

2018 West Ohio Conference Health Insurance Plan

Active Plan Quick Reference

	Single Plan			Family 2 Plan			Family 3 Plan		
	Total/Account Draw ¹	Church Premium ²	Individual Premium ³	Total/Account Draw ¹	Church Premium ²	Individual Premium ³	Total/Account Draw ¹	Church Premium ²	Individual Premium ³
January	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
February	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
March	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
April	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
May	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
June	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
July	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
August	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
September	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
October	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
November	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
December	\$880.00	\$792.00	\$88.00	\$1,840.00	\$1,656.00	\$184.00	\$2,400.00	\$2,160.00	\$240.00
Total	\$10,560.00	\$9,504.00	\$1,056.00	\$22,080.00	\$19,872.00	\$2,208.00	\$28,800.00	\$25,920.00	\$2,880.00

- (1) Amount the conference will draw from the church bank account monthly via ACH.
- (2) Amount of health insurance plan cost paid by the church on behalf of the covered individual and that the church should budget for and expect to spend in 2018, based on the plan type.
- (3) Amount of health insurance premium due to the church from the employee. It is assumed this is paid via payroll deduction. It is further assumed this amount reduces income (i.e., is pre-tax) ***as long as the church/employer adopts the West Ohio Conference Flexible Benefit Plan (Section 125 Plan) or another Section 125 Plan unique to the church/employer.***

For questions and assistance regarding Benefits & Plan Design please contact Sandi George, Benefits Coordinator, at 614.844.6200 or by email at sgeorge@wocumc.org.

For question and assistance regarding Billing please contact Betty Jo Reed, Accounts Receivable, at 614.844.6200 or by email at bjreed@wocumc.org.

Revised: October 17, 2017