



Diocese of Austin

Finance Office

The Catholic Church of Central Texas
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To: Pastors, Principals and Parish Business Administrators

Date: April 2, 2008

From: Mary Beth Koenig, Chief Financial Officer

RE: Health Insurance Open Enrollment

With the assistance and advice of a committee consisting of priests, principals and parish business administrators, we have completed negotiations to renew our contract with Blue Cross and Blue Shield (BCBS) as our Plan Administrator effective July 1, 2008. The BCBS plan will continue to be coordinated with Crest Benefits Consulting, Inc., an affiliate of JDW Insurance.

The health benefits and plan design will include the following additional benefits effective July 1, 2008 (All other benefits remain unchanged):

- Lifetime orthodontia benefit of \$1,000 per participant,
- Increase in dental maximum annual benefit from \$1,000 to \$1,500 per participant, and
- Pre-natal office visit co-payment now applies to initial visit only (vs. each individual visit) for maternity care.

Shown below is a summary of the monthly premiums charged for the two plans effective July 1, 2008:

Category	Deluxe PPO	Basic PPO
Employee	\$465	\$400
Employee + Spouse	\$920	\$791
Employee + Children	\$765	\$658
Employee + Family	\$985	\$847
Priests/Seminarians	See Below	N/A
Religious	\$675	N/A

Premiums for priests will be charged based on a graduated scale according to Sunday and Holy Day collections (similar to the premium for priest pension). The premiums for priests are as follows:

Sunday/Holy Day Collections	Monthly Premium
Less than \$500,000	\$1,125
> \$500,000 and < \$1,000,000	\$1,175
Greater than \$1,000,000	\$1,200

As part of the negotiations with BCBS, we must mandate that all locations pay for at least one-half of the employee premium for all employees that wish to participate in the health plan. All employees working 30 hours or more per week must be offered the option of participating in the plan and cannot be charged more than 50% of the cost of the employee portion of the premium for the Basic PPO Plan or \$187.50 per month. Each employer has the option to contribute at higher levels than the minimum including paying for all of the Deluxe PPO Plan if they so desire. This minimum contribution requirement is not optional and must be provided by the employer.

As in the past, each employer is also required to contribute \$25 per month for each eligible employee for the cost of the basic life and Long Term Disability plan. This \$25 premium is included in the rates shown above. This is the same contribution requirement for these plans as last year. Please note the following administrative details:

- **Employers must decide the amount of monthly employer contribution they will provide before employee enrollment meetings!** With two plan options, employers must decide and communicate to employees the amount of premium that will be provided by the employer for both plan options before enrollment meetings. Please note that every employer must offer this insurance plan to all employees working 30 hours or more per week and must contribute at least \$187.50 per month for each employee's medical coverage. As in the past, all employers are required to provide life and long-term disability insurance to all employees working 30 hours or more per week at a cost of \$25 per month (regardless of whether they are enrolled in the health plan.) Contributions at higher levels than the minimum are encouraged as a matter of social justice.
- **We have a July 1, 2008 effective date!** The administrative team from Blue Cross Blue Shield will be conducting employee enrollment meetings in early May to explain the plan, help complete all necessary participant paperwork, and answer any questions. We are working on the schedule and will communicate this in the E-pistle very soon. Employees may attend any meeting at any location to fit their schedule.
- **The open enrollment period ends on June 15!** The open enrollment period is during the month of May and early June and ends on June 15. All changes made during this time period will be effective until June 30, 2009. During this time period an employee may enroll or add or drop coverage without a qualifying event. Dependent children are eligible until age 25 without having to satisfy any type of student status. Open enrollment is the only time during the year that employees may make plan changes without a qualifying event.
- **All employees currently enrolled in the plan will automatically be enrolled unless they terminate coverage. Attendance at meetings or completion of paperwork is not required unless employees wish to add, drop or make changes. The primary purpose of this meeting is to answer questions and explain benefits.**

We hope all of your eligible employees take full advantage of this opportunity. Thank you in advance for your cooperation. If you have any questions, please contact Liz Hinojosa, Olivia Tobias or me at 512.476.4888.