



## CONTINUATION OF HEALTH INSURANCE COVERAGE SUMMARY (WEX HEALTH ADMINISTRATION)

You may continue the United Healthcare *medical, prescription, Delta dental, and vision* benefits that are in force for you and/or your dependents upon the occurrence of certain events that would normally result in termination of coverage under the Plan. WEX Health administers Continuation of Coverage options on behalf of the Archdiocese.

### Continuation of Coverage Provisions

Any individual who has been covered under this Plan for *3 months or longer* may elect to continue coverage. Anyone who is covered under another group health care plan at the time he or she becomes eligible for our Continuation of Coverage Plan or even is eligible for Medicare cannot participate in this Continuation of Coverage Plan. Anyone who is covered under a signed separation/severance agreement can participate in the Continuation of Coverage plan for the limited time of the agreement. You may continue medical, prescription, dental, and vision coverage under the Plan for yourself and your covered dependents for up to 18 months if your coverage terminates for any of the following reasons:

- If your employment terminates for any reason other than your gross misconduct; or
- If your working hours are reduced and you are no longer considered eligible for coverage under the Plan.

Continuation coverage may extend from 18 months to 29 months for a participant and/or dependent who is disabled (as defined by the Social Security Administration) at the time of termination or reduction of hours, provided that such participant and/or dependent has given notice of the disability within 60 days of the Social Security determination and requested the extended continuation period before the end of the first 18 months. Your dependents' coverage may be continued for up to 36 months if their coverage terminates for any of the following reasons:

- If you should die; or
- If you become divorced or legally separated from your spouse; or
- If your dependent child no longer meets the definition of an eligible dependent child under the Plan.
- If employees terminate after Medicare entitlement, the spouse/dependents are entitled to Continuation of Coverage for the longer of:
  - 18 months from the date of the qualifying event (employee resignation/termination)
  - 36 months from the date the employee became entitled to Medicare.

However, if the employee terminates employment just one month before Medicare entitlement, the spouse and dependents are entitled to Continuation of Coverage for up to 18 months.

### Qualifying Events for Mid-Year Changes

A qualified Continuation of Coverage participant receives the same benefits and choices such as the right to make changes during the open enrollment period or other qualifying events within 31 days of the event.

### When Continued Coverage Ends

**The continued coverage will end for any person when:**

- The cost of continued coverage is not paid on or before the date it is due; or
- That person becomes entitled to Medicare due to their age or their Social Security Medicare disability approved benefit; or
- The Plan terminates for *all* employees; or
- That person has been in the continued coverage plan for applicable maximum timeframe.
- **That person submits a cancellation form. Coverage will terminate at the end of the month.**
- **Premiums are not pro-rated. Coverage is eligible in full month increments.**

### Notice of Continuation

WEX Health administers Continuation of Coverage on behalf of the Archdiocese.

Once the Archdiocese is notified of an employee's termination from an employer, WEX Health will be extend health coverage under the Continuation of Coverage or the Early Retiree plan, (under your current plan and tier of coverage).

Employees will be sent a Welcome Letter directly from WEX Health with information about electing coverage and submitting premium payments.

WEX also has a member services line to answer all of your questions about your plan and any administrative questions. The WEX Health member services number is 1-866-451-3399

Rates outlined on next page.

**UHC Medical Plan Rates: 7/1/2025:**

<b>Comprehensive Plan:</b>		<b>Base Plan (HDHP/HSA):</b>	
employee only:	\$ 823	employee only:	\$ 620
employee+one:	\$1,818	employee+one:	\$1,370
employee+family	\$2,457	employee+family	\$1,851