The Episcopal Diocese of Southwest Florida

DENOMINATIONAL HEALTH PLAN POLICY

Adopted by Diocesan Council on January 12, 2013

Whereas, Resolution A177 adopted by the 2009 General Convention of the Episcopal Church states employers are required to provide all eligible clergy and lay employees with equal access to and parity of funding for healthcare benefits administered by CPF and provided through the Medical Trust. An eligible employee is someone who is scheduled and will be paid for at least 1,500 hours of work annually for any domestic diocese, parish, mission, or other ecclesiastical organization or body subject to the authority of the Church.

Whereas, the full implementation of the Denominational Health Plan must be completed no later than January 1, 2013.

Whereas, Resolution B026 adopted by the 2012 General Convention of the Episcopal Church further describes the implementation of the Denominational Health Plan.

The following Denominational Health Plan Policy is adopted by the Diocesan Council of the Diocese of Southwest Florida:

1. Institutions and schools under the authority of the church (as defined by Church Pension Group) are not required to participate in the Denominational Health Plan, but may opt in according to Medical Trust rules.

2. Healthcare benefits may be provided to domestic partners, but a congregation will not be required to provide such benefits.

3. The “diocesan minimum benefit” is defined as single-level coverage with 80% employer contribution to the premium cost of the “base plan” as defined annually in the diocesan healthcare plan offerings. This requirement will be implemented no later than December 31, 2015.

4. A variety of health plan structures and providers will be offered annually, along with a discussion and clarification of the “base plan”.

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2009 General Convention Resolution A177
Establishing a Denominational Health Plan

Resolved, the House of Deputies concurring, That this church establish The Denominational Health Plan of this church for all domestic dioceses, parishes, missions and other ecclesiastical organizations or bodies subject to the authority of this church, for clergy and lay employees who are scheduled to work a minimum of 1,500 hours annually, in accordance with the following principles:

1. The Denominational Health Plan shall be designed and administered by the Trustees and officers of The Church Pension Fund, following best industry practices for comparable plans;
2. The Denominational Health Plan shall provide that, subject to the rules of the plan administrator, each diocese has the right to make decisions as to plan design options offered by the plan administrator, minimum cost-sharing guidelines for parity between clergy and lay employees, domestic partner benefits in accordance with General Convention Resolution 1997-C024 and the participation of schools, day care facilities and other diocesan institutions (that is, other than the diocese itself and its parishes and missions) in The Denominational Health Plan;
3. The Denominational Health Plan shall provide benefits that are comparable in coverage to those benefits currently provided by the domestic dioceses and parishes of this church;
4. The Denominational Health Plan shall provide equal access to health care benefits for eligible clergy and eligible lay employees;
5. The Denominational Health Plan shall provide benefits through The Episcopal Church Medical Trust, which shall be the sole plan sponsor for such benefits and continue to be operated on a financially sound basis;
6. The Denominational Health Plan shall have a church-wide advisory committee that is representative of the broader church and appointed by The Church Pension Fund, and such church-wide advisory committee shall receive an annual report about the status of The Denominational Health Plan;
7. For purposes of this Resolution, the term "domestic" shall mean ecclesiastical organizations and bodies located in the United States, including the Dioceses of Puerto Rico and Virgin Islands;
8. The Church Pension Fund shall continue to work with the Dioceses of Colombia, Convocation of American Churches in Europe, Dominican Republic, Ecuador Central, Ecuador Litoral, Haiti, Honduras, Micronesia, Taiwan and Venezuela to make recommendations with respect to the provision and funding of health care benefits of such dioceses under The Denominational Health Plan; and
9. The implementation of The Denominational Health Plan shall be completed as soon as practicable, but in no event later than by the end of 2012; and be it further

Resolved, That Canon I.8 shall be amended as follows:

Sec. 1. The Church Pension Fund, a corporation created by Chapter 97 of the Laws of 1914 of the State of New York as subsequently amended, is hereby authorized to establish and administer the clergy pension system, including life, accident and health benefits, of this Church, substantially in accordance with the principles adopted by the General Convention of 1913 and
approved thereafter by the several Dioceses, with the view to providing pensions and related benefits for the Clergy who reach normal age of retirement, for the Clergy disabled by age or infirmity, and for the surviving spouses and minor children of deceased Clergy. The Church Pension Fund is also authorized to establish and administer the denominational health plan of this Church, substantially in accordance with the principles adopted by the General Convention of 2009 in Resolution A177, with the view to providing health care and related benefits for the eligible Clergy and eligible lay employees of this Church, as well as their eligible dependents.

Sec. 3. For the purpose of administering the pension system, The Church Pension Fund shall be entitled to receive and to use all net royalties from publications authorized by the General Convention, and to levy upon and to collect from all Parishes, Missions, and other ecclesiastical organizations or bodies subject to the authority of this Church, and any other societies, organizations, or bodies in the Church which under the regulations of The Church Pension Fund shall elect to come into the pension system, assessments based upon the salaries and other compensation paid to Clergy by such Parishes, Missions, and other ecclesiastical organizations or bodies for services rendered currently or in the past, prior to their becoming beneficiaries of the Fund. For the purpose of administering the denominational health plan, The Church Pension fund shall determine the eligibility of all Clergy and lay employees to participate in the denominational health plan through a formal benefits enrollment process, and The Church Pension Fund shall be entitled to levy upon and collect contributions for health care and related benefits under the denominational health plan from all Parishes, Missions, and other ecclesiastical organizations or bodies subject to the authority of this Church with respect to their Clergy and lay employees.
Resolved, the House of Deputies concurring, That the 77th General Convention acknowledges and commends the 94% of domestic dioceses (United States, Puerto Rico and the U.S. Virgin Islands) which have already enrolled in the Denominational Health Plan, and further commends those dioceses which have achieved parity between clergy and lay employees; and be it further

Resolved, That the 77th General Convention reaffirms that all domestic dioceses, parishes, missions, and other ecclesiastical organizations or bodies subject to the authority of this church be enrolled in the Episcopal Church Medical Trust by December 31, 2012; and be it further

Resolved, that the 77th General Convention commends the Episcopal Church Medical Trust for progress made toward containing health care premium costs, and urges it to continue to reduce the disparity in those costs among dioceses; and be it further

Resolved, that the Episcopal Church Medical Trust continues to explore alternative strategies to arrive at a more equitable sharing of health care premium costs, including alternative means of achieving such equity by December 31, 2015, and that the Episcopal Church Medical Trust make an annual written report to the Executive Council, the House of Bishops, the Board of Directors of the Episcopal Church Medical Trust, and the Board of Trustees of the Church Pension Fund detailing continuing progress in containment of costs and achievement of such equity; and be it further

Resolved, that within each diocese, parity in cost-sharing shall be achieved between their clergy and lay employees as soon as possible, but no later than December 31, 2015.