



2016

BENEFITS

ENROLLMENT

NEWSLETTER





BENEFITS ENROLLMENT STARTS APRIL 26, 2016

Even if you think your benefits are “just fine,” take time to learn about ALL of your options. Then, decide if you want to update your benefits, dependents, or beneficiaries.

What’s New—If available at your location, you may enroll in the NEW Concordia Flex PPO dental option. The other benefit plans are the same, but your contributions may be changing. During the year, we added a Voluntary Whole Life Insurance option. We are adding Plum Benefits who offer discounts for movies and events.

To update most benefits, complete the [Enrollment Form](#) on the Benefits Gateway and return it to your Benefits Coordinator. There’s a separate form for the Freestanding Vision Plan. Changes take effect on July 1 and remain in effect until June 30, 2017 unless you have a change in status (such as marriage or a new child) and request changes within 31 days of the event.

Benefit Program Questions? Contact your Benefit Coordinator or call the Human Resources staff at the Archdiocese Pastoral Center at 215.587.3910.

Eligibility—You may be eligible for the benefits described in this newsletter if you work at least 20 hours a week as a lay employee of a parish, incorporated agency, or other participating institution of the Archdiocese of Philadelphia. A waiting period may apply before health plan coverage begins. The benefits offered and your share of the costs vary based on location.

NEW HIRES

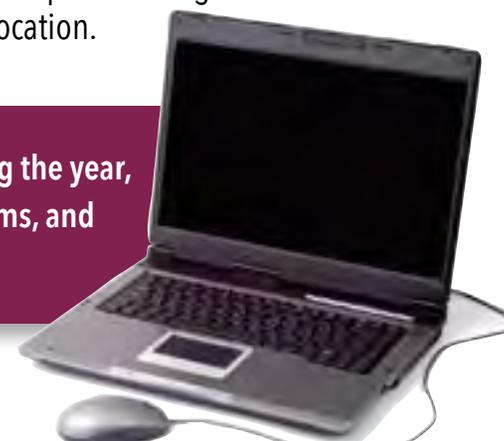
Enroll within 30 days of date of hire.

QUICK LINKS

Click on the links below to go to:

- [Enrollment Form](#)
- [Vanguard 403\(b\) Enrollment](#)
After you enroll, use this [link](#)

Check The Benefits Gateway website OFTEN! During the year, check for updates, new resources, wellness programs, and more. Go to <http://archphila.org/hrbenefits>



403(b) Retirement Plan

This is a good time to consider your 403(b) Retirement Plan elections too. You can start saving, change how much you save, or change how your account is invested at any time at vanguard.com/enroll or retirementplans.vanguard.com or by calling Vanguard at **1.800.523.1188**.



Be Smart

Make the Most of Your Benefits

- Know how each plan works.
- Call the vendors if you have questions.
- Discover the extra benefits and resources some plans offer, such as health coaching, nutrition counseling, and fitness center discounts.
- Use the vendors' websites and mobile apps to manage your benefits.
- Update your beneficiaries as needed.

Spend Your Healthcare Dollars Wisely

- Use in-network providers.
- Find out what's covered and what's not.
- Ask questions about new medications or suggested treatments—and their cost.
- When appropriate, use generic drugs and choose an urgent care center instead of the emergency room.
- Check your Explanation of Benefits (EOB) statements carefully.

MEDICAL OPTIONS—If available, consider Personal Choice HDHP with a Health Savings Account (HSA). You will pay less for medical coverage each month, and you can add pre-tax dollars to your HSA. Your employer contributes \$750 to your HSA (may be more than \$750 if your employer shares the cost of family medical coverage). You can use your HSA for today's health expenses—tax-free—or let it grow. See Page 5 to learn more.



MEDICAL OPTIONS AND VISION COVERAGE

The *Medical Options At A Glance chart* compares key features of the four medical options. The current options are not changing. Your medical coverage may already include **vision coverage**:

- The Keystone POS and HMO options include the \$35 Vision program.
- The Personal Choice HDHP option includes the \$75 Vision program.

When you use Davis Vision providers, you receive higher benefits. Both options provide benefits for eyeglasses or contact lenses; the \$75 program also covers exams. The names (\$35 or \$75) refer to the reimbursement for certain services.

If you elect the Personal Choice PPO or waive medical coverage, you may enroll in the **Freestanding Vision Plan** (this is the \$75 Vision program). You pay the full cost (separate enrollment form required).

For more information about the current medical options and vision coverage, see the [Benefits Guide](#) and the medical option plan summaries available on the [Benefits Gateway](#). To learn more about the Personal Choice HDHP option, read the next section.

Would you like to have more control over your healthcare dollars?

If so, consider enrolling in the Personal Choice HDHP option

**Personal Choice
HDHP Medical Coverage**

+

**Tax-Advantaged
Health Savings
Account (HSA)**

=

**Personal Choice
HDHP/HSA Option**

Consider Personal Choice HDHP/HSA

If offered at your location, Personal Choice HDHP (high deductible health plan) combines medical coverage with a tax-effective Health Savings Account (HSA). Here are key facts to know:

- Personal Choice HDHP is typically the **lowest cost medical option**. You can contribute the difference, or more—pre-tax—to your HSA.
- Personal Choice HDHP medical coverage pays 100% for preventive care, with no deductible. All other expenses, including prescriptions, are subject to the deductible. The deductible is \$1,500 for individual coverage or, \$3,000 if you cover dependents, and it's based on the Plan Year (7/1-6/30).
- To help you meet the deductible, your employer will contribute up to \$750 to your HSA (may be more if your employer shares the cost of family coverage).
- **Triple Tax Advantage—You don't pay taxes on HSA contributions, earnings, or distributions if you follow IRS rules.** The balance rolls over each year and you take your HSA with you if you leave the Archdiocese.
- For 2016, the maximum HSA contribution is \$3,350 if you have individual medical coverage or \$6,750 for family coverage (these limits include employer contributions).
- You can use your HSA for qualified health expenses (as determined by the IRS), such as deductibles, copays, vision and dental expenses, and more. Or, you can let your HSA build and use it for future health expenses, even after you retire.

So, what's the catch? In return for tax breaks, the IRS has rules about who can contribute, how much, and how the account can be used. You're responsible for knowing the rules and following them. If you don't, regular taxes and penalties could apply. See the [Benefits Guide](#) for more information.

HSA Is Easy to Use

You can use your HSA debit card or online bill pay to pay eligible expenses. Learn more at: healthequity.com/members/new-tools

HealthEquity Resources

HealthEquity administers the HSA. These resources may be helpful:

- Online Education (webinars and videos): <http://healthequity.com/learn/webinars> and <http://healthequity.com/learn/videos>
- HSA Overview: <http://healthequity.com/learn/health-savings-account>
- Contribution Calculator: <http://healthequity.com/calculator/hsa-contribution>
- Future Balance Calculator: <http://healthequity.com/calculator/future-balance>

There's also a short presentation about Personal Choice HDHP/HSA on the Benefits Gateway.

Example

This example compares the Personal Choice HDHP and Keystone HMO options for two employees. Joan has individual coverage and Bob has family coverage.

Medical	Personal Choice HDHP		Keystone HMO	
	Joan-Single	Bob-Family	Joan-Single	Bob-Family
Per-Pay Deduction	Less than any other Medical Plan option		More than Personal Choice HDHP	
How Medical Plan Works (Out-of-Network Personal Choice HDHP benefits are different; see <i>Medical Options at a Glance chart</i>)	Plan pays 100% for eligible preventive care. Joan and Bob pay full cost for other eligible expenses including prescriptions. After they reach the deductible, Plan pays 100% for eligible expenses except for prescription copays.		Plan pays 100% for eligible preventive care. Plan pays 100% for other eligible expenses, but copays may apply; for example: \$15 PCP, \$50 x-ray, or \$150 per day for hospital stay up to \$750.	
Deductible (In-Network)	\$1,500	\$3,000	None	None
Out-of-Pocket Limit (In-Network)	\$6,350	\$12,700 (\$6,350 for one person) Applies only to prescription copays over deductible	\$4,000	\$8,000 (\$4,000 for one person) Excludes prescription drug copays
The HSA Difference				
Employer Contributes*	\$750	\$750	Not Applicable. Joan and Bob pay a higher per-pay deduction for HMO coverage plus copays. They do not have a tax-effective HSA to use for eligible expenses today or in the future.	
Joan/Bob (optional)*	\$750	\$2,250		
Total	\$1,500	\$3,000		
Estimated Expenses**	(\$600)	(\$1,200)		
HSA Balance Rolls Over	\$900 Grows with new contributions and earnings	\$1,800		
Total Out-of-Pocket Expenses	Personal Choice HDHP per-pay deduction plus HSA contributions (plus any expenses over HSA balance)		Keystone HMO per-pay deduction plus HMO copays plus prescription drug copays	

Notes

* Employer contributes \$750 (may be more if employer shares cost of family coverage); prorated based on hire date. Employee contributions are optional. In this example, employees contribute enough to meet the deductible. You may contribute up to IRS annual limit minus employer contribution. Contributions, earnings, and distributions are tax-free if used for qualified health expenses. For details, see IRS Publications 502 and 969 or speak with a tax adviser. Depending on your location, the full employer contribution may be provided at the start of your benefits or may be spread out over time.

** Joan and Bob can use HSA to reimburse their expenses—or they can pay the expenses and let the HSA balance grow.



Chronic conditions account for 7 in 10 deaths each year and for 86% of health care costs. (Centers for Disease Control)

Get Healthy and Stay Healthy

- Heart disease, stroke, diabetes, and other chronic conditions are largely preventable. To reduce your risk, get preventive care, eat a well-balanced diet, exercise, don't use tobacco, limit alcohol use, and get help to manage stress.
- Many serious health conditions, such as high blood pressure and diabetes, have few or no warning signs. So **"know your numbers"** (blood pressure, cholesterol, glucose, body mass index). If indicated, work with your doctor to bring them under control.

IBC offers registered nurse Health Coach support to members for chronic and complex conditions. Health Coaches also are available 24/7 to answer questions and help you make decisions about your care. Just call **1.866.799.2181**. After you register at ibxpress.com, you also can access information about your claims and coverage, lifestyle improvement programs, and reliable health information from WebMD.®

PENN BEHAVIORAL HEALTH EMPLOYEE ASSISTANCE PROGRAM (EAP)

The EAP is a free, **confidential**, counseling and referral service designed to help you resolve problems that may affect your personal and professional life. For example, you can call the EAP if you have concerns about anxiety, substance abuse, financial issues, managing stress, depression, parenting concerns, relationship problems, or loss of a loved one.

Ask your Benefits Coordinator if the EAP is available at your location. If you are eligible, you or your dependents may call a toll-free help line 24 hours a day, 7 days a week.

You can reach the EAP at **1.888.321.4433** or online at <http://www.pennbehavioralhealth.org> (choose EAP under Quick Links). The User Name is pbhadp and the Password is pbhadp.

MEDICAL OPTIONS AT A GLANCE

This chart provides a high-level overview of the four medical options. The options offered may vary. Precertification of certain services may be required and limits and exclusions apply. For details, see the *Benefits Guide* or the plan charts on the Benefits Gateway. Questions? Call IBC at **1.800.ASK-BLUE (1.800.275.2583)**.

Feature/Benefit	Personal Choice HDHP/HSA		Personal Choice PPO		Keystone POS		Keystone HMO
Payroll Deductions	Lowest		Ask your Benefit Coordinator.				
Benefit Period	July 1-June 30		January 1-December 31				
Deductible	Starts July 1 and applies to all care except eligible preventive care, including prescriptions.		Applies to Out-of-Network Personal Choice PPO and Keystone POS Self-Referred care. The HMO does not have a deductible, but you must use network providers.				
Health Savings Account (HSA)	Tax-free account you can use for eligible expenses. If you are eligible your employer contributes at least \$750. You can contribute too.		Not available				
Feature/Benefit	Personal Choice HDHP/HSA		Personal Choice PPO		Keystone POS		Keystone Health Plan East HMO
	In-Network	Out-of-Network	In-Network	Out-of-Network	Referred	Self-Referred	
Deductible	\$1,500/single \$3,000/family	\$5,000/single \$10,000/family	None	\$1,000/single \$2,000/family	None	\$1,000/single \$2,000/family	None
Out-of-Pocket Maximum	\$6,350/single \$12,700/family	\$10,000/single \$20,000/family	\$3,000/single \$6,000/family	\$6,000/single \$12,000/family	\$3,000/single \$6,000/family	\$6,000/single \$12,000/family	\$4,000 /single \$8,000/family
Preventive Care	100%, no deductible	50%, no deductible	100%*	70%, no deductible	100%*	70%, no deductible	100%*
Doctors' Office Visits	100% after deductible	50% after deductible	100%*	70% after deductible	100%*	70% after deductible	100%*
	*In-Network Referred care and HMO-\$15 copay for primary care; \$40 copay for specialist.						
Outpatient Lab/ Pathology and Outpatient X-ray/ Radiology	100% after deductible	50% after deductible	100%*	70% after deductible	100%*	70% after deductible	100%*
	*In-Network/Referred care and HMO-\$50 copay for routine/diagnostic; \$100 copay for MRI/MRA, CT/CTA scan or PET scan						
Inpatient Hospital	100% after deductible	50% after deductible	100%*	70% after deductible	100%*	70% after deductible	100%*
	*In-Network/Referred care and for HMO-\$150 copay per day up to a maximum of 5 days. Inpatient hospital care limited to 70-days per Benefit Period combined for all Out-of-Network or Self-Referred inpatient medical, maternity, mental health, serious mental illness and substance abuse services.						
Emergency Care	100% after deductible	100% after in-network deductible	100%*	100%*	100%*	100%*	100%*
	*\$150 copay applies—copay NOT waived if admitted.						
Prescription Drugs	For the HDHP option, you must meet the deductible before the Plan begins to cover its share of prescription drug expenses. For the other options, the deductible does not apply. The copays (per prescription) are: Generic-\$15 for 30-day supply or \$37.50 for mail-order Non-Preferred-\$60 for 30-day supply or \$150 for mail-order.				Brand Name on Preferred List-\$35 for 30-day supply or \$87.50 for mail-order Additional limits may apply.		





DENTAL OPTIONS

Comprehensive dental care is essential to good health. That's why your location may offer up to four dental coverage options, including a **NEW** Concordia Flex PPO option. If you enroll, you pay the full cost with pre-tax dollars. The options offered, and your share of the costs, can vary based on your location.

1. **United Concordia's (UCCI) Concordia Plus DHMO**—You select a network Primary Dental Office to provide or coordinate your care. Copays apply to all care except preventive.
2. **NEW—United Concordia's Concordia Flex PPO**—You will save money if you use a dentist in the extensive Advantage network, but you may use any licensed dentist. The maximum benefit is \$1,500 a year (\$1,500 lifetime for orthodontia).
3. **Aetna DMO**—Benefits are paid only for care provided by dentists in the Aetna dental network. Generally, your primary dentist must provide your care or refer you to a network specialist.
4. **Aetna Dental PPO**—Benefits are higher if you use an Aetna network dentist, but you may use the dentists of your choice.

Key Points to Understand

- **Deductible**—Amount you may be required to pay before plan pays benefits for certain types of care.
- **Preventive/Diagnostic Care**—Exams, periodic x-rays, cleanings, and fluoride application (limits apply).
- **Basic and Major Care**—Fillings, crowns, bridges, dentures, root canal, periodontics (non-surgical), simple extractions. Limits apply; see the plan summary chart for each option.
- **Orthodontia**—Benefits available for eligible dependent children; limits apply.



DENTAL OPTIONS AT A GLANCE

Features/Benefits	United Concordia (UCCI)			Aetna		
	Concordia Plus DHMO	NEW Concordia Flex PPO Advantage Network		Aetna DMO	Aetna Dental PPO PPO II Network	
	Network Only	In-Network*	Out-of-Network*	Network Only	In-Network*	Out-of-Network*
Deductible	None	\$50 per person/\$150 family		None	\$50 per person/\$150 family	
Preventive/Diagnostic Care (age/frequency limits apply)	100%	100% (no deductible)	100% (no deductible)	100%	100% (no deductible)	100% (after deductible)
Basic Care	100% after copay	90% after deductible	90% after deductible	100% after copay	80% after deductible 50% for molar endodontics	65% after deductible
Major Care	100% after copay	60% after deductible	60% after deductible	100% after copay	50% after deductible	50% after deductible
Annual Maximum	None	\$1,500 per year		None	\$1,000 per year	
Orthodontia (up to age 19)	Copays apply	50% after deductible up to Lifetime Maximum of \$1,500		Copays apply	50% with no deductible up to Lifetime Maximum of \$1,000	

*Concordia Flex PPO and Aetna PPO In-Network benefits are based on the United Concordia's scheduled amount or Aetna negotiated rate, and you cannot be billed more than that amount. Out-of-Network benefits are based on the maximum charge allowed as determined by each carrier—and your provider may bill you for charges over that amount. For more information, see the United Concordia and Aetna plan summary charts on the Benefits Gateway.

MORE INFORMATION

- Concordia Plus DHMO or Concordia Flex PPO Advantage Network**
1.866.357.3304
www.ucci.com
- Aetna Dental (Aetna DMO or PPO II network)**
1.877.238.6200
www.aetna.com

Check each carrier's website for participating providers. For more information, see the Benefits Guide and the plan summary charts on the Benefits Gateway.



OTHER BENEFITS

These other benefits, described in more detail in the *Benefits Guide*, may be offered at your location.

- **Voluntary Term Life and AD&D Insurance**—You can buy Cigna Voluntary Life insurance for yourself and your dependents. This is term life insurance that pays benefits if you die. You also may buy Voluntary AD&D (accidental death & dismemberment) insurance for yourself with a family coverage option. If you enroll, you pay the full cost (pre-tax). Use the Enrollment Form to enroll, change your coverage, or update your beneficiary information.
- **Voluntary Whole Life Insurance**—You may want to balance your life insurance coverage by electing whole life insurance for you and your family. This coverage from New York Life builds a cash value. If you enroll, you pay the full cost (post-tax), but your premium will not increase.
- **Critical Illness and Voluntary Accident**—Aflac Critical Illness coverage provides a lump-sum payment for certain medical conditions. Unum Voluntary Accident coverage helps you pay out-of-pocket medical bills after an injury or accident. If you enroll for these coverages, you pay the full cost (post-tax).
- **Short Term Disability (STD) Coverage**—If you have a qualifying disability, this coverage will replace part of your pay. There are three options: \$400 a month for options that pay up to 30% or 60% of your monthly eligible pay. You pay the full cost (post-tax). If you remain disabled when STD benefits end, you may qualify for Long-Term Disability (LTD) benefits; this coverage is fully paid by your employer.

See Contacts and other information on the Benefits Gateway for more details about these benefits and other programs, including Plum Benefits (discounts for movies, events, and more) and the Viriva Credit Union.



403(b) RETIREMENT PLAN

The 403(b) Retirement Plan is designed to help you build income for your future, especially after you retire. Here are the basics:

- Your employer will make a contribution to your 403(b) Plan account after completion of 1,000 hours of service in a calendar year. This employer contribution is discretionary and will be announced each year. This contribution will be made every pay period even if you don't contribute to the Plan.
- You become vested in the employer contribution when you complete one year of service.
- If you are a full-time or part-time employee, you can increase your retirement income by adding your own pre-tax or post-tax savings in a Roth account. You can choose one method or both.
- For 2016, you can save any percentage of your pay, up to the annual IRS limit of \$18,000. If you will be age 50 or older this year, you can save an additional \$6,000 a year.
- You have a wide range of investment options managed by Vanguard Investments.
- **Remember:** If you were a participant in the Lay Employees Retirement Plan, you may also have earned a benefit under that plan. See the Summary Plan Description (SPD) on the Benefits Gateway.

It's easy to start saving or to change how much you save or how your account is invested. Use the Vanguard website (see [Enrolling Is Easy!](#)) or call Vanguard at 1.800.523.1188, Monday through Friday from 8:30 a.m. to 9 p.m. Eastern time.

Tools/Resources

The Vanguard website (vanguard.com) has videos, calculators, and other tools to help you make your decisions.

Enrolling Is Easy

Have you been meaning to enroll in the 403(b) Retirement Plan but were not sure how much to save or how to invest your account? With the ENROLL NOW feature, you are just two clicks from your path to a more comfortable retirement:

- Go to Vanguard.com/Enroll and enter your Social Security number, zip code, birth date, and Plan No. 094572. Click Continue and you are halfway there. If you have already registered or the Vanguard.com/Enroll link does not work, use retirementplans.vanguard.com.
- You can choose how much to contribute from each pay—and you can even sign up to increase the amount you save each year automatically. Or, instead of choosing a contribution percentage, you can simply accept a 1% paycheck deduction with a 1% deferral increase each year. Your investment defaults to a Target Retirement Fund appropriate for your age.

It's that easy. You are enrolled in the Plan and saving for your future. You can change your savings percentage or investment choices on the Vanguard website or by calling **1.800.523.1188**.