



# WELS Benefit Plans

Wisconsin Evangelical Lutheran Synod



## WELS Benefit Plans

### *Benefits Guide* For new workers in 2026

This guide provides a summary of the benefits available to you as a new worker at a WELS or ELS sponsoring organization. WELS has specifically designed these plans to support our Synod's ministry efforts by taking care of workers and their families wherever the Lord calls them to serve, while also allowing sponsoring organizations to provide comprehensive and affordable benefits that are consistent with God's Word.

# BENEFITS QUICK GUIDE

This guide provides a summary of the benefits that are available to you as a new worker. As you begin your ministry, this guide will help you familiarize yourself with the WELS Benefit Plans and the decisions you need to make for you and your family.



## PROTECTING YOUR HEALTH WITH THE WELS VEBA GROUP HEALTH CARE PLAN (WELS VEBA)

### What is WELS VEBA?

WELS VEBA is our church body's health plan. Through WELS VEBA, the health care costs for WELS and ELS workers and their families are shared by the sponsoring organizations and plan members.



**Active workers who enroll in WELS VEBA Medical Benefits automatically receive:**



Prescription Drug Benefits



Vision Benefits



Long-Term Disability Insurance

### Coverage available in addition to WELS VEBA Medical Benefits:



Dental Insurance



Group Term Life Insurance



Long-Term Disability Insurance  
(For eligible workers who do not enroll in Medical Benefits)



## PROTECTING YOUR FUTURE WITH THE WELS SHEPHERD PLAN

WELS offers retirement savings vehicles through the WELS Shepherd Plan to help workers prepare for a more financially secure retirement.

### What is the WELS Shepherd Plan?

The WELS Shepherd Plan is a 403(b) retirement income account plan that allows WELS called and lay workers to **save and invest** during their working years to provide an account balance that can be accessed in retirement. Workers own their Shepherd Plan account balances and are responsible to invest and manage their account balances to help meet financial needs in retirement.



### Any questions?

Visit the WELS Benefit Plans website at [welsbpo.net](http://welsbpo.net) or send an email to us at [bpo@wels.net](mailto:bpo@wels.net).

# THREE STEPS TO BENEFITS

## 1. READ

Please take time to read this guide and other information available to you. The WELS Benefit Plans website **welsbpo.net** is a great resource for finding detailed information about the benefits available, including latest news, rates and FAQs. You can also [watch](#) our animation that brings to life the advantages of WELS VEBA.



## 2. CONTACT

It is important to contact your sponsoring organization to determine the level of support that they will provide for your health care coverage, and to determine if the organization has created your participant account on the **Shepherd Plan** website. Obtaining this information as soon as possible is important so that you can enroll for health benefits and begin saving for retirement.

## 3. ENROLL

### ➤ WELS VEBA

To enroll in **WELS VEBA**, you need to complete the online health enrollment form through the WELS Benefits Service Center website, **wels.bswift.com** (see page 8 for details on how to access the site) or by calling **1-800-487-8322 (option 1)**. This is required **within the first 60 days of your employment start date**.

Your coverage will become effective on the latest of the following dates:

- Employment start date
- Date enrollment is completed
- Date requested for coverage, but not more than 60 days after employment start date

If you do not enroll within the 60-day period, your only opportunities to enroll in the future will be (1) if you experience a qualifying life event for special enrollment; or (2) if WELS offers an open enrollment.

### ➤ WELS SHEPHERD PLAN

If you are a **called worker** who has been issued a formal call by WELS to serve at least half-time at a WELS sponsoring organization, then you will automatically participate in the Shepherd Plan and should enroll on the Shepherd Plan website soon after your call begins.

If you are a **lay worker** who has been hired to regularly work at least 20 hours per week at a WELS sponsoring organization, then you may participate and enroll in the Shepherd Plan if you wish.

To enroll, you should check with the Shepherd Plan administrator at your organization to confirm that your participant record has been created on the Shepherd Plan website, and the administrator will provide you with enrollment instructions.



# PROTECTING YOUR HEALTH

## WELS VEBA MEDICAL BENEFITS

WELS VEBA offers four medical plan options. We encourage you to discuss with your sponsoring organization the financial support they will provide for your health coverage, to ensure that your coverage level meets your family's health care needs while also remaining affordable to your organization.

A summary of the plan options are below:

|   | Plan 1                               | Plan 2                               | Plan 3*                              | Plan 4                               |
|---|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| <b>Individual Deductible</b>                | \$500                                | \$1,000                              | \$3,400                              | \$3,500                              |
| <b>Family Deductible</b>                    | \$1,000                              | \$2,000                              | \$6,800                              | \$7,000                              |
| <b>Individual Medical Out-of-Pocket Max</b> | \$1,500                              | \$3,000                              | \$5,100                              | \$6,000                              |
| <b>Family Medical Out-of-Pocket Max</b>     | \$3,000                              | \$6,000                              | \$10,200                             | \$12,000                             |
| <b>Co-Insurance Percentage</b>              | 90% in-network<br>70% out-of-network | 85% in-network<br>70% out-of-network | 80% in-network<br>70% out-of-network | 80% in-network<br>50% out-of-network |

\*WELS VEBA Plan 3 is compliant for use with Health Savings Accounts (HSAs). Members may set up an HSA for use in conjunction with Plan 3 with their own financial institution. Please be aware that certain benefits, such as prescription drugs, are covered differently under Plan 3. Please contact the WELS Benefits Service Center for additional information.

## ➤ HOW IT WORKS

1. You and/or your sponsoring organization pay a monthly *contribution*.
2. You pay for health care until you meet your *deductible*.
3. Your plan then kicks in and you pay only a portion of the cost (*coinsurance*).
4. If you have high medical costs, you won't pay more than your *out-of-pocket maximum* for covered services obtained at in-network providers.

## ➤ WHO IS ELIGIBLE FOR WELS VEBA MEDICAL BENEFITS?

A person who is hired or called, and compensated, by a sponsoring organization to regularly work at least 20 hours per week and at least 5 months per year.

**Please note that the WELS VEBA Commission has the sole discretion to determine who qualifies as eligible for WELS VEBA.**





## WELS VEBA BENEFITS (INCLUDED WITH MEDICAL BENEFITS)

If you enroll in WELS VEBA Medical Benefits, you automatically receive the following benefits:



### ➤ PRESCRIPTION DRUG BENEFITS



Members can obtain prescription drugs at a network retail pharmacy or by mail through the Express Scripts mail service pharmacy.

Co-pay amounts for covered prescription drugs are provided below\*:

| Drug Status                         | Retail Co-Pay<br>(30-day supply) | Mail Co-Pay<br>(90-day supply) |
|-------------------------------------|----------------------------------|--------------------------------|
| Generic                             | \$10                             | \$25                           |
| Formulary (Preferred) brand         | \$30                             | \$75                           |
| Non-Formulary (Non-preferred) brand | \$60                             | \$150                          |

\* **Important:** Members enrolled in WELS VEBA Plan 3 pay the full discounted cost of their prescription drugs until their annual deductible is met. WELS VEBA pays 100% of the covered prescription drug expenses for Plan 3 members for the remainder of the year after the applicable Plan 3 deductible is met.



### ➤ VISION BENEFITS



Vision coverage focuses on the overall health and wellbeing of your eyes. One eye exam per calendar year is provided at no cost to you and each covered family member if obtained at a VSP in-network provider. Benefits are also provided for glasses and contact lenses.



### ➤ LONG-TERM DISABILITY INSURANCE



Long-term disability insurance provides protection to members who, due to sickness or injury, are unable to perform the duties for which they have been called or hired.

Coverage highlights:

- Benefits begin on the 91st day of an approved disability.
- Your benefit is 66.67% of your covered pre-disability monthly earnings. This amount may be reduced by other sources of income received while you are disabled.
- Benefits may be payable up to your Social Security Normal Retirement Age (or older if a disability begins after you attain age 60).

**Note:** Workers who are eligible, but not enrolled for medical benefits under WELS VEBA, may purchase long-term disability insurance on a voluntary basis if serving a sponsoring organization with at least one active worker enrolled in WELS VEBA Medical Benefits.



You must enroll for long-term disability insurance within the first 60 days of your employment start date to be approved for coverage. Enrollment requests made later are generally subject to medical evidence of insurability and approval by the insurance carrier, and are not guaranteed.



## PROTECTING YOUR HEALTH

### WELS VEBA BENEFITS (IN ADDITION TO MEDICAL BENEFITS)

You may enroll in the following benefits, which are available for a separate premium in addition to the contribution for WELS VEBA Medical Benefits.



#### 👉 DENTAL INSURANCE



Dental insurance covers many preventive care services, such as exams, cleanings and X-rays, at no cost to you and your covered family members. Dental insurance also covers basic services (e.g., fillings), major services (e.g., crowns) and orthodontic services (for dependents until age 19).

Monthly premiums for dental insurance in 2026 are as follows:

| Coverage Tier       | Monthly Premium |
|---------------------|-----------------|
| Employee Only       | \$38.03         |
| Employee + Spouse   | \$77.78         |
| Employee + Children | \$94.16         |
| Family              | \$154.43        |



#### 👉 GROUP TERM LIFE INSURANCE



Group term life insurance can provide valuable protection for you and your family when financial help is needed the most.

Group term life insurance is available in the following coverage amounts:

| Coverage        | Benefit  |
|-----------------|--|
| Worker          | Guaranteed issue during first 60 days of initial eligibility: \$150,000<br>Coverage amounts available range from \$10,000 to \$400,000.  |
| Spouse          | Guaranteed issue during first 60 days of initial eligibility: \$25,000<br>Coverage amounts available range from \$5,000 to \$200,000.<br>Spouse amount is limited to 50% of the worker amount. |
| Dependent Child | Guaranteed issue during first 60 days of initial eligibility: \$5,000<br>Coverage amount available: \$5,000  |

To be eligible for Dental or Group Term Life Insurance, you must serve at a sponsoring organization with at least one active worker enrolled in WELS VEBA Medical Benefits.

Premium rates vary by coverage type, amount and age. Please contact the WELS Benefits Service Center to determine the applicable premium for your coverage.



You must enroll for group term life insurance within the first 60 days of your employment start date to be approved for coverage up to the guaranteed issue amounts specified above. Enrollment requests made later are generally subject to medical evidence of insurability and approval by the insurance carrier, and are not guaranteed.

# PROTECTING YOUR FUTURE

## WELS SHEPHERD PLAN

WELS offers a 403(b) retirement income account plan, called the WELS Shepherd Plan, to help workers prepare for a more financially secure retirement. Although retirement may seem a long way off for many workers who are just entering the ministry, it is never too early to develop a financial plan and begin saving for the future. Please consider the benefits of the Shepherd Plan, in conjunction with your Social Security benefits (if applicable), and your personal savings, when planning for retirement.

The WELS Shepherd Plan allows you, as a called or lay worker, to save and invest during your working years to provide an account balance that you can access during retirement. You own the balance in your Shepherd Plan account, and are responsible to invest and manage that account balance to help meet your financial needs in retirement.

### 👉 ELIGIBILITY AND PARTICIPATION

If you are a **called worker** who has been issued a formal call by WELS to serve at least half-time at a WELS sponsoring organization, then you will automatically participate in the Shepherd Plan and should enroll on the Shepherd Plan website soon after your call begins.

If you are a **lay worker** who has been hired to regularly work at least 20 hours per week at a WELS sponsoring organization, then you may participate and enroll in the Shepherd Plan if you wish.

\* **Important:** You should check with the Shepherd Plan administrator at your organization to confirm that your participant record has been created on the Shepherd Plan website so that you can complete the enrollment process.

### 👉 CONTRIBUTIONS

There are three main types of contributions that can be made to your Shepherd Plan account: Synod Allocations, Employer Contributions, and Employee Contributions.

**Synod Allocations** are the denominational retirement benefits that are paid for by WELS sponsoring organizations and provided to WELS called workers. Only called workers receive Synod Allocations. If you are a called worker, you will receive a Synod Allocation in your Shepherd Plan account each quarter based on your call status on the first day of that quarter, according to the amounts shown below:

- Full-Time: \$500
- Three-Quarter-Time: \$375
- Half-Time: \$250

**Employer Contributions** are contributions that your sponsoring organization may make to your Shepherd Plan account in addition to any amount paid for Synod Allocations. Employer Contributions are voluntary; sponsoring organizations are not required to make Employer Contributions. Check with your sponsoring organization to determine if Employer Contributions will be made to your Shepherd Plan account.

**Employee Contributions** are the amounts that you can save from your pay and invest in the Shepherd Plan for use during your retirement years. Employee Contributions can be made pre-tax or after-tax.

#### Note:

- You can invest these contributions in any of the investment fund options available in the Shepherd Plan.
- Eligible contributions made to a called worker's Shepherd Plan account while the called worker is a Minister of the Gospel may be eligible for distribution in retirement as housing allowance that is not subject to income tax.
- Workers at ELS sponsoring organizations are not eligible to participate in the WELS Shepherd Plan.



Called workers who served before 2022 may have earned a benefit in the WELS Pension Plan, which is now frozen. Please contact the Benefit Plans Office if you have any questions about the Pension Plan.

# HOW TO ENROLL IN WELS VEBA



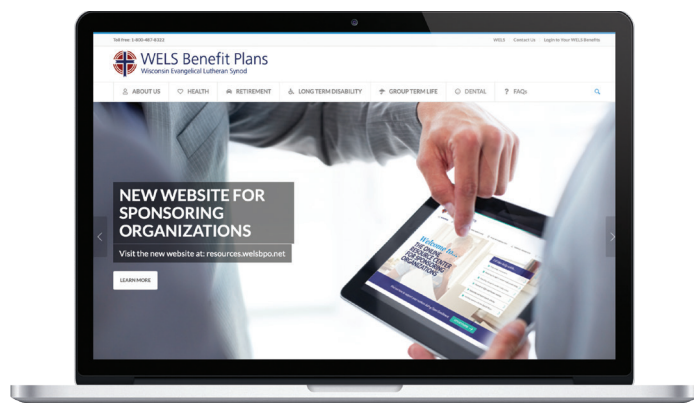
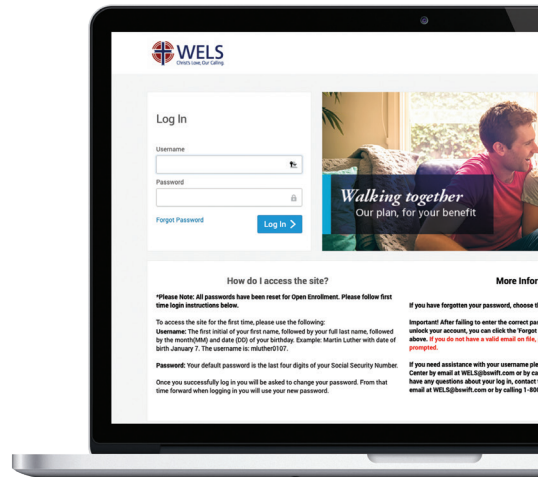
## YOU MAY ENROLL IN WELS VEBA EITHER BY PHONE OR ONLINE

To enroll by phone, call the WELS Benefits Service Center at **1-800-487-8322 (option 1)**.

To enroll online, login to the WELS Benefits Service Center website at **wels.bswift.com**.

If enrolling online, to access the site for the first time:

- **Username:** *First initial* of your first name, followed by your *full last name*, followed by the *month (MM)* and *date (DD)* of your birth. (Example: Martin Luther, born on January 7th, username is *mluther0107*).
- **Password:** The last four digits of your Social Security Number.



## ANY QUESTIONS?

If you have any questions, the WELS Benefit Plans Office and website (**welsbpo.net**) is a great resource for general benefit information. For specific questions regarding enrollment, you should contact the WELS Benefits Service Center at **1-800-487-8322 (option 1)** or **wels@bswift.com**.

## ABOUT THIS GUIDE

This guide describes the benefit plans available to you as an employee of WELS or ELS. The details of these plans are contained in the official Plan Documents, including some insurance contracts. This guide is meant only to cover the major points of each plan. It does not contain all of the details that are included in your Summary Plan Description (SPD) (as described by the Employee Retirement Income Security Act). If there is ever a question about one of these plans, or if there is a conflict between the information in this guide and the formal language of the Plan documents, the formal wording in the Plan Documents will govern. Please note that the benefits described in this guide may be changed at any time and do not represent a contractual obligation on the part of WELS.



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