

Dental, Life and Disability 2020 Open Enrollment



Annual Open Enrollment Period November 2020

Dental, Short & Long-Term Disability*, Group Life Insurance

Annual Open Enrollment is the time to review your benefit choices and decide if you want to change your coverage for the coming year. It is also a good time to revisit the valuable benefits provided to you by your congregation/agency through the Episcopal Diocese of Michigan. This guide addresses the available dental, group term life/accidental death, and disability benefits available for eligible clergy and lay employees in our diocese.

2020 Updates:

We are very fortunate that the Delta Dental rate has been renewed with no increase to the premium. The rates for the short-term disability benefit cost through Lincoln Life has slightly increased. However, the impact for each employing entity will be a small one.

Looking to enroll in **medical insurance** for 2020 or have questions about Open Enrollment? Please contact Canon Jo Ann Hardy, Diocesan Administrator 313.833.4422 or jhardy@edomi.org

Please Note: It is not necessary to complete the enclosed enrollment/change form <u>unless</u> you are making changes to your coverage or dependents, <u>or</u> if you are enrolling in the Delta Dental or life/disability insurance plans for the first time.

> * Clergy Short and Long-Term disability insurance is provided through the Church Pension Fund. Please visit www.cpg.org for additional information.

Contact Informat	tion		
Provider	Benefit	lr	nformation
Delta Dental	Dental Group Policy #5781-0001,0002	Customer Service Finding a provider	(800) 524-0149 www.deltadentalmi.com
Lincoln National Life	Group Term Life/AD&D Dependent Term Life Lay Short-Term Disability Lay Long-Term Disability	Customer Service Website	(800) 423-2765 <u>www.lincoln4benefits.com</u>
Canon Jo Ann Hardy Diocesan Administrator	Benefit & HR Questions	Phone E-mail	(313) 833-4422 jhardy@edomi.org

Dental Coverage

Dental insurance is provided through Delta Dental of Michigan. Delta Dental offers one of the largest panels of participating dentists in the industry.

Note: Our dental insurance is through Delta Dental.

Clergy and lay employees are eligible for dental coverage as of the date of hire.

You have the freedom to receive services from any dentist; however, your out of pocket cost is lower when you receive dental services from in network participating providers. Dentists that participate with Delta Dental have agreed to accept Delta's approved amount as payment in full less your co-insurance for the services received. Non-participating providers, can charge you for the difference between Delta Dental's approved amount and their charged amount. This is known as "balance-billing". The level of dentist participation is broken down into three categories:

- DELTA DPO Providers—You will receive the most cost effective coverage when receiving services from a DPO provider. Delta DPO providers have agreed to accept the DPO payment schedule less your co-insurance, based on services received as payment in full. This is the most aggressive payment schedule. This means your share of costs will more than likely be less than if visiting a non-DPO dentist.
- 2. DELTA PREMIER Providers—Your out-of-pocket amount will be slightly higher when receiving services from a Delta Premier provider. Delta Premier dentists have also signed contracts with Delta Dental.
- 3. *NON-PARTICIPATING Providers*—These dentists have no contracts with Delta, and can. Therefore, balance-bill you up to the full amount of their charges. Keep in mind you have the freedom to use whatever level of provider you wish.

Visit the Delta Dental website for a listing of participating dentists in your area at www.deltadentalmi.com.

Delta Dental's Consumer Toolkit

Need information about your Delta Dental coverage? The online Consumer Toolkit provides you with easy access to a wealth of information 24/7. This secure service allows you to:

- Review up-to-date benefit information (such as coverage levels for specific services, how much of your yearly benefit has been used to date, and how much is still available)
- Verify your eligibility
- Check your claims and see what's been paid
- Search directories of participating dentists
- Print ID cards and claim forms
- Dental health tips

Log on to Delta's Consumer Toolkit at https://www.toolkitsonline.com/

Dental Coverage - continued

Episcopal Diocese of Delta Preferred Option Point of S		nmary
	DPO Member Dentist	Delta Premier or Non-Par Dentist
Deductible	None	None
Class I Services		
 Diagnosis and preventive Oral exams and cleanings (twice in any 12 months) Fluoride treatment (under 19, twice in any 12 months) 		
Emergency palliative treatment	100% Coverage of approved amount	100% Coverage of approved amount
 X-rays Bitewing (once every 12 months) Full mouth (once every 5 years) 		
Class II Services		I
 Oral surgery Endodontics Periodontics Minor restorative 	75% Coverage of approved amount	75% Coverage of approved amount
Class III Services		
 Prosthodontics Major restorative	50% Coverage of approved amount	50% Coverage of approved amount
Class IV Services		
Orthodontics (to age 19)	50% Coverage of approved amount	50% Coverage of approved amount
Annual Maximum Benefit	\$1	,000
Orthodontia Lifetime Benefit Maximum	\$1	,000

	Monthly Cost of D	ental Coverage for	2020
		1	
Single	Employee + Spouse/ Partner	Employee + Child	Employee + Family
\$42.04	\$79.41	\$99.68	\$154.00

Short-Term Disability (STD) Coverage

Please note: Eligible clergy receive STD benefits through the Church Pension Fund.

Congregations and agencies of the Episcopal Diocese of Michigan provide permanent lay employees ,working 1500 hours or more per year, with short-term disability coverage. STD coverage replaces a portion of your income in the event you are unable to work as the result of a non-work-related illness or injury.

This benefit is equal to 70% of your base weekly earnings, to a maximum of \$1,100 per week. Benefits are payable for up to 13 weeks from the initial date of disability, provided you remain disabled according to the terms of the contract.

Benefits are payable as of the first day if you are disabled due to an injury, or the eighth day if you are disabled due to an illness.

Long-Term Disability (LTD) Coverage

Please note: Eligible clergy receive LTD benefits through the Church Pension Fund.

Diocesan congregations and agencies also provide permanent lay employees, working 1500 hours or more per year with long-term disability coverage. The long-term disability plan provides you with income in the event of a disability that continues for more than 90 days.

The long-term disability benefit replaces 60% of your pre-disability monthly earnings, up to a maximum benefit of \$6,000 per month. The plan begins to pay benefits as of the 91st day of disability. Payment of LTD benefits is limited to 24 months for a disability caused or contributed to by a mental disorder or substance abuse. Please see your Certificate of Coverage for a more detailed review of the LTD plan, including additional plan limitations and exclusions.

NOTE: If you have not been covered by long-term disability coverage provided through the Episcopal Diocese of Michigan for 12 months, you may be subject to the pre-existing condition limitation provision of the plan. The plan will not pay a benefit for a condition that was present three months prior to your effective date of coverage until you have been insured and actively at work for 12 continuous months.

Basic Group Life/AD&D Coverage

The Basic Life and Accidental Death & Dismemberment (AD&D) plan is provided for eligible clergy and lay employees. The life insurance benefit amount is two times your basic annual salary, up to a maximum benefit of \$100,000. The death benefit is payable to your designated beneficiary at the point of your death.

The AD&D portion of the policy will pay your beneficiary an additional benefit amount equal to your Life benefit should your death be the result of an accident.

Basic life insurance coverage for your spouse or domestic partner and your child are also provided by congregations of the Episcopal Diocese of Michigan. The benefit is equal to \$5,000 for each dependent (children must be between the ages of 6 months and 19 years, or to age 26 if a full time student, to be eligible for the full benefit).

Certain age reductions and restrictions do apply for group life. Please contact Canon Jo Ann Hardy at jhardy@edomi.org for details.

Extra Added Benefits:

Lincoln Financial EmployeeConnect Services:

EmployeeConnect is an Employee Assistance Program (EAP) which provides confidential support, guidance and resources 24 hours a day 7 days a week.

Some of the services provided include:

- In person help with short-term issues, up to four sessions per person per issue, per year.
- Unlimited phone access to legal, financial and work-life services.
- A 25% discount on in-person consultations with network lawyers.
- Financial consultations and referrals.
- Work/life services for assistance with child care, finding movers, kennels and pet care, vacation planning and more.

To learn more about the Lincoln Financial EmployeeConnect program, visit <u>https://www.guidanceresources.com/</u> (user name = LFGsupport; password LFGsupport1). You can connect or speak with a specialist at 888-628-4824.

Lincoln Financial TravelConnect:

TravelConnect focuses on travel, medical and safety related services you may need while traveling. When traveling just 100 miles or more from home, TravelConnect services are available to you. Services are available 24 hours a day 7 days a week and include some of the following:

- Destination information—weather, currency and more
- Emergency travel arrangements and fund transfers
- Lost or stolen travel document assistance
- Language translation services
- Medical and dental referrals
- Assistance with corrective lenses or medical device replacement
- Arrangement for delivery of medications, vaccines or blood
- Updates to family, employer and/or home physician
- Repatriation of a deceased traveler
- Security and political evacuation assistance

A program description is available at <u>www.lincoln4benefits.com</u>

To use TravelConnect call MEDEX at 1-800-527-0218 or 410-453-6330. Your Identification number is 322541.

2020 Open Enrollment

New Enrollment/Change Form

Medical, Dental, Group Life, Short & Long Term Disability

(Please complete only If you are a new enrollee, or have changes to report for Open Enrollment)

CLERGY/LA	AY EMPLO	YEE INFORMA	TION							
<u>Name</u>							<u>SSN</u>			
Address							Home Ph	one		
Check if Cha	nge						<u>Email Ad</u>	<u>dress</u>		
Marital Status			Yearly Salary	Congregation/Age	ency Name & City/Positic	on	Date of B	<u>irth</u>		Date of Hire
□ Single	Married	Divorced								
ENROLLME	NT INFOR	RMATION - Pl	ease list tho	se you wish to	cover under eac	h plan and indi	cate cov	erage seleo	cted.	
Action	Relation		<u>Name</u>		Social Security	<u>r#</u> Date	of Birth	<u>Gender</u>		<u>Coverage</u>
ContinueAddDelete	Employee									Dental
ContinueAddDelete	Spouse / Domestic Partner									Dental
ContinueAddDelete	Dep 2									Dental
	ATION OF	BENEFITS								
Are you or your	dependents co	overed by any othe	r group health or	dental plan?	YES 🗖 NO					
DENTAL P	LAN SELE	CTIONS (DEL	TA DENTA	L OF MICHIG	AN)					
The Insurance Delta Dental	e Carrier rates	s are illustrated fo	or your informat	ion.	<u>Single</u> □ \$42.04	Employee & Spouse/Partner		<u>oloyee & Child</u> ⊒\$99.68		<u>Family</u> □\$154.00
	e Dental cov	erane								

Medical Plan Selections

Episcopal DIOCESE OF MICHIGAN

Episcopal Medical Trust			
	Single	Plus One	Family
Anthem BCBS BlueCard 100	1027	1849	2876
Anthem BCBS BlueCard 90	947	1705	2652
Anthem BCBS Blue Card 80*	859*	1546	2405
CDHP 20**	687	1237	1924
CDHP 15**	777	1399	2176

*Rate for monthly annuity in lieu of medical insurance

**Plans must be combined with contributions to a Health Savings Account (HSA)

Basic Life / AD&D Insurar are paid by your employer.	nce amount equal to 2x yo	our base annual earni	ings up to a maximum of \$100),000 is prov	ided at no cost to you. The premium
	Enroll	Decline			
Basic Life – Spouse			Name		DOB
Basic Life Child(ren)			Name		DOB
			Name		DOB
					Use additional sheet if necessal
BASIC LIFE INSURANCE	BENEFICIARY				
I designate the person(s) named than one beneficiary is named, th	below as beneficiary of a ne death benefit, unless of	therwise provided he	rein, will be paid in equal shar		nder the terms of the plan. If more signated beneficiaries who survive th
I designate the person(s) named	below as beneficiary of a ne death benefit, unless of survives, payment will be	therwise provided he e made in accordance	rein, will be paid in equal shar		
I designate the person(s) named than one beneficiary is named, th associate. If no such beneficiary	below as beneficiary of a ne death benefit, unless of survives, payment will be ciary - Individual or Trus	therwise provided he e made in accordance	rein, will be paid in equal shar		signated beneficiaries who survive th
I designate the person(s) named than one beneficiary is named, th associate. If no such beneficiary Life Insurance Primary Benefic	below as beneficiary of a ne death benefit, unless of survives, payment will be ciary - Individual or Trus	therwise provided he e made in accordance t	rein, will be paid in equal shar e with the terms of the policy.		signated beneficiaries who survive th
I designate the person(s) named than one beneficiary is named, th associate. If no such beneficiary Life Insurance Primary Benefic Name	below as beneficiary of a ne death benefit, unless of survives, payment will be ciary - Individual or Trus	therwise provided he e made in accordance t ate of Birth ate of Birth	rein, will be paid in equal shar e with the terms of the policy. Relationship		signated beneficiaries who survive th
I designate the person(s) named than one beneficiary is named, th associate. If no such beneficiary Life Insurance Primary Benefic Name	below as beneficiary of a ne death benefit, unless of survives, payment will be ciary - Individual or Trus D eficiary- Individual or Tr	therwise provided he e made in accordance t ate of Birth ate of Birth	rein, will be paid in equal shar e with the terms of the policy. Relationship		signated beneficiaries who survive th

Z Lay employees working 1500 hours or more annually are provided a STD benefit insured by Lincoln Life. The benefit amount is equal to 70% of your base weekly earnings to a maximum of \$1,000 per month.

LONG TERM DISABILITY (LTD) INSURANCE (LINCOLN LIFE)

🗹 Lay employees working 1500 hours or more annually are provided a LTD benefit equal to 60% of your base monthly earnings to a maximum of \$6,000 per month. Benefit begins on the 90th day of disability. Please see your Lincoln Life booklet for more details.

<u>Please note</u>: All active diocesan clergy are covered for short term and long term disability through the Church Pension Fund. Please contact Canon Jo Ann Hardy, Diocesan Administrator (jhardy@edomi.org) for clarification.

AUTHORIZATION

I have read the enrollment materials and I have indicated my elections on this form. I understand that should I waive coverage my next opportunity to enroll in the benefit plans will be November 1, 2020 unless I have a qualified family status change as addressed in the benefit guide. Please sign and date below, and make a copy for your records.

Signature:

Date:

Episcopal Diocese of MICHIGAN

Please address questions to: Canon Jo Ann Hardy, Diocesan Administrator 313.833.4422 jhardy@edomi.org