

**Your Medical, Dental,
Vision, Disability, Life Insurance
and Retirement Plans**

2008

Benefits Booklet



ARCHDIOCESE OF INDIANAPOLIS

The church in central and southern Indiana

Our Mission and Values guide us...

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Our mission reminds us that we are to “serve human needs.” We see adequate benefits as a “human need” of the employees and families of the parishes, schools and agencies of the Archdiocese. So we strive to offer benefits that are affordable and provide a “safety net” of protection for employees and their families.

We are also called by our values to be compassionate, to share responsibility, to demonstrate pro-active leadership and to be good stewards. We believe that the benefit plans offered here demonstrate these values.

We pray that each employee and family will benefit from the coverage provided. We also ask that you take time to read this information carefully and educate yourself about the options available to you. We ask that you continue to work with your parish, school or agency to be good stewards of the gifts that God has provided for us.



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The Regulations of Our Medical, Vision and Dental Plans

The benefit plans offered by the Archdiocese follow applicable state and federal law. There are legal documents that define and control the provisions of each plan. Here's important information that relates to your enrollment. A summary of all plan provisions can be found in your certificates of coverage documents.

Eligibility

To be eligible for medical/vision and dental insurance coverage, a religious or lay employee of the Archdiocese of Indianapolis must be:

1. A full-time teacher or educational administrator under written contract who is paid the appropriate full-time salary used by the school;
2. A non-school or school employee who is scheduled to work for a minimum of 30 hours during the work week for the 12 months of the calendar year ;
3. A school employee who is scheduled to work for a minimum of 36 hours during the work week for at least ten months of the school year; or
4. A school employee who is scheduled to work for a minimum of 39 hours during the work week for at least nine months of the school year.

When Coverage Begins

For new employees or newly eligible employees, the date your coverage becomes effective depends upon the following guidelines:

1. For teachers and educational administrators under written contract, benefits will begin on the first day of the month in which pay starts. For example, if pay begins on September 15, benefits coverage will begin on September 1.
2. For other employees, coverage will become effective the first day of the month following your hire date. If your first day of work is on the first day of the month, coverage is effective that day.

Declining Coverage

If you are declining enrollment for yourself or your dependents (including your spouse) because of other health insurance coverage, you may be able to enroll yourself or your dependents in this plan in the future, provided that you request enrollment within 31 days after your other coverage ends.

If you do not choose medical coverage for yourself or your dependents, you agree that you will not hold the parishes, schools and agencies of the Archdiocese liable for medical expenses incurred by you or your dependents.

Eligibility of Family Members

You may be able to cover your dependents under the benefits plans. Your spouse and unmarried dependent children, who live with you or are residents in the same county, are eligible as covered dependents for the Medical/Vision and Dental Plans. Your eligible children may be covered through the end of the calendar year in which they reach age 19, or age 23 if a full-time student taking enough credit hours per semester to qualify as a full-time student at their learning institution.

If your spouse or children no longer qualify for coverage in our plans, they may be able to continue coverage under our plans. Contact Human Resources for more information about continuation of coverage.

If your spouse is also an employee within the Archdiocese and is eligible for benefits, only one of you may elect coverage for the family. You cannot cover yourself and your spouse and your dependent children twice under our plans. These plans do not allow for "double coverage."

What Happens If You Don't Enroll

If, for any reason, you don't complete an enrollment form and return it within 31 days of your hire date, you and your family will not be covered by our medical/vision and dental plans.

Enrollment and Payroll Deduction Authorization

Completing and returning your enrollment form authorizes the Archdiocese and its designees to enroll you for the plans you selected, at the coverage levels you want and to make the necessary deductions from your pay. By completing your enrollment form and returning it, you acknowledge that you have read and understand the benefits materials.

Changing Coverage, Adding Dependents or Electing Coverage During the Year

If your personal situation changes during the year, and you want to change your benefit elections, you may call Human Resources and request a change form.

For example, if you have a new dependent as a result of marriage, adoption, or placement for adoption, you may be able to enroll yourself and/or your dependents. You may also request to change or elect coverage if you become legally separated, divorced or lose coverage due to a change in your spouse's employment. In all cases, you must complete the request for change form within 31 days of the event.

Continuation of These Plans

The Archdiocese reserves the right to change or end any of the benefits plans, at any time and for any reason, to the extent allowed by law. Your participation in these plans is not a contract of employment and does not guarantee future employment with the Archdiocese.



The Archdiocesan Medical and Prescription Drug Plan

Health Savings Account (HSA)

The Health Savings Account is designed to help you pay for your medical expenses, particularly to help toward your deductible. The HSA can also be used to pay for other health expenses. Both you and the Archdiocese may make contributions to the HSA.



Your Contributions to the Health Savings Account

Federal regulations limit the amount that can be contributed to the HSA. However, you can change your contributions at anytime during the year, as often as once a month. Please contact Human Resources for a form.

Parish, School or Agency Contributions to Your Health Savings Account

Your parish, school or agency makes contributions as shown below:

Coverage	Parish, School or Agency Contribution
Individual Coverage For elections which are effective in the 2008 calendar year	<ul style="list-style-type: none"> • \$560 lump-sum contribution on January 1, 2008 • \$540 contribution in monthly installments (\$45 per month for up to 12 months) • You only receive the lump-sum contributions and each monthly contribution if you are employed, eligible for benefits and participate in the HSA at the time the contribution is made.
Family Coverage For elections which are effective in the 2008 calendar year	<ul style="list-style-type: none"> • \$1,120 lump-sum contribution on January 1, 2008 • \$1,080 contribution in monthly installments (\$90 per month for up to 12 months) • You only receive the lump-sum contributions and each monthly contribution if you are employed, eligible for benefits and participate in the HSA at the time the contribution is made.

Coverage	Employer Contribution	Maximum You Can Contribute	Total HSA Contribution
Individual Coverage	Up to \$1,100 per calendar year, if you are employed, eligible for benefits and participate in the HSA at the time the contribution is made.	<ul style="list-style-type: none"> • Up to \$1,800 per calendar year • Up to \$2,700 for employees age 55 and over (includes \$900 catch-up contribution) 	<ul style="list-style-type: none"> • \$2,900 per calendar year • \$3,800 for employees age 55 and over
Family Coverage	Up to \$2,200 per calendar year, if you are employed, eligible for benefits and participate in the HSA at the time the contribution is made.	<ul style="list-style-type: none"> • Up to \$3,600 per calendar year • Up to \$4,500 for employees age 55 and over (includes \$900 catch-up contribution) 	<ul style="list-style-type: none"> • \$5,800 per calendar year • \$6,700 for employees age 55 and over

The Archdiocesan Medical and Prescription Drug Plan

Health Savings Account (HSA)

Establishing Your Health Savings Account at Teachers Credit Union (TCU)

The Archdiocese has partnered with Teachers Credit Union to provide Health Savings Accounts to parish, school and agency employees who elect our plan. Your account balances are National Credit Union Association (NCUA) insured and earn interest. **When you elect our plan and meet the eligibility requirements, you will be asked to complete two forms from TCU: an application for membership and a Health Savings Account application.** These two forms are needed to set up your account so that you can receive your employer's contributions and begin making your contributions. You can find these forms on the Archdiocese website: www.archindy.org/intranet, in the Human Resources section.

Debit Cards for your Health Savings Account

Once your account is established, you will receive a TCU Visa Check Card. The TCU Visa Check Card is also known as a debit card. When you incur a health expense that you want to pay for using your health savings account, you simply swipe your card, sign the receipt and keep a copy of the receipt for your records. Teachers Credit Union also offers a Bill Payment service through their home banking site that allows you to pay your health expenses/bills electronically. Teachers Credit Union's home banking site also allows you to run payment reports that help you meet your HSA tracking needs. If you prefer to use paper checks for your Health Savings Account, you can order them from Teachers Credit Union for a fee.

Your Account Carries Over and Grows

Your Health Savings Account works like most checking accounts – it does not end or close at the end of a calendar year – it continues to accept contributions and accrue interest year after year. Your Health Savings Account earns interest that is tax-free.

Available Funds

Like most checking accounts, you may only spend the amount of money in your account. There is no overdraft protection. If you use your TCU Visa Check Card to pay for your expenses and your expense is greater than your available funds, your expense will be denied. In these cases you can pay the expense and then reimburse yourself when your Health Savings Account balance will cover it. Or, you can ask the provider if they will accept payments in installments.

Qualified Expenses

While the money in your account is intended to cover your deductible, you may also use it to pay for other health expenses. In general, qualified expenses include medical, dental and vision expenses that are not covered by insurance. Some examples that count toward your deductible and may be paid from your account are your expenses for prescription drugs, doctor's office visits, inpatient or outpatient services, laboratory and diagnostic testing. Please see page 18 for a complete listing.

You may also pay for dental procedures (fillings, extractions, root canals, etc.) and vision care (glasses, contacts, etc.) using your Health Savings Account. And, you may use your HSA to pay for adult orthodontia, corrective vision surgery, hearing aids, orthopedic shoes when medically necessary, and over-the-counter drugs. However, these expenses do not count toward your medical plan deductible.



Future Funding of the Health Savings Account

Because of cost savings uncovered in our retirement plan, the Archdiocese was able to make generous contributions to the HSA this year. However, this is not a guarantee of future funding for this benefit. Each year the Archdiocese must weigh the expenses and needs of our entire benefits program and workforce, and then revise our budgets accordingly. We hope to be able to continue at least a portion of the employer contributions to the HSA in 2008 (and beyond).

The Archdiocesan Medical and Prescription Drug Plan

Health Savings Account (HSA)

It's important to keep a few things in mind when using your Health Savings Account:



- You are limited to the annual combined HSA contributions of \$2,900 (individual coverage) and \$5,800 (family coverage). Employees age 55 or over are limited to \$3,800 (individual coverage) and \$6,700 (family coverage) which includes catch-up contributions.
- If you expect to meet your deductible during the calendar year and also incur the 30% co-insurance on some medical care, you may need to save for these additional expenses using other means (see the Flexible Spending Account on pages 14 and 15).
- If you expect that you will not meet your deductible during the calendar year, then you can elect to contribute less than the maximum. Any funds left in your account at the end of the year will earn interest, carryover, and be available for future expenses. It is also portable when you leave employment.
- Save your receipts as well as any paperwork you receive from Anthem (Blue Access PPO, vision care and dental plan). If you pay for non-qualified expenses using your health savings account, you will be liable for taxes on the amount of the withdrawal plus a 10% penalty.
- Save money by using Anthem's preferred providers: Blue Access PPO providers, network pharmacies (CVS, Walgreen's, Wal-Mart, Meijer, Costco, K-Mart, Marsh, Sam's Club, Target and Kroger), vision care providers (Lens Crafters, Pearle Vision, Sears Optical, and Target Optical) and other Anthem preferred providers. **You can find Anthem providers at www.anthem.com.**

For employees enrolled in Medicare or receiving Veteran's Administration Benefits...

Federal regulations prohibit you from participating in a Health Savings Account. However, the Archdiocese can set up a Health Reimbursement Account for you. The Health Reimbursement Account allows your parish, school or agency to contribute to the HRA account to help pay for your deductible and out-of-pocket medical expenses. Our contributions will follow the same rules as outlined under the HSA. You are not allowed to contribute to a Health Reimbursement Account – it is set up for employer contributions only. Employees may contribute to the Health Care Flexible Spending Account for persons not contributing to a HSA (see page 14 for more information).

The Archdiocesan Medical and Prescription Drug Plan

The Basics of How Our Plan Works

The following pages highlight our health plans. The Archdiocesan Plan features a Health Savings Account, the Blue Access PPO network and a wide range of programs and services designed to keep you healthy. There are a number of online resources for our plan. Please take a moment to review page 10 which lists the resources available to you and how you can access them.

Our plan is a new style of health insurance. It combines a high deductible health plan with a savings account that both your employer and you contribute to. Your contributions **are made on a pre-tax basis**. The Health Savings Account is used to pay the expenses that apply toward your deductible, as well as other eligible health expenses. Any money left in your Health Savings Account at the end of the plan year remains in the account to be used in future years (and gain interest).

To help manage the costs of medical care, we have partnered with Anthem to offer the Blue Access PPO network. Although you do not have to use providers in the Blue Access network, **when you use a Blue Access provider, you'll benefit from discounted rates** – as much as a 40% discount!

Because there are tax benefits associated with our plan, there are **some limitations to participation** in the Health Savings Account. You'll want to review this booklet and Anthem's website carefully to make sure that you get the most from your participation in this plan.

Eligibility

Employees of the parishes, schools and agencies of the Archdiocese who are scheduled to work at least 1,500 hours per calendar year are eligible for the high deductible health plan and preventive care. However, participation in Health Savings Accounts has some restrictions. You may not participate in the Health Savings Account if you are covered by other insurance that provides "first dollar" coverage (plans that include copays for doctor's visits or prescription drugs) and has an annual deductible less than the amount established by the IRS. You also cannot participate in the Health Savings Account, if you are enrolled in Medicare, receive Veteran's Administration benefits, or if you are listed as a dependent on someone else's tax return.

High Deductible Health Plan

Plan Feature	Your Responsibility In-Network	Your Responsibility Out-of-Network
Annual Deductible*	Individual \$2,200 Family \$4,400	Individual \$4,400 Family \$8,800
Co-insurance	30% of expense for service (paid after deductible is satisfied)	50% of expense for service (paid after deductible is satisfied)
Out-of-Pocket (OOP) Maximum* OOP maximum is the combined costs of your deductible and co-insurance	Individual \$4,400 Family \$8,800	Individual \$8,800 Family \$17,600
Preventive Care Services	\$0 - No copayments or co-insurance, not subject to deductible and does not count toward your OOP maximum	50% after your deductible is satisfied
Urgent Care and Emergency Services	30% after your deductible is satisfied	30% after your deductible is satisfied
In-patient, Outpatient, Laboratory, Diagnostic, Maternity and Physician Office Visits and Services	30% after your deductible is satisfied	50% after your deductible is satisfied
Prescription Drugs	30% after your deductible is satisfied	50% after your deductible

* The in-network and out-of-pocket deductibles and OOP maximums do not cross-reduce.

The Archdiocesan Medical and Prescription Drug Plan continued



Payroll Deductions Medical and Prescription Drug Plan

Coverage	Monthly Deductions
Individual	\$70.00
Family	\$382.00

Managing Your Expenses: Use the Blue Access PPO

Our plan is administered and supported by Anthem and its Blue Access PPO. You can use any doctor or facility, but you save money by using Blue Access PPO providers. These providers have contracted with Anthem to provide their services to participants in the Archdiocesan plan at a discounted rate. You'll receive a BlueCard® which gives you access to both local and national Blue Cross Blue Shield providers. So whether you are traveling or at home, Blue Access and the BlueCard® have you covered.

To view a list of the doctors and facilities participating in the Blue Access PPO network, go to www.anthem.com.

NOTE: If you choose an out-of-network provider, precertification is required for any procedures you elect. See your BlueCard® for the precertification phone numbers.

Preventive Services: FREE to Plan Participants

If you elect our plan, you and your covered family members are eligible for many free preventive services from Anthem providers. **The following preventive care is not subject to any copayments, deductibles or co-insurance:**

- Routine exams including diagnostic studies
- Well baby care
- Pelvic exams and pap tests
- Routine mammograms
- PSA test (prostate screening)
- Immunizations (flu shots, tetanus shots, etc.)
- Annual diabetic eye exams
- Annual vision and hearing exams
- Diabetic education
- Medical Nutritional Therapy
- Prescription drugs for smoking cessation up to \$1,000 per year
- Prescription drugs for weight loss up to \$1,000 per year

Preventive services do not apply toward your deductible, co-insurance or out-of-pocket maximum.

Your Out-of-Pocket Costs

Under our plan, you will be responsible for paying the deductible and your 30% co-insurance. If your expenses reach the out of pocket maximum (\$4,400 individual or \$8,800 family, in-network, or \$8,800 and \$17,600 out-of-network) the plan begins to cover the cost of your care at 100%.

Prescription Drug Coverage

Using your BlueCard® at participating network pharmacies (CVS, Walgreen's, Wal-Mart, Meijer, Costco, K-Mart, Marsh, Sam's Club, Target and Kroger) assures that you will benefit from the lowest negotiated rates for prescription drugs. **You should also request generic drugs whenever possible (about half the drugs on the market are also available in generic form).** And Anthem also offers a mail order pharmacy that may be the most economical choice for convenient refills of routine medications for ongoing medical conditions such as arthritis, asthma, diabetes and high blood pressure. **Before using the mail order pharmacy, be sure to compare the costs of your prescriptions through the mail order pharmacy and your local pharmacy.** We encourage you to purchase your prescriptions where you find the "best deal."

Under our medical plan, you will pay the cost of the prescription until your deductible is satisfied. (Remember, all non-preventive care is subject to the deductible.) Once your deductible is satisfied, you will pay 30% of the cost of your prescription, and the plan will cover the remaining 70%. If your medical expenses for the year reach the out-of-pocket maximum, the plan then covers your medical expenses at 100% including your prescription drugs. **The Health Savings Account is available to help pay for your medical expenses, including prescription drugs.**

The Archdiocesan Medical and Prescription Drug Plan continued

Vision Coverage

If you elect the high deductible health plan, you and your covered family members are eligible for an annual eye exam free of charge from any eye doctor (both optometrists and ophthalmologists) in the Anthem network. In addition, you are eligible for discounts on eyeglasses, contact lenses and laser vision correction when you use selected providers:

- Up to 30% savings on prescription eyeglasses, sunglasses and accessories
- 15-20% savings on top-selling brand name contacts through mail order
- Pay just \$749-\$950 per eye for LASIK or PRK laser vision correction

To view a list of network eye doctors, simply go to www.anthem.com, select Indiana, and click on “Find a Doctor.” Under Select a Plan, choose Blue Access PPO and under Select a Provider Type, click on “Other Health Professionals and Vision Specialists.”

To find a list of providers offering a 30% discount on eyeglasses, please go to www.anthem.com, select Indiana, click on “Answers @ Anthem” and then “Special Offers at Anthem.” You can pay for eye care including eyeglasses, contact lenses and corrective eye surgeries (LASIK or PRK) using your Health Savings Account (or your Flexible Spending Account or Health Reimbursement Account for those not electing the HSA).



The Archdiocesan Medical and Prescription Drug Plan

Additional Resources Available through Anthem

We have partnered with Anthem for the discounts available through their networks and also for the vast resources they bring to parish, school and agency employees.

Here are just a few of the opportunities available to you.

MyAnthem

MyAnthem offers a wealth of information for your health and for your family. MyAnthem is the “doorway” to:

- MySpecialOffers@Anthem which offers discounts on health clubs, weight management programs, smoking cessation programs, eyeglasses, laser vision correction, teeth whitening and so much more
- MyHealth@Anthem® which provides health management tools that help you with chronic and acute conditions, fitness, health information, health risk assessments, disease prevention, pregnancy tracking and early childhood development
- Decision support tools provided by Subimo including
 - Healthcare Advisor® which helps you understand your illness, know what to expect, research treatment options, and find appropriate care/facilities for your illness
 - Treatment Cost Advisor™ which helps you estimate your medical costs before you receive care
 - PharmaAdvisor™ which helps you better understand your prescription medications from learning how the drug works to understanding side effects and drug interactions.

Health Promotion

Anthem takes a proactive approach to health. Anthem’s programs provide health information, immunization reminders, health screening reminders and the Anthem Healthy Solutions member newsletter.

Disease Management

To help participants in our plan lead healthier lives and manage chronic illness, Anthem also provides programs for cardiac care, chronic kidney care, diabetes care and pulmonary care. These programs provide information and reminders to help you manage any chronic illnesses you or a family member may have.



To register for MyAnthem, go to anthem.com, click on the Members tab. Then click on your state and click on the “Enter” button. On the Member Welcome screen, click on the “Register” button and complete the registration form.

Free to Plan Participants!

When you elect our high deductible medical plan, you and your covered family members are eligible for many FREE preventive services.

Preventive Services.

FREE!

- Routine exams including diagnostic studies
- Well baby care
- Pelvic exams and pap tests
- Routine mammograms
- PSA test (prostate screening)
- Immunizations (flu shots, tetanus shots, etc.)
- Annual diabetic eye exams
- Annual vision and hearing exams
- Diabetic education
- Medical Nutritional Therapy
- Prescription drugs for smoking cessation up to \$1,000 per year
- Prescription drugs for weight loss up to \$1,000 per year

Preventive services do not apply toward your deductible, co-insurance or out-of-pocket maximum.



Issues to Consider: Medical and Prescription Drug Plan

Leaving Employment and Continuing Coverage

If you leave employment and you are covered under our high deductible medical plan, you may elect to continue your coverage for up to 18 months. If you are age 60 or over and have worked for the Archdiocese for 10 years or more, you can continue your coverage for up to five years. This “continuation” coverage allows you to continue your current coverage under the current plan. If you are contributing to the HSA, you may also continue to contribute to the Health Savings Account directly through Teachers Credit Union (TCU). However, the Archdiocese will not be making contributions to your Health Savings Account.

Your monthly premiums for continuing coverage under the Archdiocesan Plan in 2008:

Medical Plan Continuation	Individual cost per month: \$477	Family cost per month:\$1,280
Dental Plan Continuation	Individual cost per month: \$42	Family cost per month:\$78

If you wish to continue your coverage, please contact Human Resources about two weeks after receiving your last paycheck

Over Age Dependents

If your children are covered by our medical or dental plans, remember that their coverage ends at the end of the calendar year in which they turn age 19 or turn age 23, if they are full-time students. If your child becomes ineligible for coverage, the child may purchase continuation coverage under our high deductible plan for up to 18 months.

You must fill out a benefit change form in order to receive continuation coverage for your dependents. Contact Human Resources to receive a benefit change form and a coverage continuation packet.

Medical Coverage Issues for College Students

Here are some issues to keep in mind if you have children attending college and want to cover them under our medical plan:

- You may cover your children who attend college under the medical plan as long as they are attending school as a full-time student up to the end of the calendar year in which they turn 23.
- Our plan uses the Anthem Blue Access network which means that you can find in-network providers in most states where your child might attend college. Our plan also covers out-of-network providers, which means your child is covered no matter where he/she goes to school.

- For the sake of convenience of care, many members elect to purchase medical coverage through plans offered by their child’s university. These programs typically provide routine and immediate care through a student health services center with comprehensive coverage for other services.

BlueCard® ID Cards

After you enroll for medical coverage by completing and returning your enrollment form, Anthem will take your information and enter it into their computer system. Then they will issue BlueCard® ID cards for you and your spouse (if you elect family coverage). College-age dependents can receive an ID card of their own, if you request it from Anthem. It is very important to complete your enrollment form so that preparation of your ID card will not be delayed.



Dental Plan: Anthem Dental PPO

Our dental plan takes advantage of network cost savings while continuing to offer a high-quality benefit. You may see any dentist you choose either in or out of the network. However, if you choose a network dentist you are assured your dentist will bill you for services at negotiated, discounted rates.

Payroll Deductions Dental Plan

Coverage	Monthly Deductions
Individual	\$8.00
Family	\$42.00

*Your payroll deductions are tax-free and are deducted from your pay before your taxes are calculated and deducted.

About the Network
Anthem is the administrator for our dental plan network and claims payment. Anthem offers a large network of providers in Indiana. **To find a network dentist, use the provider directory on the anthem.com home page or you can call Anthem Dental customer service (for Indiana: 800-828-3677 or for Kentucky and Ohio: 800-367-5897.**

Seeing a Network Dentist
When you select a network dentist, he or she has agreed to charge both the plan and the member at a discounted rate. This rate is a fair and appropriate fee in keeping with the average fees charged for this service provided. This discounted rate means that you and your covered family members will incur lower out-of-pocket costs. It's important to remember – this is your choice – you are not required to use a network dentist to receive coverage.

Seeing an Out-of-Network Dentist
You can see any dentist you choose. But you should also know that out-of-network dentists are not bound by the Anthem fee schedule of discounted rates.

Based on the average costs for dental services in our area, our plan has set a fee schedule that generally represents the “going rate” for dental services. If you see a dentist outside the network, you could be subject to fees that are higher than our fee schedule. When you have dental work done, you are responsible

for the deductible and your co-insurance (a percentage of the fees). The dentist submits the bill to Anthem and receives payment for the portion of the bill up to the fee schedule amount. If the dentist's fees exceed the fee schedule, he or she may bill you for the amount over the fee schedule. This is called balance billing.



If you are balance billed by your dentist, it's a good idea to contact the dentist's office and question the bill. In some cases, the dentist may be willing to waive these “balance billed” charges to keep a valued patient. It never hurts to ask.

Brief Summary

Plan Feature	Your Responsibility*
Deductible	\$50 per person, \$100 per family
Co-insurance – Preventive Services 2 exams per calendar year 2 cleanings per calendar year 1 fluoride application for children under age 15 per calendar year 1 set bitewing x-rays per calendar year 1 set full mouth x-rays per calendar year Space maintainers for children age 12 and under	The deductible. (Plan pays 100% after you satisfy your deductible.)
Co-insurance – Basic Services Extractions Anesthetic Root canals Relining of dentures (once every 2 years) Emergency palliative treatment	20% after deductible is satisfied
Co-insurance – Major Services Inlays, onlays, crowns and gold fillings Initial and replacement bridgework and crowns Initial and replacement partial and full removable dentures	50% after the deductible
Orthodontia – for dependents up to age 19	50% after the deductible

*The plan pays a calendar year maximum benefit per covered person of \$750. Lifetime Orthodontia Maximum is \$1,500.

You can see any dentist you choose.

If you choose an Anthem network dentist, you'll save money! Anthem has negotiated lower rates for employees and their families who enroll for coverage and receive dental services within the network. You can access the provider directory on the anthem.com home page or by calling Anthem Dental Customer Service at 800-828-3677 in Indiana or 800-367-5897 in Kentucky and Ohio.

Flexible Spending Accounts: Read Carefully

Federal regulations govern the rules for our Flexible Spending Accounts to allow for the use of the Health Savings Account. Please consider these limitations before you elect to contribute to any of these accounts.

Flexible Spending Accounts allow you to pay for certain out-of-pocket health and dependent care expenses with money you set aside tax-free. Through these plans, you can save a little each pay period to cover the expenses not covered by the medical, dental and vision coverage and to pay for your dependent day care expenses.

Health Care Flexible Spending Account - for Persons NOT Contributing to a Health Savings Account

This spending account is designed for employees who are not eligible for the Health Savings Account such as employees who are covered by Medicare, receive Veteran's Administration benefits, or who are covered by a non-high-deductible health plan. This spending account is also available to employees who are eligible but choose not to elect the Health Savings Account.

This spending account recognizes these allowable expenses:

- medical plan expenses that apply toward your medical plan deductible, co-insurance and out-of-pocket maximum,
- other medical expenses not covered by the medical plans such as over-the-counter medications
- expenses not covered by the dental plan (deductibles, co-insurance, balance billing for out of network fees, adult orthodontia, expenses over the annual maximum)
- expenses not covered by our vision coverage (eyeglasses, contacts, LASIK surgery, prescription sunglasses)
- other allowable expenses such as transportation, hearing care, diabetic supplies, over the counter drugs, therapy, and certain medical equipment.

The "Use It or Lose It" provision also applies to this Flexible Spending Account.

Maximum Contributions to the Health Care FSA

The maximum annual contribution you can make to the Health Care FSA for persons not contributing to the Health Savings Account is \$3,000.

Limited Purpose Dental and Vision Flexible Spending Account - for Persons Contributing to the Health Savings Account

If you are electing the high deductible medical plan and the Health Savings Account, but you expect that your HSA account balance will not be enough to cover your medical, dental and vision expenses for the year, you may want to consider making contributions to the Limited Purpose FSA.

Under this plan, you can make contributions and receive reimbursement for dental and vision expenses such as:

- expenses not covered by the dental plan (deductibles, co-insurance, balance billing for out of network fees, adult orthodontia, expenses over the annual maximum)
- expenses not covered by our vision coverage (eyeglasses, contacts, LASIK surgery, prescription sunglasses)

This spending account recognizes the allowable dental and vision expenses (see page 18 for a list) and the "Use It or Lose It" provision.

Maximum Contributions to the Limited Purpose Health Care FSA

The maximum annual contribution you can make to this account is \$3,000.

Flexible Spending Accounts: Read Carefully

Post Deductible Health Care Flexible Spending Account – for expenses incurred above the amount of the deductible for persons contributing to the Health Savings Account

If you elect to participate in the Health Savings Account and you expect your health expenses to be greater than the amount of your deductible, then you can contribute to a Post Deductible Health Care Flexible Spending Account. You can request reimbursement from this flexible spending account only after you have reached your annual deductible.

This flexible spending account may be used to reimburse:

- medical plan expenses that apply toward your medical plan co-insurance and out-of-pocket maximum,
- expenses not covered by the dental plan (deductibles, co-insurance, balance billing for out of network fees, adult orthodontia, expenses over the annual maximum)
- expenses not covered by our vision coverage (eyeglasses, contacts, LASIK surgery, prescription sunglasses)
- other allowable expenses such as transportation, hearing care, diabetic supplies, over the counter drugs, therapy, and certain medical equipment.

This spending account recognizes the allowable health care expenses with the exception of expenses that are applied toward your medical plan deductible (see page 18 for a list) and also recognizes the “Use It or Lose It” provision.

Maximum Contributions to the Post Deductible Health Care FSA

The maximum Contribution is \$3,000 per calendar year.



Flexible Spending Accounts: Read Carefully

Dependent Care Flexible Spending Account

The Dependent Care Flexible Spending Account is available for the reimbursement of your child care expenses.



Eligibility for Dependent Care FSA

This plan is designed to help pay for expenses related to caring for your dependents while you are at work. To be eligible, you must be single, or married with a spouse who works, is actively seeking work or is a full-time student.

Using the Dependent Care FSA

You pay your dependent care provider and submit a reimbursement form to BASIC along with your documentation. You are reimbursed from your account. Reimbursement requests are generally processed within two business days of receipt by BASIC.

Eligible Expenses

Dependent care expenses include the cost of:

- care in someone's home, including a neighbor's or relative's home
- daycare centers
- nursery school or preschool (as of 2008, kindergarten expenses are no longer reimbursable)
- care in your home

To be eligible, expenses must be for a dependent under age 13 whom you claim as an exemption on your income taxes. This plan also reimburses you for care of a mentally or physically handicapped spouse or other dependent that requires care while you are working. You cannot pay someone in your immediate family from this account.

Documentation and Reimbursement for the Dependent Care FSA

To receive reimbursement under this account, you must have custody of the child(ren) and submit a short form along with an itemized bill. Your canceled checks are not acceptable documentation. An itemized bill should include:

- The name and the taxpayer identification number (TIN) or Social Security number of the person or organization who provides care
- The name of the person receiving the care
- The dates care was provided
- The total charges for the care

Maximum Contributions to the Dependent Care FSA

If you are single or married filing a joint tax return, you may put up to \$5,000 in the account each year. If you are married and filing separate tax returns, you may put up to \$2,500 in the account each year.

If you elect the Dependent Care FSA, you will need to submit a reimbursement request along with your documentation to BASIC, the administrator for the Archdiocesan FSA plans. BASIC processes most reimbursement requests within two business days of receipt.

Flexible Spending Accounts: Issues To Consider



Use It or Lose It

It's important to use any money in your accounts by the end of the calendar year. Because of the tax benefits associated with FSAs, federal regulations require that you forfeit any money left in your account at the end of the year. The "Use It or Lose It" regulation applies to FSAs and does not apply to the Health Savings Account or Health Reimbursement Account.

Time Limit for Filing Flexible Spending Account Reimbursement Requests

You may file reimbursement claims until March 31, 2009 for services provided during 2008, provided the expenses were incurred prior to the end of the 2008 plan year or prior to the time your contributions ceased, whichever comes first.

Reimbursement Forms

Reimbursement request forms are available online at www.basichr.nu. You then have the option to mail, fax or email your reimbursement request form and documentation to BASIC.

Mail to:
BASIC
9246 Portage Industrial Drive
Portage, MI 49024

Fax to:
1-800-391-6562 or 1-269-327-0716
(You may go online to check the receipt of your fax within two days of faxing at doyouhavemyfax.com.)

Email to:
Claims@basicflex.com

Reimbursement Requests: Problems to Avoid

- Credit care receipts and personal checks are not acceptable documentation. You must attach a receipt.
- Balance statements are also not acceptable documentation.
- Remember to sign your reimbursement form. If you do not sign your form, your reimbursement cannot be processed.
- Some documentation does not fax well. If BASIC can't read the information, then they will not process your reimbursement. If your receipt/documentation is on colored paper or on transparent paper, it may not fax well – it's probably best to mail it.

Allowable Health Care Expenses

The Health Savings Accounts, Health Reimbursement Accounts and Flexible Spending Accounts allow certain expenses to be reimbursed. Consider the following list and the limitations outlined on the previous pages when paying for or requesting reimbursement for health care expenses.

Medical Expenses
 including copayments
 (under your spouse's plan),
 deductibles, co-insurance,
 out-of-pocket costs

Doctor's Fees:	Diagnostic Services:	Inpatient and Outpatient Care:	Prescription Drugs:	Other:
<ul style="list-style-type: none"> • Primary care doctor • Specialist such as gynecologist/OB, dermatologist, etc. • Chiropractor • Podiatrist 	<ul style="list-style-type: none"> • Laboratory services • X-rays and ultrasounds • Scans (MRI, CT, etc.) 	<ul style="list-style-type: none"> • Room and board • Surgery • Other procedures 	<ul style="list-style-type: none"> • In-network pharmacies • Out-of-network pharmacies • Mail order pharmacies 	<ul style="list-style-type: none"> • Acupuncture • Diabetic Supplies such as insulin, glucometer, syringes, needles, test strips • Hearing care such as hearing exams, hearing aids, and special batteries • Therapy such as physical (including massage), learning, psychological • Medical equipment such as wheelchair, crutches, walkers, etc. • Specialty programs for smoking cessation or weight loss • Mileage to/from doctor or hospital

Over-the-Counter Medication and Supplies

Allergy and Cold	Stomach/Digestive	Rash/Cut/Scrape/Itch	Muscle and Joint Aches/Injuries	Other
<ul style="list-style-type: none"> • Allergy medication such as Claritin or Benadryl • Cold medicines • Sinus medicines • Cough drops and cough suppressants • Nasal sinus sprays • Nasal strips 	<ul style="list-style-type: none"> • Antacids • Anti-diarrhea medicine • Laxatives • Pills for lactose intolerance • Hemorrhoid medication • Pedialyte for sick child's dehydration 	<ul style="list-style-type: none"> • Bactine • Band-aids • Bug bite treatments • Calamine Lotion • Diaper rash ointment • First aid creams • Liquid adhesive for small cuts • Rubbing alcohol • Ointment/cream for sunburn treatment 	<ul style="list-style-type: none"> • Carpel tunnel wrist supports • Cold/hot packs for injuries • Products for muscle pain or joint pain • Pain relievers 	<ul style="list-style-type: none"> • Home pregnancy tests • Incontinence supplies • Menstrual cycle products for pain and cramp relief • Motion sickness pills • Nicotine gum or patches for smoking cessation • Reading glasses • Sleeping aids for treating occasional insomnia

Dental and Vision
 including copayments,
 deductibles, co-insurance,
 out-of-pocket costs

Dental services such as:	Vision services such as:
<ul style="list-style-type: none"> • Cleanings and fillings • Fluoride treatments and seals • Extractions • Dentures, bridges and crowns • Root canals • Orthodontia, including adult orthodontia 	<ul style="list-style-type: none"> • Eye exams • Eyeglasses and contact lenses • Contact lens solutions • Prescription sunglasses • LASIK or other corrective surgery

Have Questions About Your Benefits?

- Call Human Resources at 317-236-1594 or 1-800-382-9836, ext. 1594.
- Or email us at hr@archindy.org.

What You Can Do Online...

MyAnthem Web Page

The screenshot shows the MyAnthem web interface. At the top, it says "MyAnthem™" and "Anthem." with a logo. Below that, it says "Welcome Archie D. Employee" and has links for "My Profile", "Contact Us", "Help", and "Logout". A navigation bar contains tabs for "Overview", "My Plans", "My Claims", "Provider Finder", "My Pharmacy", and "My Health". The main content area is divided into several sections:

- Member Information:** Member ID: 1234567989AD, ademployee@archindy.org.
- Things You Can Do:** A list of actions including "Download Forms", "Find a Provider", "Manage My Account", "Print Temporary ID Card", and "Request ID Card".
- Tools & Information:** A list of services including "24 Hour Nurse Line", "Appeal Process", "MyAnthem™ Online Access Agreement", "Protect Your Identity", "Provider Finder", "Subimo's Healthcare Advisor", "Submit Online Appeal Form", "Special Offers @ Anthem SM", "View Certificate Booklets", and "WebMD".
- Need Help:** Links for "Contact Us", "Frequently Asked Questions", "Glossary", and "Help".
- MyAnthem Overview:** A section with a photo of a woman and child, listing employee names: Archibald David Employee, Edith D. Employee, Archibald D. Employee, Jr., Gloria Employee, Michael D. Employee, Louise J. Employee, and George J. Employee.
- Disclaimer:** "This is the most current information available. Our records are updated nightly for claims, benefits and eligibility information."
- WebMD and Subimo:** Logos and descriptions for "WebMD Personal Health Manager" and "Subimo's Healthcare Advisor".

Looking for a doctor?
Click here.

Lost your ID Card?
Click here.

Need help making
health care decisions?
Click here.

Need information about a
specific health condition?
Click here.

Disability Plans

Illness and Short Term Disability Insurance

We don't like to think about our health and safety in these terms, but it's important to recognize that we are more likely to be hurt or injured in an accident than we are likely to die suddenly. You and your family continue to require income even when you can't work. So you and your local parish, school or agency work together to provide opportunities to replace a portion of your income for those times when you are unable to work.

Brief Illnesses

When you need to take a few days off for illness, your local parish, school or agency provides sick days. Sick days vary within the Archdiocese, so please consult with your supervisor for details of your plan.

Eligibility for the Short Term Disability Plan

Full-time employees working at least 1,500 hours per year may elect the Voluntary Short Term Disability Plan. This plan is available as a purchase option. The Short Term Disability Plan is designed to lessen the financial impact of any non-work-related illness or injury that prevents you from working. You may purchase this coverage when you are hired or during the annual benefits enrollment in October each year.

Benefits

The Short Term Disability benefit is 60 percent of your base pay and may begin as early as the 16th or 31st day of disability depending on the plan you select. If the disability continues beyond 90 calendar days, then you may qualify for Long Term Disability benefits.

Your Costs

You pay the full cost of the short term disability plan. The cost varies for each person and is determined by your age and pay and may include a medical review.

Long Term Disability Insurance

The Long Term Disability Plan provides income replacement if you become ill or injured (non-work-related) and are unable to work.

Eligibility for the Long Term Disability Plan (LTD)

Full-time employees working at least 1,500 hours per year are eligible for the Long Term Disability Plan. If you are eligible, **this plan is provided automatically by the Archdiocese at no cost.**

Benefits

After 90 calendar days of disability, you may be eligible to receive LTD benefits. Your LTD benefit is 60% of your base pay up to a maximum benefit of \$5,000 per month. Until your LTD benefit begins, you may use your sick days, vacation time and any short-term disability benefits to replace your income. If you are age 69.5 or older, long-term disability benefits are limited to 12 months. There is also a 24-month limit for mental/nervous claims, alcohol/substance abuse claims, and special conditions such as musculo-skeletal and corrective disorders of the neck and back, chronic fatigue syndrome, fibromyalgia, carpal tunnel syndrome and environmental allergic illness

Issues to Consider

Offsets

Short Term Disability and Long Term Disability benefits are offset (i.e. reduced) by any other income you receive, including Social Security disability. If you are receiving Social Security retirement benefits, your disability benefits will also be offset by any Social Security and Archdiocesan Lay Retirement Plan benefits.

Pre-existing Conditions

A pre-existing condition is a sickness or injury for which you receive or should have received medical treatment, consultation, care, services, prescribed drugs or medicines within the three months before your LTD eligibility begins. Therefore, if you become disabled because of a pre-existing condition (as described above) during 2008, your disability benefits may not begin after 90 days. If you become disabled after you have performed the material duties of

your occupation for 12 consecutive months, there will not be a limitation because of a pre-existing condition.

Work-Related Disabilities

If you suffer a work-related illness or injury, please notify your supervisor immediately.

You may also be eligible for Family and Medical leave. See page 27

Life Insurance Plans

You have several life insurance options through the Archdiocesan benefits program. You may purchase term or universal life insurance and you may cover yourself and your dependents. Term Life Insurance is life insurance that covers you while you are employed by the Archdiocese, but does not have a cash value. Universal Life Insurance generally has a cash value and is portable.

Voluntary Term Life Insurance is additional term life insurance you may purchase at group rates as an employee of the Archdiocese. Term life insurance coverage is only effective during the term of your employment.

Download Beneficiary Forms from:
archindy.org/intranet

Basic Term Life and Accidental Death and Dismemberment Insurance (Life and AD&D Insurance)

Benefits

The Archdiocese provides Basic Term Life and AD&D Insurance to employees who work at least 1,500 hours per year...

- The benefit is equal to 1 times your annual base pay.
- The maximum level of coverage is \$200,000.
- If you are age 65 to age 70, there is a 35% reduction in coverage. If you are age 70 or over, there is a 50% reduction in coverage.
- Enrollment /Beneficiary forms should be completed and maintained at your parish, school or agency.

Your Costs

The Archdiocese pays the full cost to provide coverage of 1 times your annual base pay!

Basic Term Life Insurance and the IRS

The IRS has set a limit on the amount of group term life insurance you may have through an employer's plan without being taxed. You may have up to \$50,000 of group term life insurance before this benefit affects your taxes. However, if you have more than \$50,000 in coverage, the 'value' of the coverage in excess of \$50,000 will be taxed because the IRS considers this 'value' to be taxable income. (The 'value' is determined from an IRS valuation table using age and amount of insurance.) If this applies to you, on the first pay of each month the 'value' of your life insurance in excess of \$50,000 will appear on your pay stub and will be added to your taxable income. Appropriate federal, state, and local income taxes and Social Security and Medicare taxes will be withheld.

Voluntary Term Life Insurance

Benefits

Coverage amounts are determined by the amount you elect and remain in effect throughout the plan year. You may purchase voluntary term life insurance in amounts from \$10,000 to \$500,000 in \$5,000 increments. You may elect coverage or change your coverage amounts each year during annual benefits enrollment with proof of good health. New employees may elect up to a \$50,000 benefit without proof of good health (guaranteed issue) during the

first year of employment. Your voluntary life insurance benefits are provided through American United Life (AUL), our life insurance provider.

Increasing Your Coverage

If you elect or increase coverage after your first year of employment, then proof of good health is required. Upon approval, your coverage and payroll deductions take effect.

Special Features

If you become ineligible for benefits or leave the Archdiocese, your voluntary term insurance benefits may be convertible.

You may convert all or a portion of this coverage to an individual whole life policy. The rates for converted coverage will most likely be higher than you will pay under the Supplemental Life Plan. You may continue a whole life policy even after you reach age 65.

Voluntary Term Life Insurance Payroll Deductions

Your payroll deductions are based on your age and pay. AUL will quote your individual rates for each option. Your payroll deductions are after-tax.

Life Insurance Plans



Dependent Term Life Insurance

None of us wants to consider the loss of a loved one. But even during the saddest times of our lives, there are financial considerations. To help you prepare for those financial concerns now, the Archdiocese offers Dependent Term Life Insurance through American United Life (AUL).

Benefits

The Voluntary Dependent Life Insurance Plan offers several coverage options for your family's needs. You may elect to cover your family even if you do not elect to cover yourself under the Voluntary Life Plans. Keep in mind that Dependent Life Insurance is also term insurance and only continues for the term of your employment.

Coverage amounts:

- You may select coverage for your spouse of \$5,000, \$10,000 or \$20,000.
- You may select coverage for your children of \$2,500, \$5,000, or \$10,000.

*When you select coverage for your children, you are covering each of your dependent children for this amount regardless of the number of children you have. Remember, dependents include children under age 19 or age 25 if a full-time student.

Voluntary Universal Life Insurance Issues to Consider

Through our relationship with AUL, you may also purchase universal life insurance for yourself and/or your family. AUL offers many products including several that build cash value on a tax-deferred basis at competitive interest rates. These products are also portable which allows you to take this benefit with you after your employment ends (at no increased cost).

Electing Voluntary Life Insurance

You may enroll for Voluntary Term and Universal Life Insurance during annual benefits enrollment in October.

Getting More Information

To find out more about the products and life insurance coverage, please contact Darrel Fitch, our insurance agent, at (317) 285-4806.

Beneficiary Designations

It's important to review your beneficiary designations each year. Our lives and families change and grow - please take the time to make sure that your family is provided for in the event of your death.

Determining How Much Life Insurance You Need

How much life insurance is enough can be a difficult question to answer. To help, AUL has a needs assessment calculator available online at www.oneamerica.com

Retirement Plans

Your employment within the Archdiocese touches the lives and spiritual development of the many people served by your parish, school or agency. In order to recognize and support your service to this ministry, the Archdiocese established pension and savings plans to help provide income for you and your family when you retire.

The Lay Employees' Retirement Plan (also called the Pension Plan)

Eligibility and Participation

Lay employees of the Archdiocese may be eligible for this plan. If you are a new employee, you are automatically a Pension Plan participant on January 1 of the first calendar year in which you complete 1,500 hours of service. (If you are a current employee, you may have become a participant under other eligibility requirements.)

Your Pension Benefit

When you become a participant, an account is established for you in the Plan. Each year, the Archdiocese makes a contribution to the plan on your behalf. This contribution is based on your period of service (completing 1,500 or more hours of service per calendar year) and your pay. The contributions remain in your account and are held in trust earning interest until you reach retirement age or leave employment with the Archdiocese.

Period of Service on December 31 Valuation Date	Percentage of Annual Compensation Contributed to the Plan
Less than 10 years of service	4%
10-19 years of service	6%
20 or more years of service	8%

Period of Service

Prior to January 1, 2005, the Plan recognized and employees earned service based on different definitions. Since January 1, 2005, we have defined a period of service as any plan year (calendar year) in which you completed 1,500 hours of service (worked 1,500 hours).

Interest

Your pension account earns interest at a rate equivalent to the 10-year Treasury rate. The rate varies from year to year, but is always a positive number.

Vesting

Pension Plan vesting means your "ownership" in your pension benefits. You are 100%, fully vested:

- after working at least 1,500 hours in each of five calendar years, or
- at your disability or death, if you are a Participant regardless of your credited service.

If you leave employment with the Archdiocese before you are fully vested in your pension benefit, you will forfeit any contributions and interest in your Pension Plan account.

Receiving Benefits

If you are vested in your benefits, then you will be eligible to receive benefits...

- After the termination of your employment with the Archdiocese of Indianapolis, regardless of your age. However, benefit payments which you receive prior to age 59 1/2 may be subject to penalty tax when you file your income taxes.
- In the event of your disability.
- In the event of your death.

The normal form of benefit payment is a monthly annuity payable for your lifetime. You may elect optional forms of payment including a lump sum, or a joint and survivor annuity, or a monthly annuity with guaranteed payments for 120 or 180 months.



Retirement Plans

Watching Your Benefits Grow

As your service with the Archdiocese grows so does your pension benefit. To keep track of your benefit and to estimate your benefit at retirement, Nyhart (also known as Alliance Benefit group), our pension plan administrator offers online benefit estimates.



To access the Nyhart website:

1. Go to <http://nyhart.biz>
2. Click on “Participants.” It's the fifth button down the left side of the screen.
3. You will see four pictures in the center of the screen - each one represents a different account. Click on “Your Pension Plan Accounts.”
4. Type in your USER ID and PIN. You should have received a letter from Nyhart with your User ID and PIN (in 2003 or when you became eligible). If you do not know your User ID or PIN, please call Nyhart at 1-800-428-7106.
5. You'll be asked to accept the user agreement in order to access your account information. It is a legal requirement in order for Nyhart to allow access to the pension system. If you want to proceed with getting your account information, please click on “accept.”
6. At this point, you have entered the pension plan account information area of the website and you have several options to choose from. If you would like help in navigating the system at this point, please click on “Step-by-step Help.”

*We evaluate the administrators for our benefits plans continuously. Our pension plan administrator may change in future years. Be sure to review this brochure from time to time. The most current version is available at www.archindy.org/intranet.

Retirement Plans

The Archdiocesan Retirement Savings Plan (also called the 403(b) Plan)

All employees, both full-time and part-time, are eligible for this plan. You may begin contributing to the Retirement Savings Plan when you are hired (if you are paid for at least one hour per year). You may enroll for the Retirement Savings Plan at any time.

Your Retirement Savings Plan Contributions

Your savings contributions are made on a before-tax basis as a percentage of your pay. You may contribute up to \$15,500 in 2008. You may even contribute an additional \$5,000 (\$20,500 total) if you are over 50 years of age or are turning 50 in 2008.

Retirement Savings Plan Vesting

Vesting refers to your “ownership” of the money in the plan. You are always 100% vested in the money you contribute, plus any investment earnings they generate. The matching contribution from the Archdiocese also vests immediately.

A Simple Way to Invest Wisely

Effective April 1, 2008, our plans will offer Target Retirement Funds that invest according to your projected retirement date (age 65). As you get closer to retirement, the investment mix changes automatically, eliminating the need to “rebalance” your investments over time. You may also choose among a selection of other investment funds offered through One America (AUL), the company that manages our Retirement Savings Plan.

Making Changes to Your Contributions during the Year

You may begin contributing to a Retirement Savings Plan as soon as you are hired. You may stop saving at any time. If you decide to resume your contributions, you may do so at the beginning of the next calendar quarter.

You can also change the amount you are contributing (payroll deduction) once per quarter.

Making Changes to Your Investments

You can change how your future contributions are invested at any time. You may also move money from one investment fund to another at any time.

The Archdiocesan Matching Contributions

To encourage and help you to save for your own financial security, the Archdiocese matches a portion of your contributions to the 403(b) Plan:

Match

50% of the first 6% of pay you contribute

That's an automatic 50% return on your investment!

Retirement Plans

Hardship Withdrawals

If eligible, you can withdraw your contributions and earnings from your Retirement Savings Plan account balance under specific conditions of financial hardship. These conditions include:

- medical hardship,
- purchase of your primary residence,
- tuition payments for post-secondary education for yourself, your spouse, your children or your dependents, or
- in the event of eviction or foreclosure or damage to your home by force of nature or
- for burial of yourself or a dependent.

You must stop your 403(b) contributions for six months after a hardship withdrawal.

Receiving Your Retirement Savings Plan Benefits

You may begin receiving benefits (making withdrawals) from your account as early as age 59 1/2 without penalties. You must begin receiving benefits by age 70 1/2. Your benefits become taxable as income when you begin receiving them. Many pay-out options are available. You may elect a lump-sum or partial lump sum payment. Or you may decide to receive periodic distributions from your account.

Obtaining Information about Your Account

You will receive a personalized account statement after each calendar quarter. You can also access your account by telephone or online.

AUL Keeps You Connected

Your savings and investment returns will make up a significant portion of your retirement income. To help you stay connected to your account, AUL offers online access. To access your account, you must first register in the system.

Registration

1. Log on to www.eretirement.aul.com
2. Click on “Participants” which is the first button on the left side of the screen.
3. Click on “Access your Account” which is the first button on the left side of this screen also.
4. Click on “Register for our Service”
5. Enter your Social Security Number. Read the Terms and Conditions. Click on “Next” if you agree with the terms.
6. Enter your plan number “G75194” and your date of birth. Click “Next.”
7. Choose a password and enter your identifying information. If you forget your password, this information will allow you to reset your own password. Click on “Finish Registration.”

Access

1. Log on to www.eretirement.aul.com
2. Choose “Participants”
3. Click on Access your Account
4. Enter your Social Security Number and Password.
5. Select “Login.” And you're in!



Issues to Consider Beneficiary Designations Retirement Planning

It's important to review your beneficiary designations each year. Things change - please take the time to make sure that your family is provided for in the event of your death. AUL retains copies of your designations.

Knowing how much to save is almost as important as saving! Take advantage of the services that AUL offers to prepare for your retirement now.

The AUL web site listed above provides tools to assess your retirement savings needs.

Work & Family Benefits Plans

Time-off Benefits

Each school, parish and agency observes certain holidays and school breaks. Contact your supervisor or consult the school handbook for a list of these holidays. In addition, you may also receive sick time and/or vacation benefits. Your local parish, school or agency determines these benefits and can provide you with information about your eligibility for these programs.



Family and Medical Leave

There are times in life when we need to care for a family member or for ourselves. To allow for these absences and your return to work, the Archdiocese provides Family and Medical Leave to employees with 1 year of service and who have worked 1,250 hours or more in the previous 12 months. To be eligible for Family and Medical Leave, your absence must be due to one of the following reasons:

- Birth of a child (you must be the father or mother of the child)
- Adoption or foster care of a child (you must be the father or mother of the child)
- Care of a spouse, child or parent because of a serious health condition
- Your own serious health condition

If you wish to apply for a Family and Medical Leave, please contact the Human Resources office. They will give you the forms you will need to complete - a Request for Family and Medical Leave form, and for medical leaves, a Certification of Health Care Provider form. You will need to complete the appropriate forms and return them to the Human Resources office. If you have any questions, please contact us at 1-800-382-9836, ext.1594.

Employee Assistance Plan (EAP)

Working, raising a family, managing a home and finding time for yourself and your spouse become more difficult every year. To help employees and their families cope with the challenges of life, the Archdiocese offers an Employee Assistance Plan. The Employee Assistance Plan offers confidential crisis intervention and counseling to all employees and their family members of up to 7 sessions per life event. These services are available as early as your first day of work and continue for up to six months after your employment ends. The Employee Assistance Plan handles initial counseling and problem evaluation at no cost to you. If a treatment plan is needed, the EAP may refer you to an outside resource for legal services, financial counseling, self-help groups, physicians or specialized treatment services.

The EAP can help with:

- Alcohol and substance abuse
- Emotional distress
- Marital and family conflicts
- Financial and legal problems
- Work stress

Contact the EAP at 317-338-4900
or 1-800-544-9412

Work & Family Benefits Plans

Adoption Assistance

Families are important. And so many children need families. Adoption is a wonderful opportunity to grow your family, and the Archdiocese wants to help. Employees must have worked at the Archdiocese for one year and be at least age 21 and be eligible for the Archdiocese of Indianapolis health insurance plans. A home study from a licensed agency is also required.

For eligible employees who are adopting children, the Archdiocese provides up to \$5,000 reimbursement to help pay for adoption expenses. If you are adopting a special needs child, the Archdiocese provides up to \$6,000 reimbursement. If you work 1,500 hours per year, after one year of service, you may apply for adoption assistance. To find out more about this benefit and what expenses qualify for reimbursement, call the HR Office at 317-234-1594 or 1-800-382-9836, extension 1594. These benefits may be taxable; please consult your tax advisor.

US Savings Bonds

There are many ways to save for the future, and US Savings Bonds remain a popular option. US Savings Bonds are a safe investment that protects your savings from inflation for up to 30 years! US Savings Bonds are available through payroll deduction. For more information, you can contact the National Bond and Trust Company in Crown Point, Indiana at 1-800-321-8024.



Credit Unions

The Archdiocese of Indianapolis is a member of several credit unions offering convenient services throughout the state. Simply mention that you are an employee of the Archdiocese and they will take care of the rest!

Forum Credit Union
Teachers Credit Union
Indiana Members Credit Union
Centra Credit Union

Telephone
1-800-382-5414
1-800-552-4745
1-800-556-9268
1-800-232-3642

Web Address
www.forumcu.com
www.tcunet.com
www.imcu.com
www.centra.org

Continuation of Benefits after Loss of Coverage

If you and/or your dependents lose coverage as the result of termination of employment, divorce or separation or loss of eligibility, then you may be able to continue your medical, vision and dental coverage. If you elect the Archdiocese Continuation Benefits, then you pay the entire cost of the premium plus a 2% administration fee.

See page 12 for 2008 Continuation Benefit Premiums

Resources You Can Use!

There are many resources available to help you in choosing the best coverage for your family.

Benefit Plans	Telephone	Website
Medical/Dental/Vision Plans	1-800-345-2460	www.anthem.com
Flexible Spending Accounts BASIC	1-800-444-1922 1-800-391-6562 (fax)	www.BASIC.com
Voluntary Term Life Insurance and Short Term Disability Darrel Fitch, insurance agent	(317) 285-4806	
Voluntary Universal Life Insurance Darrel Fitch, insurance agent	(317) 285-4806	
Retirement Savings Plan AUL-Retirement Assistance Center	1-800-249-6269	www.eretirement.aul.com
Pension Plan Nyhart Company (also known as Alliance Benefit Group)	317-803-7708 1-800-428-7106	www.nyhart.biz
Employee Assistance Plan St.Vincent EAP	317-338-4900 1-800-544-9412	
Archdiocesan Human Resource Staff	317-236-1594 or 1-800-382-9836, ext. 1594	hr@archindy.org

What to do if you have questions...

If you have questions about your **eligibility for benefits** or your dependents' eligibility for benefits, call the Human Resources Department at the Archdiocese.

If you have **questions about coverage** for a doctor's visit or procedure, call Anthem.

If you have **questions about claims or bills** you are receiving from a provider, contact Anthem.

Any question can be directed to the Human Resources staff at the Archdiocese, and they will help you find the best resource for answers.

Life Events and What You Should Know

The events of our lives bring great joy and sometimes sorrow...and always mean making decisions about our future. Here's a chart to help you consider the issues that impact you during some of life's most important events. In some situations, you must take action (*italics*). For most events listed below, we've simply outlined the choices available to you.

Event	Health Plans	Disability Plans	Life Insurance Plans	Retirement Plans	Work/Family Benefits
Marriage	<ul style="list-style-type: none"> Consider adding your spouse to the Archdiocesan Plan or dropping coverage and joining your spouse's plan Consider increasing your contribution to the Health Savings Account <i>If your name or address changes, contact HR and complete a change form.</i> 	<ul style="list-style-type: none"> Consider electing Short Term Disability during benefits enrollment to replace 60% of your pay if you can't work due to illness, injury, or child birth 	<ul style="list-style-type: none"> Consider adding your spouse as a beneficiary to your life insurance. Consider electing voluntary life insurance during the next benefits enrollment to help support your family in the event of your death Consider electing life insurance for your spouse during the next benefits enrollment <i>If your name or address changes, contact AUL and complete a change form.</i> 	<ul style="list-style-type: none"> Consider increasing your contributions to the 403(b) Plan Add your spouse as a beneficiary for your 403(b) Plan and Pension Plan <i>If your name or address changes, contact Nyhart and complete a change form.</i> 	<ul style="list-style-type: none"> Call the EAP to help with transitions or challenges
Birth of a Child	<ul style="list-style-type: none"> <i>Add your new baby to the medical plan within 31 days</i> Consider participating in the dependent care Flexible Spending Accounts Consider increasing your contribution to the Health Savings Account 	<ul style="list-style-type: none"> <i>If you elected Short Term Disability, you can apply for benefits after the elimination period for a medical leave.</i> To apply for benefits, call HR 	<ul style="list-style-type: none"> Consider adding your child as a beneficiary Consider increasing your life insurance to provide more financial support for your family (call your AUL representative) 	<ul style="list-style-type: none"> Consider adding your child as a beneficiary for your 403(b) and Pension Plans 	<ul style="list-style-type: none"> Call the EAP to help with transitions or challenges Consider Family and Medical Leave for additional time with your children Consider purchasing US Savings Bonds
Adoption	<ul style="list-style-type: none"> <i>Add your new baby to the medical plan within 31 days</i> Consider increasing your contribution to the Health Savings Account 		<ul style="list-style-type: none"> Consider adding your child as a beneficiary Consider increasing your life insurance to provide more financial support for your family (call your AUL representative) 	<ul style="list-style-type: none"> Consider adding your child as a beneficiary for your 403(b) and Pension Plans 	<ul style="list-style-type: none"> Consider applying for the Adoption Assistance Plan Call the EAP to help with transitions or challenges Consider Family and Medical Leave for additional time with your children Consider purchasing US Savings Bonds

Life Events and What You Should Know

Event	Health Plans	Disability Plans	Life Insurance Plans	Retirement Plans	Work/Family Benefits
Your Permanent Disability	<ul style="list-style-type: none"> If you are permanently disabled, health care coverage is provided at no cost to you. 	<ul style="list-style-type: none"> If you are permanently disabled, you may be eligible to receive LTD benefits until you become eligible for retirement benefits. 	<ul style="list-style-type: none"> After 18 months of disability, your employment ends and you are no longer eligible for group life insurance. You may elect to convert your life insurance to individual policies. 	<ul style="list-style-type: none"> After 18 months of disability, your employment ends and you are no longer eligible for 403(b) and pension plan contributions. 	<ul style="list-style-type: none"> Call the EAP for help with transitions and challenges
A non-occupational injury or illness	<ul style="list-style-type: none"> Make sure your medical providers have your insurance information and that you follow all procedures for referrals 	<ul style="list-style-type: none"> If you elected Short Term Disability, you can apply for benefits after the elimination period for a medical leave. If your disability continues after 90 days, you may also be eligible for Long Term Disability benefits. To apply for benefits, call HR. 			<ul style="list-style-type: none"> Call the EAP to help with transitions or challenges
Child Leaving for College	<ul style="list-style-type: none"> At the end of the calendar year in which your child turns age 23, your child is no longer eligible for coverage under the Archdiocesan Plan but may be eligible for continuation coverage. 				<ul style="list-style-type: none"> Call the EAP to help with transitions or challenges
Your Death	<ul style="list-style-type: none"> If your family members wish to continue health benefits through the Archdiocesan plan, they should contact HR. 		<ul style="list-style-type: none"> Your beneficiary should contact HR about life insurance benefits. 	<ul style="list-style-type: none"> Your beneficiary should contact HR about any 403(b) and Pension Plan benefits. 	<ul style="list-style-type: none"> Your family members may call the EAP for help with your loss for up to six months after your death.
Death of a Spouse	<ul style="list-style-type: none"> Review health care coverage (elect coverage for yourself/family under the Archdiocesan plan) If you change your name or address, contact HR and complete a change form. If you participate in the Health Savings Accounts, you may want to change your contributions. 		<ul style="list-style-type: none"> Consider changing your beneficiary designation If you elected life insurance coverage for spouse, contact HR to apply for benefits. 	<ul style="list-style-type: none"> Change your beneficiary designations for your 403(b) and pension plans. 	<ul style="list-style-type: none"> Call the EAP for help with your loss and grief

Life Events and What You Should Know

Event	Health Plans	Disability Plans	Life Insurance Plans	Retirement Plans	Work/Family Benefits
Your Retirement	<ul style="list-style-type: none"> • Consider Continuation Benefits coverage. If you are at least age 60 and have at least 10 years of service with the Archdiocese, you can elect to continue your health care coverage for up to five years at COBRA rates. • <i>If you move, contact HR and complete a change form.</i> 	<ul style="list-style-type: none"> • Consider converting your life insurance to an individual policy. Contact HR for more details. 	<ul style="list-style-type: none"> • <i>Review your payout options and select one. Contact HR for pension and 403(b) information.</i> 		<ul style="list-style-type: none"> • Call the EAP to help with transitions or challenges
Name or Address Change	<ul style="list-style-type: none"> • <i>Contact HR</i> 		<ul style="list-style-type: none"> • <i>Contact AUL and provide new name and address.</i> 	<ul style="list-style-type: none"> • <i>Contact AUL and Nyhart to provide new name and address.</i> 	
Divorce/Separation	<ul style="list-style-type: none"> • Review health care coverage (elect coverage for yourself under the Archdiocesan plan or drop your spouse from the plan) • <i>If you change your name or address, contact HR and complete a change form.</i> • If your spouse loses coverage as a dependent, he/she may be eligible for continuation benefits. • If you participate in the Health Savings Account, you may want to change your contributions. 		<ul style="list-style-type: none"> • Consider changing your beneficiary designations • Consider dropping any dependent coverage you may have elected • <i>If your name or address changes, contact AUL and complete a change form.</i> 	<ul style="list-style-type: none"> • Consider changing your beneficiary designations • <i>If your name or address changes, contact Nyhart and complete a change form.</i> 	<ul style="list-style-type: none"> • Call the EAP to help with transitions or challenges