



# DIOCESE OF OWENSBORO

Catholic Pastoral Center

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July 26, 2011

Dear Diocesan Employee,

**Open enrollment begins August 1, 2011** for eligible Diocesan employees who want to enroll in the Medical/dental portion of the insurance and did not do so within the first 31 days of their employment. The coverage would begin September 1, 2011. Open enrollment is during the month of August each year. Enrollment forms must be submitted by August 29, 2011 to the person at your location who handles the benefits.

**Rates for 2011-2012 will increase 3%**, a minor increase compared to the national trend. As a self-funded insurance plan the premiums collected are used to pay the insurance claims. It is everyone on the plans responsibility to try to maintain a healthy life style to keep premiums down. We will continue to do our part also, to keep cost and premiums down as much as possible.

**No premium "Holiday" planned at this time.** We will continue to monitor how the plan is doing and if conditions permit a "holiday" will be given.

**Patient Protection Affordable Care Act (PPACA)** changes to our plan:

■ **GRANDFATHER STATUS**-The Roman Catholic Employee Benefit Plan believes this self-insured plan is a "grandfathered health plan" under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the plan administrator at Anthem 1-888-650-4047.

■ **LIFETIME LIMIT**-The lifetime limit on the dollar value of benefits under Roman Catholic Employee Benefit Plan no longer applies. Individuals whose coverage ended by reason of reaching a lifetime limit under the plan are eligible to enroll in the plan. Individuals have 30 days from the date of this notice to request enrollment. For more information contact the Kay Hardin at 270-852-8364.

■ **DEPENDENT COVERAGE-** Individuals whose coverage ended, or who were denied coverage (or were not eligible for coverage), because the availability of dependent coverage of children ended before attainment of age 26 are eligible to enroll in Roman Catholic Employee Benefit Plan. Individuals may request enrollment for such children for 30 days from the date of notice. For more information contact the Kay Hardin at 270-852-8364.

**Two insurance coverage options are available.** Our plan has an additional choice in the type of coverage a participant can choose. There is a \$2,000 deductible plan that may interest those who do not need coverage that is as extensive as the \$500 deductible plan. A summary of the two coverages are posted on the Diocesan website [www.rcdok.org](http://www.rcdok.org) under Administration.

Please continue to use the Caremark prescription mail order plan for all *maintenance* medication and ask your doctor if any of the medication he is prescribing will work in Generic form and if not, would one of the medications from the Preferred Drug List be acceptable? Prescriptions continue to be one of the largest expenses of the benefit plan.

Should you have any questions on the plan please contact me.

Thank you,

Kay Hardin  
Office of Administration

# Roman Catholic Diocese of Owensboro Employee Benefit Plan

Rates effective September 1, 2011 to August 31, 2012

	<b>\$500 Deductible</b>	<b>\$2,000 Deductible</b>
<b>Single coverage</b>		
Total Premium	589.35	506.25
EmployER pays	392.90	392.90
EmployEE pays	196.45	113.35
<b>Employee &amp; Family</b>		
Total Premium	1,333.12	1,145.15
EmployER pays	392.90	392.90
EmployEE pays	940.21	752.25
<b>Medicare Primary Single</b>		
Total Premium	425.69	365.68
EmployER pays	311.07	311.07
EmployEE pays	114.62	54.61
<b>Medicare Primary Family</b>		
Total Premium	829.90	712.90
EmployER pays	311.07	311.07
EmployEE pays	518.83	401.83
<b>Priest Premium</b>		
Single coverage	884.29	N/A
Medicare Primary	502.95	N/A