

# FCMM Benefit Plan

## Employee Welcome Packet

Short Term Disability, Long Term Disability, and  
Life with Accidental Death & Dismemberment Insurance

BENEFITS & RETIREMENT  
**fcmm** ®  
prepare today, ready tomorrow

Contact Us: (800) 995-5357 • [benefits@fcmmbenefits.org](mailto:benefits@fcmmbenefits.org)  
FCMM • 901 East 78th Street • Minneapolis, MN 55420



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## Welcome

Welcome to the Free Church Ministers and Missionaries (FCMM) Benefit Plan Employee Welcome Packet! FCMM provides an affordable benefit to pastors and support staff in participating organizations.

We offer two different Benefit Plans for your employer to choose:

1. The *Standard Plan* includes Long Term Disability (LTD) and Life with Accidental Death and Dismemberment Insurance (Life/AD&D).
2. The *Plus Plan* includes Short Term Disability (STD), Long Term Disability (LTD) and Life with Accidental Death and Dismemberment Insurance (Life/AD&D).

This Employee Welcome Packet is intended to offer helpful information regarding the FCMM Benefit Plan. As questions arise about the Benefit Plan, please contact your organization, or reference this packet. If you have specific questions which are not addressed in the resources provided, contact FCMM for further assistance. Contact information is listed on the last page of this packet.



# Form Guide

## **Form 100 - Enrollment Application Packet**

This packet is required for newly eligible employees enrolling in the Benefit Plan. It includes Enrollment Information, Form 101, Limitations & Exclusions, Form 102, Form 103, and Form 138.

## **Form 101 - Enrollment Application**

This form is included in the Benefit Enrollment Application (Form 100) and is required for enrollment. Employee must complete and sign this form to enroll. Employer must complete the employer section per the church's Employer Benefit Agreement (Form 120) and sign the Authorized Employer Signature.

## **Limitations & Exclusions**

This form is included in the Benefit Enrollment Application (Form 100) and is required for enrollment. It has information regarding the limitations and exclusions of the coverage.

## **Form 102: Beneficiary Designation**

This form is included in the Benefit Enrollment Application (Form 100) and is required for enrollment. As required by the insurance carrier, the original, hard copy of this form must be mailed to FCMM. Both a primary and contingent beneficiary are required, and a physical signature and date. This form can be updated any time there is a change.

## **Form 103: Salary Worksheet**

This form is included in the Benefit Enrollment Application (Form 100) and is required for enrollment. The employee's total annual salary including housing allowance must be detailed on this form. Employer must complete the employer section per the church's Employer Benefit Agreement (Form 120) for initial enrollment only. This form also contains premium payment calculations for benefits. This form can be updated any time there is a change.

## **Form 104: Application Addendum for Updates**

This form is used during the annual open enrollment period only after the employer updates their Employer Benefit Agreement (Form 120). All employees receiving a change to benefits must complete and submit this form during the annual open enrollment period. Employer must complete the employer section per the church's Employer Benefit Agreement (Form 120).

## **Form 120: Employer Benefit Agreement**

This form must be completed by the employer either when initially entering the Benefit Plan or making updates to the plan during the annual open enrollment period. The form details the two benefit plan options, employee classes by benefit, payment methods by benefit, and Life/AD&D coverage amounts. Further information and instructions on completion are detailed on page 4 of this packet.

## **Form 121: Employer Guide**

This guide is used to inform employers about the different aspects of the Benefit Plan. It details how to complete the Employer Benefit Agreement, initiating enrollment for employees, payment methods, paying the quarterly invoice through the online payment portal, and answering frequently asked questions regarding the FCMM Benefit Plan.

## **Form 138: Coverage Overview**

This form is included in the Benefit Enrollment Application (Form 100). It gives a brief coverage overview of each benefit.

## **Form 150: Employee Welcome Packet**

This packet is sent to eligible employees once enrollment is complete and contains helpful Benefit Plan information.

## **Policy Certificates**

Policy certificates for STD, LTD, and Life/AD&D are sent to employees upon initial enrollment and contain full benefit information. They can also be requested by emailing Benefit Plan Client Services ([benefits@fcmmbenefits.org](mailto:benefits@fcmmbenefits.org)).



Underwritten by:

Unum Life Insurance Company of America  
2211 Congress Street, Portland, ME 04122

**FCMM Benefits & Retirement**  
901 East 78th Street, Minneapolis, MN 55420  
Group Short and Long Term Disability Insurance  
with Term Life/AD&D  
Information Form  
Policy #930391/Div #001

## Form 138: Coverage Overview

### **GROUP SHORT TERM DISABILITY (STD) PLAN HIGHLIGHTS**

#### **Employee Short Term Disability Insurance**

- Pays 60% of Weekly earnings to a maximum weekly benefit of \$1,000
- 14 Day Elimination Period before disability benefit payments begin
- Maximum Benefit Duration is 11 weeks of benefit payments
- Definition of Disability is based on your inability to perform the duties of your own-occupation during the claim period.
- Employees working at least 25 hours per week may be eligible for this plan.

#### **Additional Short Term Disability Plan Features**

- Rehabilitation and Return to Work Assistance Program – depending on your disability, UNUM may create a program tailored to your needs that could assist you in returning to work. This program may pay an additional benefit amount.
- Guaranteed Insurability if you enroll when initially eligible
- Full Maternity Benefits Covered
- Pre-Existing Conditions are eligible for coverage following 12 months of coverage under this plan. A Pre-Existing Condition is any health condition that was known, diagnosed or treated in the 6 months prior to the individuals' effective date of coverage under this plan.

#### **In general, the Short Term Disability weekly payments will be taxable:**

If the employer pays the premiums & employees' salaries are not grossed-up to include premiums as taxable income.

- If the Employees pay premiums with pre-tax dollars.
- If employees share premium payments with the employer, the portion paid by the employer will be taxable.

#### **In general, the Short Term Disability weekly payment will not be taxable:**

If Employees pay premiums with post-tax dollars.

- If the employer pays the premiums and employees' salaries are grossed-up to include premiums as taxable income.

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### **GROUP LONG TERM DISABILITY (LTD) PLAN HIGHLIGHTS**

#### **Employee Long Term Disability Insurance**

- Pays 60% of your monthly earnings to a maximum monthly benefit of \$8,500
- 90 Day Elimination Period before disability benefit payments begin
- Maximum Benefit Duration information in LTD Policy document (request LTD Policy if necessary)
- Definition of Disability is based on your inability to perform the duties of your own- occupation for the first 3 years of a disability
- Additional disability benefits of up to \$1,000/month may be available to you for up to 2 years if you are cognitively disabled or unable to perform two or more Activities of Daily Living (ADLs)
- Employees working at least 25 hours per week may be eligible for the plan

#### **Spouse Long Term Disability Rider**

- Pays a benefit if your spouse is cognitively disabled or unable to perform two or more Activities of Daily Living (ADLs)
- Pays a \$1,500 monthly benefit after a 60-day elimination period up to 2 year lifetime maximum payment period



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## Form 138: Coverage Overview

### Additional Long Term Disability Plan Features

- **Conversion** – you may convert your coverage to an individual policy and take it with you if your employment ends
- **Survivor Benefit** – if you pass away while receiving a long term disability benefit, Unum will pay your eligible survivor a lump sum benefit equal to 3 months of your gross disability payment
- **Rehabilitation and Return to Work Assistance Program** – depending on your disability, Unum may create a program tailored to your needs that could assist you in returning to work. This program pays an additional disability benefit of 10% of your gross disability payment to a maximum benefit of \$1,000 per month. You may also qualify for child care reimbursement of \$250 per child, per month, not to exceed \$1,000 per month while participating in this program

### GROUP LIFE WITH ACCIDENTAL DEATH & DISMEMBERMENT (LIFE/AD&D) PLAN HIGHLIGHTS

#### Employee Life/AD&D Insurance

- Employees working at least 25 hours per week may be eligible for the plan
- Benefit Age Reduction:
  - \$10,000 under age 70, \$6,500 ages 70 – 75, and \$5,000 ages 75+
  - \$50,000 under age 70, \$32,500 ages 70-75, and \$25,000 age 75+
  - One Times (1x) Annual Salary under age 70, 65% ages 70-74, and 50% age 75+
- Guarantee Issue coverage – you will not have to answer any medical questions

#### Additional Life/AD&D Plan Features:

- **Waiver of Premium** - If you become disabled (as defined by your plan) and are no longer able to work, your premium payments will be waived during this period of disability.
- **Survivor Support** counsel included
- **Portability** - If you retire, reduce your hours or leave your Employer, you can take this coverage with you according to the terms of the contract.

### VALUE ADD SERVICES

#### Travel Assistance Benefit

Employees and family are covered while traveling (100 or more miles from home), with crisis management, guaranteed hospital admissions, critical care monitoring, emergency medical evacuation, etc.

#### Employee Assistance Program

Unum's Life Balance program is there to assist employees with everyday home, personal and family issues. They provide full access to counseling, information, resources for wellness and free will preparation services.

#### Will Preparation

Unum's Life Balance program is there to assist employees with everyday home, personal and family issues. They provide full access to counseling, information, resources for wellness and free will preparation services.

## Premium Rates and Payment Methods

### Option 1: Standard Plan (LTD & Life/AD&D)

#### Long Term Disability (LTD)

- $.008 \text{ (rate)} \times \text{total annual salary}^* = \text{annual cost}$   
*\*if total annual salary exceeds \$170,000, use \$170,000 as total annual salary*
  - Quarterly Cost = annual cost / 4
  - Cost per Payroll = annual cost / # annual payrolls

#### Life with Accidental Death & Dismemberment (Life/AD&D)

- \$10,000 Coverage x .0036 (rate) = \$36 annual cost
- \$50,000 Coverage x .0036 (rate) = \$180 annual cost
- 1x Coverage =  $.0036 \text{ (rate)} \times \text{total annual salary}^{**} = \text{annual cost}$   
*\*\*if total annual salary exceeds \$120,000, use \$120,000 as total annual salary*
  - Quarterly Cost = annual cost / 4
  - Cost per Payroll = annual cost / # annual payrolls

### Option 2: Plus Plan (STD, LTD, & Life/AD&D)

#### Disability – Short and Long Term Disability (STD & LTD)

- $.0092 \text{ (rate)} \times \text{total annual salary}^* = \text{annual cost}$   
*\*if total annual salary exceeds \$170,000, use \$170,000 as total annual salary*
  - Quarterly Cost = annual cost / 4
  - Cost per Payroll = annual cost / # annual payrolls

#### Life with Accidental Death & Dismemberment (Life/AD&D)

- \$10,000 Coverage x .0036 (rate) = \$36 annual cost
- \$50,000 Coverage x .0036 (rate) = \$180 annual cost
- 1x Coverage =  $.0036 \text{ (rate)} \times \text{total annual salary}^{**} = \text{annual cost}$   
*\*\*if total annual salary exceeds \$120,000, use \$120,000 as total annual salary*
  - Quarterly Cost = annual cost / 4
  - Cost per Payroll = annual cost / # annual payrolls

### Disability (STD and/or LTD) Payment Methods – payment methods can vary by employee class

- Staff Benefit [Employer Paid]
  - Premium is paid by the employer.
  - Benefit will be taxable income if member becomes disabled and claim is approved.
- Payroll Deduction | Conventional [Employee Paid]
  - Premium is paid through an after-tax payroll deduction from the employee's paycheck.
  - Benefit will not be taxable income if member becomes disabled and claim is approved.
- Payroll Deduction | Tax Choice [Employer Paid]
  - Premium is paid when employer adds an earning amount equivalent to the disability (STD and/or LTD) premium amount. Amount is then deducted as an after- tax deduction from employee's paycheck.
  - Benefit will not be taxable income if the member becomes disabled and claim is approved.
  - This method allows the benefit to be employer paid and not be taxable in the event of an approved claim.

### Life/AD&D Payment Methods – payment methods must be the same for both employee classes

- Staff Benefit [Employer Paid]
  - Premium is paid by the employer.
- Payroll Deduction [Employee Paid]
  - Premium is paid through an after-tax payroll deduction from the employee's paycheck.
- *Specific Employee Option (employer paid)*
  - *If an employer does not want to provide Life/AD&D coverage as a staff benefit (employer paid) to all employees, an employer may add the premium amount to the specific employee's salary and then deduct the same amount as a payroll deduction. The benefit is then employer paid, and still follows the premium payment method of payroll deduction.*

<b>Benefit Plan Invoice Payment Schedule</b>			
1 <sup>st</sup> Quarter (January – March)	2 <sup>nd</sup> Quarter (April - June)	3 <sup>rd</sup> Quarter (July - September)	4 <sup>th</sup> Quarter (October - December)
Mailed - November Due - <b>December 15</b>	Mailed - February Due - <b>March 15</b>	Mailed - May Due - <b>June 15</b>	Mailed - August Due - <b>September 15</b>

# Frequently Asked Questions

## Benefit Plans

### What is the difference between the Standard Plan and Plus Plan?

The Standard Plan includes Long Term Disability (LTD) and Life with Accidental Death and Dismemberment (Life/AD&D). The Plus Plan includes Short Term Disability (STD), Long Term Disability (LTD), and Life with Accidental Death and Dismemberment (Life/AD&D).

### Can some employees be on the Standard Plan and others on the Plus Plan?

No, all employees must be on the same plan.

## Enrollment

### Who is eligible for benefits?

Eligibility is determined on the Employer Benefit Agreement (Form 120). The default number of hours for eligibility is those working at least 25 hours a week. The “eligible class full-time hire date” refers to the date when an employee became eligible for the FCMM Benefit Plan.

### What enrollment forms are required?

Eligible employees need to complete:

- Form 101 - Enrollment Application
- Form 102 - Beneficiary Designation
- Form 103 - Salary Worksheet

### What is an employee’s waiting period for benefits?

The employee’s waiting period is determined on the Employer Benefit Agreement (Form 120). The default waiting period for coverage begins the 1st of the month following the eligible class full-time hire date.

### What is an employee class?

For disability (STD and/or LTD), employee classes are different groups of employees determined by the employer, and each class can have different payment methods (e.g. exempt, non-exempt, administrative staff, pastoral, directors, etc.). For Life/AD&D, the employee classes are pre-determined and the premium payment method must be the same for both classes while coverage amount may vary by class.

### What if I miss the window for enrollment?

Employees who miss the window for enrollment will need to wait until the open enrollment period to apply for the Benefit Plan.

### What is open enrollment?

Open enrollment occurs only once a year. This period is for employees who missed their initial enrollment or employers making changes to their Employer Benefit Agreement. Enrollment and change forms must be submitted during the open enrollment dates for a January 1 effective date.

## Forms & Resources

### Where do I find forms and other benefit information?

All forms are found on our website, <http://www.fcmmbenefits.org> under the “Forms & Document” tab.

## Invoices & Premiums

### What are the premium rates and payment methods for the Standard and Plus plans?

See page 5 for premium rates and payment methods.

## Updates & Changes

### Do I need to update my salary with FCMM?

Yes! Any time there is a salary update, FCMM needs to be informed because the salary amount affects the disability (STD and/or LTD) potential benefit amount. Complete *Form 103: Salary Worksheet* and submit to FCMM.

### What if my employment ends or I am no longer eligible?

Inform FCMM by email immediately with the employee’s last date of eligible employment. FCMM issues premium refunds if necessary. Continuation information will be emailed to you.

*Active employment is work for earnings which are paid regularly where the employee is performing the material and substantial duties of their regular occupation. Severance pay is NOT active employment, and employees cannot continue to be covered.*

### What do I do when my marital status and/or name changes?

Provide FCMM with the proper documentation:

- Verification of Marital Status Update (copy of marriage certificate or copy of divorce decree)
- Verification of Name Change (copy of drivers license, social security card, or passport)
- Updated Form 102: Beneficiary Designation
- Updated contact information (if necessary)

## Benefit Information

### What is the Long Term Disability maximum salary used to calculate the maximum benefit?

The maximum salary to receive the maximum benefit for an approved Long Term Disability claim is \$170,000/year.

### What is the Short Term Disability maximum salary used to calculate the maximum benefit?

The maximum salary to receive the maximum benefit for an approved Short Term Disability claim is \$86,600/year.

### Are Life/AD&D premiums taxable?

Per the IRS, taxability of premiums applies only to staff benefit (employer) paid one times (1x) annual salary Life/AD&D coverage. The taxable income amount is equal to the total premium paid minus the equivalent premium amount for \$50,000 coverage.

*Example: If employee’s total annual salary equals \$90,000, the 1x Annual coverage amount is \$90,000. The total annual premium is \$324. The total annual premium for \$50,000 is \$180. Taxable income amount for \$90,000 of coverage (\$324) minus the total premium amount for \$50,000 (\$180) equals \$144.*

### How do I file a claim?

Contact FCMM Benefit Plan at [benefits@fcmmbenefits.org](mailto:benefits@fcmmbenefits.org) and specify which benefit it applies.



## FCMM Privacy Notice

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FCMM Benefits & Retirement (FCMM) offers multiple benefit programs serving employers and their employees. FCMM collects data from you and/or your employer that is needed to establish enrollment, administer your account(s), follow legal requirements, and prepare for your or your beneficiary's future benefits within a given program. This notice describes FCMM's policies for collecting your data and how we keep it secure.

### What information does FCMM collect?

The data we collect varies depending upon the benefit program(s) in which you participate and may include:

- Name, date of birth, social security number, marital status, address, phone, email
- Employment status, compensation, payroll data, hire date, housing allowance eligibility
- Investment selections, contribution amounts, tax status of contributions, deferral elections
- Account transactions including asset transfers, rollovers, distributions, benefit requests and claims
- Information and verifications related to processing of benefits or other participant requests such as: Beneficiary information, bank account details, statements for other retirement accounts
- Verifications related to changes in personal status or contact information such as: contact information, housing allowance eligibility, employment status, marital status – including divorce and death of spouse, disability status, name changes, and the effective dates of any of these changes.
- Communication between you (or a person you have authorized to speak on your behalf) and FCMM – Including email, phone, mail, and in person communications.
- Website activity: Some of the features accessed via our website may direct the information *you* provide to a third-party service provider in order to utilize the respective feature. Google Analytics is used to collect information about the effectiveness of our website and may include: the time of visit, pages visited, and time spent on website; referring site details; type of web browser and operating system; flash version, JavaScript support, screen resolution, and screen color processing ability; network location and IP address.

### Why does FCMM collect this data?

FCMM is considered the Controller of the data we collect. We collect personal information about you to conduct our business, check your identity and comply with laws.

Processing this data is necessary for the purposes of the legitimate interests by FCMM and our third-party service providers. Having this data allows us to answer questions needed to determine your benefits or take certain actions on your behalf. FCMM must have this information to comply with the provisions of the program documents and legal regulations in order to correctly satisfy the terms of our relationship with you.

When processing *special category data*, such as notices of ill health, FCMM may request *explicit consent* from the participant, or when needed, from a third-party that has been pre-authorized by the participant to act on their behalf.

If you have submitted personal information about another person (*ex: spouse*), FCMM will process this data based on the assumption that you obtained their consent for us to do so prior to providing FCMM with their personal information.

### What does FCMM do with your data?

Your information may be collected and processed at different times, such as when enrolling in one of our programs, when your data changes, or to administer the operations related to your account. FCMM limits the sharing of information with others and does not sell your information to third-parties.

As the Benefits Board of the Evangelical Free Church of America (EFCA), FCMM has an arrangement with the EFCA to utilize their secure database for establishing accounts and maintaining account data. We also partner with third-parties as necessary to administer your account and/or provide benefits within our different programs. The information shared with these entities is limited to what is necessary to process requests, provide benefits, maintain your account, or to provide access to program features. We require organizations with which we share your information to have privacy standards in place and to use your information only for the limited purpose for which it was shared.

### How do you request a correction to your data?

Our goal is to keep participant and employer information accurate and up-to-date. You can access certain information that we collect and maintain by contacting us. You may correct factual errors in your information by calling or sending us a request substantiating the error and offering a proposed correction. To protect your privacy and security, we will take reasonable steps to verify your identity before making corrections.

### How long does FCMM keep your data?

FCMM is required by law to keep our books and records available for review by the IRS, this includes participant data. Your information will be kept on file for audit purposes for at least as long as regulatory requirements dictate. Our data retention requirements don't expire upon cancellation or revocation of your account. FCMM must keep participant records on file until all benefits of your account have been paid out AND enough time has passed that FCMM will not be audited on those records. Generally, this means keeping your records for six years after the year your account is terminated.

### How does FCMM keep your data secure?

To help prevent unauthorized access, maintain data accuracy, and facilitate the correct use of information, we have put in place physical, electronic, and administrative procedures to safeguard your information. Only authorized employees and representatives are permitted to see and use your information. Those who use your information are required to follow established standards, procedures, and laws. Processed data is stored and maintained electronically within secure databases and/or secure files. Any physical copies of documents related to your account are stored in locked files within the FCMM office.

FCMM is committed to transferring your sensitive data via secure means. FCMM utilizes secure uploads to our third-party service providers. For correspondence from FCMM to our participants, we send communication through fax or a secure file exchange system. FCMM encourages participants to use these same methods when sending us data electronically.

## Contact Information

### Where to Send Documents

**Address**

FCMM Benefits & Retirement  
901 East 78th Street  
Minneapolis, Minnesota 55420

**Secure File Upload**

<https://fcmmbenefits.leapfile.net/>

**Fax**

(952) 853-8474

### How to Contact

**Email**

[benefits@fcmmbenefits.org](mailto:benefits@fcmmbenefits.org)

**Phone**

(800) 995-5357

**Website**

[www.fcmmbenefits.org](http://www.fcmmbenefits.org)

### FCMM Client Services Staff

Dan May

*Manager of Client Services*

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