Plans:** Co-Pay plans have set amounts that you pay for each visit or prescription (copays), and often feature lower deductibles. With a co-pay plan, you will typically pay higher premiums than an HDHP because you are likely accessing your benefit more frequently.

**Network:** There are a variety of networks for plans such as PPO, EPO and HMO. With a PPO plan, you are likely to have the widest network and access to out-of-network coverage. An EPO can have a wide network with a greater likelihood for prior-authorization requests. Finally, an HMO network tends to be narrow and may request a referral before major procedures.

# HEALTH SAVINGS ACCOUNT (HSA)

HEALTHEQUITY

HSAs are tax-advantaged savings accounts that accompany high deductible health plans (HDHPs).

HSA ADVANTAGES	
<b>Save Money</b>	HDHPs have lower monthly premiums, meaning you pay less out of your paycheck.
<b>Portable</b>	Money in your HSA is carried over year to year and remains yours, even if you leave the company.
<b>Triple Tax Advantages</b>	HSA contributions are tax-free. Interest earnings on HSA contributions accumulate tax-free. Amounts distributed for qualified expenses are tax-free as well.



## Maximum Contributions: 2025 tax year

- **Individual Coverage:** \$4,300
- **Family Coverage:** \$8,550
- **Individuals age 55+:** additional \$1,000 catch up contribution per year

## HSA things you need to know:

### Annual limits apply to HSA contributions:

- The amount is federally mandated and different for individual and family HDHP coverage.
- Contributions exceeding the maximum limits become taxable as income.
- Withdrawals used for non-qualified expenses are taxable as income and subject to 20% penalty.
- Changes to contributions can be made at any time throughout the year, contact HR/Payroll for guidelines.

### Who is eligible to open and fund an HSA? Anyone who is:

- Covered by a qualified HDHP;
- Not covered under another medical plan that is not a qualified HDHP - including Medicare, Medicaid, TriCare, VA and/or a Health Care Flexible Spending Account (FSA)



# DENTAL PLAN

## PREMERA BLUE CROSS – DENTAL BASE PLAN



**Preferred Provider Organization (PPO) Plans** allow you the freedom to use the dentist of your choice or access the PPO network of dentists. There are reduced fees for services based on negotiated rates.

Out of network benefits are available

- **You will pay the difference in cost between a non-network provider's charges and the allowed amount.**

In Network Benefits	Premera Blue Cross
	Dental PPO – Base Plan
<b>Annual Deductible</b>	\$50 Individual \$150 Family Deductible is waived for Preventive Services
<b>Annual Benefit Maximum</b>	\$1,000
<b>Orthodontia Benefit</b>	Not Covered
<b>TMJ Services</b>	Not Covered
<b>Class I Preventive &amp; Diagnostic Services</b>	
Routine Exam Cleanings Fluoride X-Rays Sealants	Plan pays 100%
<b>Class II Basic Services</b>	
Fillings Endodontics (Root Canal) Periodontics Oral Surgery	Plan pays 80%
<b>Class III Major Services</b>	
Dentures/Partial Dentures Bridges Crowns Implants	Plan pays 50%
<b>Out of Network Benefits</b>	
<b>Annual Deductible</b>	Shared with In Network
<b>Annual Benefit Maximum</b>	Shared with In Network
<b>Preventive / Basic / Major Services</b>	100% / 80% / 50%
<b>Usual Customary Reimbursement (UCR)</b>	90 <sup>th</sup> Percentile UCR

For a full listing of the covered benefits, please contact your HR Department for copies of the Benefit Summary and Booklet.

# DENTAL PLAN

## PREMERA BLUE CROSS – DENTAL BUY UP PLAN



**Preferred Provider Organization (PPO) Plans** allow you the freedom to use the dentist of your choice or access the PPO network of dentists. There are reduced fees for services based on negotiated rates.

Out of network benefits are available

- **You will pay the difference in cost between a non-network provider's charges and the allowed amount.**

In Network Benefits	Premera Blue Cross
	Dental PPO
<b>Annual Deductible</b>	\$50 Individual \$150 Family Deductible is waived for Preventive Services
<b>Annual Benefit Maximum</b>	\$2,000
<b>Orthodontia Benefit</b>	Not Covered
<b>TMJ Services</b>	Not Covered
<b>Class I Preventive &amp; Diagnostic Services</b>	
Routine Exam Cleanings Fluoride X-Rays Sealants	Plan pays 100%
<b>Class II Basic Services</b>	
Fillings Endodontics (Root Canal) Periodontics Oral Surgery	Plan pays 90%
<b>Class III Major Services</b>	
Dentures/Partial Dentures Bridges Crowns Implants	Plan pays 60%
<b>Out of Network Benefits</b>	
<b>Annual Deductible</b>	Shared with In Network
<b>Annual Benefit Maximum</b>	Shared with In Network
<b>Preventive / Basic / Major Services</b>	100% / 90% / 60%
<b>Usual Customary Reimbursement (UCR)</b>	90 <sup>th</sup> Percentile UCR

For a full listing of the covered benefits, please contact your HR Department for copies of the Benefit Summary and Booklet.

# VISION PLAN

## AMERITAS – FOCUS AND VIEWPOINTE COMPARISON



The vision plan provides you with the freedom to use an eye doctor of your choice or access the **VSP Choice or EyeMed Insight Network** of providers, depending upon your plan election. If you use a provider participating in the network, your out of pocket expenses will be reduced.

**Extra Savings:** In addition to the coverage below, the plan provides savings on additional pairs of glasses and sunglasses, retinal screening, and laser vision correction.

In Network Benefits	Plan 1	Plan 2
	Focus VSP Choice Network	ViewPoint Eyemed Insight Network
Eye Exam	\$10 copay	\$10 copay
Prescription Lenses & Frames		
Single Vision Lined Bifocal Lined Trifocal Frames Frames Allowance	\$25 copay \$25 copay \$25 copay \$130 max allowance, \$70 Costco/Walmart allowance	\$25 copay \$25 copay \$25 copay \$130 max allowance
Lens Enhancements		
Progressive Lenses & Other Enhancements	Available at a discounted rate	Available at a discounted rate
Contact Lenses		
Lens Exam (fitting & evaluation) Contacts (instead of glasses)	Up to \$60 \$130 allowance	Up to \$40 \$130 allowance
Medically Necessary Lenses	Paid in full	Paid in full
Frequency		
Eye Exam Lenses – Eyeglass or Contacts Frames	Every 12 months Every 12 months Every 24 months	Every 12 months Every 12 months Every 24 months
Out of Network Benefits	See Benefit Summary	See Benefit Summary

## USING YOUR BENEFITS IS EASY

There's no ID card necessary (but you can print a Member Vision Card if you'd like from [www.ameritas.com](http://www.ameritas.com))

- Just tell your provider you have Ameritas coverage along with your selected network
- Give the provider the primary member's name
  - It will be helpful to have the primary member's Date of Birth and Social Security Number handy, in case the provider asks for additional information to look up the coverage

For a full listing of the covered benefits, please contact your HR Department for copies of the Benefit Summary and Booklet.

# FLEXIBLE SPENDING ACCOUNT (FSA)

HEALTHEQUITY

You have the opportunity to pay for out of pocket Medical, Dental, Vision, and/or Dependent Care expenses with pre-tax dollars through payroll deduction. This means that you don't pay federal income or FICA taxes on the portion of your paycheck you contribute to your FSA. **Important Note: If you will be funding an HSA, you cannot participate in the Health Care FSA or be covered by your spouse's FSA unless it is a Limited-Purpose FSA. Cascade Christian Schools does not offer a Limited Purpose FSA.**



**Plan Year:** January 1, 2025 to December 31, 2025

**Health Care Contribution Limit:** \$2,000

**Dependent Care Contribution Limit:** \$5,000

Health Care FSA	Set aside pre-tax dollars to pay for out-of-pocket health care expenses (medical, dental and vision) incurred by you, your spouse and/or your dependent children; whether you insure them or not.
Rollover/Carryover	If you still have money in the account at the end of the Plan Year (December 31, 2025), up to \$660 of your unused balance will carry over into the new FSA plan year.
Dependent Care FSA	Used to reimburse childcare expenses; while you or your spouse work, look for work or attend school full-time or are physically unable to care for your dependent. Eligible children are under age 13, or a dependent who is physically or mentally not able to care for themselves.
	Eligible dependent care expenses include: <ul style="list-style-type: none"><li>• Nanny</li><li>• Nursery school</li><li>• Before and after school care</li><li>• Day Camp</li><li>• Daycare</li></ul>
Plan Year:	January 1, 2025 through December 31, 2025

# EMPLOYEE ASSISTANCE PLAN (EAP)

## PRINCIPAL EAP

The EAP provides a positive, confidential tool to help resolve personal or family problems. You and your dependents can use EAP services to get support for and work towards solutions to solve a wide range of issues and concerns.

### Services include support for:

- Anxiety and Depression
- Couples/Relationship/Parenting
- Crisis Support
- Alcohol/Drug Problems
- Grief and Loss
- Work Conflict
- Compulsive Behaviors
- Domestic Violence
- Legal and Financial
- Childcare and Eldercare
- ID Theft
- Healthy Living Tips

Your company's complimentary EAP program is available 24/7 and covers not only you, but spouses, domestic partners and children up to age 26. The EAP is here to help when you're facing issues that interfere with your health, well-being, and productivity at home or at work.

The EAP offers up to 3 **sessions face-to-face or telehealth** (no copay, deductible or premium) with a qualified clinical expert who can assess your concerns and develop a plan of action. If you need legal\* or financial consultation, or ID theft resolution, you can speak with an expert for up to 30 minutes at no charge. EAP consultants can also provide you with childcare and eldercare information and resources for anywhere in the country. Additionally, the Home Ownership program is a valuable tool to gain a competitive edge as a buyer and can save you thousands when buying or selling a home.

Simply call us at 800.450.1327 or visit our website to request an appointment.

\*Workplace issues are excluded.

## Here's how to get started

Give us a call as 800.450.1327 and we will connect you with the right resource or professional.

Visit our website to learn more about all the services available at [www.MagellanAscend.com](http://www.MagellanAscend.com).

Enter **Principal Core** for the company name

# GROUP LIFE & AD&D INSURANCE

PRINCIPAL– 1X ANNUAL EARNINGS

Group Life and AD&D Insurance is arranged through **Principal**. All benefit eligible employees receive life and accidental death & dismemberment (AD&D) insurance.



**This benefit is provided at no cost to you.**

## Benefits

### Basic Life Coverage Amount

Your Basic Life coverage amount is 1 times your annual earnings to a maximum of \$100,000.

### Basic AD&D Coverage Amount

Your Basic AD&D coverage amount is equal to your Basic Term life coverage amount.

For a covered accidental loss of life, your Basic AD&D coverage amount is equal to your Basic Life coverage amount. For other covered losses, a percentage of this benefit will be payable, please refer to the contract for details.

## Age Reductions

The amount of insurance reduces by 35 percent at the age of 65, to 50 percent at the age of 70, adjusted at policy renewal following the change in age.

## Other Basic Life Features and Services

- Accelerated Death Benefit
- Waiver of Premium
- Right to Convert Provision
- Grief Counseling
- Will Preparation
- Beneficiary Assistance

## Other Basic AD&D Features and Services

- Air Bag Benefit
- Seat Belt Benefit

For a full listing of the covered benefits, please contact your HR Department for copies of the Benefit Summary and Certificate.

# VOLUNTARY LIFE/AD&D INSURANCE

Voluntary Life and AD&D Insurance is arranged through **Principal**. This insurance can help your family meet daily expenses, maintain their standard of living, pay off debt, secure your children's education, and more in the event of your passing.



## Coverage Information

Within the coverage amount guidelines shown below, you select the amount of Voluntary Life and Dependent Life insurance for which you are interested in applying. Additional AD&D insurance is included for Employees and Spouses only.

	Minimum	Incremental Unit	Guarantee Issue Amount	Maximum
<b>Employee</b>	\$10,000	\$10,000	<b>\$150,000</b> Age 70+ \$10,000	5x annual earnings up to \$500,000
<b>Spouse</b>	\$5,000	\$5,000	<b>\$30,000</b> Age 70+ \$10,000	<b>\$150,000</b> , not to exceed 100% of employee's benefit
<b>Child</b>	Options: \$2,500, \$5,000 or \$10,000*. All amounts guaranteed. *Children under 14 days old limited to \$1,000 benefit.			

## What is Guarantee Issue?

This is the maximum amount of coverage you can elect during your initial enrollment as a new hire or during a carrier approved open enrollment opportunity without answering health questions. Otherwise, all elections require the completion of a health statement and are subject to underwriting approval.

## Age Reductions

The amount of insurance reduces by 35 percent at the age of 70, with an additional 20% reduction at age 75, adjusted at policy renewal following the change in age.

## Additional Features

- Accelerated Death Benefit
- Portability of Insurance Provision
- Waiver of Premium
- Right to Convert Provision

## Rates and Calculation

Employee & Spouse Rates* per \$1,000 of coverage	
Age	Rate**
Under 25	\$0.061
25-29	\$0.061
30-34	\$0.080
35-39	\$0.111
40-44	\$0.146
45-49	\$0.211
50-54	\$0.315
55-59	\$0.495
60-64	\$0.639
65-69	\$1.027
70+	\$1.640
<b>Child Rate</b>	
\$.500 per \$2,500 of benefit regardless of the number of children in the family	

Here's how to calculate your monthly premium:

### Step 1

Select your volume (amount of coverage) = \$ \_\_\_\_\_

### Step 2

Multiply your volume by your Age Rate = \$ \_\_\_\_\_

### Step 3

Divide the amount in Step 2 by \$1,000 = \$ \_\_\_\_\_  
Monthly Premium



# DISABILITY INSURANCE



Without disability coverage, you and your family may struggle to get by if you miss work due to an injury or illness. If you become disabled from an injury or sickness, disability income benefits will provide a partial replacement of lost income. Cascade Christian Schools provides full time employees the option to purchase long term disability on a voluntary basis, through payroll deduction.

## PRINCIPAL

	Voluntary Long-Term Disability
Benefits Begin	91 <sup>st</sup> day
Percentage of Pre-Disability Income Replaced	60%
Duration of Benefits Payable	Until age 65 or Social Security Normal Retirement Age
Maximum Benefit	Up to \$5,000 monthly
Monthly Rates – Your age as of January 1 <sup>st</sup>	Long Term Disability Rates are expressed as a percent of covered monthly earnings
Under 35	0.20%
35-39	0.41%
40-44	0.57%
45-49	0.77%
50-54	1.02%
55-59	1.18%
60-64	0.92%
65+	0.34%

For a full listing of the covered benefits, please contact your HR Department for copies of the Benefit Summary and Certificate.

# DISABILITY & WASHINGTON PAID FAMILY AND MEDICAL LEAVE COORDINATION

## **FOR EMPLOYEES: What you need to know**

If you are unable to work due to an illness or injury and want to file a disability claim with your insurance, there are some important things to keep in mind.

## **Don't forget to file for Washington Paid Family & Medical Leave**

In general, insurance carriers will assume that you are taking WPFML concurrently with any disability and will automatically reduce your benefit by the anticipated WPFML you would receive.

If you do not qualify for WPFML, the insurance carrier will reinstate your full benefit upon receipt of documentation that you are not eligible or that WPFML benefits have been denied.

## **How long will benefits last?**

WPFML provides up to 12 weeks of medical leave benefits per year. Your disability plan may provide a similar number of weeks; however, you should contact the carrier's customer service or review your plan booklet to confirm the number of disability weeks available.

***Your particular situation will determine the actual number of weeks you are approved for, for both WPFML and your Disability.***

## **What if I have Long Term Disability?**

For most people, WPFML and LTD will never overlap. If your approved WPFML does overlap slightly with an LTD claim, benefits will continue to be reduced until your WPFML benefits have been exhausted. Once WPFML benefits are exhausted, your full disability benefit would be reinstated. It will not be necessary to provide additional documentation for the end of the WPFML because that will have been collected during the time you were on STD.

If you have Long Term Disability, without a Short-Term Disability benefit, you will still report the WPFML benefit as income being received. You should indicate when the WPFML benefits are expected to end, and it would be beneficial to include a copy of your WPFML benefit letter to confirm the benefit expiration date.

## **Resources**

- Please review **your specific disability plan booklet/contract** for specific details of coverage and coordination of benefits
- **Washington Paid Family Medical Leave**  
<https://paidleave.wa.gov/individuals-and-families/>

# RETIREMENT SAVINGS PLAN – 403B

## **Barron Financial Services**

### **Cascade Christian Schools - 403b Opportunities** **YOUR FUTURE...is in YOUR Hands!**

*Julie M. Drennon, M.Ed, CRPC®, Barron Financial Services*

#### **Why Thinking about Goals for Your Future NOW is Important!**

- Social Security?
- Health Care Costs?
- Longer Life Spans?

#### **What is a 403b?**

- VOLUNTARY Tax Deferred Retirement Savings Plan
- Also known as TSA (Tax Sheltered Annuity)
- Time+Compound Interest = GROWTH

#### **What are Cascade Christian Schools' Plan Highlights?**

- ALL employees eligible to participate in 403b Plan
- A variety of investment products available through a menu of Approved Vendors including Great American, GWN Securities Managed Account Program, (American Funds, Vanguard, Blackrock, etc), VOYA, and Oppenheimer Funds
- A variety of investment vehicles in which to invest
- A choice to work with an Advisor that best works for you

#### **What are My Options?**

- Painless Payroll Deduction
- \$50 - \$1416 per month (can defer \$24,000 per year and more with "catch ups")
- Flexible vendors and investment vehicles

#### **How do I Get Started?**

- Discuss your goals, timelines and risk tolerance with your Advisor
- Determine best investment vehicle for you
- Determine the \$\$ amount you can afford "live without" each month to determine deferred contribution
- Complete forms with advisor
- Consider getting a COMPLIMENTARY Goal Setting and Retirement Analysis
- Kick back and SAVE, SAVE, SAVE!
- Enjoy your "Golden Years"

**Julie M. Drennon, M.Ed, CRPC®**

**Barron Financial Services**

**315 39<sup>th</sup> Ave. SW, Suite #8**

**Puyallup, WA 98373**

**360.791.4701 (cell)**

**[www.barronfinancial.com](http://www.barronfinancial.com)**

**[Julie.drennon@barronfinancial.com](mailto:Julie.drennon@barronfinancial.com)**

***"Planning for YOUR Future!"***

## NOTES



**CASCADE**  
CHRISTIAN SCHOOLS



**Brown & Brown**