

With its robust collection of programs grounded in wholeness and well-being, the Benefits Plan of the Presbyterian Church (U.S.A.) includes one of the most comprehensive healthcare plans in the church benefits community. All three Medical Plan options — preferred provider organization (PPO), exclusive provider organization (EPO), and qualified high deductible health plan (HDHP) — offer access to the largest national network (Blue Cross Blue Shield). With \$180 million in annual claims and expenses, ours is among the largest national medical plans with Highmark Blue Cross Blue Shield, enabling competitive pricing, efficient claims processing, and high levels of dedicated service.

Healthcare benefits include prescription coverage with nationally recognized vendor partner OptumRx; Call to Health, a web-based multi-dimensional initiative promoting spiritual, health, financial, and vocational well-being; a vision exam benefit through VSP; and an Employee Assistance Program (EAP) for employee, family, and workplace counseling.

Online self-service through the Board's proprietary decision support tool allows employers to design, model, and price benefits options for employees. Employees can access claims, physicians and providers, and prescription plan information through secure single sign on to Benefits Connect, the Board's benefits website.

Why consider the Board of Pensions?

The Benefits Plan of the Presbyterian Church (U.S.A.) offers you the opportunity to partner with an institution grounded in its covenant relationship with the PC(USA). Our benefits are structured to reflect our commitment to that community of faith. We offer a unique value proposition that includes robust benefits and services not available commercially, supported by our calling to serve others, and a long-term view that has guided our decisions since we began.

Experience the Board's approach to helping employers select, administer, fund, and communicate their benefits programs. Call or email Linda Jacobsen, Vice President, Growth Strategies and Solutions today: ljacobsen@pensions.org; 215-587-7353.

The new qualified HDHP medical option — available in 2019 — offers an affordable, high-quality healthcare coverage alternative for churches and employers who are seeking more affordable medical coverage, or who want to transition from a current commercial HDHP to a plan managed by the Board. Our HDHP can be paired with a tax-favored health savings account (HSA) which employers and employees can fund with pretax dollars to pay for eligible healthcare expenses now and into retirement.

Medical Plan options

Benefit	PPO 2019		EPO 2019	HDHP 2019
	Minimum effective salary	Maximum effective salary	NA	NA
Network deductible (Standard)	\$660/member ¹ \$660/all other family members ^{1,2}	\$1,305/member ¹ \$1,305/all other family members ^{1,2}	\$2,000/member \$2,000/all other family members ²	\$3,000/member only \$6,000/member + family ³
Network deductible (Call to Health)	\$440/member ¹ \$440/all other family members ^{1,2}	\$870/member ¹ \$870/all other family members ^{1,2}	\$1,500/member \$1,500/all other family members ²	\$2,250/member only \$4,500/member + family ³
Spending account compatibility	Healthcare FSA		Healthcare FSA	Health savings account (HSA)
Medical coverage after deductible (copayment)	Member pays 20%		Member pays 20%	Member pays 20%
Out of network benefits?	Yes		No	No
Cigna EAP services	6 sessions/issue at no cost		6 sessions/issue at no cost	6 sessions/issue at no cost
Preventive care ⁴	Covered 100%		Covered 100%	Covered 100%
Teladoc	\$10 copay		\$10 copay	Member pays 100% up to deductible amount; after deductible, member pays 20%
Primary and behavioral office visit	\$25 copay		\$40 copay	
Specialist office visit	\$45 copay		\$60 copay	
Urgent care visit	\$45 copay		\$60 copay	

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Medical Plan options (continued)

Benefit	PPO 2019	EPO 2019	HDHP 2019
Basic diagnostic services (imaging, lab, X-rays, etc.)	Member pays 20%, after deductible	\$65 copay	Member pays 100% up to deductible amount; after deductible, member pays 20%
Advanced imaging (MRI, CAT, PET, etc.)	Member pays 20%, after deductible	\$200 copay	
Physical, speech, and occupational therapy	Member pays 20%, after deductible	\$40 copay	
Hearing aid (device and fitting) (plan max of \$2,500 every 3 years)	Member pays 20%, after deductible	Member pays 20%, after deductible	
Hospital inpatient, outpatient, and emergency room	Member pays 20%, after deductible	Member pays 20%, after deductible	
Infertility treatment (3 procedure life max)	Member pays 20%, after deductible	Not covered	
ABA therapy	Member pays 20%, after deductible	Member pays 20%, after deductible	
Select surgeries	Member pays 0% after deductible when these select surgeries are performed in a BCBS Blue Distinction Center: bariatric surgery, knee replacement surgery, hip replacement surgery, spinal surgery, and transplants. Family travel benefit also available depending upon distance.		

Prescription drugs (OptumRx)

	PPO 2019		EPO 2019	HDHP 2019
	Minimum effective salary	Maximum effective salary	NA	NA
Preventive Rx generic retail (30/90)/mail 90	\$5 / \$15 / \$12.50		\$6 / \$18 / \$15	\$6 / \$18 / \$15 Not subject to HDHP deductible
Preventive Rx formulary brand retail (30/90)/mail 90	\$20 / \$60 / \$50		\$30 / \$90 / \$75	\$30 / \$90 / \$75 Not subject to HDHP deductible
Preventive Rx non-formulary brand	No incentive for non-formulary Rx		Not covered	Not covered
Generic Retail (30/90)	\$10 / \$30		\$12 / \$36	Member pays 100% up to deductible amount; after deductible, member pays 30% subject to \$150 (30 day), \$450 (90 day) or \$375 (90 day mail) max
Generic Mail (90)	\$25		\$30	
Formulary Brand Retail (30/90)	30% of cost; 30 days: \$20 min to \$100 max 90 days: \$60 min to \$300 max		35% of cost; 30 days: \$35 min to \$150 max 90 days: \$105 min to \$450 max	
Formulary Brand Mail (90)	30% of cost; \$50 min to \$250 max		35% of cost; \$85 min to \$375 max	
Non-formulary Brand Retail (30/90)	50% of cost; 30 days: \$50 min to \$150 max 90 days: \$150 min to \$450 max		Not covered	
Non-formulary Brand Mail (90)	50% of cost; \$125 min to \$375 max		Not covered	Not covered
Prescription copayment max	\$3,000 (member & family combined)		Part of the combined max out-of-pocket	Part of the combined max out-of-pocket
Medical copayment max	\$2,200/family ¹	\$4,340/family ¹	Part of the combined max out-of-pocket	Part of the combined max out-of-pocket
Combined max out-of-pocket	\$5,860/member ⁵ \$6,520/family ⁵	\$7,900/member ⁵ \$9,950/family ⁵	\$7,900/member ⁶ \$15,800/family ⁶	\$6,750/member ⁷ \$13,500/family ⁷

Vision exam benefits (VSP)

Benefit	PPO 2019	EPO 2019	HDHP 2019
Vision exam	\$25 at VSP provider	\$25 at VSP provider	\$25 at VSP provider ⁸

¹ See full deductible and copayment maximum charts for PPO deductibles and copayment maximums at all effective salary levels.

² Members with covered spouses and/or children are responsible for two medical deductibles, one for themselves and one for all other family members combined.

³ Members with covered spouses and/or children are responsible for the entire family deductible amount.

⁴ Coverage for preventive services exceeds ACA definition.

⁵ Includes network deductible, copayment maximum, and prescription maximum.

⁶ Includes network deductible, office visit copays, copayments, and prescription drug copays (reflects Affordable Care Act maximums).

⁷ Reflects Affordable Care Act maximums for 2019.

⁸ Individuals enrolled in the HDHP will be automatically enrolled in the VSP vision exam benefit. The vision exam benefit is not considered part of the HDHP.

