



SUMMARY OF BENEFITS*

RCAB Lay Benefits Office

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BENEFIT	ELIGIBILITY	ORG. PAYS	EMP. PAYS	SUMMARY
Medical Blue Cross BlueShield of MA	1st of month following date of hire	Check in MyEnroll or consult payroll administrator		Two PPO Plan options and a High Deductible Health Plan with HSA. Medical coverage administered by Blue Cross Blue Shield of MA.
Prescription Drugs CVS/Caremark Pharmacy Benefit Manager	Same as Medical enrollment date	Included in medical rates		Pharmacy co-pays: Generic, Branded, Non-Formulary rates vary by plan; Maintenance Choice provides a 3-month supply for 2 months of co-pays
Nurse Advice Line	Same as Medical enrollment date	Included in medical rates		Talk to a Registered Nurse to help you make informed decisions about your family's health 24 hours a day, 7 days a week 1-888-247-BLUE
Dental Delta Dental	1st of month following date of hire	Check in MyEnroll or consult payroll administrator		In-Network coverage/services 100% preventative svcs; 80% restorative svcs; 50% major restorative svcs; \$50 deductible; max \$1,500 per person, per calendar year
401(k) Plan TIAA	New hires are automatically enrolled with a 3% pre-tax deferral. Employer contributions begin after 1 year of benefit-eligible service.	Up to 4% of eligible wages as employer contribution	Up to annual legal limits. Check with your location's business office to confirm that this benefit applies to you.	Employees may defer their own wages on a pre-tax or Roth after- tax basis into the Plan, up to the annual legal limits. Broad array of investment options available. All employer contributions are immediately vested.
Long Term Disability Plan (LTD) Sun Life	1st of month following 1 year of benefit eligible service; 1,000 hours of work	100%	None Check with your location's business office to confirm that this benefit applies to you.	Provides monthly income benefit of 60% base monthly wage after 26 weeks of total disability, to max of \$10,000/month

*This document is a summary. In the event of differences between this summary and applicable plan documents, plan documents will prevail. Employee must work a minimum of 20 hours/week to receive these benefits unless otherwise noted above.

BENEFIT	ELIGIBILITY	ORG. PAYS	EMP. PAYS	SUMMARY
Life Insurance Plan Accidental Death and Dismemberment Sun Life	1 st of month following 1 year of benefit eligible service; 1,000 hours of work	100%	None Check with your location's business office to confirm that this benefit applies to you.	Benefit level of 2 times annual salary rounded up to the nearest thousand with a maximum benefit of \$300,000 (reduced for employees age 65+)
RCAB Transition Assistance Program	1 st of month following 1 year of benefit eligible service; 1,000 hours of work	100%	None Check with your location's business office to confirm that this benefit applies to you.	Employees who experience involuntary job loss; payment of up to 50% of previous wages to a maximum; for a period of up to 30 weeks; contingent on continued active job search
Employee Assistance Program GuidanceResources EAP Sun Life	All employees	None	None	Confidential service offered via a toll-free hotline, 1-800-460-4374 and a user-friendly website, guidanceresources.com. Employees and their families may use the EAP to help address issues on a variety of topics. Web ID: EAPEssential

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