

ARCHDIOCESE OF DENVER WELFARE BENEFITS TRUST



2026 Open Enrollment

BENEFIT PLANS EFFECTIVE JULY 1, 2026–JUNE 30, 2027

Agenda



- ❖ Intro – Benefit Philosophy
- ❖ Open Enrollment
- ❖ Benefits Overview
- ❖ How to Enroll

Benefit Philosophy

Our Mission

We are dedicated to the healing ministry of the Catholic Church. We seek to provide our employees with a Benefits Plan designed to meet the health and welfare of employees and their families in accordance with the teachings of the Catholic Church.

Exclusion of Coverage

Certain procedures and/or treatments are not covered under any of the Plan's coverage options as they conflict with the teachings of the Catholic Church. Examples of exclusions include, but are not limited to abortion, sterilization, and contraceptives. In addition, certain procedures and/or treatments may be covered for diagnostic purposes only.

Open Enrollment Overview

- ❖ Open enrollment is an opportunity to:
 - Enroll or decline benefit elections
 - Add or change coverage for yourself or your eligible dependents
 - Submit flexible spending account elections (required every year)
 - Update your beneficiary designation(s)
- ❖ All elections will be effective **July 1, 2026–June 30, 2027**
- ❖ Open enrollment is the **only time during the year** you can make enroll, or decline coverage, *unless* you experience an IRS-defined qualifying life event, such as:
 - Marriage
 - Divorce
 - Birth or adoption of a child
 - Change in your spouse's coverage
 - Enrollment in Medicare



To request a benefits change, log into your Paylocity self-service account and click Life Event. Change requests submitted after 31 days cannot be accepted.

Open Enrollment Process

- ❖ Open Enrollment period is **April 27th – May 15th**

PASSIVE ENROLLMENT

Passive enrollment means your current benefit elections, except FSA contributions, will carry over to the 2026-2027 plan year. The Platinum dental plan will be removed this year; anyone enrolled in the Platinum dental plan will automatically be enrolled in the Gold dental plan.

If you are happy with your coverage, no action is required unless you wish to contribute to an FSA or change your dental plan.

❖ Enrollment – Election Changes

- AoD and Catholic Charities Denver utilize Paylocity with bswift
- DoCS utilize MyEnroll / BAS



Elections must be submitted by **May 15, 2026**.
Changes submitted after this date will not be accepted.

Benefit Concierge Center

All employees have access to the **Benefits Concierge Center** at no cost. From helping you enroll, to finding in-network providers, to answering benefits questions—the Benefits Concierge Center can help.

The Benefits Concierge Center serves as your personal benefits advisor. Licensed benefits experts can assist with questions related to medical, dental, vision, pharmacy, FSA, HSA, and more.

WHY SHOULD I CONTACT THE BENEFITS CONCIERGE CENTER?

- ❖ **Need help choosing your benefits?** The Benefits Concierge Center can help you find the plans that are best for you and your family.
- ❖ **Questions about your benefits?** The Benefits Concierge Center can answer your questions and point you in the right direction for additional information.
- ❖ **Need a new doctor?** The Benefits Concierge Center can help you find in-network providers.

The Benefits Concierge Center is simple, free, and available to you and your family. Contact the Benefits Concierge Center during Open Enrollment, at **(833) 990-0048** Monday through Friday from 7 a.m. to 6 p.m. MST.

Dependent Validation

- ❖ All employees who enroll their dependents in the medical, dental, or vision plans will be required to submit documentation confirming each individual meets the eligibility requirements.
- ❖ iVerifyPro will contact employees directly to request documentation to ensure only qualified dependents are enrolled in our plans.

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Benefits Overview

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Medical Plans

| Summary of Covered Benefits | Exclusive Care Plan | | High Deductible Open Network Plan | |
|--|--|--|--|--|
| | In-Network Tier 1 AoD Direct Contracted Providers ¹ | In-Network Tier 2 UHC Choice Plus | In Network UHC Choice Plus | Out of Network All Other Providers |
| Calendar Year Deductible Individual/Family | \$0 | \$6,000/\$12,000 | \$3,400/\$6,800 | \$8,000/\$16,000 |
| Out-of-Pocket Maximum Individual/Family | Includes deductible, copays, and coinsurance | | | |
| | \$3,000/\$6,000 | \$9,450/\$18,900 | \$6,000/\$12,000 | \$16,000/\$32,000 |
| Preventive Care | Plan pays 100% | Plan pays 100% | Plan pays 100% | Plan pays 100% |
| Physician Services Primary Care Physician Specialist Virtual Care Immunizations Urgent Care | Plan pays 100% \$40 copay Plan pays 100% Plan pays 100% \$50 copay | 50% after ded. 50% after ded. Plan pays 100% 50% after ded. \$50 copay | 20% after ded. 20% after ded. 20% after ded. 20% after ded. 20% after ded. | 50% after ded. 50% after ded. 50% after ded. 50% after ded. 50% after ded. |
| Mental Health Office Visit² | Plan pays 100% | Plan pays 100% | 20% after ded. | 50% after ded. |
| Lab/X-Ray Diagnostic Lab/X-Ray Advanced Radiology Imaging | Plan pays 100% \$150 copay | 50% after ded. 50% after ded. | 20% after ded. 20% after ded. | 50% after ded. 50% after ded. |
| Hospital Services Inpatient Outpatient | \$500 copay \$250 copay | 50% after ded. 50% after ded. | 20% after ded. 20% after ded. | 50% after ded. 50% after ded. |
| Emergency Room | \$300 copay | | 20% after ded. | |
| Physical, Occupational, Speech Therapy (60 visits combined max) | Plan pays 100% | 50% after ded. | 20% after ded. | 50% after ded. |
| Chiropractic (20 visits max) | Plan pays 100% | 50% (not subject to deductible) | 20% after ded. | 50% after ded. |
| Prescription Drugs | Optum Premium Formulary | | | |
| Tier 1: Generic Tier 2: Preferred Brand Tier 3: Non-Preferred Brand Tier 4: Specialty Mail Order (90-day supply) | \$10 copay \$30 copay \$50 copay 20% up to \$200 max 2x retail copay | | 20% after ded. 20% after ded. 20% after ded. 20% after ded. 20% after ded. | Not covered |

***Take note that Mental Health visits are covered 100% for both Tier 1 and 2 on the Exclusive Care Plan!**



Medical Plans – Exclusive Care Plan

TIER 1

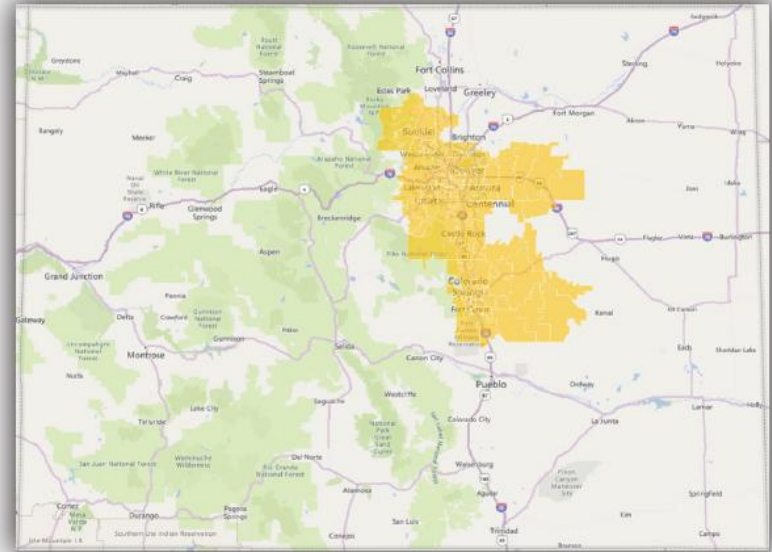
- Doctors are affiliated with CommonSpirit, Advent Health, and Children’s Hospital of Colorado.
- There is **NO ANNUAL DEDUCTIBLE** to meet when you choose a Tier 1 provider for your care.
- Most services are **COVERED IN FULL** by the plan after you pay a fixed dollar copay.

TIER 2

- Access a wider network of UnitedHealthcare Choice Plus providers.
- You will pay for most services until you reach your deductible (\$6,000 for individuals and \$12,000 for families).
- After you meet your deductible, you may pay coinsurance, which is your share of the costs of a covered service.

Network Map

Highlighted below are the eight counties where you can seek care within the Tier 1 and Tier 2 network.



OUTSIDE OF THE EXCLUSIVE CARE PLAN TIER 1 AREA

If you seek care outside of Denver, Jefferson, Arapahoe, El Paso, Adams, Douglas, Boulder, and Broomfield counties, you may go to any UnitedHealthcare Choice Plus provider. Your care will be covered at the Tier 1 coverage level.



- ❖ Below are the monthly costs for the medical plans.
 - The amount you pay for coverage is deducted from your paycheck on a pre-tax basis. Only those Religious VOP with the Archdiocese of Denver will have post-tax deductions.

| Level of Coverage | Exclusive Care Plan | | High Deductible Open Network Plan | |
|-----------------------|-----------------------|-----------------|-----------------------------------|-----------------|
| | Premium Employer Pays | Premium You Pay | Premium Employer Pays | Premium You Pay |
| Employee Only | \$862 | \$94 | \$932 | \$114 |
| Employee + Spouse | \$1,499 | \$496 | \$1,588 | \$595 |
| Employee + Child(ren) | \$1,467 | \$484 | \$1,552 | \$582 |
| Employee + Family | \$2,534 | \$836 | \$2,681 | \$1,003 |



Health Savings Account

- ❖ If you enroll in the High Deductible Open Network Plan, you may be eligible to open and contribute to a Health Savings Account through a **bank of your choice**.

An HSA is a savings account that you can use to pay out-of-pocket health care expenses with pre-tax dollars.

2026 IRS HSA CONTRIBUTION MAXIMUMS

Contributions to an HSA cannot exceed the IRS allowed annual maximums.

- **Individuals:** \$4,400
- **All other coverage levels:** \$8,750

If you are age 55+ by December 31, 2026, you may contribute an additional \$1,000.

HSA ELIGIBILITY

You are eligible to fund an HSA if:

- You are enrolled in the Qualified High-Deductible Health Plan.

You are **NOT** eligible to fund an HSA if:

- You are covered by a non-HSA eligible medical plan, healthcare FSA, or health reimbursement arrangement.
- You are eligible to be claimed as a dependent on someone else's tax return.
- You are enrolled in Medicare, TRICARE, or TRICARE for Life.

Refer to **IRS Publication 969** for additional eligibility details. If you are over age 65, please contact Human Resources.

Flexible Spending Accounts

- ❖ There are two Flexible Spending Account (FSA) options offered through UMR:

- **Healthcare FSA (Exclusive Care Plan Only)**



- The healthcare FSA allows you to set aside pre-tax money for eligible out-of-pocket expenses such as office visit and Rx copays, vision care, dental expenses.
- The healthcare FSA maximum contribution is **\$3,400** for the 2026–2027 plan year.

- **Dependent Care FSA (Daycare Expenses)**



- The dependent care FSA allows you to set aside pre-tax money for day care expenses to allow you and your spouse to work or attend school full-time.
- The dependent care FSA maximum contribution is **\$7,500** for the 2026–2027 plan year, if you are married and file a joint return or if you file a single or head of household return.
 - If you are married and file separate returns, then the maximum contribution is \$3,750 for the 2026–2027 plan year.

You will **NOT** receive a debit card to pay for FSA expenses. You will be responsible for submitting your expenses to UMR for reimbursement.

The Plan year runs from July 1, 2026 through June 30, 2027.



Flexible Spending Accounts

HOW TO USE AN FSA

CONTRIBUTE

Decide how much to contribute to your FSA on a plan year basis up to the maximum allowable amounts.

Amounts will be automatically calculated and deducted based on your benefit elections for the 2026–2027 plan year.

1

PAY

To pay for your eligible expenses, you must submit a claim form and a bill or itemized receipt from the provider to UMR. Keep all receipts in case UMR requires you to verify the eligibility of a purchase. You will not receive a debit card.

2

USE IT OR LOSE IT

FSA funds are use it or lose it.

Archdiocese of Denver:

You must submit all reimbursement request forms by September 30, 2027.

Catholic Charities of Denver and Diocese of Colorado Springs:

You must submit all reimbursement request forms by October 31, 2027.

3

Please take note of the deadlines for submission of expenses for reimbursement.

Tools & Resources

- ❖ UMR is our administrator for:
 - Medical coverage
 - Flexible Spending & Dependent Care

- ❖ Access your plan information anytime at [umar.com](https://www.umar.com).
 - Search network providers and facilities
 - View your benefits and claims
 - Estimate costs for services with myHealthcare Cost Estimator
 - Wellness information

❖ UMR Plan Advisors – Your first stop to all your benefit needs:



- Claims
 - Find a provider
 - Make a doctor's appointment
 - Verifying pre-authorization
- Connect with UMR Plan Advisors (7am to 6pm MST) by calling **800-207-3172**



Virtual Care - MyCatholicDoctor

- ❖ MyCatholicDoctor gives you access 24 hours a day, seven days a week to a faithful medical professional through the convenience of phone or video visits.
- ❖ Connect with a physician by visiting mycatholicdoctor.com or calling **888-822-8436**.



A virtual office visit for non-emergency care



Connect by phone or video



24/7 assistance in 10 minutes



A network of qualified family physicians



Prescriptions sent to your pharmacy



Low-cost alternative to ER or urgent care

Prescription Drug Plan

- ❖ Prescription drug coverage is included with each medical plan option and provided through UMR/OptumRx.

OptumRx Prescription Drug Formulary

- ❖ The formulary is Optum's Premium Formulary. A formulary is a list of drugs that have been selected from their drug class as being the most clinically effective and cost-efficient drugs for a specified condition.
- ❖ Visit https://www.optumrx.com/oe_premium/landing for a fast, safe and secure way to see if your prescription is covered.
- ❖ If your prescription is excluded from the formulary, please follow the steps for your provider to submit for Prior Authorization. This will likely be denied at which point you will have your provider submit an appeal showing medical necessity.

Pre-Authorization

- ❖ Certain drugs, such as compound drugs, opioids, and some specialty medications require pre-authorization.
 - For more information, contact OptumRx at **877-559-2955**

Prescription Savings – Free Benefit!

Need help spending less on prescriptions? Rx Savings Solutions has you covered.

Archdiocese of Denver brings you a trusted service—created and run by pharmacists—that can help you take control of your prescription drug costs.

HOW IT WORKS

1. RxSS pharmacists find equally effective, affordable medications covered by your insurance.
2. Your online account shows any lower-cost prescriptions available and lets you compare prices.
3. Switch to a more affordable option with ease. We'll get your doctor's approval and work with your pharmacy to get it done for you.
4. We'll contact you anytime you can save on prescriptions.



ACTIVATE OR LOG INTO YOUR ACCOUNT TO PAY LESS FOR PRESCRIPTIONS

Scan the QR code to download the RxSS app and activate your account.



Dental Plans



- ❖ There will be two dental plans offered and monthly contributions will remain the same.
- ❖ Locate a Guardian network provider at guardianlife.com

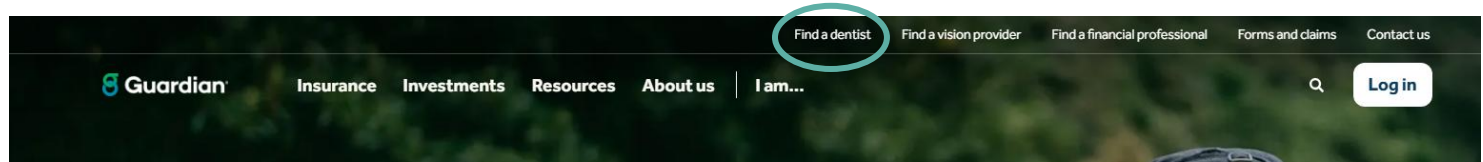
| Summary of Covered Benefits | Gold | | Silver | |
|---|-------------------|----------------|----------------|----------------|
| | In Network | Out of Network | In Network | Out of Network |
| Calendar Year Deductible Individual/Family | \$25/\$75 | \$50/\$150 | \$25/\$75 | |
| Calendar Year Benefit Maximum | \$2,000 | \$750 | \$750 | |
| Preventive Care (Oral exams, cleanings, bitewings) | Deductible waived | | | |
| | Plan pays 100% | 20% | Plan pays 100% | Plan pays 100% |
| Basic Services (Periodontal services, fillings, root canals, full mouth x-rays) | 20% after ded. | 40% after ded. | 20% after ded. | 20% after ded. |
| Major Services (Bridges, crowns, dentures) | 50% after ded. | Not covered | Not covered | |
| Orthodontia Services | 40% | Not covered | Not covered | |
| Orthodontia Lifetime Maximum | \$1,500 | N/A | N/A | |
| Level of Coverage | Gold | | Silver | |
| Employee Only* | \$45 | | \$23 | |
| Employee + Spouse* | \$63 | | \$35 | |
| Employee + Child(ren)* | \$63 | | \$35 | |
| Employee + Family* | \$102 | | \$56 | |

*Employee contributions vary. Please contact Human Resources for your specific cost.

Find a Dental Provider

Smile. Finding a dentist in the Guardian network is easy.

1. Visit guardianlife.com
2. Select 'Find a Dentist' then 'Find a Dentist' again
3. Sort by name, distance and specialty



Dental benefits bought through your workplace

Search for a network dentist if your dental plan is through an employer.

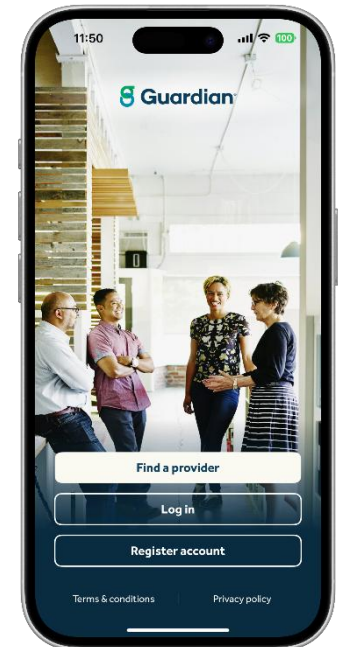
[Find a dentist →](#)

You will NOT receive a physical ID card

ID card mobile app

- Search by name or location
- View in map and get directions
- View, print or email ID cards

Download the Guardian app on your Android or iPhone and find a dentist on the go. Visit guardianlife.com to download the app.



Vision Plan



- ❖ Locate a VSP network provider at [vsp.com](https://www.vsp.com).
- ❖ Access to retail chains: Costco Optical, Pearle Vision, Sam's Club Optical, Visionworks, and Walmart.

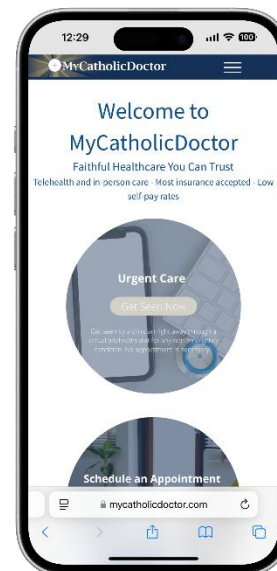
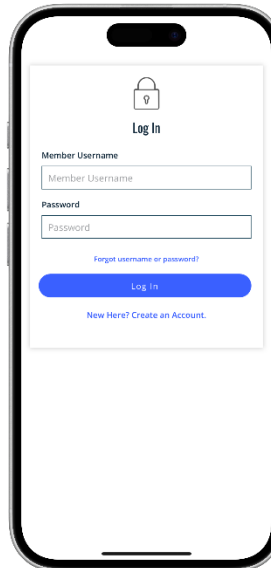
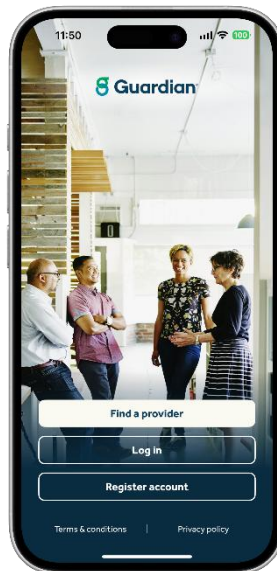
| Summary of Covered Benefits | Vision | |
|--|---|--------------------------------|
| | In Network | Out of Network |
| Eye Exam (Every 12 months) | \$15 copay | Up to \$35 allowance |
| Standard Plastic Lenses (Every 12 months) Single/Bifocal/Trifocal | \$15 copay | Up to \$25/\$40/\$55 allowance |
| Frames (Every 24 months) | \$180 allowance + 20% off balance | Up to \$45 allowance |
| Contact Lenses (Every 12 months in lieu of standard plastic lenses) | \$180 allowance | Up to \$105 allowance |
| Light Care | Members can use their benefit to purchase ready-made non-prescription blue light filtering glasses or ready-made non-prescription sunglasses. | N/A |

| Level of Coverage | Vision | | |
|-----------------------|------------|---------------|---------|
| | Total Cost | Employer Pays | You Pay |
| Employee Only | \$8 | \$7 | \$1 |
| Employee + Spouse | \$17 | \$14 | \$3 |
| Employee + Child(ren) | \$18 | \$15 | \$3 |
| Employee + Family | \$25 | \$20 | \$5 |

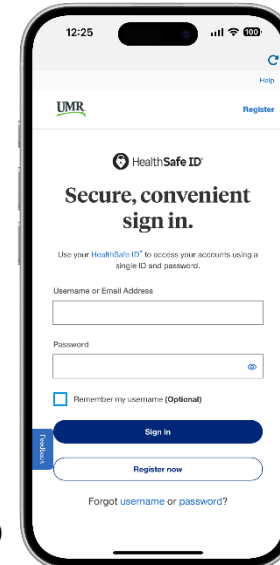


Mobile Apps

- ❖ There are several mobile apps available to help you manage all your benefit needs.
 - Search for providers near you
 - Access your ID cards
 - View your benefits and claims



*MyCatholicDoctor does not have an app but can be accessed in your mobile browser (Safari, Chrome, etc.)



Basic Life and AD&D Insurance

❖ The Archdiocese of Denver Welfare Benefits Trust automatically provides basic life and AD&D insurance for all benefits-eligible employees **at no cost** through Sun Life.

- **Employee life and AD&D benefit:** \$50,000
- **Spouse life benefit:** \$2,000
- **Dependent children life benefit:** \$2,000 (up to age 26)
- **Spouse AD&D benefit:** \$500
- **Dependent children AD&D benefit:** \$500



Benefits will reduce to 65% at age 65 and to 50% at age 70.

Please be sure to keep your beneficiary designation(s) up to date in Paylocity.

Voluntary Life and AD&D Insurance

- ❖ You have the option to purchase supplemental life and AD&D for yourself, your spouse, and your dependent children through Sun Life.

- **Employee life benefit:** \$10,000 increments up to \$500,000 or 5x salary, whichever is less

Guarantee issue: \$250,000



- **Spouse life benefit:** \$5,000 increments up to \$50,000 or 100% of the employee's election, whichever is less

Guarantee issue: \$50,000

- **Dependent children life benefit:** Birth to 6 months: \$2,000; 6 months to age 26: \$2,000 increments up to \$10,000

Guarantee issue: \$10,000

- ❖ AD&D coverage is included automatically and will mirror the voluntary life election amount.

- ❖ Benefits reduce to 50% at age 70.

Note: If you elect supplemental coverage when you're first eligible to enroll, you may purchase up to the guarantee issue amount(s) without completing a statement of health (evidence of insurability). If you do not enroll when first eligible, and choose to enroll during a subsequent annual open enrollment period, you will be required to submit evidence of insurability for any amount of coverage. Coverage will not take effect until approved by Sun Life.

Disability Insurance

- ❖ Disability insurance is designed to help you meet your financial needs if you become unable to work due to an illness or injury.
- ❖ Automatically provided to all full-time lay employees **at no cost.**

Short-Term Disability



- **Benefit:** 60% of base weekly pay up to \$1,500 per week
- **Elimination period:** 14 days
- **Benefit duration:** Up to 26 weeks

Long-Term Disability



- **Benefit:** 60% of base monthly pay up to \$10,000 per month
- **Elimination period:** 26 weeks
- **Benefit duration:** Social Security normal retirement age

Employee Assistance Program

- ❖ This program can help you and your family find solutions and restore your peace of mind.
- ❖ You and your family members can utilize the telephonic counseling and up to **three** face-to-face visits per issue, per year with a licensed counselor **at no cost**.
- ❖ Confidential assistance is available for the following personal and work-life situations:



- Legal concerns
- Parenting, child, senior, and pet care
- Emotional and work-life counseling
- Chronic illness



- Stress, family, or marital conflicts
- Depression
- Financial consultation

- ❖ Support is available 24/7/365 by phone **877-595-5281** or online at **guidanceresources.com** (web ID: **EAPBusiness**).



Save up to 60% on entertainment events and online shopping

Working Advantage

Gain access to exclusive discounts for movie theatres, movie rentals, theme parks, ski tickets, Broadway theatre, special family events, online shopping, hotel stays and much more. Click here to register and take advantage of discount offers of up to 60 percent. For questions, call Working Advantage at 1-800-565-3712.

Voluntary Benefits

- ❖ You have the option to purchase voluntary critical illness and accident insurance through Sun Life.



- Critical illness insurance helps with the cost of out-of-pocket expenses not covered by your medical insurance
- Eligible expenses include: travel, food, lodging, child care, household assistance
- Wellness benefit



- Accident insurance provides you with cash benefits in the event of an accident
- Benefits are paid for an accident such as: emergency room treatment, ambulance, x-rays, hospital admission
- Wellness benefit

New – SmartConnect, Medicare Education

SmartConnect assists with educating employees on all aspects of Medicare plans and enrollment, including:

- ❖ Medicare plan comparison and selection
- ❖ Medicare enrollment
- ❖ Ongoing support with plans and claims

This service is available to all employees and their families!

Including active Medicare-eligible employees, those transitioning to retirement from the group health plan, and those helping friends and loved ones as they transition to Medicare.

Next Steps – AoD and Catholic Charities

1. Log into your Payroll Self Service Portal
2. Navigate to HR & Payroll
3. Select “Bswift Benefits”
4. Click “Start Your Enrollment” and review your personal information. Enter a home email address if a work email isn’t populated or select Preferred Email as “None”. Then check “I agree” and “Continue”.
5. Review any family information for accuracy and/or add any dependents. Then check “I agree” and “Continue”.
6. After reading each benefit plan, choose your coverage, then select either to enroll or waive. When all plans have been enrolled in or waived out of, click “Continue”.
7. Add beneficiaries as applicable, click “Continue”.
8. Review all information and/or elections. To complete enrollment, click “I agree, and I’m finished with my enrollment.” Then “Complete Enrollment”.

Benefit elections must be submitted through Paylocity by **May 15, 2026**

Next Steps – Colorado Springs

1. Log into myenroll.com.
2. Select “Get Started Here!” at the top of the page or select “Enroll.” In the drop-down box, select “Enrollment Wizard.”
Note: The dates of open enrollment are at the top of the page.
3. Click on the green button “Begin Your Enrollment.”
4. Complete each page of the enrollment wizard. Click “I accept and Confirm.”
5. Print two copies of your summary statement—one copy for your records and one copy for your payroll department.

Please note: Benefit information and annual notices can be found in the Library in MyEnroll.

Benefit elections must be submitted through MyEnroll by **May 15, 2026**

Open Enrollment Recap



❖ **Passive Enrollment**

- Your benefits **will** carry over to 2026/2027. Make changes or contribute to an FSA now!
 - If you are happy with your benefits, no action is needed unless you wish to contribute to an FSA which requires elections be made at Open Enrollment each year regardless.
 - Anyone currently enrolled in the Platinum dental plan will be automatically moved to the Gold dental plan, unless action is taken during open enrollment.
- We strongly encourage every employee to log in to verify beneficiaries.

❖ **Benefit elections are due [May 15, 2026](#)**

- Elections submitted after this date cannot be accepted.

**ARCHDIOCESE OF DENVER
WELFARE BENEFITS TRUST**