2019 Employer Guide to the Concordia Health Plan

What to consider before choosing your option(s)
The CHP in 2019

You’re tasked with being a good steward of your ministry’s budget and providing your workers and their families with good health benefits. So you want a health plan option(s) that provides quality benefits at an affordable price and is flexible to the needs of your ministry.

Let us help you find your ministry’s 2019 benefits solutions. Check out these solutions we’re offering through the CHP in 2019!

**Three new options**

You’ll have three new options to consider for 2019 – Healthy Me A, Healthy Me B and Healthy Me C.

**Unbundled dental and vision**

Being able to unbundled dental and vision affords your ministry the opportunity to offer these benefits separately from medical benefits and fund them in such a way that best suits your budget and your workers. Unbundling is offered with the new Healthy Me options and our Whole Health options.

**Lower deductibles**

Your workers can meet their individual and family deductibles sooner with our new Healthy Me options – Healthy Me A, $1200/$2400 deductible; Healthy Me B, $1400/$2800 deductible; and Healthy Me C, $2800/$5600 deductible.

**Capped rate increase**

If your ministry elects any of the new Healthy Me options for 2019, your CHP rate increase is guaranteed to be 6.5 percent or less for 2020.

**Familiar network providers**

The Healthy Me options have three provider networks – Cigna, Blue Cross Blue Shield of Minnesota and UMR. Being able to offer the same networks that your workers and their families have come to rely on does away with their pain point of having to find new doctors, hospitals, etc. And knowing this lessens your hesitancy to move your ministry to more affordable options.

Welcome Your New Employer Portal

It’s here and ready for you to make your 2019 CHP elections! The new employer portal provides your ministry:

- Electronic election and enrollment for 2019 CHP benefits
- Snapshots of current worker enrollments
- Personalized ministry dashboards
- Alerts for actions the ministry needs to take

If you have already designated your benefits administrator and set up your employer account, starting July 2 you can go to [ConcordiaPlans.org](http://ConcordiaPlans.org) and make your 2019 elections.

Still need to designate a benefits administrator and/or set up your employer account? Visit [ConcordiaPlans.org/portalhelp](http://ConcordiaPlans.org/portalhelp).
Provider Networks Available in Your Area

Your networks are determined by your organization’s state and ZIP code.

- Kaiser Permanente
- Blue Cross Blue Shield
- Cigna (Open Access Plus Network)
- Cigna (LocalPlus Network)
- Tampa
- Miami
- Orlando
- Portland area
- Seattle area
- Spokane area
- Portland area
- Washington, DC area
- Baltimore area
- Northeastern area of Virginia
- Nebraska
- Southern California
- Northern California
- Phoenix
- Denver
- Wisconsin
- Chicago area
- St. Louis area
- I-25 corridor
- New York
- Dallas/Ft. Worth
- Houston
- Austin
- Chicago area
- Wisconsin
- Nebraska
- St. Louis area
- Washington, DC area
- Baltimore area
- Northeastern area of Virginia
- New York
- Northern California
- Southern California
- Phoenix
- Denver
- Dallas/Ft. Worth
- Houston
- Austin
- Chicago area
- Wisconsin
- Nebraska
- St. Louis area
- I-25 corridor
- New York
- Baltimore area
- Northeastern area of Virginia
- Washington, DC area
- Portland area
- Seattle area
- Spokane area
- Portland area
- Washington, DC area
- Baltimore area
- Northeastern area of Virginia
- New York
- Northern California
- Southern California
- Phoenix
- Denver
- Dallas/Ft. Worth
- Houston
- Austin
- Chicago area
- Wisconsin
- Nebraska
- St. Louis area
Passive Election Leads to Default

Ministries that offered Health Wise and Whole Health options in 2018 and do not actively make 2019 elections online via the new employer portal between July 2 and Aug. 24 will default to the following:

### Health Wise

<table>
<thead>
<tr>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Wise 1200</td>
<td>Healthy Me A with Dental A and Vision A, funded 100% Voluntary</td>
</tr>
<tr>
<td>Health Wise Plus 3000</td>
<td>Healthy Me C with Dental A and Vision A, funded 100% Voluntary</td>
</tr>
</tbody>
</table>

### Whole Health

<table>
<thead>
<tr>
<th>2018</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whole Health</td>
<td>Whole Health with Dental A and Vision A, funded 100% Voluntary</td>
</tr>
<tr>
<td>Whole Health 1000</td>
<td>Whole Health 1000 with Dental A and Vision A, funded 100% Voluntary</td>
</tr>
<tr>
<td>Whole Health 2000</td>
<td>Whole Health 2000 with Dental A and Vision A, funded 100% Voluntary</td>
</tr>
</tbody>
</table>

Defaulting applies to ALL employers who do not actively make a 2019 election by August 24. Whatever option(s) you offered your workers in 2018 will default to the same option(s) or the option(s) closest to those offering(s) for 2019.

Visit [ConcordiaPlans.org](http://ConcordiaPlans.org) and log in to the new employer portal to make your 2019 elections – July 2 through Aug. 24.
Determining Your Funding Strategy

You, as the employer, have a great deal of flexibility and many options to consider as far as who pays what for healthcare expenses. Keep the following funding strategies in mind when considering your healthcare elections for the coming year.

Choice of Health Plan Option

• If you provide an incentive for workers to enroll in a high deductible health plan option, such as a monthly contribution to their health savings accounts, your workers may be more inclined to take advantage of an option with a lower contribution rate.

Choice of Employer/Worker Funding

You are required to pay at least 50 percent of the individual worker cost of the health plan but can determine the additional amount paid toward the cost of worker and dependent coverage.

• If you are paying 100 percent of the cost for dependents in the CHP, there is no incentive for a worker’s spouse to use alternative health coverage that may be available. You may want to offer a monthly stipend for a worker’s dependent to use the other available health plan.

• If you have workers share in the cost of CHP coverage, use workers’ pre-tax dollars. If you adopt a Premium Only Cafeteria Plan, you can permit workers to deduct their portion of healthcare contributions pre-tax from their paychecks. To access the Cafeteria Plan document, search “11074 Cafeteria Plan” at ConcordiaPlans.org.

Choice of Hours and Probationary Period

• For the CHP, you can designate more than 20, more than 25, more than 30 or 30 or more hours per week and more than five consecutive months as the definition of full time.*

• For all the Concordia Plans, you also may adopt a probationary period to delay enrollment of a newly employed lay worker for up to 60 days. (Probationary periods do not apply to rostered workers.)*

*You must apply definitions of hours and probationary period equally for all workers in the specified class of employees. Universities and other Non-Qualified Church-Controlled Organizations that are enrolled in the Concordia Retirement Savings Plan cannot use a probationary period to delay enrollment in the Plans.

Personal Spending Accounts

Flexible spending accounts, health reimbursement arrangements and health savings accounts offer great tax-advantages to workers and ease the transition to higher deductible/higher out-of-pocket cost plans while still being easy on the employer’s benefits budget. Ask your Account Management Team representative about PSAs.

Questions?
Call 888-927-7526, ext. 6010, or email info@ConcordiaPlans.org. Our Account Management Team can provide you with information about which option(s) may be the right fit for your organization and workers, and talk with you about ways to maximize your healthcare dollars.
What You Need to Know

**Minimum Participation Requirements**

Employers must meet the following minimum participation requirements to offer the CHP:

- Another health plan cannot be offered alongside the CHP
- At least 75 percent of those eligible to enroll in the CHP must be either enrolled in the CHP or be an eligible opt-out (as defined below)
- If you have three workers, you can have one ineligible opt-out, as long as two workers are enrolled in the CHP

**Eligible Opt-Outs**

Eligible opt-outs are workers who are not enrolled in the CHP because they already have health coverage under:

- A spouse’s or parent’s group health plan (coverage by virtue of employment, including military service)
- A former employer’s group health plan
- A current non-LCMS employer’s group health plan
- The military as a retiree
- A Medicare supplement plan
- A government medical assistance program for low-income persons (e.g., Medicaid)
- A foreign country health plan
- A group health plan of an employer located in the state of Hawaii

A worker also is considered an eligible opt-out if he/she does not meet the minimum hours worked requirement (more than 20, more than 25, more than 30 or 30 or more hours per week, as selected by the employer) to be eligible for the CHP.
Important Notes About the CHP and the Affordable Care Act

• The CHP will continue to be available to LCMS ministries and their full-time employees in 2019, providing a variety of health plan options which offer a wide array of coverage levels.

• The CHP is a grandfathered health plan under health care reform. As such, we have been able to maintain benefit options that are aligned with our Lutheran faith and beliefs for employers and workers who would not otherwise have these protections.

  **NOTE:** The following are the CHP options that are considered grandfathered options: Option A, Option B, Option C, Option D, Option E, Option HDHP, Option HDHP (UMR), Option HMO, Option HMO-C and Option HMO-C2.

  All other CHP options are **NOT** grandfathered options.

• The CHP intends to comply with all health care reform requirements applicable to grandfathered health plans, as well as to all other CHP options.

• All options under the CHP meet the minimum value requirement regarding the percentage of costs associated with care that must be reimbursed by the Plan. Our Account Management Team also can work with employers to review their funding strategies.

• CPS or its benefits administrators will provide proof of Minimum Essential Coverage (Form 1095-B) as outlined under the Individual Mandate of the Affordable Care Act to all workers enrolled in the CHP and to the IRS.

---

**Helpful Resources for Understanding ACA Mandate**

To better understand the meaning of conscience protection and the contraceptive mandate, we have some information that will hopefully be helpful to you. Visit [ConcordiaPlans.org](http://ConcordiaPlans.org) to download these resources:

*Important Notice: The CHP Options and Conscience Protection Flyer (12075-0618)*

*The ACA Contraceptive Mandate: Is Your Organization Exempt? Flowchart (11403-0618)*

As an employer, it is your responsibility to determine if your organization is exempt or non-exempt. CPS cannot make this determination for you.
Grandfathered Status

The CHP believes it is a “grandfathered health plan” excluding all non-grandfathered options under the Patient Protection and Affordable Care Act (the Affordable Care Act, or ACA). As permitted by the ACA, 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 the CHP may not include certain consumer protections of the ACA that apply to other plans (for example, the requirement to provide an internal and external appeal review process). However, grandfathered health plans must comply with certain other consumer protections in the ACA (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 CPS at 888-927-7526. You also may contact the U.S. Department of Health and Human Services at healthcare.gov.