

THE ROMAN CATHOLIC
ARCHDIOCESE OF ATLANTA

OFFICE OF HUMAN RESOURCES



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***2026 ANNUAL ENROLLMENT
CHANGES DUE NOVEMBER 19, 2025***

To Our Employees and Their Families:

The Archdiocese of Atlanta provides Group Health Benefits to all full-time employees of the Archdiocese of Atlanta working at least 1,500 hours per year.

Thank you for visiting our website. In addition to this letter, you will find all 2026 Annual Enrollment materials and updates, including the 2026 Lay Employee Benefits Quick Guide, Summary of Benefits and Coverage (SBC), The Group Health Care Plan Document and The Hartford Benefit Plan Booklet. You will also find information on additional services provided with your benefits, such as the Employee Assistance Program (EAP).

The Lay Employee Benefits Quick Guide provides annual mandated notices and an overview of the benefits available to you and your family through the Archdiocese of Atlanta. The Summary of Benefits and Coverage (SBC), The Group Health Care Plan Document and The Hartford Benefit Plan Booklet documents provide essential information about the health coverage options, and the Long-Term Disability and Term Life Benefits offered by the Archdiocese of Atlanta.

Please see the *2026 Annual Enrollment Instruction Sheet* for making changes to your benefit coverage and elections.

Form 1095-C In compliance with the Affordable Care Act, the Archdiocese of Atlanta is required to provide form 1095-C to each employee who had coverage through The Archdiocese of Atlanta Group Health Care Plan at any time during 2025.

Tax form 1095-C will be mailed to you by the IRS mandated deadline.

Meritain Health continues as the Plan's claims processor. The Aetna Choice Plus POS II continues as our network of providers.

OptumRx continues as our Pharmacy Benefit Manager (PBM).

Health ID Card – Please continue to use your current Meritain Health ID card.

2026 Group Health Plan CHANGES:

Dental Plan

- Annual Maximum Benefit of \$1500 for B, C and D class only PLUS
- Two (2) preventive (A class) services per year to be paid at \$100%
(Removed preventative from the Annual Maximum Benefit)

Vision Plan

- Increased the Annual Maximum Vision Materials Benefit from \$250 to \$500

2026 Group Health Plan RATES: Effective January 1, 2026 there will be a slight increase to the monthly premium amounts.

MONTHLY CONTRIBUTION	VALUE PLAN	PREMIER PLAN
Employee Only	\$0	\$131.66
Employee & Children	\$500.28	\$704.37
Employee & Spouse	\$697.79	\$875.52
Employee & Family	\$720.15	\$892.64

Please feel free to contact me at (404) 920-7485 or Fay Duhé at (404) 920-7484 should you have questions or need assistance.

God Bless,



Lily Gallagher
Director of Benefits
Archdiocese of Atlanta