



The Pension Boards
United Church of Christ, Inc.

475 Riverside Drive
Room 1020
New York, NY 10115-0059

p 800.642.6543
f 212.729.2701

www.pbucc.org
info@pbucc.org

September 2017

INDIANA-KENTUCKY CONF
1100 WEST 42ND STREET
SUITE 155
INDIANAPOLIS, IN 46208-3387

ID: 11894

2018 UCC Medical and Dental Benefits Plan Rate Announcement

We hope this letter finds you in good health, and in peace.

Thank you for being a part of the UCC Medical and Dental Benefits Plan, which assists thousands of clergy and lay employees, and their eligible dependents, in meeting ever-increasing health care costs.

We are pleased to report that the Plan is in a stable financial position, with adequate reserves to cover unexpected high claims and contingencies. The Plan also continues to benefit from the purchasing power created by group purchasing partnerships with the health benefit plans of other denominations.

For the 2018 Plan Year, please note the following rate actions:

- UCC Non-Medicare Health Plan: 7% increase; no change to deductibles and copays
- UCC Medicare Supplement Health Plan w/Rx: 3% increase; no change to deductibles and copays
- UCC Pharmacy Benefit Plan: no change to copays
- UCC Dental Benefit Plan: no change
- UCC Vision Benefit Plan: no change

Please note that individual employee health plan contribution rates will vary, depending upon changes to coverage tier and/or age bands as of January 1, 2018.

Please note the following benefit enhancements for the 2018 Plan Year:

- Enhanced coverage for Autism Spectrum Disorder services, including Applied Behavioral Analysis
- Coverage for dental sealants for adolescents up to age 16
- A new Member Assistance Program for Non-Medicare Health Plan participants (additional information will be mailed separately)

Information regarding all health benefits may be found on the Pension Boards' website: www.pbucc.org.

If you have any questions, please do not hesitate to contact a Health Services Representative at 1.800.642.6543, ext. 2870.

Sincerely,

REC'D OCT 02 2017

Frank Loiacono
Director, Health Plan Operations

Quarterly Rates for 2018 (Non-Medicare Standard Rates for Members Age 41 and Over)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
One adult	\$ 2,698.50	\$ 2,296.50	\$ 1,857.00
Two adults	\$ 5,352.75	\$ 4,606.50	\$ 3,720.75
One adult with child(ren)	\$ 5,263.50	\$ 4,532.25	\$ 3,665.25
Two adults with child(ren)	\$ 5,764.50	\$ 4,862.25	\$ 3,918.00

Quarterly Rates for 2018 (Non-Medicare Standard Rates for Members Age 40)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
One adult	\$ 2,024.25	\$ 1,722.75	\$ 1,392.75
Two adults	\$ 4,014.75	\$ 3,455.25	\$ 2,790.75
One adult with child(ren)	\$ 3,948.00	\$ 3,399.00	\$ 2,748.75
Two adults with child(ren)	\$ 4,323.75	\$ 3,646.50	\$ 2,938.50

Quarterly Rates for 2018 (Non-Medicare Rates for Members Age 35 through 39)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
One adult	\$ 1,430.25	\$ 1,217.25	\$ 984.00
Two adults	\$ 2,837.25	\$ 2,441.25	\$ 1,971.75
One adult with child(ren)	\$ 2,790.00	\$ 2,402.25	\$ 1,942.50
Two adults with child(ren)	\$ 3,055.50	\$ 2,577.00	\$ 2,076.75

Quarterly Rates for 2018 (Non-Medicare Rates for Members Age 30 through 34)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
One adult	\$ 1,565.25	\$ 1,332.00	\$ 1,077.00
Two adults	\$ 3,104.25	\$ 2,671.50	\$ 2,157.75
One adult with child(ren)	\$ 3,052.50	\$ 2,628.75	\$ 2,125.50
Two adults with child(ren)	\$ 3,343.50	\$ 2,820.00	\$ 2,272.50

Quarterly Rates for 2018 (Non-Medicare Rates for Members Age 25 through 29)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
One adult	\$ 1,457.25	\$ 1,239.75	\$ 1,002.75
Two adults	\$ 2,890.50	\$ 2,487.75	\$ 2,009.25
One adult with child(ren)	\$ 2,842.50	\$ 2,447.25	\$ 1,979.25
Two adults with child(ren)	\$ 3,112.50	\$ 2,625.75	\$ 2,115.75

Quarterly Rates for 2018 (Non-Medicare Rates for Members Under Age 25)

Coverage Type	Contribution Rate Plan A	Contribution Rate Plan B	Contribution Rate Plan C
One adult	\$ 944.25	\$ 804.00	\$ 650.25
Two adults	\$ 1,873.50	\$ 1,612.50	\$ 1,302.00
One adult with child(ren)	\$ 1,842.00	\$ 1,586.25	\$ 1,282.50
Two adults with child(ren)	\$ 2,017.50	\$ 1,701.75	\$ 1,371.00

Medicare Supplement Plan with Rx Rates for 2018

Medicare Supplement Plan	Quarterly Rate
Single	\$972.00
Single w/Medicare Child(ren)	\$1,846.50
2 Medicare Adults	\$1,846.50
2 Medicare Adults w/Medicare Child(ren)	\$2,430.00
Plan A	
Single w/ Non-Medicare Children	\$3,294.75
2 Medicare Adults, w/ Non-Medicare Child(ren)	\$3,789.75
2 Adults, one Non-Medicare	\$3,260.25
2 Adults, one Non-Medicare, w/ Non-Medicare Child(ren)	\$3,813.75
2 Adults, one Non-Medicare, w/ Medicare Child(ren)	\$3,408.75
Plan B	
Single w/ Non-Medicare Children	\$2,899.50
2 Medicare Adults, w/ Non-Medicare Child(ren)	\$3,303.00
2 Adults, one Non-Medicare	\$2,868.75
2 Adults, one Non-Medicare, w/ Non-Medicare Child(ren)	\$3,342.00
2 Adults, one Non-Medicare, w/ Medicare Child(ren)	\$3,108.00
Plan C	
Single w/ Non-Medicare Children	\$2,461.50
2 Medicare Adults, w/ Non-Medicare Child(ren)	\$2,775.75
2 Adults, one Non-Medicare	\$2,434.50
2 Adults, one Non-Medicare, w/ Non-Medicare Child(ren)	\$2,806.50
2 Adults, one Non-Medicare, w/ Medicare Child(ren)	\$3,069.75

**UCC Dental Benefits Plan
Standard Plan – Dental 1800**

Coverage Tier	Quarterly Rate
Single Adult	\$122.25
Two Adults	\$236.25
Single + Child(ren)	\$240.00
Two Adults + Child(ren)	\$270.00

**UCC Vision Plan
(for Service Year beginning April 1, 2018)**

Coverage Tier	Annual Rate
Single Adult	\$100.00
Two Adults	\$183.00
Single + Child(ren)	\$164.00
Two Adults + Child(ren)	\$249.00

Churches and employers that wish to transfer among Health Plans A, B, or C may do so during the Plan Selection Period, available through **November 15, 2017**, for coverage to become effective **January 1, 2018**. Please contact Member Services toll-free at **1.800.642.6543, Option 6**. There is no need to respond if no change in coverage is desired.