



Resurrection

A UNITED METHODIST CHURCH

PURPOSE STATEMENT

To build a Christian community where non-religious and nominally religious people are becoming deeply committed Christians.

2026

BENEFITS OVERVIEW

Appointed Clergy



Your Health & Wellness Guide

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Disclaimer

This Benefits guide provides an overview of the benefit programs offered at Resurrection but does not create any express or implied contractual rights, guarantees, or promises of continued employment or benefits. The specific terms and conditions of the benefits are governed by the applicable legal plan documents, including insurance contracts. Changes in the benefit provisions subsequent to the publication of this guide will take precedence over its contents. Resurrection reserves the right to modify, suspend, or terminate any benefit plan at any time. Because benefit provisions may change after publication, please contact a representative of the Human Resource department if you have questions or need to confirm that you have the most current information about your benefits.



MEET YOUR BUKATY SERVICE TEAM

Your dedicated service team is available to help address claims, billing, and other benefit-related questions. Please contact them by phone or email.



Liz Heller
Principal
lheller@bukaty.com
913-653-8368

Liz is the lead contact and overall strategist for your employee benefits program. She provides direction and oversight for the team and ensures your benefits strategy aligns with organizational goals.



Kelley Trammell
Benefits Consultant
ktrammell@bukaty.com
913-647-3965

Kelley supports the benefits program through reporting, analytics, and insights, helping ensure plans are monitored effectively and information is used to support informed decision-making.



Chris Stitt
Account Executive
cstitt@bukaty.com
913-396-0861

Chris is your main contact for benefit questions. Employees can reach out to him for help with claims, coverage questions, and other benefit-related needs.



Melissa Findley
Account Manager
mfindley@bukaty.com
913-647-5549

Melissa serves as secondary support for employee questions and provides administrative assistance for benefits, including vendor coordination, contracts, and billing-related items.



IMPORTANT CONTACTS

PLAN	WHOM TO CALL	PHONE NUMBER	EMAIL OR WEBSITE
Resurrection Human Resources	Mary Murray	913-232-4193	mary.murray@resurrection.church
Bukaty Companies	Liz Heller Chris Stitt Melissa Findley	913-653-8368 913-396-0861 913-647-5549	lheller@bukaty.com cbstitt@bukaty.com mfindley@bukaty.com
Medical / Pharmacy	Blue KC	888-989-8842	www.bluekc.com Mobile App: MyBlueKC
Behavioral Health Services for Blue KC Members	Blue KC	833-302-MIND (6463)	www.mindfulbluekc.com
Diabetes Management for Blue KC Members	Blue KC	800-945-4355	join.livongo.com/BlueKC/register
Virtual Care for Blue KC Members	Blue KC	Download the MyBlueKC Virtual Care App	www.bluekcvirtualcare.com
Dental	Cigna	800-997-1654	my.cigna.com
Vision	Cigna	800-997-1654	my.cigna.com
Health Savings Account (HSA)	UMB	800-860-4862	www.umb.com
Flexible Spending Account (FSA)	UMB	800-860-4862	www.umb.com
Employee Assistance Plan (EAP)	LifeMatters	800-634-6433	mylifematters.com Password: COR1 Mobile App: LifeMatters
Pension Plan	Wespath	800-851-2201	www.wespath.org
Life & AD&D, Long Term Disability	Unum	866-679-3054	www.unum.com



WELCOME TO YOUR 2026 BENEFITS!

At Resurrection, we know it's easier to be happy at work when you're healthy at home (and everywhere else). That's why we offer a fully customizable benefits package to take the best care of you and yours. Within this guide, you can jump in and get to know more about your options.

Be sure to reach out to Human Resources any time you have a question, and we'll be happy to help!

ELIGIBILITY:

Regular Status Employees Scheduled to Work 30 Hours Per Week or More

If you're a regular status employee scheduled to work at least 30 hours per week, Resurrection's benefits has you and your dependents covered! Dependents are individuals like your legal spouse and your children up to age 26 – children are your kids, step kids, adopted kids, or kids that you're a legal guardian for. *Please review each benefit summary for specific eligibility requirements and age limits.*

New Hires Scheduled to Work 30 Hours Per Week or More

Welcome to the team, we're so glad you're here! If you were hired into a regular status position schedule to work at least 30 hours per week, you have **30 days from your date-of-hire** to choose your benefits. Your coverage begins the first day of the month on or following your hire date. Choosing your benefits through ADP is easy, but this guide and your HR team are here to help!

Make sure to enroll

If you do not enroll during annual open enrollment or during your initial eligibility period, you will not have another opportunity to enroll for the group benefits coverage until the next open enrollment period unless you have a **Qualifying Life Event**. Additionally, no changes can be made to the group benefits you enrolled in during the year unless you have a Qualifying Life Event.

Qualifying Life Events

To request an election change due to a Qualifying Life Event, you must notify Human Resources within 30 days of the event to confirm your eligibility for adjusting your coverage. Benefit changes cannot be made after this 30-day window.

For assistance, contact Mary Murray.

QUALIFYING LIFE EVENTS



* This is not exclusive. Permitted changes may vary based on the type of event and enrollment change requested.

Regular Status Employees Scheduled to Work 20 to 29 Hours Per Week

If you are a regular status employee scheduled to work 20–29 hours per week, you are not eligible for health benefits; however, you are eligible for the benefits listed in the **Additional Benefits** section of this overview.



HOW TO ENROLL

- Open enrollment for the 2026 plan year is **November 18 – December 2, 2025**.
- If you are a new hire, you have **30** days to enroll from your date of hire.
- You must **complete** your enrollment to receive benefit coverage for the plan year.

2026 Open Enrollment Reminders

This is a **passive enrollment**, meaning no action is required **unless**:

- **You have a medical, limited purpose or dependent care Flexible Spending Account. A new annual contribution election is required each year**
- You want to change medical plans
- You want to drop, change coverage levels, or add/remove dependents on any plans
- You want to change your health savings account contribution

Electronic Enrollment

- If you are making enrollment changes for you and/or your dependents, you must complete online enrollment in ADP
- If you are currently enrolled or want to enroll in a Medical, Limited Purpose or Dependent Care FSA account
- Please contact Mary Murray in Human Resources for assistance

Update Personal Information

- Verify/update your address in ADP
- Verify/update beneficiary information in ADP
- Authorize Premium Only Section 125 Election (Pre-tax premium deductions) in ADP

ID Cards

- **Medical ID cards** will be mailed to employees to the address provided in ADP during Open Enrollment. You can also access your medical ID cards digitally through the Blue KC app
- **Dental & Vision ID cards** will only be available digitally via www.my.cigna.com

For the January 1, 2026, effective date, employees making changes to their benefits must complete electronic enrollment between November 18, 2025, and midnight December 2, 2025.



THE LANGUAGE OF BENEFITS

Definitions for Common Terms

Annual Maximum Benefit: A cap on the benefits your insurance company will pay in a year while you're enrolled in a particular benefit plan. After an annual limit is reached, you must pay all associated health care costs for the rest of the year.

Coinsurance: The percentage of costs for a covered health care service that you pay after you've paid your deductible.

Copayment (copay): A fixed amount that you pay for a covered health care service (for example, a doctor's office visit). Copays can vary for different services within the same plan, such as prescriptions, lab tests, and visits to specialists. Most copays apply before the deductible is met.

Deductible: The amount you pay for covered health care services before your insurance plan starts to pay. For example, with a \$2,500 deductible, you pay the first \$2,500 of covered services yourself. For plans with coinsurance, after you pay your deductible, you will pay the coinsurance amount for covered services until your out-of-pocket maximum is met, then your insurance company pays the rest. Your deductible starts over each calendar year.

Exclusive Provider Organization (EPO): Requires members to use a specific network of doctors and hospitals. Members do not need a referral to see specialists in network. Care outside this network is generally not covered, except in emergencies. This means you must choose providers within the EPO network for your healthcare needs.

In-Network: Providers who contract with your insurance carrier. In-network services typically cost less than out-of-network services.

Out-of-Network: Providers who don't contract with your insurance carrier. Out-of-network services typically cost more than in-network services. In addition, you may be responsible for anything above the allowed amount.

Out-of-Pocket Maximum: The most you will pay for covered services in a plan year. After you spend this amount on deductibles, copayments, and coinsurance, your plan pays 100% of the costs of covered services. The out-of-pocket limit doesn't include your monthly premiums or anything you may spend for services your plan doesn't cover.

Preferred Provider Organization (PPO): Offers a larger network of providers and allows members to see any doctor or specialist without a referral. While you can receive care from out-of-network providers, it will typically cost more than in-network-care.

Prescription Drug Formulary: A list of prescription drugs covered by a prescription drug plan. Also called a drug list.

Premium: The amount you pay for the insurance plan.

Prior Authorization: Approval from a health plan that may be required before you receive a service or fill a prescription in order for the service or prescription to be covered by your plan.

Preventive Care: Routine health care that includes screenings, check-ups, and patient counseling to prevent illnesses, disease, or other health problems.



WHICH MEDICAL PLAN SHOULD I CHOOSE?

1. Compare Networks

	HDHP Aggregate Spira Care Preferred Care Blue PPO	HDHP Aggregate Spira Care Blue Select Plus EPO Traditional Embedded Spira Care Blue Select Plus EPO
	Preferred-Care Blue	Blue Select Plus
AdventHealth Shawnee Mission	YES	YES
Belton Regional Medical Center	YES	NO
Cameron Regional Medical Center	YES	YES
Cass Regional Medical Center	YES	NO
Center Point Medical Center	YES	NO
Children's Mercy Hospitals	YES	YES
Lee's Summit Hospital	YES	NO
Liberty Hospital	YES	YES
Menorah Medical Center	YES	NO
North Kansas City Hospital	YES	YES
Olathe Health System	YES	YES
Overland Park Regional Medical Center	YES	NO
Providence Medical Center	YES	YES
Research Medical Center	YES	NO
St. Joseph Medical Center	NO	YES
St. Luke's Health System	YES	NO
St. Mary's Medical Center	NO	YES
University Health (formerly Truman Medical Centers)	YES	YES
University of Kansas Health System	YES	YES
Western Missouri Medical Center	YES	YES

HOW TO CHECK WHICH NETWORK YOUR PROVIDER IS IN

- Go to BlueKC.com and select **Find Care** at the top. Click on **Find Care for Plans through Employers**.
- Click **Doctors and Hospitals** on the top left column
- Scroll down and select **Find Care as a Guest**
- Choose a network. Resurrection's plans offer two networks-
 - **Preferred Care Blue (PCB)**
 - **Blue Select Plus with Spira Care (BSP)**
- Search to find providers, hospitals, etc.

* **Always confirm network affiliation with your provider!**



BLUE KC SPIRA CARE

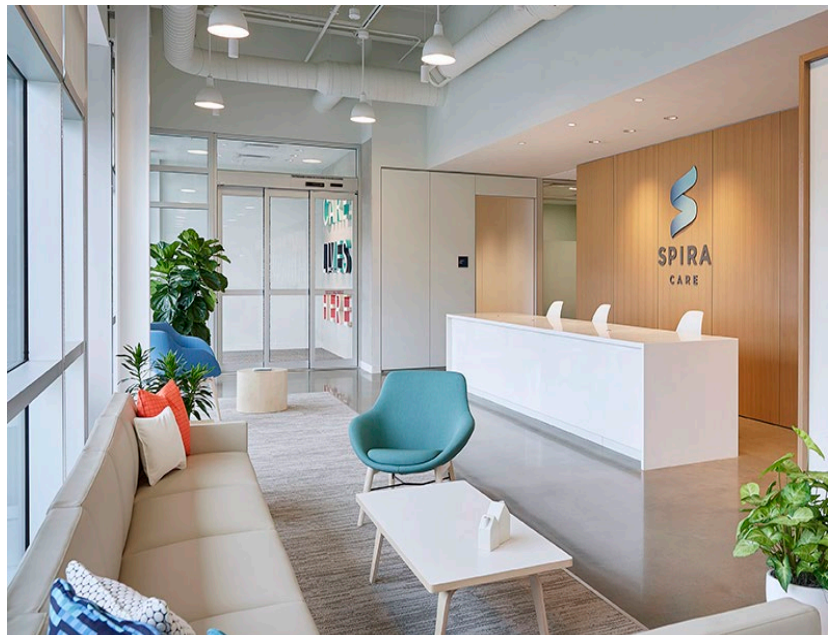
Your Advanced Primary Care Team Benefits

9 Spira Care Centers	Doctor-led Care Teams	Advanced Primary Care	Pediatric Care	Convenient Benefits
<ul style="list-style-type: none"> • Crossroads • Independence • Liberty • Lee's Summit • Olathe • Overland Park • Shawnee • Tiffany Springs • Wyandotte 	<ul style="list-style-type: none"> • Physicians • Physician Assistants • Nurse Practitioners • Behavioral Health Consultants • Diabetes Care Specialists • Care Guides • Ambulatory Care Pharmacist • Nurses and Medical Assistants 	<ul style="list-style-type: none"> • Care for the whole family including newborns, infants, children, teens and adults • Routine Preventive Care • Wellness appointments (annual physicals or checkups) • Immunizations • Behavioral Health Support • Diabetes Care Management • Comprehensive Medication Management • Digital X-Rays and Lab Draws • And more! 	<ul style="list-style-type: none"> • Well-Child • Age-appropriate screening, growth and development tracking • Immunizations, including flu shots • Diagnosis and management of childhood illness • Care of chronic conditions • Behavioral health support for children and teens • Healthy habits coaching • Care of the youth athlete 	<ul style="list-style-type: none"> • In-person and virtual care appointments • Same-day, next-day, Saturday, and evening appointments at most Care Centers • Online communications with your Care Team • Help understanding your plan's network • Referrals and scheduling for in-network specialists • Access to Care Guides for benefits and care questions • Triage nurses and an on-call provider available to help when you have health questions or concerns that aren't an emergency

All services provided at Spira Care Centers are based on your primary care needs only and must be ordered by a member of the Spira Care Team. This includes digital x-rays, routine labs and immunizations. Orders by a specialist or someone outside of the Care Center cannot be completed or fulfilled at Spira Care Centers.



Take a Virtual Tour at [SpiraCare.com](https://www.SpiraCare.com)





BLUE KC VIRTUAL CARE

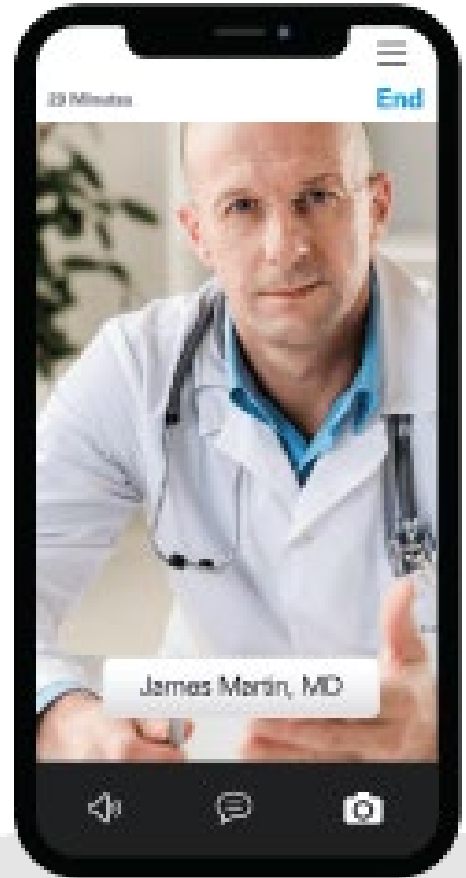
For Your Urgent Sick and Behavioral Healthcare Needs

- Care you need—including prescriptions
- Board-certified physicians
- Great for traveling when you need care
- Private and secure
- Save on drive time or office wait time
- Pay much less than the emergency room
- Affordable 24/7 access
- No sick care appointment necessary
- Schedule a video visit with a board-certified doctor

PRIVATE AND SECURE

Scheduled sessions with therapists and psychiatrists are available for various behavioral health needs

[BlueKCVirtualCare.com](https://www.BlueKCVirtualCare.com)





BLUE KC PRESCRIPTION DRUG COVERAGE

Our medical coverage through Blue Cross Blue Shield of Kansas City includes a Prescription Drug Program. The cost of each prescription is determined by the tier it falls under. You can find in-network pharmacies and a list of covered prescriptions at www.bluekc.com.

GENERIC DRUGS	
Tier 1	To get more out of your health care plan, choose generic drugs when possible. Generic drugs are the chemical equivalent of their more expensive brand name drug counterparts. Even if your doctor prescribes you a brand name drug, you can always ask for the generic equivalent.
PREFERRED DRUGS	
Tier 2	Preferred brand name drugs are prescriptions that your pharmacy benefit plan has selected as the most effective and cost efficient to treat certain conditions or illnesses. These brand name drugs are often more expensive than their generic counterpart.
NON-PREFERRED DRUGS	
Tier 3	Non-preferred brand name drugs treat conditions or illnesses that can also be treated by a preferred brand name or generic prescription. These drugs typically have a higher copayment.
SPECIALTY DRUGS	
Tier 4	Specialty drugs are high-cost prescription medications used to treat complex, chronic conditions like cancer, rheumatoid arthritis, and multiple sclerosis. These drugs sometimes require special handling and administration.

Blue KC Prescription Drug Copays

Supply / Tier	HDHP Aggregate Spira Care Blue Select Plus EPO	Traditional Embedded Spira Care Blue Select Plus EPO	HDHP Aggregate Preferred Care Blue Spira Care PPO
Retail Rx (30-day supply)	In-Network	In-Network	In-Network
Tier 1 Generic	0% after Ded	\$15 Copay	20% after Ded
Tier 2 Preferred Brand	0% after Ded	\$50 Copay	20% after Ded
Tier 3 Non-Preferred Brand	0% after Ded	0% after Ded	20% after Ded
Tier 4 (Preferred/Non-Preferred Specialty)	0% after Ded	0% after Ded	20% after Ded
Mail Order Rx (90-day supply)	In-Network	In-Network	In-Network
Tier 1 Generic	0% after Ded	\$15 Copay	20% after Ded
Tier 2 Preferred Brand	0% after Ded	\$125 Copay	20% after Ded
Tier 3 Non-Preferred Brand	0% after Ded	0% after Ded	20% after Ded
Tier 4 (Preferred/Non-Preferred Specialty)	0% after Ded	0% after Ded	20% after Ded

See carrier benefit summary for out-of-network benefits and additional benefit plan details.

A selection of preventive prescription medications are available to employees enrolled in a HDHP plan at no cost.



PHARMACY BENEFITS

We know how important your pharmacy benefits are to you. Blue KC, together with our pharmacy benefit manager (PBM), provides safe, easy and cost-effective ways for you to get the medication you need. You have several ways to fill prescriptions. Each option offers convenient services to help you make the most of your pharmacy plan.

Retail Network

You can fill your prescriptions at thousands of retail pharmacies and many national drug stores, supermarkets and large retailers

Home Delivery

Home Delivery Follow the instructions on the right to enroll in our home delivery program and have a three-month supply of maintenance medication (those you take regularly) delivered directly to your home. Here's what else this program can offer:

- Cost Savings – You may pay less for your medication with a three-month supply through home delivery.
- Convenience – Get free standard shipping on medications delivered to your mailbox.
- 24/7 Access and Reminders – Speak to a pharmacist who can answer your questions any time, any day.

Specialty Pharmacy

Specialty medications can be important to maintaining or improving your health and quality of life. If you take a specialty medication, our specialty pharmacy can help by providing resources and personalized, therapy-specific support. Here are just a few of the support services available to you:

- Access to your medications at the lowest cost.
- 24/7 access to personalized patient care from knowledgeable pharmacists and nurses who specialize in your condition.
- Proactive refill reminders with timely delivery and shipping in confidential packaging

Manage Prescriptions and Track Home Deliveries Online

Log into your pharmacy benefits account by following these easy steps:

Step 1: Log into [MyBlueKC.com](https://www.MyBlueKC.com).

Step 2: Click Plan Benefits on the left and then select **Pharmacy**.

Step 3: From that screen select **Manage Prescriptions & Track Home Deliveries** to be redirected to our PBM's site.

Once you're redirected to our PBM's homepage, you can:

- Enroll in home delivery
- Find a network pharmacy
- Check medication coverage

Use the same credentials that you use on [MyBlueKC.com](https://www.MyBlueKC.com) to access the MyBlueKC mobile app. Find Pharmacy Benefits on the app under Plan Benefits & Coverage Information.

Use Rx Savings Solutions to Save on Prescriptions!

Rx Savings Solutions (RxSS) is an online tool that helps you find ways to save money on your prescription drugs. Blue KC offers RxSS free of charge to you and your dependents enrolled in medical benefits. RxSS' experienced pharmacists can work directly with your doctor or pharmacist to make safe changes that save you money. For assistance, please contact the RxSS Pharmacy Support team at 1-800-268-4476. You will receive notifications when new savings opportunities are available

TIP GoodRx

Search for medications, compare prices, and find coupons for prescription drugs at more than 70,000 US pharmacies. Save up to 80% instantly! [Goodrx.com](https://www.Goodrx.com)



BLUE KC MEDICAL PLAN SUMMARY

Medical Plan	HDHP Aggregate Spira Care Blue Select Plus EPO	Traditional Embedded Spira Care Blue Select Plus EPO	HDHP Aggregate Spira Care Preferred Care Blue PPO
	Spira Care		
Plan Network	Blue Select Plus (BSP)	Blue Select Plus (BSP)	Preferred Care Blue
Calendar Year Deductible (Employee Pays)	In-Network Benefits Only	In-Network Benefits Only	In-Network Benefits
<ul style="list-style-type: none"> Individual Family 	\$2,500 \$5,000	\$2,500 \$5,000	\$2,500 \$5,000
Coinsurance (Employee Pays)	0% after deductible	0% after deductible	20% after deductible
Out of Pocket Maximum (Employee Pays)	Includes deductible, coinsurance & copays		
<ul style="list-style-type: none"> Individual Family 	\$2,500 \$5,000	\$2,500 \$5,000	\$3,400 \$6,800
Preventive Care	No Cost	No Cost	No Cost
Office Visit Copays	0% after deductible	0% after deductible	20% after deductible
<ul style="list-style-type: none"> Virtual Visits 			
<ul style="list-style-type: none"> Primary Care 	Spira: \$60 charge, \$0 after deductible BSP: Deductible	Spira: No Cost BSP: Deductible	Spira: \$60 charge \$0 after deductible PCB: 20% after deductible
<ul style="list-style-type: none"> Specialist 	0% after deductible	0% after deductible	20% after deductible
Urgent Care	0% after deductible	0% after deductible	20% after deductible
Emergency Room	0% after deductible	0% after deductible	20% after deductible
Hospital Services			
<ul style="list-style-type: none"> Inpatient Outpatient Surgery 	0% after deductible 0% after deductible	0% after deductible 0% after deductible	20% after deductible 20% after deductible
Prescription Drugs (retail: 30-day supply /mail order: 90-day supply)	0% after deductible	\$15/\$50/deductible \$15/\$125/deductible	20% after deductible

See carrier benefit summary for out-of-network benefits and additional benefit plan details.

Aggregate Deductible: If you have other family members on the plan with you, the overall family deductible must be met before the plan begins to pay for any individual.

Embedded Deductible: An individual covered in a family will not pay more than the individual deductible.



MEDICAL BLUE KC 2026 PREMIUMS

Effective January 1, 2026 – December 31, 2026

HDHP Aggregate Spira Care Blue Select Plus EPO	Total Monthly Cost	Church Monthly Cost	Employee Monthly Cost
Employee Only	\$711.93	\$650.93	\$61
Employee + Spouse	\$1,423.86	\$1,254.86	\$169
Employee + Child(ren)	\$1,352.66	\$1,183.66	\$169
Employee + Family	\$2,278.17	\$1,915.17	\$363

Traditional Embedded Spira Care Blue Select Plus EPO	Total Monthly Cost	Church Monthly Cost	Employee Monthly Cost
Employee Only	\$731.03	\$634.03	\$97
Employee + Spouse	\$1,462.06	\$1,220.06	\$242
Employee + Child(ren)	\$1,388.96	\$1,146.96	\$242
Employee + Family	\$2,339.30	\$1,855.30	\$484

HDHP Aggregate Spira Care Preferred Care Blue PPO	Total Monthly Cost	Church Monthly Cost	Employee Monthly Cost
Employee Only	\$811.78	\$664.78	\$147
Employee + Spouse	\$1,623.55	\$1,278.55	\$345
Employee + Child(ren)	\$1,542.37	\$1,197.37	\$345
Employee + Family	\$2,597.68	\$1,919.68	\$678

Premium Discounts through A Healthier You

Employees and enrolled spouses who complete Resurrection's required activities through [A Healthier You](#) by October 31, 2026, will receive the premium discounts in the table below beginning January 1, 2027, through December 31, 2027.

Resurrection's required activities to be completed **by October 31, 2026**, include:

1. Complete the Health Risk Assessment in [A Healthier You](#)
2. Complete a biometric screen through [A Healthier You](#)
3. Earn at least 10,000 points in [A Healthier You](#)

	Monthly Premium Discount
Employee	\$50
Employee + Spouse	\$100
Employee + Children	\$50
Family	\$100



UMB HEALTH SAVINGS ACCOUNT (HSA)

A Health Savings Account (HSA) is a personal savings account that you own that allows you to set aside money on a pre-tax bases to pay for qualified health care expenses, such as doctor visits, prescriptions, braces or even Lasik eye surgery, with tax-free dollars. Your HSA can be used to pay for your health care expenses and those of your spouse and dependents, even if they are not covered by the High-Deductible Health Plan (HDHP).

How a Health Savings Account (HSA) Works

	Eligibility
	<p>Anyone who is:</p> <ul style="list-style-type: none"> • Enrolled in a High-Deductible Health Plan (HDHP) • Not enrolled in another medical plan, unless it is a High Deducible Health Plan (HDHP) • Not enrolled in Medicare benefits • Not eligible to be claimed on another person’s tax return
	Your Contributions
	<p>You choose how much to contribute from each paycheck on a pretax basis You can contribute up to the 2026 IRS maximum of \$4,400/individual or \$8,750/family You can make an additional “catch-up” contribution of up to \$1,000 per year if you are age 55 or older</p>
	Eligible Expenses
	<p>You can use your HSA to pay for medical, dental, vision and prescription drug expenses incurred by you and your eligible family members. <i>Please note: Funds available for reimbursement are limited to the balance in your HSA.</i></p>
	Using Your Account
	<p>Use the debit card linked to your HSA to cover eligible expenses — or pay for expenses out of your own pocket and save your HSA dollars for future health care expenses.</p>
	Your HSA is always yours – no matter what
	<p>One of the best features of an HSA is that money left over at the end of the year remains in the account so you can use it the following year or at any time in the future. If you leave the Resurrection or retire; your HSA goes with you!</p>
	Triple Tax Advantage
	<ul style="list-style-type: none"> • You can use your HSA funds to cover qualified medical expenses, including dental and vision expenses — tax-free. • Unused funds grow and can earn interest over time — tax-free. • You can save your HSA dollars to use for your health care when you leave or retire — tax-free.

To help offset the deductible on the HDHP plans, Resurrection will contribute the following amounts per pay period to the employee’s HSA in 2026.

Employee Only Employee + Spouse	\$29.25
Employee + Child(ren) Employee + Family	\$41.75

See Plan Document and Summary Plan Description for Plan details.



UMB Flexible Spending Accounts (FSA)

An FSA is an employer-sponsored account that allows you to pay for medical and dependent care expenses with pre-tax dollars. You can choose from a Medical FSA, Limited Purpose FSA, or Dependent Care FSA. Be sure to check the IRS website for eligible expenses.

You must choose to enroll in a Medical, Limited Purpose or Dependent Care FSA each year – your participation WILL NOT automatically carry over from year to year

IRS Rules Govern Substantiation Requirements

The IRS has established specific guidelines that require all Benefit Spending Accounts, including Flexible Spending Account and Dependent Care Account transactions — even those made using a debit card — to be substantiated (verified that the purchase was an eligible expense).

The substantiation process is performed by UMB. They are very diligent in the execution of the substantiation process to avoid adverse tax consequences to employees.

	Substantiation REQUIRED	No Follow-Up REQUIRED
Matched Co-Pays		X
Transactions at merchants who can electronically validate the expense at the point of sale		X
Recurring Expenses	One time only (annually)	No further substantiation needed if the subsequent transaction exactly matches the provider and dollar amount as the transaction previously approved
Medical Care	X	
Dental Care	X	
Vision Care	X	

UMB makes it easy to submit required receipts, just follow the SWIPE and SNAP rules!

Simply swipe your card, collect your itemized receipt or Explanation of Benefits (EOB), and snap a picture to upload it to your online account.

See Plan Document and Summary Plan Description for Plan details.



FAQs	Health Savings Account (HSA)	Full Purpose Healthcare (FSA)	Limited Purpose Healthcare (FSA)	Dependent Care (FSA)
Who's eligible? If you are enrolled in	Eligible if enrolled in HDHP You are <u>not</u> eligible if: <ul style="list-style-type: none"> • You or your spouse have an FSA or HRA • You have medical coverage other than HDHP • You can be claimed as a dependent on some else's tax return • You are enrolled in Medicare, Medicaid, or Tricare, or received care from the VA in the past three months. 	Employees enrolled in the \$2,500 Traditional EPO plan Employees enrolled in Medicare If you or your spouse is enrolled in an HSA, you cannot enroll in a Medical FSA	Employees enrolled in an HSA plan	Employees that have childcare expenses, an/or adult/elder daycare of a parent incapable of caring for themselves.
Who owns the account?	Employee	Resurrection, A United Methodist Church		
Do funds rollover?	Yes. Funds rollover year to year.	No. FSAs are "use it or lose it" accounts. However, you carry over a maximum of \$680 to the next year.		You cannot carry over Dependent FSA
Can I take it with me?	Yes. This is <u>your</u> bank account, so you can take it with you if you ever leave Resurrection.	No. You cannot take the account/funds with you if you leave Resurrection.		
Where's the money?	HSA Accounts are set up with UMB.	The amount you choose is sent to UMB and is available right away. The amount is then deducted pre-tax across 24 pay periods.		The amount you choose comes out of your paycheck pre-tax across 24 pay periods.
When are the funds available?	Funds are available once they are credited to your account. Deposits are made with each pay roll deduction.	The full amount is available immediately.		Funds are available as they are credited to your account.
What is the 2026 maximum contribution?	\$4,400 for Employee Only \$8,750 for Employee + Dependents (Including Resurrection and Employee contributions) *Employees who are age 55 or over can make an additional \$1,000 catch-up contribution.	\$3,400	\$3,400	\$7,500 or \$3,750 if married, filing separately
Does Resurrection contribute to my account?	Yes, in 2026 Resurrection will contribute a per pay period amount of: \$29.25 - Employee Only and Employee + Spouse coverage \$41.75 - Employee + Child(ren) and Employee + Family	No, Resurrection does not make any contributions to an FSA.		



UMB Flexible Spending Accounts (FSA) - Continued

IRS Rules Govern Substantiation Requirements

The IRS has established specific guidelines that require all Benefit Spending Accounts, including Flexible Spending Account and Dependent Care Account transactions — even those made using a debit card — to be substantiated (verified that the purchase was an eligible expense).

The substantiation process is performed by UMB. They are very diligent in the execution of the substantiation process to avoid adverse tax consequences to employees.

	Substantiation REQUIRED	No Follow-Up REQUIRED
Matched Co-Pays		X
Transactions at merchants who can electronically validate the expense at the point of sale		X
Recurring Expenses	One time only (annually)	No further substantiation needed if the subsequent transaction exactly matches the provider and dollar amount as the transaction previously approved
Medical Care	X	
Dental Care	X	
Vision Care	X	

UMB makes it easy to submit required receipts, just follow the SWIPE and SNAP rules!

Simply swipe your card, collect your itemized receipt or Explanation of Benefits (EOB), and snap a picture to upload it to your online account.

See Plan Document and Summary Plan Description for Plan details.

If you have questions about your account(s), contact UMB Consumer Services: [1.877.743.9482](tel:18777439482) (Monday-Friday, 7 a.m. – 7 p.m. CST) or email them at UMBCS@service.healthaccountservices.com



CIGNA DENTAL

Taking care of your oral health is not a luxury; it is necessary for optimal long-term health. With a focus on prevention, early diagnosis and treatment, dental coverage can greatly reduce the cost of restorative and emergency procedures. Preventive services at in-network providers are generally covered at no cost to you and include routine exams and cleanings. You pay a small deductible and coinsurance for basic and major services.

You may enroll yourself and your eligible dependents — or you may waive dental coverage. You do not have to be enrolled in medical coverage to elect a dental plan.

Resurrection offers dental coverage through Cigna. For information on finding a dental provider, visit www.cigna.com.

Benefits	CIGNA Dental Plan
	In-Network Benefits
Type I – Preventive / Diagnostic Services	100% (No Deductible)
Calendar Year Deductible for Type II, III & IV Services Single / Family	\$50 / \$150
Type II – Basic Services	80%
Type III – Major Services	50%
Calendar Year Maximum Benefit (Type I, II, & III)	\$1,000
Type IV – Orthodontia	Not Covered
Type V – Implants	50%
Dependent Age Limit for Children	To Age 26 End of Month

	January 1- December 31, 2026		
CIGNA Dental Employee Cost	Total Monthly Cost	Church Monthly Cost	Employee Monthly Cost
Employee	\$29.87	\$17.87	\$12.00
Employee + Spouse	\$59.77	\$35.77	\$24.00
Employee + Child(ren)	\$76.19	\$46.19	\$30.00
Employee + Family	\$106.06	\$62.06	\$44.00



CIGNA VISION

Eyesight is critical to your overall health. Resurrection offers you vision insurance through **Cigna Vision Services by EyeMed**.

To find in-network providers, visit www.cigna.com or call the toll free # listed on the back of your ID card for assistance.

Make sure to stay in-network. When you schedule your appointment, verify your provider is in **Cigna Vision Services by EyeMed** network. If you have a contact lens exam, this is not covered at 100% and you are responsible for this additional cost.

CIGNA Benefit Summary	CIGNA Vision Plan
	In-Network Benefits
Exam Copay	\$10
Materials (Lenses & Frames) Copay	\$15
Benefit Highlights	
Single Spectacle Lens Allowance	100%
Bifocal Spectacle Lens Allowance / Includes Progressive Lens	100%
Trifocal Spectacle Lens Allowance / Includes Progressive Lens	100%
Frames Allowance	Up to \$200 allowance
Contact Lenses (in lieu of eyeglasses)	Elective: Up to \$200 allowance
Frequency	
Exams	Once every 12 months
Standard Corrective Lenses	Once every 12 months
Contact Lenses	Once every 12 months
Frames	Once every 24 months

CIGNA Vision Employee Cost	Total Monthly Cost	Church Monthly Cost	Employee Monthly Cost
Employee	\$7.98	\$0.00	\$7.98
Employee + Spouse	\$15.96	\$0.00	\$15.96
Employee + Child(ren)	\$17.10	\$0.00	\$17.10
Employee + Family	\$25.78	\$0.00	\$25.78



LIFE AND ACCIDENTAL DEATH & DISMEMBERMENT (AD&D) Appointed Clergy

Comprehensive Protection Plan (CPP)

When the unthinkable happens, you want to know your family is covered. The Great Plains Conference provides appointed clergy with Life and Accidental Death and Dismemberment (AD&D) insurance through Wespath at no cost to appointed clergy.

Basic Life Insurance and Accidental Death & Dismemberment (AD&D) and Income Protection

The Comprehensive Protection Plan (CPP) is administered by Wespath. The plan includes death benefits, long-term disability income replacement and other survivor benefits. Appointed clergy can contact Wespath at 1-800-851-2201 with questions.





ADDITIONAL BENEFITS

Employee Assistance Program (EAP)

LifeMatters Employee Assistance Program (EAP)

Resurrection cares about you and your family's total well-being. That's why we provide an Employee Assistance Program (EAP) at no cost to you. Administered by LifeMatters, the EAP is a confidential service designed to help employees and members of their household with personal or work/life balance issues.

EAP Services

- Stress, depression, and personal problems
- Balancing work and personal needs
- Family and relationship concerns
- Alcohol or drug dependency
- Workplace conflicts
- Any other issue of concern in your life

EAP Benefits

- Short-term counseling, up to eight (8) visits per person per person, per situation
- 24/7 call center
- Unlimited financial consultation and resources to set up a budget, obtain and review credit report information, or assist with debt management and consolidation.
- Legal consultation with an attorney either over the phone or face-to-face for consumer law, traffic citations and fender benders, family law, or estate planning.

EAP Contact Information

Toll Free Number: 1-800-634-6433
Website: mylifematters.com
Password: COR1
Mobile App: LifeMatters

- Child and elder care resources and guidance
- Adoption assistance
- Educational resources
- Home improvement resources
- Veterinarians, pet sitting, and obedience training resources
- And much more!
- **COMPLETELY CONFIDENTIAL!**



ADDITIONAL BENEFITS

Appointed Clergy

COMPASS RETIREMENT PLAN

In May 2024, General Conference voted to create a new mandatory account-based retirement plan for U.S. clergy called Compass, which will begin January 1, 2026.

With an account-based, defined contribution (DC) retirement plan, each clergy has their own account—the money in that account belongs to that individual, to keep for the rest of their lives—and any remaining balance can be left to family members, or to a church, charity or other beneficiaries after the clergy dies. A DC account grows over time by investing in the financial markets.

Clergy may choose to make before-tax, Roth and/or after-tax contributions through payroll deductions.

Automatic Contributions

- Full time appointed clergy - \$150 per month
- Half time Appointed Clergy - \$75 per month
- 3% of total pensionable pay

Additional Contributions

- Clergy will receive a \$1/\$1 matching contribution on up to 4% of their compensation.

EDUCATIONAL ASSISTANCE

Eligible staff seeking a degree, continuing education or certification related to their current job duties or a foreseeable future position in the organization may be eligible for reimbursement for educational expenses.

Maximum Allowances

30+ hours \$2,000 reimbursement per calendar year up to a maximum of \$8,000

20-29 hours \$1,000 reimbursement per calendar year up to a maximum of \$4,000

Resurrection has the sole discretion to determine whether the education relates to an employee's current job duties or a foreseeable future position. Contact Human Resources for additional information regarding this benefit.

CONTINUING EDUCATION

On July 1, eligible appointed clergy receive one week, based on regularly scheduled weekly hours, of paid Continuing Education leave. Continuing Education Leave hours unused by June 30 are forfeited.



ADDITIONAL BENEFITS

Appointed Clergy

EMPLOYER PAID HOLIDAYS

Eligible staff receive holiday pay equal to one-fifth of regularly scheduled weekly hours.

- New Year's Day
- Martin Luther King Day**
- Monday after Easter
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Thanksgiving Day
- Day after Thanksgiving
- Christmas Day
- Day after Christmas

** Employees are strongly encouraged to participate in service opportunities in their community on Martin Luther King Day.*

SICK LEAVE

Eligible staff accrue .83 of a workday on the 15th of each month based on regular scheduled weekly hours. Maximum sick leave accrual of 13 weeks (65 days).

PERSONAL LEAVE

On January 1, eligible staff receive two personal days based on regular scheduled weekly hours to be used at their discretion. Personal leave hours unused by December 31 are forfeited.

CONTINUING EDUCATION

On July 1, eligible appointed clergy receive one week, based on regularly scheduled weekly hours, of paid Continuing Education leave. Continuing Education Leave hours unused by June 30 are forfeited.

VACATION

Eligible appointed clergy accrue vacation based on years of service and regular scheduled weekly hours. Vacation accrues each year on July 1. Appointed clergy may carry over up to 2 weeks of unused vacation each July 1.

<u>Years of Service</u>	<u>Vacation Accrual</u>
Less than 15 years	Four Weeks
Completion of 15 years	Five Weeks

SPIRITUAL RETREAT LEAVE

On January 1, eligible staff receive two spiritual retreat days based on regular scheduled weekly hours to be used exclusively for time alone in devotion, prayer, and personal study of scripture away from one's home or office. Spiritual retreat leave hours unused by December 31 will be forfeited.

EARLY LEARNING CENTER TUITION DISCOUNT

Eligible staff whose children attend a Resurrection Early Learning Center are eligible to receive a 50% tuition discount.

This discount applies only to children of employees and enrollment is subject to available openings.

Contact the Learning Centers Lead Director for additional information regarding this benefit.

THE SPRING CAFÉ & THE WELL BOOKSTORE DISCOUNT

Eligible staff receive a 10% discount at the Spring Café and Well Bookstore at the Leawood location.



ADDITIONAL BENEFITS

Appointed Clergy

MISSION LEAVE

On January 1 eligible staff may take up to one week, based on regularly scheduled weekly hours, to participate in local, domestic or international mission service. Mission leave hours unused by December 31 are forfeited.

A financial incentive is available to help defray the cost of one mission trip anytime between the specified anniversary milestones listed in the chart below:

<u>Service Anniversary</u>	<u>Mission Trip Incentive</u>
Second Anniversary	\$200
Fifth Anniversary	\$500
Tenth Anniversary And every fifth year after	\$1,000

PARENTAL LEAVE

The Great Plains Conference provides eligible clergy with 13 weeks of paid parental leave, based on regularly scheduled weekly hours, following the birth of a child or, in the case of legal adoption, the arrival of a child who was not previously a stepchild into the home for purposes of adoption.

Parental leave may begin on the date of birth or adoption placement or be taken any time within nine months of the birth/arrival

Eligible clergy must contact Resurrection’s Human Resources Department and the Great Plains Conference to coordinate parental leave.

BEREAVEMENT LEAVE

Bereavement leave provides eligible staff with paid time away from work to mourn the loss of a loved one, make funeral arrangements, and begin the healing process.

Bereavement pay is calculated based on your base pay rate and one-fifth of your regularly scheduled weekly hours for each day taken. The amount of paid bereavement leave you receive depends on your relationship to the deceased and includes biological, adoptive, and step relatives.

Please refer to the Bereavement Leave Guidelines on the All Staff Hub or contact Human Resources to confirm the amount of leave you are eligible for.

JURY DUTY

We encourage you to fulfill your civic responsibilities by serving jury duty when required. You must give a copy of your jury duty summons to your supervisor, the Human Resources and Payroll Departments as soon as possible so arrangements may be made to accommodate and pay you for your absence. You are expected to report for work whenever the court schedule permits.

VOTING TIME

Eligible staff may take up to 3 hours of paid time to vote on election day for each local, state, and national election if the polls are not open three consecutive hours before or after the employee is scheduled to work on the day of the election.

ANNUAL NOTICE REMINDERS

The 2026 Medical Summary of Benefits & Coverage (SBC) and the following Annual Notices are provided to you by Resurrection when you log into the All Staff Hub.

Please review each notice to assure you understand benefits available to you and your covered family members. You may request an additional copy from Resurrection at no cost to you.

- Summary of Benefits & Coverage (SBC)
- Medicaid & Children's Health Insurance Program (CHIP)
- Women's Health & Cancer Rights Act Notice
- Special Enrollment Notice
- Medicare Part D
- COBRA Notice
- Marketplace Notice
- Notice of Privacy Policy Practices