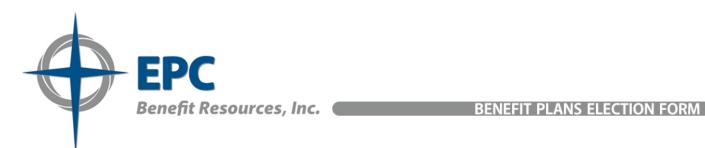


Please provide information on the 2021 Benefit Plan Elections you offer to your employees. BRI uses this for tracking purposes, and does not limit you as the employer from providing additional benefits to your employees in the future. For information on our benefits, see <a href="https://www.epc.org/benefits">www.epc.org/benefits</a>.

Church Name	Billing ID
City/State/ZIP	Phone
Administrator Name	Email

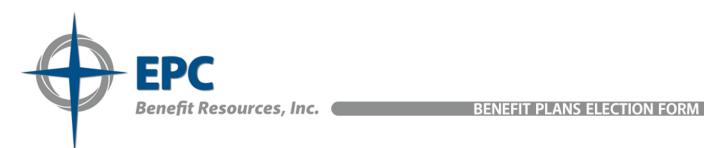
2021 EPC B	enefit Plan	Choices offered to <i>EPO</i>	CORDAI	NED STAF	F
	Does your church offer this plan? (Y) or (N)	Plan types	Church Pays %	Employee Pays %	Comments
		Platinum PPO			
MEDICAL		Gold PPO			
Any combination of Medical Plans		Gold HDHP			
may be offered		Silver PPO			
		Bronze HDHP			
DENTAL		<b>DeltaDental</b> (High Plan)			
DEN I AL		DeltaDental (Low Plan)			
VISION		National Vision Administrators			
LIFE/AD&D/LONG-TERM DISABILITY (LTD)		The Hartford Life/AD&D/LTD			
<b>403(b)(9) Retirement Plan</b> (Required for Ordained)		Adoption Agreement (availabl needs to be completed and on Email completed form to bene	file with th	e BRI office.	îts/retiremen
		Employee/Dependent Life			
Voluntary Insurance		Short-Term Disability			
through Colonial Life		Accident Coverage			
		Critical Illness Coverage			
Amplifon Hearing Aid Discount Program		This program provides partici services throughout the count		discounted l	nearing aids a



## 2021 EPC Benefit Plan Choices offered to EPC OTHER STAFF I

Benefit Class: \_\_\_\_\_\_ (Specify: non-EPC ordained, salaried, hourly, management, etc.)

	Does your church offer this plan? (Y) or (N)	Plan types	Church Pays %	Employee Pays %	Comments
		Platinum PPO			
MEDICAL		Gold PPO			
Any combination of Medical Plans		Gold HDHP			
may be offered		Silver PPO			
		Bronze HDHP			
DENTAL		<b>DeltaDental</b> (High Plan)			
DENTAL		<b>DeltaDental</b> (Low Plan)			
VISION		National Vision Administrators			
LIFE/AD&D/LONG-TERM DISABILITY (LTD)		The Hartford Life/AD&D/LTD			
<b>403(b)(9) Retirement Plan</b> (Required for Ordained)	Adoption Agreement (available at <a href="www.epc.org/benefits/retirement">www.epc.org/benefits/retirement</a> ) needs to be completed and on file with the BRI office. Email completed form to <a href="mailto:benefits@epc.org">benefits/retirement</a> )				
		Employee/Dependent Life			
Voluntary Insurance		Short-Term Disability			
through Colonial Life		Accident Coverage			
		Critical Illness Coverage			
Amplifon Hearing Aid Discount Program		This program provides partici services throughout the count		discounted	hearing aids and



## 2021 EPC Benefit Plan Choices offered to EPC OTHER STAFF II

Benefit Class: \_\_\_\_\_\_ (Specify: non-EPC ordained, salaried, hourly, management, etc.)

	Does your church offer this plan? (Y) or (N)	Plan types	Church Pays %	Employee Pays %	Comments
		Platinum PPO			
MEDICAL		Gold PPO			
Any combination of Medical Plans		Gold HDHP			
may be offered		Silver PPO			
		Bronze HDHP			
DENTAL		<b>DeltaDental</b> (High Plan)			
DENTAL		<b>DeltaDental</b> (Low Plan)			
VISION		National Vision Administrators			
LIFE/AD&D/LONG-TERM DISABILITY (LTD)		The Hartford Life/AD&D/LTD			
<b>403(b)(9) Retirement Plan</b> (Required for Ordained)	Adoption Agreement (available at <a href="www.epc.org/benefits/retirement">www.epc.org/benefits/retirement</a> ) needs to be completed and on file with the BRI office. Email completed form to <a href="mailto:benefits@epc.org">benefits/retirement</a> )				
Voluntary Insurance through Colonial Life		Employee/Dependent Life			
		Short-Term Disability			
		Accident Coverage			
		Critical Illness Coverage			
Amplifon Hearing Aid Discount Program		This program provides partici services throughout the count		discounted	hearing aids and



## 2021 EPC Benefit Plan Choices offered to PART-TIME CHURCH STAFF

Employees working less than 30 hours per week are not eligible for the Health and Basic Life/AD&D/LTD Plans.

	Does your church offer this plan? (Y) or (N)	Plan types	Church Pays %	Employee Pays %	Comments
<b>403(b)(9) Retirement Plan</b> (Required for Ordained)		Adoption Agreement (availabl needs to be completed and on Email completed form to bene,	file with th	e BRI office	
Voluntary Insurance through Colonial Life		Employee/Dependent Life			
		Short-Term Disability			
		Accident Coverage			
		Critical Illness Coverage			
Amplifon Hearing Aid Discount Program		This program provides partici services throughout the count		discounted	hearing aids and

## **AUTHORIZATION AND SIGNATURE**

Name		
Title		
Signature	Date	