## BOARD OF PENSION AND HEALTH BENEFITS Steve Curry, Chair

Most of our full-time active and retired clergy participate in a hybrid defined benefit (DB, or traditional pension)/Defined Contribution plan. Part-time clergies are participating in a Defined Contribution plan (UMPIP). Our plans were funded by the annual conference and are administered by Wespath Benefits and Investments (Wespath), formerly known as the General Board of Pension and Health Benefits.

The annual conference, this board, and their predecessors have been good stewards of the funds entrusted to us. As a result, the Tennessee-Western Kentucky Conference has pension reserves that should protect our retirees well into the future.

The 2024 Comprehensive Benefit Funding Plan for the Tennessee-Western Kentucky Conference will be prepared and submitted to Wespath as required by the *Book of Discipline* (2016), ¶1506.6. The Tennessee-Western Kentucky Conference directs bills to local churches and other entities covered by the pension and health plan. Pension billing amounts are based on clergy's Plan Compensation (Salary + Housing). Churches with full-time clergy are billed at a rate of 13 percent of Plan Compensation and part-time are billed at nine percent.

The 2024 Past Service Rate for Pre-82 Plan is \$786.

On behalf of the Board, I want to recognize and express my appreciation to the staff: Larry, Melinda, Clare, and Alice. We could not perform our duties without their knowledge, leadership, experience, and willingness to work with us. They are dedicated and hardworking.

As chair, I want to express my respect and appreciation to members of the Board of Pension and Health. The members have been responsible, asked tough questions, taken action as needed, and balanced the need to provide the best for both our ministers and the churches in our conference.

## **Active Clergy Health Insurance**

Wespath, through Healthflex Exchange, is opening medical insurance plan options for full-time clergy and their families, billing the annual conference at a blended rate. For churches with full-time clergy on the conference plan, premiums billed to the churches will reflect that blended rate in the form of a fixed premium credit. Each church will be billed the same amount of no more than \$15,732 annually. The full-time clergy then choose the insurance plan that best fits their needs and pay the premium appropriate to their selection through a pre-tax salary reduction.

The conference will be moving to a new insurance network in 2024, we will be moving from United Healthcare (UHC) to Blue Cross Blue Shield.

Dental and vision coverage remain optional, and those premiums may also be paid in full or in part through a pre-tax salary reduction. Through Healthflex Exchange, there are three dental and two vision plan options from which the clergy may choose.

The due date for submitting premium payments is the twenty-fifth of each month, and a two percent late fee will be added for payments received after the due date. Insurance <u>may</u> be subject to cancellation after 90 days of nonpayment.

## Part I Active Clergy 2024 Insurance Premiums

Plan / Tier	Participant share (medical only)
B1000 w/ P1	
Employee Only	\$250
Employee and One Dependent	\$474
Family	\$650
CDHP/C2000 w/ P2	
Employee Only	\$209

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Employee and One Dependent	\$397
Family	\$544
C3000 w/ P2	400
Employee Only	\$83
Employee and One Dependent	\$158
Family	\$216
H2000 w/ P3	
Employee Only	\$185
Employee and One Dependent	\$351
Family	\$480
H2500 w/ P4	
Employee Only	\$51
Employee and One Dependent	\$96
Family	\$131
H5000 w/ P5	
Employee Only	\$0
Employee and One Dependent	\$0
Family	\$0
Dental Plan / Tier	Participant Cost
Passive PPO 2000	
Daniel almane	\$48
Participant	\$40
Participant+1	\$95
Participant+1 Family	·
Participant+1	\$95
Participant+1 Family	\$95
Participant+1 Family Dental PPO	\$95 \$143
Participant+1 Family Dental PPO Participant	\$95 \$143 \$40
Participant+1 Family Dental PPO Participant Participant+1	\$95 \$143 \$40 \$78
Participant+1 Family Dental PPO Participant Participant+1 Family	\$95 \$143 \$40 \$78
Participant+1 Family  Dental PPO Participant Participant+1 Family  Dental HMO	\$95 \$143 \$40 \$78 \$118
Participant+1 Family  Dental PPO Participant Participant+1 Family  Dental HMO Participant	\$95 \$143 \$40 \$78 \$118
Participant+1 Family  Dental PPO Participant Participant+1 Family  Dental HMO Participant Participant	\$95 \$143 \$40 \$78 \$118 \$16 \$30
Participant+1 Family  Dental PPO Participant Participant+1 Family  Dental HMO Participant Participant	\$95 \$143 \$40 \$78 \$118 \$16 \$30
Participant+1 Family  Dental PPO  Participant  Participant+1 Family  Dental HMO  Participant  Participant  Participant  Participant  Participant+1  Family	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53
Participant+1 Family  Dental PPO  Participant  Participant+1 Family  Dental HMO  Participant  Participant  Participant  Vision Plan / Tier	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53
Participant+1 Family  Dental PPO Participant Participant+1 Family  Dental HMO Participant Participant Participant  Participant Participant Family  Vision Plan / Tier Full Service	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53 Participant Cost
Participant+1 Family  Dental PPO  Participant Participant+1 Family  Dental HMO Participant Participant Participant  Participant  Participant  Participant  Family  Vision Plan / Tier  Full Service  Participant	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53 <b>Participant Cost</b>
Participant+1 Family  Dental PPO  Participant  Participant+1 Family  Dental HMO  Participant  Participant+1  Family  Vision Plan / Tier  Full Service  Participant+1  Participant  Participant	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53 <b>Participant Cost</b> \$8 \$13
Participant+1 Family  Dental PPO Participant Participant+1 Family  Dental HMO Participant Participant Participant  Participant Participant Family  Vision Plan / Tier Full Service Participant Participant Participant Participant Participant Participant Participant Family	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53 <b>Participant Cost</b> \$8 \$13
Participant+1 Family  Dental PPO  Participant Participant+1 Family  Dental HMO Participant Participant Participant+1 Family  Vision Plan / Tier Full Service Participant Participant Participant Participant Participant Participant Participant Participant Participant Participant+1 Family  Premier	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53 <b>Participant Cost</b> \$8 \$13 \$20
Participant+1 Family  Dental PPO  Participant  Participant+1 Family  Dental HMO  Participant  Participant  Participant+1  Family  Vision Plan / Tier  Full Service  Participant  Participant	\$95 \$143 \$40 \$78 \$118 \$16 \$30 \$53 <b>Participant Cost</b> \$8 \$13 \$20