

The Board of Pensions administers the Benefits Plan of the Presbyterian Church (U.S.A.), offering retirement, healthcare, death, and disability benefits to qualifying members. The Board also provides financial and vocational grants through the Assistance Program.

Summary

Once your coverage under the Medical Plan ends, enrolling in medical continuation coverage enables you to continue essentially the same healthcare coverage that you and your covered family members had, but on a self-paid basis and for a limited time. To continue your coverage, you must enroll within 60 days of the termination event. If you do not enroll when you are first eligible, you will not be able to enroll later.

You must enroll in the same program, the PPO or EPO, for medical continuation that you had while working for the Presbyterian Church (U.S.A.) or other affiliated employer. The cost for medical continuation coverage starts on the day the coverage becomes effective.

In certain circumstances, you and/or your eligible family members may be entitled to a period of coverage at no cost to you immediately after your coverage under the Medical Plan ends and before you begin or waive medical continuation coverage. For information about your eligibility for and the length of any coverage available at no cost to you, see *Guide to Your Healthcare Benefits*, available on pensions.org or by calling the Board at 800-773-7752 (800-PRESPLAN) and requesting a copy.

Eligibility

The following individuals may be eligible to enroll in medical continuation coverage:

- members, seminary students, and those on transitional participation status* who are terminating from the Benefits Plan
- members for whom disability status ends and termination status begins
- retired members under age 65
- children who reach age 26
- surviving spouses and former spouses

Spouses and eligible children of terminated members may enroll even if the member does not.

The duration of medical continuation coverage depends on why your current coverage is ending and whether you meet the Rule of 70. (See the Eligibility and Duration chart.)

If you are retiring at age 64 or earlier, see the Medical Continuation for Members Retiring before Age 65 Benefits Overview for further information.

* *Ministers of the Word and Sacrament who are temporarily unemployed and actively seeking church service, on an approved leave of absence, or under discipline may first participate in transitional participation coverage and subsequently, if they do not return to church employment, be eligible for medical continuation. If they enroll in medical continuation coverage first, they will not be eligible later for transitional participation coverage.*

Continuous coverage requirement

If you meet the following conditions, you may postpone enrollment — that is, you may waive medical continuation coverage — provided you have continuous coverage from the time any coverage that was sponsored by the Board of Pensions ends. To be eligible to waive coverage you must

- be age 55 or older;
- meet the Rule of 70; and
- have other employer-sponsored or qualified health plan coverage from the time your Board-sponsored coverage ends until the time you enroll in medical continuation coverage.

If you do not file a waiver of continuous coverage when your coverage under the Medical Plan ends, you cannot enroll in Medicare Supplement at a later date, if you are otherwise eligible.

To waive coverage, you must return the completed waiver section of the Medical Continuation Subscription or Waiver form, along with a copy of your medical identification card(s) from the other plan.

Covered services

The coverage under medical continuation is the same as that provided by the Medical Plan to active members and their families, with one difference for those in the PPO option: The PPO deductible and copayment maximum amounts are based on the congregational teaching elders' median. For those in the EPO option, the deductible and maximum out-of-pocket amounts are the same as provided by the Medical Plan to active members and their families. (See *Guide to Your Healthcare Benefits* for coverage details.)

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The rule of 70

- You must be age 55 or older when you terminate eligible active service.
- You must have at least five years of Medical Plan participation.
- The sum of your age and years of Medical Plan participation at termination must equal 70 or more.

Monthly rates for 2019

| Coverage Level | PPO | EPO |
|---------------------|---------|---------|
| Member-only | \$919 | \$781 |
| Member + Child(ren) | \$1,425 | \$1,211 |
| Member + Spouse | \$1,868 | \$1,588 |
| Member + Family | \$2,544 | \$2,162 |

Enrolling for coverage

To enroll, you must return to the Board the completed personal information, subscription, and authorization sections of the Medical Continuation Subscription or Waiver form, with the initial payment, within 60 days of the event that results in termination of your coverage under the Medical Plan. Your coverage begins immediately following any applicable coverage period in which coverage is provided at no cost to you.

Continuing coverage upon certain life events

Divorce/dissolution

If, as an active member, you are divorced or your marriage is dissolved, your former spouse may continue coverage by making the monthly payments. If your former spouse wants to continue medical coverage through the Board of Pensions after the divorce or dissolution, he or she must elect medical continuation coverage before the divorce/dissolution is final. The cost for continued coverage starts on the day the coverage becomes effective.

If a divorce or dissolution occurs when the member is retired, see the Medical Continuation for Members Retiring before Age 65 Benefits Overview for the applicable plan provisions.

Member's death

If an active member dies, the surviving eligible family will receive 12 months of coverage at no charge provided they notify the Board within 60 days of the date of death. To continue coverage after this 12-month period, eligible family members must enroll during the period of no-cost coverage. The spouse may enroll for medical continuation coverage on a self-paid basis until he or she is eligible for Medicare and Medicare Supplement. The member's eligible children also may enroll in medical continuation until age 26.

If a retired member dies while covered under medical continuation, see the Medical Continuation for Members Retiring before Age 65 Benefits Overview for the applicable plan provisions.

Canceling coverage

You may cancel your medical continuation coverage by sending a written cancellation request in advance of the termination date to

The Board of Pensions of the Presbyterian Church (U.S.A.)
Attn: Plan Operations
2000 Market Street
Philadelphia, PA 19103-3298

The Board must receive your request at least one month in advance of the date you want the coverage to end. **If you cancel your coverage in medical continuation, you cannot reinstate it.**

Note: All the provisions of medical continuation coverage, including appeals and amendments to the plan, are described in *The Benefits Plan of the Presbyterian Church (U.S.A.)*. See also *Guide to Your Healthcare Benefits*, on pensions.org.

This is not a full description of benefits and limitations of the plan. If there is any difference between the information presented here and the provisions of the Benefits Plan of the Presbyterian Church (U.S.A.), the plan terms will govern. Visit pensions.org or call the Board at 800-773-7752 (800-PRESPLAN) for a copy of the plan document.

Note: You have the option of changing from medical continuation coverage to another qualified plan, including any plan on the federal Health Insurance Marketplace or a state health insurance marketplace, and still satisfying the continuous coverage requirement for enrollment in Medicare Supplement at age 65 (keep in mind, maintaining such coverage satisfies just one of several eligibility criteria for Medicare Supplement). For information about how and why you might want to make such a change, call the Board of Pensions at 800-773-7752 (800-PRESPLAN).

ELIGIBILITY AND DURATION

| Reason for loss of coverage | Eligible | Duration of coverage |
|--|------------------|---|
| Member's employment terminates (before age 55 or at any age if not vested) | Member | 18 months (29 months if member is disabled during first 60 days of medical continuation coverage) |
| | Spouse | 18 months (29 months if spouse is disabled during first 60 days of medical continuation coverage) |
| | Child | 18 months (29 months if child is disabled during first 60 days of medical continuation coverage) |
| Member's disability status ends and termination status starts | Member | 18 months |
| | Spouse | 18 months |
| | Child | 18 months |
| Member's death | Surviving Spouse | 36 months (includes 12 months of no-cost coverage) |
| | Child | 36 months or until loss of eligibility (includes 12 months of no-cost coverage) |
| Divorce/Dissolution | Former Spouse | 36 months |
| | Child | 36 months or until loss of eligibility |
| Employment terminates for vested member at age 55 or older who meets the Rule of 70 and retirement is deferred; eligible to waive the continuous coverage requirement with other qualified health plan coverage. | Member | Until eligible for Medicare and Medicare Supplement |
| | Spouse | Until eligible for Medicare and Medicare Supplement |
| | Child | Until loss of eligibility |
| Early retirement for vested member at age 55 or older who meets the Rule of 70; eligible to waive the continuous coverage requirement with other qualified health plan coverage. | Member | Until eligible for Medicare and Medicare Supplement |
| | Spouse | Until eligible for Medicare and Medicare Supplement |
| | Child | Until loss of eligibility |
| Early retirement for vested member at age 55 or older who does not meet the Rule of 70 | Member | 18 months |
| | Spouse | 18 months |
| | Child | 18 months |
| Child loses eligibility because of age | Child | 36 months |
| Employer withdraws employment classification from plan participation | No one | Not available |

