



Baltimore-Washington Conference

The United Methodist Church

OFFICE OF HUMAN RESOURCES AND BENEFITS

WWW.BWCUMC.ORG

TEL. 410-309-3400 | 800-492-2525

Memorandum

To: Pastors, Finance Chairs, S/PPRC Chairs, and Treasurers
From: Francess Tagoe, Director, Human Resources & Benefits
Date: July 1, 2016
Re: **2017 Pension Information and HealthFlex Premium**

As you prepare for charge conference, this information is to help you calculate the pastor’s benefits for the 2017 fiscal year. The Pension formula for the year 2017 remains the same. The Denominational Average Compensation (DAC) for 2017 is **\$68,876**. Due to the increase in the DAC you will notice an increase in CRSP-DB calculation for clergy whose total compensation is over the DAC.

Clergy Retirement Security Plan (CRSP) and **Comprehensive Protection Plan (CPP)** is based on a percentage of “plan compensation” (plan compensation is the “cash salary¹” plus “other compensation items paid by the church on behalf of the Pastor²” plus either the housing allowance or 25% of cash salary for living in the parsonage). ³ **United Methodist Personal Investment Plan (UMPIP)** is an optional plan (personal savings). ⁴ Calculation/Billing for these pension plans is as follows:

CRSP - Defined Contribution (DC)	3% of Plan Compensation
CRSP - Defined Benefit (DB)	12% of Plan Compensation-- limited by the Denominational Average Compensation (DAC) \$68,876 for 2017
CPP (death & disability benefit)	Fulltime Members - 3% of Plan Compensation – limited by 2xDAC=\$137,752 <i>Part Time Local Pastors – Not eligible</i>
UMLife Option (New in 2017)	Death & disability benefits for Full Members appointment to 50% or 25% - 3% of Plan Compensation
UMPIP (personal savings - optional)	Clergy MUST contribute at least 1% of Plan Compensation to be eligible for the CRSP match.

¹ Cash Salary = Cash salary plus these optional items: Self Employment Tax payments, Other Cash Compensation (bonuses or gifts), Equitable Compensation support (Unified Funding Task Force), Compensation Support from the Conference.

² Other Compensation items paid by the Church on behalf of the Pastor = Optional benefits such as: Before or after tax United Methodist Personal Investment Plan (UMPIP), Flexible Spending accounts (Medical Reimbursement or Dependent Care), Pastor’s portion of Health Insurance Premium and other medical contribution.

³ UMPIP is an optional benefit and we strongly encourage Pastor’s to participate.

⁴ Funding for CRSP (DC/DB) CPP/UMLife Option is the responsibility of the Church.



Baltimore-Washington Conference

The United Methodist Church

OFFICE OF HUMAN RESOURCES AND BENEFITS

WWW.BWCUMC.ORG

TEL. 410-309-3400 | 800-492-2525

HEALTHFLEX EXCHANGE 2017 RATE SHEET

These premiums may increase or decrease based on participant's option at Annual Election – participants now have the option to upgrade their dental and vision plans at additional cost

All plans include current DENTAL and VISION Plans

OPTION 1 - B1000/P1 HRA/HSA-NOT APPLICABLE	Medical & Dental Plan Sponsor Expense per Plan Type:	BWC DEFINED CONTRIBUTION	Participant's Monthly Premium
BWC Participant Only	\$651.00	\$542.00	\$109.00
BWC Participant + 1 (1+1=2)	\$1,381.00	\$997.00	\$384.00
BWC Participant/Family (3 or more)	\$1,975.00	\$1,425.00	\$550.00



BWC DEFAULT PLAN

OPTION 2 - CDHP C2000/P2 "GOLD" HRA: \$1000/\$2000 HSA-NOT APPLICABLE	Medical & Dental Plan Sponsor Expense per Plan Type:	BWC DEFINED CONTRIBUTION	Participant's Monthly Premium
BWC Participant Only	\$622.00	\$542.00	\$80.00
BWC Participant/Child (1+1=2)	\$1,323.00	\$997.00	\$326.00
BWC Participant/Spouse (1+1=2)	\$1,323.00	\$997.00	\$326.00
BWC Participant/ChildREN (3 or more)	\$1,892.00	\$1,425.00	\$467.00
BWC Participant/Family (3 or more)	\$1,892.00	\$1,425.00	\$467.00

OPTION 3 - CDHP C3000/P2 "SILVER" HRA: \$250/\$500 HSA-NOT APPLICABLE	Medical & Dental Plan Sponsor Expense per Plan Type:	BWC DEFINED CONTRIBUTION	Participant's Monthly Premium
BWC Participant Only	\$554.00	\$542.00	\$12.00
BWC Participant + 1 (1+1=2)	\$1,177.00	\$997.00	\$180.00
BWC Participant/Family (3 or more)	\$1,684.00	\$1,425.00	\$259.00



Baltimore-Washington Conference

The United Methodist Church

OFFICE OF HUMAN RESOURCES AND BENEFITS

WWW.BWCUMC.ORG

TEL. 410-309-3400 | 800-492-2525

OPTION 4 - HDHP H1500/P3 "GOLD" HRA: NOT APPLICABLE HSA- \$750/\$1500	Medical & Dental Plan Sponsor Expense per Plan Type:	BWC DEFINED CONTRIBUTION	Participant's Monthly Premium
BWC Participant Only	\$619.00	\$542.00	\$77.00
BWC Participant + 1 (1+1=2)	\$1,313.00	\$997.00	\$316.00
BWC Participant/Family (3 or more)	\$1,879.00	\$1,425.00	\$454.00

OPTION 5 - HDHP H2000/P4 "SILVER" HRA: NOT APPLICABLE HSA- \$500/\$1000	Medical & Dental Plan Sponsor Expense per Plan Type:	BWC DEFINED CONTRIBUTION	Participant's Monthly Premium
BWC Participant Only	\$588.00	\$542.00	\$46.00
BWC Participant + 1 (1+1=2)	\$1,247.00	\$997.00	\$250.00
BWC Participant/Family (3 or more)	\$1,785.00	\$1,425.00	\$360.00

OPTION 6 - HDHP H3000/P5 "BRONZE" HRA: NOT APPLICABLE HSA- \$0/\$0	Medical & Dental Plan Sponsor Expense per Plan Type:	BWC DEFINED CONTRIBUTION	Participant's Monthly Premium
BWC Participant Only	\$503.00	\$542.00	-\$39.00
BWC Participant + 1 (1+1=2)	\$1,066.00	\$997.00	\$69.00
BWC Participant/Family (3 or more)	\$1,526.00	\$1,425.00	\$101.00

BWC Clergy and Lay Staff:

Current HealthFlex participants with a Participant/Child and Participant/Children coverage will be grandfathered in the DEFAULT plan ONLY. If you terminate your dependent coverage and have to re-enroll, you will be enrolled in the new tier type.

The Tier type for all newly eligible participant as of January 1, 2017 will be as follows:

- BWC Participant Only
- BWC Participant + 1 (1+1=2)
- BWC Participant/Family (3 or more)

Church Monthly Rate per Clergy - \$840.00