

ROMAN CATHOLIC
DIOCESE *of*
SACRAMENTO

ANNUAL ADMINISTRATIVE WORKSHOP

AGENDA

- 2023 Employee Benefits Program
 - ✓ Important Open Enrollment Dates and Notifications
 - ✓ What's changing for 2023
 - ✓ Benefit Offerings from Reta
- Benefits Reminders
 - ✓ HSA Payroll Process / Updates
 - ✓ Priests included in BAS Statements
 - ✓ Insurance Waivers
 - ✓ Qualifying Life Event Process
- Personnel Reminders and Updates
 - ✓ Personnel Forms
 - ✓ Personnel Handbook Updates
 - ✓ Orientation Process
 - ✓ HR Record Retention
 - ✓ Benefit Eligibility
 - ✓ Transition of Key Players
 - ✓ Lay Personnel Background Check
 - ✓ Live Scan/Safe Haven
 - ✓ Sexual Harassment Training
 - ✓ LOA's and W/C Cases
 - ✓ Insurance Stoploss
 - ✓ Termination Requirements
 - ✓ ADP Rollout
 - ✓ Misc. Payroll Items
 - ✓ Pay Transparency Law
 - ✓ Breakroom Postings
 - ✓ COVID Items
 - ✓ Equifax and The Work Number
 - ✓ Weekly News on Website
- Miscellaneous Bookkeeping Items



2023 EMPLOYEE BENEFITS PROGRAM



OPEN ENROLLMENT 2023

Open Enrollment Period:

Monday May 1st – Tuesday May 16th at 11:59 P.M.

- Coverage and premium cost share will become effective July 1, 2023 and last until June 30, 2024.
- Passive Enrollment
- If employees do not go online to elect coverage, **their existing benefits will default to current coverage and tiers.**
- Changes are not allowed outside Open Enrollment- unless employees experience a Qualifying Event. Examples can be found in the Employee Benefits Guide.
- Training Tuesday's will continue to offer training for administrators at 11 am
 - April 25 – Open Enrollment Training
 - May – All Month – Open Enrollment Training
 - June 6th & 13th – Post Open Enrollment Training



ENROLLMENT PROCESS

- The benefits open enrollment process is completely online through RetaEnroll 360
- Reta Trust registered users will receive communication from Reta about what's coming for the new plan year closer to open enrollment date.
- The enrollment site is available 24 hours a day, 7 days a week during the Open Enrollment period. Steps for completing online benefits elections:
 1. Go to www.retatrust.org and click the Log In button in the top right hand corner.
 2. Enter your User Name and Password.
 3. Follow the easy enrollment steps in the Open Enrollment Wizard.
 4. Review and confirm your elections, making changes as necessary.
 5. Print your benefits confirmation statement.



WHAT'S CHANGING FOR 2023?

- Reminder: Reta's integrated wellness plans are now offered through Reta's medical plan providers: Kaiser Workforce Health and BSC Wellvolution
- ***MyCatholicDoctor*** programs offered by BSC and now Kaiser
Reta will be offering MCD natural family planning care for Kaiser members beginning on January 1, 2023 at no additional cost.

Reta introduced MCD to our members enrolled in BSC in July of 2022. BSC members will continue to have access to the MCD national network at no additional cost for services, including virtual primary care, restorative reproductive medicine, natural family planning, mental health, adolescent medicine, and end of life programs. MCD can also order labs, imaging, and prescriptions for Reta BSC members.



BLUE SHIELD OF CALIFORNIA (BSC) PLANS

	EPO plan	PPO	PPO with HSA
Network	PPO network providers only	PPO network + non-network providers	PPO network + non-network providers
Access to care	Visit any doctor you choose in the PPO network; can't go outside network	Visit any doctor you choose	Visit any doctor you choose
Availability	Nationwide	Nationwide	Nationwide
Health Savings Account with Health Equity	No	No	Yes
Telehealth (Teladoc) general medicine & mental health	Your office visit copay	Your office visit copay	After your deductible is met your office visit copay
Consider this plan if you want:	<ul style="list-style-type: none"> • Access to Full PPO network of doctors • More affordable plan than our regular PPO plan 	<ul style="list-style-type: none"> • Flexibility to see any doctor you choose, in or out of network 	<ul style="list-style-type: none"> • Flexibility to see any doctor you choose, in or out of network



BLUE SHIELD EPO-5139 PLAN

EPO gives you access to:

- 39,000+ doctors and specialists in BSC PPO network
- Self-referral to specialists without a referral from a primary care provider
- Care anywhere in the world through BlueCard

EPO does not cover:

- Non-network services

It's important to know who participates in your EPO plan's network. If you go to a doctor or hospital that doesn't accept your plan, you'll pay all costs.



BLUE SHIELD PPO-5119 PLAN

PPO gives you access to:

- 39,000+ doctors and specialists in BSC PPO network
- Self-referral to specialists without a referral from a primary care provider
- Care anywhere in the world through BlueCard

PPO also covers:

- Non-network services



BLUE SHIELD HSA-5070 PLAN

PPO with an HSA Plan offers:

- 39,000+ doctors and specialists in BSC PPO network
- Self-referral to specialists without a referral from a primary care provider
- Care anywhere in the world through BlueCard

PPO with an HSA Plan also includes:

- Health Savings Account (HSA) with **Health Equity** to put aside tax-free money for qualified medical expenses
- Roll-over and portable HSA funds for qualified medical expenses

You will pay for all covered services until you reach your deductible.



BSC PROVIDER NETWORK

- To find doctors, urgent care centers, mental health providers and hospitals in California
 - **blueshieldca.com/networkPPO**
- To find a doctor and hospitals throughout the United States (outside of California)
 - **provider.bcbs.com**
- Access **blueshieldca.com/watchfindadoctor** to for quick video on the Find a Doctor tool



MEMBER ID CARD

- Members will have one (1) ID card for their Healthcare and Pharmacy needs.
- Same subscriber ID number for Medical and RX
- Subscribers will receive 2 ID cards in a welcome letter per family. Only the Members name appears on the ID card.
- How to get additional ID cards:
 - Call Member Services
 - Visit EngagementPoint at blueshieldca.com/engagementpoint



BLUE SHIELD ENGAGEMENT POINT



Tap into your health

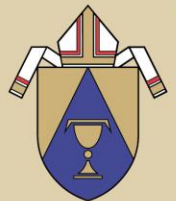
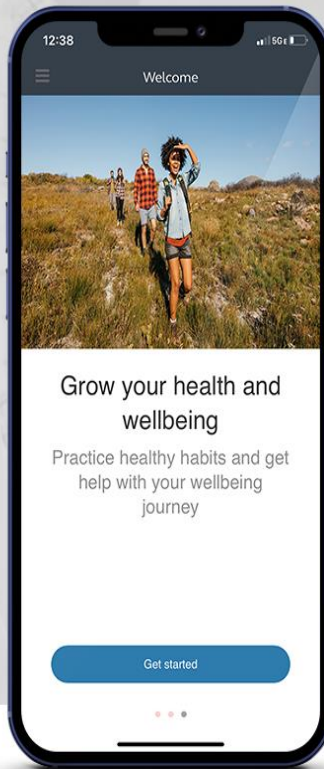
Earn rewards, manage your health, and view your member ID with EngagementPoint – available exclusively through your employer.

Create my account

Already have an account? [Sign in here.](#)



Scroll Down



CVS CAREMARK (CVS)

- Reta's Pharmacy Benefit Manager
- BSC members will receive Welcome Kits and a single ID card for BSC medical and CVS pharmacy benefits prior to July 1st.
- Nationwide network of pharmacies that includes Walgreens, Walmart, local pharmacies and CVS stores.
- Members can sign into their Caremark.com profile to locate an in-network pharmacy near them
- CVS direct member outreach for formulary disruption and specialty medications
 - To see a list of CVS non-specialty medications visit https://www.caremark.com/portal/asset/Advanced_Control_Specialty_Performance_Drug_List.pdf
 - To see a list of CVS Specialty Formulary medications visit https://www.caremark.com/portal/asset/Advanced_Control_Specialty_PREFERRED_Drug_List.pdf



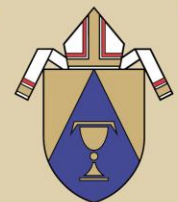
HEALTH EQUITY

- Reta is the HSA plan administrator
- Members will receive the following:
 - *Welcome Kit*
 - *New Health Equity debit card*
- PPD Account Numbers –
Employee's direct deposit bank
information



KAISER PERMANENTE PLANS

BENEFIT DESCRIPTION	KAISER EPO-4063	KAISER HSA-4085
Calendar Year Deductible: Individual / Family	\$1,000 / \$2,000	\$1,400 / \$2,800
Out of Pocket Maximum: Individual / Family	\$4,000 / \$8,000	\$3,000 / \$6,000
Hospitalization	10% after Deductible	\$250 after Deductible
Outpatient Surgery	10% after Deductible	\$150 after Deductible
Emergency Room (waived if admitted)	10% after Deductible	\$100 after Deductible
Office Visits	\$25	\$20 after Deductible
Routine Physicals	No Charge	No Charge
X-Ray/Lab	\$10 after Deductible	\$10 after Deductible
Chiropractic	\$15 (24 visits / calendar year)	\$15 after Deductible (20 visits / calendar year)
Ambulance	\$150 after Deductible	\$150 after Deductible
Routine Eye Care	No Charge (\$175 allowance every 24 months)	No Charge (\$150 allowance every 24 months)
Prescription Generic / Brand	Generic: \$10 (retail) / \$20 (mail order) Brand: \$30 (retail) / \$60 (mail order) 30 day supply at retail 100 days supply at mail order	After Deductible: Generic: \$10 (retail) / \$20 (mail order) Brand: \$30 (retail) / \$60 (mail order) 30 day supply at retail 100 days supply at mail order



KAISER EPO-4063 PLAN

- Preventative care at little or no out-of-pocket cost
- A personal doctor for routine medical care
- No referrals needed for certain specialties, like optometry and obstetrics/gynecology
- EPO plans do not cover care outside the Kaiser network unless it's an emergency.
 - 24/7 Away from Home Travel Line: 951-268-3900
 - Kp.org/travel
- Kaiser provides the pharmacy benefits



KAISER HSA-4085 PLAN

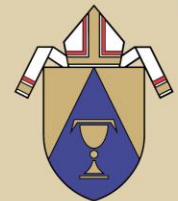
- Preventative care at little or no out-of-pocket cost
- A personal doctor for routine medical care
- Copays or coinsurance for most covered services after you meet your deductible
- No additional coinsurance needed after the annual out-of-pocket maximum is met
- A pre-tax health savings account to help pay for certain medical expenses
- Kaiser provides the pharmacy benefits



DELTA DENTAL PLANS

BENEFIT DESCRIPTION	LOW OPTION		HIGH OPTION	
	PPO	Non-PPO	PPO	Non-PPO
Annual Deductible - Individual / Family Max.	\$50 (x3)		\$50 (x3)	
Deductible Waived for Preventive Services	Yes		Yes	
Preventive Services	100%	100%	100%	100%
Basic Services	90%	80%	90%	80%
Major Services (includes Implants)	60%	50%	60%	50%
Waiting Period for Major Services	None		None	
TMJ (Separate \$1,000 Lifetime max)	60%	50%	60%	50%
Calendar Year Maximum Benefit	\$1,500	\$1,000	\$2,500	\$1,500
Orthodontia-Dependent Children	50%		50%	
Adult Benefit Ortho	50%		50%	
Orthodontia Deductible	N/A		N/A	
Orthodontia Lifetime Benefit	\$1,000		\$2,500	
Waiting Period for Orthodontia	None		None	

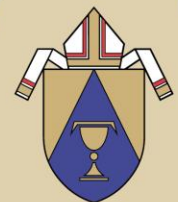
Coverage includes Brush Biopsies and 1 regular/1 periodontic cleaning every 6 months



VSP VISION PLANS

BENEFIT DESCRIPTION	LOW OPTION			HIGH OPTION		
	In-Network	Out of Network	Frequency	In-Network	Out of Network	Frequency
Exam	\$10 Copay	Up to \$45	Every 12 Months	\$10 Copay	\$10 Copay	Every 12 Months
Lenses	See below		Every 24 Months*	See below		Every 12 Months*
Single Vision Lenses	Covered in Full	Up to \$30		Covered in Full	Up to \$30	
Bifocal Lenses	Covered in Full	Up to \$50		Covered in Full	Up to \$50	
Trifocal Lenses	Covered in Full	Up to \$65		Covered in Full	Up to \$65	
Frames	\$25 Copay \$150 Allowance	Up to \$70	Every 24 Months	\$10 Copay \$150 Allowance	Up to \$70	Every 12 Months
Contact Lenses in Lieu of Glasses	\$150 Allowance for Exam and Contacts	Up to \$70	Every 24 Months	\$150 Allowance for Exam and Contacts	Up to \$105	Every 12 Months

**Interim Benefits: Lenses provided every 12 months with an Rx change of .50 diopter or more



RETA'S INTEGRATED WELLNESS PROGRAMS

- Wellvolution through BSC
 - Members will have 29 lifestyle well-being programs to choose from. And they will be eligible for disease prevention and condition reversal programs, which include intensive behavioral counseling for treating diabetes, hypertension, digestive health, obesity, and heart disease.
 - For complete details about Wellvolution, go to https://rbc-ihc.retatrust.org/?id=ab9b2b45c5c95e3c00b106993c1d5804&ft=onlyNetworks#medical-blue_shield_ca
- Workforce Health through Kaiser
 - A health assessment, telephonic coaching and healthy lifestyle programs will be offered to members to help them reach their unique goals. And this information can be shared with the member's care delivery team to provide a more holistic view of their patient's health status.
 - Online healthy lifestyle programs, videos, podcasts, recipes and more
 - On-site health education classes and support groups (classes vary at each location and some may require a fee)
 - For complete details about Workforce Health, go to <https://rbc-ihc.retatrust.org/?id=e7e142497f5cdba9b8dad86d36473e9d&ft=onlyNetworks>



ADMINISTRATOR NOTES

- Invoices are generated on the 21st of every month
- Invoices should be printed and compared to the ADP roster on a monthly basis to insure accuracy of employees being billed for
- Review bill for any changes
- Administrator accounts are separate from your employee account
- Administrator account must also be approved by the benefits administrator for the location



HSA EDUCATION

JULIE ROWLANDS



Winning with an HSA



Member since 2011



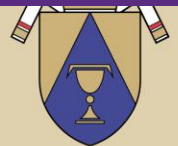
Members
since 2012



Members
since 2010



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Winning with an HSA

EMPOWERING YOU
—*to build*—
HEALTH SAVINGS



Why choose an HSA?

AN EASY WIN
in today's
— COMPLEX —
HEALTHCARE
SYSTEM

Save now:

- Lower monthly insurance premiums
- HSA contributions aren't taxed
- Qualified medical expenses are tax-free¹

Save for the future:

- HSA funds roll over year after year
- You keep the money even if you change jobs or insurance plans
- Tax-free interest earned
- Simple investment options

Same: doctors, network, negotiated discounts



Two parts: health plan + savings account

HEALTH PLAN

blue  of california

HSA-qualified plan through insurance
Preventive services covered at 100%

Office visits, prescriptions,
deductible, copays and coinsurance
ALL count toward your deductible
and out-of-pocket maximum



HealthEquity[®]

HSA through HealthEquity
Tax-free¹ savings for
qualified medical expenses

Works together with
the HSA-qualified plan



The old way vs. the new strategy

TRADITIONAL HEALTH PLAN



Higher monthly premium
Lower deductible

VS.

HSA-QUALIFIED HEALTH PLAN



Lower monthly premium
Higher deductible



Money into HSA



How an HSA works



Qualified medical expenses:

Exams, prescriptions, procedures, vision, dental and more

Visit HealthEquity.com/QME



Don't leave
money
on the **TABLE** for the IRS

Put money into your HSA

**Maximize your HSA
contributions in 2023:**

Single-coverage: \$3,850
save up to \$700 in taxes!¹

Family-coverage: \$7,750
save up to \$1,400 in taxes!¹

Catch-up contribution,
age 55+: \$1,000



How to add funds to your HSA

- Your employer provides:
 - \$3,850/year for single coverage
 - \$7,750/year for family coverage
- Pre-tax contributions through payroll
 - Change your payroll deductions any time
- You can make contributions until the tax deadline for the previous tax year



At the very least...

Fund your account before paying a qualified expense.



Who is eligible to add funds to an HSA?



To contribute to an HSA, the IRS requires that:

- You are covered **ONLY** by an HSA-qualified health plan
 - Other health coverage may disqualify you (including Medicare, Tricare, or a traditional health plan)
- You do not have access to a full purpose FSA (even through a spouse)
- You aren't claimed as a dependent on anyone's tax return



Healthcare costs in retirement



401(k) and HSA
together can offer
the optimal retirement
planning solution

AVERAGE COUPLE NEEDS
\$265,000*

to cover out-of-pocket healthcare costs during retirement

~~**\$318,000**~~
gross withdrawal from
a traditional 401(k)**

OR

\$265,000
tax-free withdrawal
from an HSA



Cover the Medicare gap

Qualified medical expenses not covered by Medicare can always be paid from your HSA tax-free.¹

- Prescriptions
- Medical
- Dental
- Vision
- Hearing expenses
- Copays
- Premiums







Extra fuel for your retirement

Maximize your tax-free earning potential through investing

- Access the easy-to-use investment platform within your HealthEquity member portal.
- Use your savings to help grow your money even faster.
- Other than the monthly investment administration fee and the respective mutual fund expense ratio there are no trading costs, commissions or fund minimums.



Investment advisory services

 Powered by: HealthEquity Advisors, LLC		HealthEquity
 Autopilot Full-service fund management based on personal risk profile	 GPS Guidance provided for fund management, implemented by account holder	 Self-driven Manage your own funds

HealthEquity, Inc. does not provide financial advice. HealthEquity Advisors, LLC™, a wholly owned subsidiary of HealthEquity, Inc. and an SEC-registered investment adviser, does provide web-based investment advice to HSA holders that subscribe for its services (minimum thresholds and additional fees apply). HealthEquity Advisors, LLC also selects the mutual funds offered to HSA holders through the HealthEquity, Inc. platform. Registration does not imply endorsement by any state or agency and does not imply a level of skill, education, or training. HSA holders making investments should review the applicable fund's prospectus. Investment options and thresholds may vary and are subject to change. Consult your advisor or the IRS with any questions regarding investments or on filing your tax return.





HealthEquity's plan comparison tool

Let us do the math!
Compare your health plans side-by-side

CompareMyHSA.com



Powerful tools



- Debit card access¹
- Use the mobile app² or member portal to:
 - Check your balance
 - Review transactions
 - Review claims
 - Submit new claims or documents
 - Send payments and reimbursements
 - Access tax documents



Account mentors

- Available around-the-clock, every day
- Helpful support for members
- Based in Salt Lake City

877.857.6810



2016
Silver Stevie
Customer Service
Team of the Year



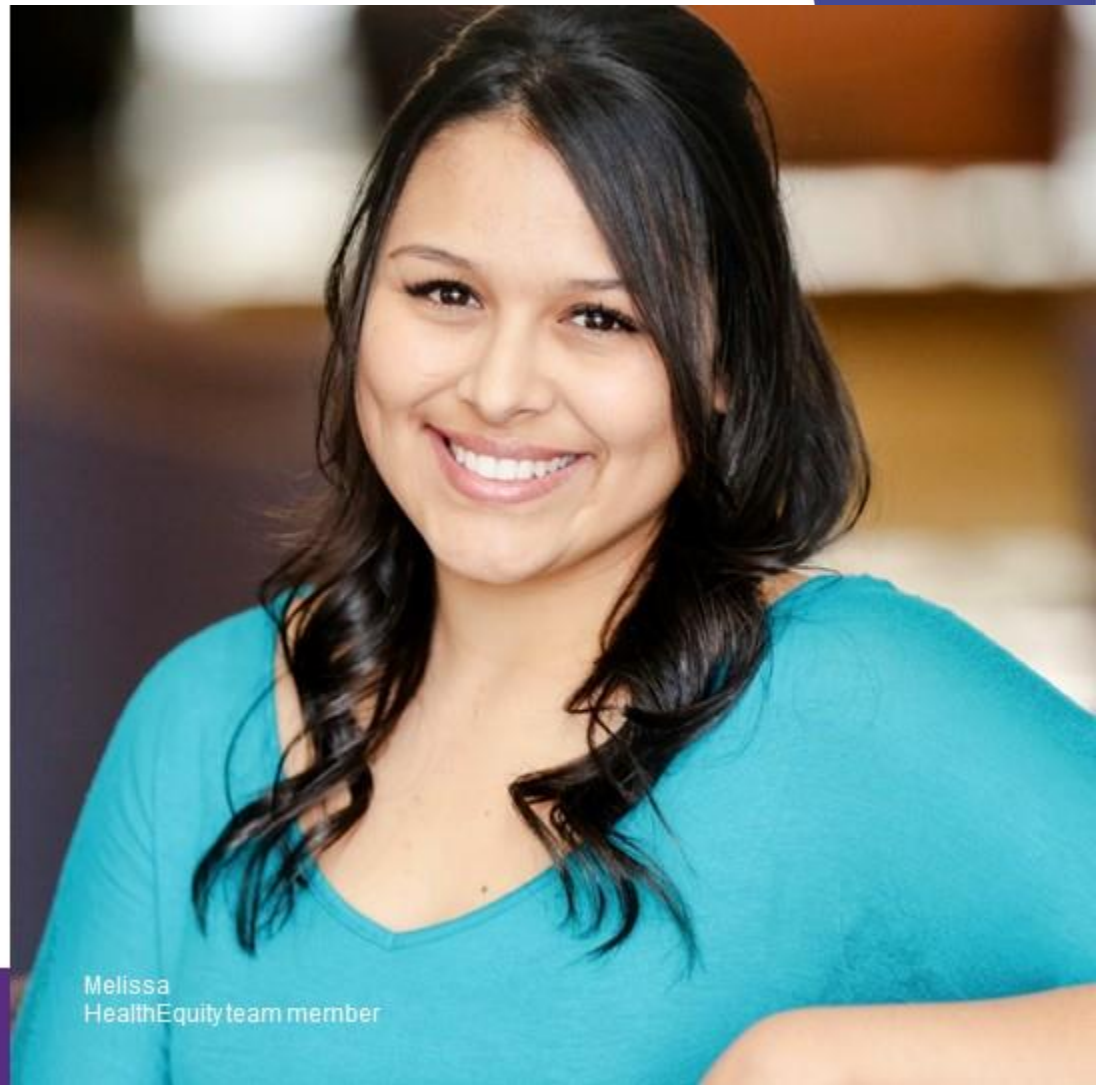
2013, 2015, 2016
Utah Business Magazine
Best Companies
To Work For



2015, 2016
Salt Lake Tribune
Top Workplaces



HealthEquity



Melissa
HealthEquity team member





HealthEquity®



THE STANDARD 403(B)

KEN SCHLOSSER





Your Retirement Plan

Diocese of Sacramento

TheStandard®

Agenda

- **Plan Provisions**
- **Investment Strategies**
- **Forms**



Plan Participation

- **Eligibility**

- No service requirement for employee contributions.
- One year with 1000 hour requirement to start receiving 6% employer contribution.

- **Maximum Employee Contributions**

- \$22,500 in 2023 (additional \$7,500 if age 50 or older)

- **Qualified Default Investment Alternative (QDIA)**

- If no investment selection is made, contributions made to an employee's 403(b) account default to an American Funds Target Date fund based on the employee's date of birth and the plan's normal retirement age of 65. A target date fund is comprised of a mix of investments and is managed based on an assumed retirement year.

Contributions

- **Employee Contributions and Earnings:**

always 100% theirs

- **Traditional:** pre-tax contributions
- **Roth:** after-tax contributions

- **Employer Contributions and Earnings:**

vest according to the following schedule based on date of hire:

Years of Service	Vested Percent
Less than 3	0%
3	20%
4	40%
5	60%
6	80%
7	100%

Roth/Traditional Pre-tax Comparison

	Roth Option	Traditional
Deferrals	After-tax – included in gross income	Pre-tax – not part of gross income
Earnings	Grow tax free	Grow tax deferred
Distributions	Qualified distributions not subject to tax	Contributions and earnings taxed

Roth Tax Considerations



Try to pay taxes when rates are lowest — which option could work best for you?



Roth Distributions

- Tax-free if at least five years after first Roth contribution
- Must be eligible
- Required minimum distribution rules apply



Loans

- Minimum amount for new loans: \$1000
- Fees: \$125
- Repayment deadlines
 - 5 year general purpose loan
 - 10 year principal purchase loan
- Payroll deduction
- Calculate a loan online
- Employees may request the loan directly online or if they prefer completing a paper form, please call The Standard's Participant Service Center (800)858-5420 for a paper loan application



Distributions

- **Age 65** – normal retirement
- **Age 55** with **7** years of service – early retirement, termination required
- **Age 59 ½** while still employed
- **Age 73** – required minimum distributions
- Termination, death or disability

Hardship Withdrawal Distributions

- Major medical expenses not covered by insurance
- Higher education costs
- Purchase of principal residence
- Avoid eviction or foreclosure
- Funeral expenses
- Expenses for repair of damage to principal residence

Rolling Over Savings to 403(b) Plan

More room on your schedule



- Just one account to track and manage
- More time for doing other things

Reduced cybersecurity risk



- Fewer accounts lowers your risk of cyber threats
- One less password to remember!

One account, one investment strategy



- Easier to make investment changes
- Easier to adjust asset allocation

Are you there yet?



- Much easier to track progress toward goals

Steps to Rollover Assets to 403(b) Plan

- Complete an Application for Rollover
- Submit a distribution request from the existing plan administrator
- Call **800.858.5420** with questions



INVESTING: THE NUTS AND BOLTS



Mutual Funds

- Collections of stocks, bonds or money market instruments
- Designed to meet a specific financial objective



A 25% drop in price equals a **25% loss in your investment**

Investing in
one company



The same 25% drop in a company's stock has only a **minor impact on your overall investment**

Investing in
a mutual fund

Two Types of Investors



Hands on



My choice



Hands off



Target
Date
Funds

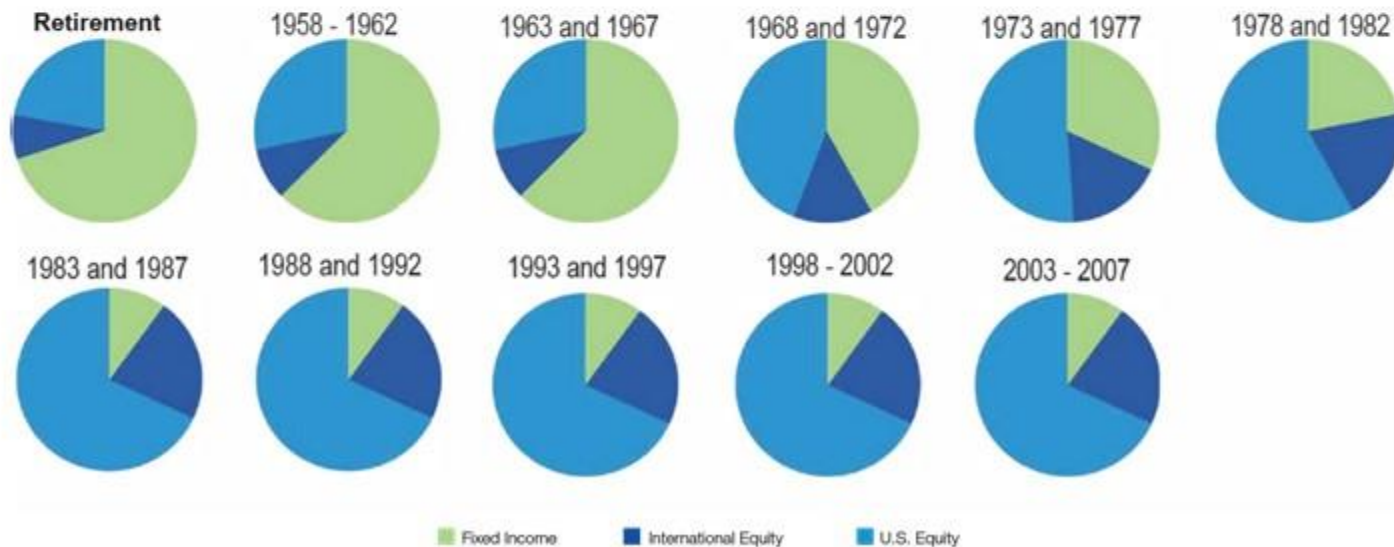
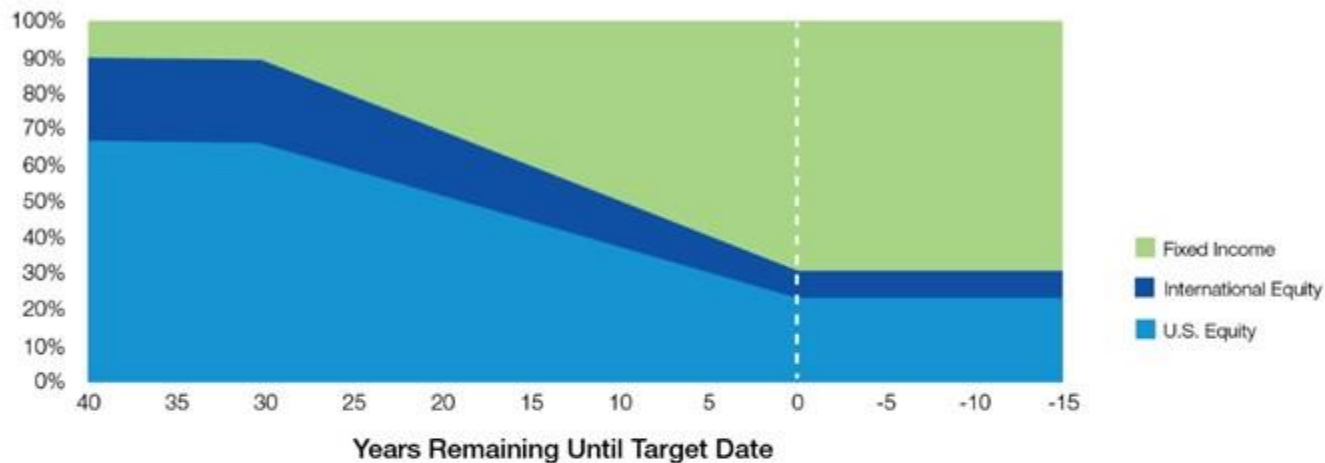


Guided
Portfolios

American Funds Target Date Funds (default)

If you were born:	You would select:
In 1998 or after	Retirement 2065
Between 1993 and 1997	Retirement 2060
Between 1988 and 1992	Retirement 2055
Between 1983 and 1987	Retirement 2050
Between 1978 and 1982	Retirement 2045
Between 1973 and 1977	Retirement 2040
Between 1968 and 1972	Retirement 2035
Between 1963 and 1967	Retirement 2030
Between 1958 and 1962	Retirement 2025
In 1957 or before	Retirement 2020

Target Date Funds



Enroll Today! | www.standard.com/retirement | 800.858.5420



Investor Profile Quiz: Discover your investing style

When do you expect to tap into your retirement account?	Points
a. Less than 5 years	0
b. Between 5 and 10 years	20
c. Between 10 and 15 years	30
d. More than 15 years	40

Score: _____

What do you expect to happen to your pay (salary) in the next five years?	Points
a. I expect my pay to increase much faster than inflation (due to promotions, new job, etc.).	12
b. I expect my pay to increase slightly faster than inflation.	10
c. I expect my pay to just keep up with inflation.	5
d. I expect my pay to decrease (due to retirement, part-time work, depressed industry, etc.).	0

Score: _____

How do you feel about investing for retirement?	Points
a. I am seeking maximum stability, even if returns are low.	0
b. I can tolerate a small amount of fluctuation in my investment account and I am seeking consistent returns.	4
c. I am middle-of-the-road and prefer both growth potential and consistency of returns. I can tolerate a fair amount of market movement in exchange for more attractive long-term returns.	8
d. I am willing to assume a relatively high level of volatility for potentially greater returns.	12
e. I am seeking maximum long-term growth, even if it means wide swings in my account value.	15

Score: _____

How willing are you to increase your investment return?	Points
a. I am willing to take a lot of risk with all of my retirement account.	15
b. I am willing to take a lot of risk with some of my retirement account.	12
c. I am willing to take a little risk with all of my retirement account.	8
d. I am willing to take a little risk with some of my retirement account.	4
e. I am unwilling to take on more risk.	0

Score: _____

If the stock market went down 15 percent, what would you do?	Points
a. Sell all of my stock funds immediately and put the money in something more stable.	0
b. Transfer some of my stock funds into less aggressive investments.	2
c. Do nothing and wait for it to come back.	4
d. Buy more: Increase my stock investments while prices are low.	8

Score: _____

If you received several statements in a row with negative returns and realized that your account had lost 20 percent, what would you do?	Points
a. Sell all of my stock funds immediately and put the money in something more stable.	0
b. Transfer some of my stock funds into less aggressive investments.	3
c. Do nothing and wait for it to come back.	6
d. Buy more: Increase my holdings in stock funds while prices are low.	10

Score: _____

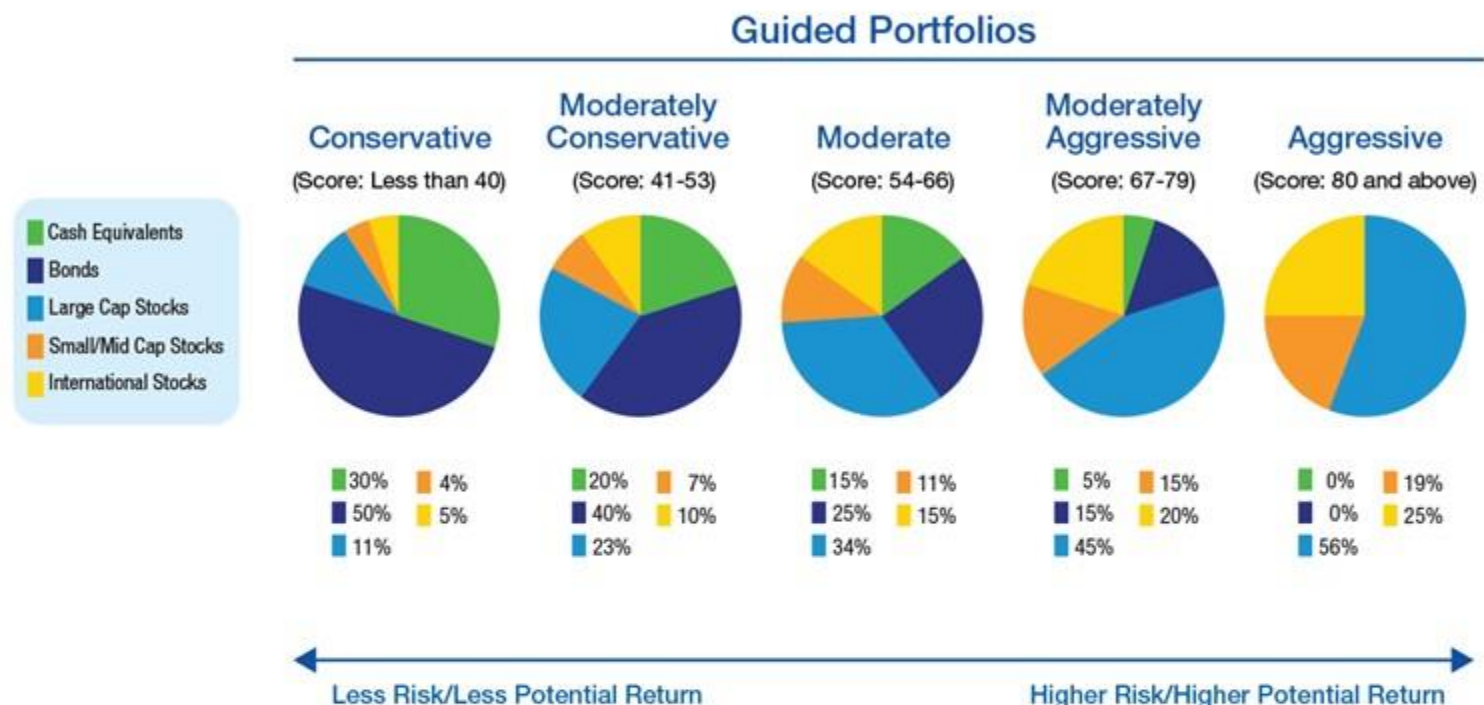
Total Score: _____

After each question, circle the letter that best describes you. Then, add up the points and match the total with the pre-mixed portfolios.

Please note that this profiling tool is only a guide.



Guided Portfolios



You should carefully consider the investment objectives, risks, charges and expenses of the investment options offered under the retirement plan before investing. Small-company (small cap) investing involves specific risks not necessarily encountered in large-company investing, such as increased volatility. Funds that invest in bonds are subject to certain risks, including interest-rate risk, credit risk and inflation risk. As interest rates rise, the prices of bonds fall. International investing involves certain risks, such as currency fluctuations, economic instability and political developments. These risks may be accentuated in emerging markets.

Your plan may be funded by a mutual fund trust, collective trust or a group annuity contract. All are suitable for long-term investing, including saving for retirement. While annuities generally provide tax-deferred treatment of earnings, the group annuity contract does not provide any additional tax-deferred treatment beyond the treatment provided by your retirement plan.

Don't Forget About This Tool

Initial Allocation



10 Years Later
(without Automatic Rebalancer)



Allocation After
Rebalancing



■ Stocks ■ Bonds

This simplified example shows how Automatic Rebalancer works; choosing diversified investments can help reduce your risk.

Past performance is no guarantee of future results. This example is hypothetical and for illustrative purposes only and is not indicative of the performance of any specific investment.



FORMS



Forms to Complete

- Savings Form
 - Keep a copy to set-up payroll deductions

Savings Form

The Standard
Diocese of Sacramento 403(b) Plan
#807165

Sign up now! Simply complete the information below to begin saving in your retirement plan. Return the completed form to Your Bookkeeper.

YOUR INFORMATION			
Social Security Number	Last Name	First Name	
Mailing Address	City	State	ZIP
Date of Birth (mm/dd/yy)	Date of Hire (mm/dd/yy)	Email Address	Phone

HOW MUCH DO YOU WANT TO SAVE?	
Pre-Tax Savings (Check One)	
The smallest amount you can contribute is 1% of your compensation. The most you can save during 2023 is \$22,500 (\$30,000 if you are age 50 or older). Other plan or legal limits may apply.	
I elect to contribute as pre-tax contributions:	
<input type="checkbox"/> _____ %	<input type="checkbox"/> \$ _____ per paycheck
<input type="checkbox"/> No pre-tax amounts at this time. I elect to opt out of pre-tax contributions and understand I can enroll at a later time.	
Roth Savings (Check One)	
Enter the after-tax amount you wish to contribute to your Roth retirement savings account. The smallest amount you can contribute is 0% of your compensation. The most you can save during 2023 (including any pre-tax contributions) is \$22,500 (\$30,000 if you are age 50 or older). Other plan or legal limits may also apply.	
<input type="checkbox"/> _____ %	<input type="checkbox"/> \$ _____ per paycheck
<input type="checkbox"/> I elect not to make Roth contributions at this time. I understand I can change my election at a later time.	


AUTHORIZATION	
I authorize my employer and the plan administrator to deduct from my earnings the amounts determined by the designation above and to forward such amounts to the plan. I also direct my employer and the plan administrator to implement any other instructions I have provided on this form. I have read the Disclosure Statement on this form and, by signing here, agree to be bound by its terms. The employer, trustees and any others concerned with the administration of the plan are entitled to rely on these instructions; each shall be fully protected in taking or omitting any action under any provisions of the plan in reliance on this information.	
Signature _____	Date _____

Forms to Complete

- Investing Form
 - Send to
Veronica
Oberlander
at
SUPERIOR
USA

Investing Form

Diocese of Sacramento 403(b) Plan
#807165



The Standard

YOUR INFORMATION

Social Security Number	Last Name	First Name	
Mailing Address	City	State	ZIP
Date of Birth (mm/dd/yy)	Date of Hire (mm/dd/yy)	Email Address	Phone

HOW DO YOU WANT TO INVEST YOUR CONTRIBUTIONS?

The Standard can help you manage your investments when you select a Guided Portfolio. You may create your own portfolio by completing the Independent section below. If you do not make a selection, your contributions will be invested in the plan's default fund(s).
You may change your investment instructions at any time by logging into www.standard.com/retirement or calling 800.858.5420.
Complete only one subsection, not both.

Option 1: Guided Portfolios — Choose one of the Guided Portfolios below by checking the appropriate box. The allocation for each of these portfolios can be found on the reverse side of this form.

<input type="checkbox"/> Conservative	<input type="checkbox"/> Moderately Conservative	<input type="checkbox"/> Moderate
<input type="checkbox"/> Moderately Aggressive	<input type="checkbox"/> Aggressive	

Option 2: Independent — Select your own combination of investments by entering whole percentages below. Please be sure that your selections total 100 percent. The minimum for any investment is 1 percent.
1. Signifies a scheduled fund termination that will occur in the next 120 days. 2. Redemption fee may apply to short-term investments.

<input type="checkbox"/> % Standard State Asset A <input type="checkbox"/> % American Funds Amer Balanced R6 <input type="checkbox"/> % American Funds 2030 Tgr Ret R6 <input type="checkbox"/> % American Funds 2040 Tgr Ret R6 <input type="checkbox"/> % American Funds 2050 Tgr Ret R6 <input type="checkbox"/> % American Funds 2060 Tgr Ret R6 <input type="checkbox"/> % Calvert US Lg Cap Core Bp Idx R6 <input type="checkbox"/> % Vanguard Mid Cap Val Idx Adm <input type="checkbox"/> % Vanguard Sm Cap Val Idx Adm <input type="checkbox"/> % Vanguard Total Stk Idx Adm	<input type="checkbox"/> % Vanguard Total Bnd Mkts Idx Adm <input type="checkbox"/> % American Funds 2020 Tgr Ret R6 <input type="checkbox"/> % American Funds 2035 Tgr Ret R6 <input type="checkbox"/> % American Funds 2050 Tgr Ret R6 <input type="checkbox"/> % American Funds 2065 Tgr Ret R6 <input type="checkbox"/> % Vanguard 500 Index Adm <input type="checkbox"/> % Vanguard Mid Cap Index Adm <input type="checkbox"/> % Vanguard Small Cap Index Adm <input type="checkbox"/> % American Funds Euro Pac Grow R6	<input type="checkbox"/> % PMCO Total Return Intl <input type="checkbox"/> % American Funds 2025 Tgr Ret R6 <input type="checkbox"/> % American Funds 2040 Tgr Ret R6 <input type="checkbox"/> % American Funds 2055 Tgr Ret R6 <input type="checkbox"/> % Vanguard Windsor II Adm <input type="checkbox"/> % MFS Growth R6 <input type="checkbox"/> % Vanguard MidCap Growth Idx Adm <input type="checkbox"/> % Vanguard Sm Cap Grth Idx Adm <input type="checkbox"/> % American Funds New World R6 <div style="text-align: right;">100% Total</div>
--	---	---

AUTOMATIC REBALANCER

Check a box below to select the Automatic Rebalancer service for your account. If you select this service, your account assets will be rebalanced to match your investment directives at the time of rebalancing. Automatic Rebalancer will remain off if you do not make a selection below.

How often would you like your account rebalanced? ☐ Quarterly ☐ Semiannually ☐ Annually

AUTHORIZATION

I authorize my employer and the plan administrator to invest my savings as outlined on this form. I also direct my employer and the plan administrator to implement any other instructions I have provided on this form. I have read the Disclosure Statement on this form and, by signing here, agree to be bound by its terms. The employer, trustees and any others concerned with the administration of the plan are entitled to rely on these instructions; each shall be fully protected in taking or omitting any action under any provisions of the plan in reliance on this information.

Signature _____ Date _____

FOR BOOKKEEPERS ONLY

Please fax or email a copy of this form to SuperiorUSA Benefits. Fax: 218-725-9161
Email: contributions@superiorusa.com

Location Code _____ Participant Name _____

For questions, Please call 877-529-2477 x33



Forms to Complete

- Beneficiary Form

Beneficiary Designation for Death Benefits Form

Diocese of Sacramento 403(b) Plan
#807165

The Standard
See reverse for instructions and explanation.

PARTICIPANT Complete this section (and Spouse section, if necessary), and submit to your employer

Name of Participant _____

Social Security Number _____ Date of Birth _____

I have read the explanation on the back of this form. I understand that if I am married and die before I retire, my Plan Benefits will be paid to my spouse. However, I have the right to waive payment to my spouse as sole beneficiary, provided my spouse consents to the waiver. I can revoke this waiver at any time. This designation replaces any previous designation.

100% of the benefits will be paid to the Primary Beneficiary(ies). Contingent beneficiaries receive benefits only if all Primary Beneficiaries predecease you.

I designate as my beneficiary(ies) for benefits from this plan:

% of proceeds for Primary Beneficiaries must total 100%				% of proceeds for Contingent Beneficiaries must total 100%			
Name of Primary Beneficiary (please print) _____		Social Security Number _____		Name of Contingent Beneficiary (please print) _____		Social Security Number _____	
Relationship _____	Date of Birth _____	% of Proceeds _____		Relationship _____	Date of Birth _____	% of Proceeds _____	
Current Address _____				Current Address _____			
Name of Primary Beneficiary (please print) _____		Social Security Number _____		Name of Contingent Beneficiary (please print) _____		Social Security Number _____	
Relationship _____	Date of Birth _____	% of Proceeds _____		Relationship _____	Date of Birth _____	% of Proceeds _____	
Current Address _____				Current Address _____			
Name of Primary Beneficiary (please print) _____		Social Security Number _____		Name of Contingent Beneficiary (please print) _____		Social Security Number _____	
Relationship _____	Date of Birth _____	% of Proceeds _____		Relationship _____	Date of Birth _____	% of Proceeds _____	
Current Address _____				Current Address _____			

I am ☐ married ☐ unmarried

If I am married and have designated someone other than my spouse as my beneficiary, this designation will be effective only if my spouse consents to it by signing in the spouse section below.

X _____

Participant Signature _____ Date _____

Please complete additional information on the other side

Forms to Complete

- Application for Rollover
 - Participants keep a copy and also send a copy to The Standard.



The Standard

Standard Retirement Services, Inc.
1100 SW Sixth Avenue Portland OR 97204-1020
Phone: 800.858.5420

Application for Rollover Form

Diocese of Sacramento 403(b) Plan/807165

Step One:

Participant Name: _____ Social Security Number: _____ - _____ - _____

Name of Former Retirement Plan Provider: _____

(Hint: Who do you receive your statement from?)

Former Employer Retirement Plan Name: _____

Step Two:

- Contact your prior retirement plan provider to initiate your rollover distribution to The Standard.

The check from your prior retirement plan provider must be made payable to the custodian listed below. If the check is payable to you, please endorse as: Payable to (custodian listed below)

Mail the check to the following address:

Regular Mailing Address

Reliance Trust Company
FBO: (Participant's Name)
Custodian Account No. 0155817414
Mail Stop 579
PO Box 5396
Carol Stream, IL 60197-5396

Overnight Mailing Address

Reliance Trust Company
FBO: (Participant's Name)
Custodian Account No. 0155817414
Box 5396 Mail Stop 579
270 Remington Blvd Ste B
Bolingbrook, IL 60440

- Request a copy of your most recent retirement plan statement.
- For Roth Contributions, please confirm the following with your prior retirement plan provider to ensure taxation on future Roth distributions is accurate:

Date of First Roth Contribution:	_____
Total Roth Contributions	\$ _____
Total Earnings on Roth Contributions	\$ _____
Approximate Check Total (sum of above)	\$ _____

Note: Roth IRAs cannot be rolled into this plan.

Step Three:

Sign and Date

I hereby certify to the best of my knowledge that the rollover contribution made to this plan is eligible for rollover. This includes, but is not limited to certifying the distribution did not come from a beneficiary account, was not a required minimum distribution and was not one of a series of periodic payments. If the distribution was not one of a series of periodic payments, and if an indirect rollover, then the distribution was received not more than sixty days before the date of the rollover. Distributions eligible for rollover into this plan will be determined by my Plan Administrator and may include distributions from a 401(a), 401(k), 403(b), governmental 457(b) plans, an IRA, a Roth 401(k), or a Roth 403(b) plan. If my distribution includes after-tax amounts, I understand that those amounts can only be rolled over if my plan accepts such contributions and if I provide information related to the cost basis of those amounts. I understand that if this rollover is accepted, it will be directed to investments based on my contribution directives in place at the time the rollover is received by The Standard. If I do not have directives in place, the rollover will be placed into the plan's default investment option. For more information on eligible rollover distributions please see IRS website (<http://www.irs.gov/retirement-plans/>).

PARTICIPANT SIGNATURE: _____ DATE: _____



Resources

Personal Savings Center

standard.com/retirement



Interactive phone system

800.858.5420



Veronica Oberlander

voberlander@superiorusa.com

Payroll & Contribution Consultant

SuperiorUSA Benefits

Toll Free: [877- 529-2477](tel:877-529-2477) Ext. 33

Fax: [218-725-9161](tel:218-725-9161)

Toll Free Fax: [877-422-5192](tel:877-422-5192)

THANK YOU

TheStandard®



Enroll Today! | www.standard.com/retirement | 800.858.5420

Employers and plan participants should carefully consider the investment objectives, risks, charges and expenses of the investment options offered under the retirement plan before investing. The prospectuses for the individual mutual funds in the group annuity contain this and other important information. Prospectuses may be obtained by calling 877.805.1127. Please read the prospectus carefully before investing. Investments are subject to market risk and fluctuate in value.

The Standard is the marketing name for StanCorp Financial Group, Inc., and its subsidiaries. StanCorp Equities, Inc., member FINRA, wholesales a group annuity contract issued by Standard Insurance Company and a mutual fund trust platform for retirement plans. Standard Retirement Services, Inc., provides financial recordkeeping and plan administrative services. Investment advisory services are provided by StanCorp Investment Advisers, Inc., a registered investment advisor. StanCorp Equities, Inc., Standard Insurance Company, Standard Retirement Services, Inc., and StanCorp Investment Advisers, Inc., are subsidiaries of StanCorp Financial Group, Inc., and all are Oregon corporations.



BREAK



BENEFITS REMINDERS



HSA PAYROLL PROCESS/UPDATES

- Health Equity is the administrator for HSA plans.
- HSA set-up in ADP WorkforceNow available at <https://www.scd.org/sites/default/files/2020-12/HSA-Setup-in-ADP-111820.pdf>
 - Please contact the Lay Personnel Office to obtain employee's direct deposit bank information
- Employee HSA payroll deduction form available at https://www.scd.org/sites/default/files/2022-10/Employee_HSA_Payroll_Deduction_Form-October-2022.pdf



BAS STATEMENTS

- Monthly invoices are generated and emailed on the 21st of the month.
- Invoices must be reviewed on a monthly basis.
- Priest health premiums are now included in BAS Statements
- ADP / Reta Enroll
- 2023-2024 Benefits calculation worksheet (PT 10 & PT1001)



WAIVER OF GROUP HEALTH BENEFITS

- If an employee waives medical coverage, please provide them a waiver of group health benefits form.
- Waiver form must be completed annually.

- Waiver form:

<https://www.scd.org/sites/default/files/2019-06/Waiver%20of%20Group%20Health%20Benefits.pdf>

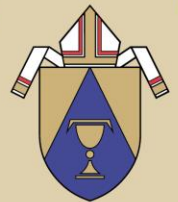


QUALIFYING LIFE EVENT PROCESS

- Employees must complete qualifying life events electronically in RetaEnroll.
- Employees will be prompted to upload proof documents specific to their Qualifying Life Event during the submission process.
- Location Administrators must submit all Benefits Class changes to Reta Trust Customer Service at: service@retaenroll.org.
- All life events for Reta are effective the 1st of the month following the date the Qualifying Life Event occurs. However, newborns are effective on the date of birth.
- Instructions on how to submit a life event available at <https://www.scd.org/sites/default/files/2020-01/RETA%20Life%20Event%20Model%20Employee%20%20%5B3%5D.pdf>



LUNCH



PERSONNEL REMINDERS & UPDATES



PERSONNEL FORMS BEST PRACTICES

- All forms are found on our Diocesan Website under the Lay Personnel page.
 - <https://www.scd.org/lay-personnel/employee-forms>
 - Date is listed when forms have been updated
 - Print forms as needed as updated regularly
 - PT10/PT1001 Form located on website
- Paperwork required to be sent to Lay Personnel
 - i.e. PT 200 Personnel Transaction: Separation/Change



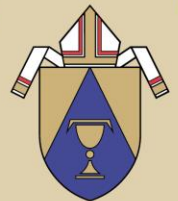
PERSONNEL HANDBOOK UPDATES

- The following polices have been updated:
 - 7.0 Work Hours/Attendance
 - 31.2 Holidays
 - 31.3 Sick Pay Policy
 - 31.4 Bereavement Pay Policy
 - 42.0 General Standards of Conduct
 - 51.0 Workplace Violence/Workplace Security
 - 56.0 Expense Reimbursement Allotment Policy
 - 57.0 Employee Referral Policy
- The following policies have been implemented:
 - 11.1 Hiring of Permanent Deacons and their Families
 - 50.0 Infectious Disease Preparedness and Response Plan
- New Agreement Regarding Arbitration of Disputes.
- All employees should have been provided with a copy of the updated Lay Personnel Handbook. The acknowledgement forms at the end of the handbook should have been signed by the employee and submitted back to you for their personnel file.



ORIENTATION PROCESS

- Using New Hire Checklist
 - Ensure Pre-Application and Application is completed before moving to hire
 - Pre-hire Section
 - *Ensure clearances are obtained*
 - *If previously employed in the Diocese, ensure they left in good standing*
 - Post-hire Section
 - *Onboarding, Memo for State Forms*
- Ensure all required clearances have been completed before entering new hire into ADP



HR RECORD RETENTION

- The law has expanded the record retention requirement for employment records to 4 years
- Ensuring tabs are set-up (color coded)
 - Preferably in 2 drawer file cabinet
 - *Records older than 4 years should be stored separately from the records in the drawers*
 - *The Diocese is still under a “do not destroy” order regarding personnel documents.*



BENEFIT ELIGIBILITY

- Regular Part-Time and Full-Time Employees (20 hours or more a week) are eligible for all fringe benefits
- Occasional Part-Time Employees (19 hours or less a week) are not eligible for fringe benefits
 - Employees shared between sites may be eligible for medical benefits if the combined hours worked at all sites are 20 hours or more a week
 - Employees working more than 19 hours a week occasionally/frequently may be eligible for medical benefits, if weekly average is 20 hours or more a week
- Temporary Employees (assignment 6 months or less) are not eligible for fringe benefits
 - If the temp assignment extends beyond 6 months, contact Lay Personnel as a status change may be necessary



TRANSITION OF KEY POSITIONS

- When possible provide the Diocese with a 2 week notice when changes with key positions such as Bookkeeper, Payroll/RETA Contact, Office/Business Managers
 - Need to know to ensure access is appropriately transferred
 - Would like to assist with orientation in respective areas of expertise



LAY PERSONNEL BACKGROUND CHECK

- New hire candidates, independent contractors, or volunteers in certain positions are to complete and clear the general background check prior to beginning work.
 - The background check should be conducted when the employee or volunteer is performing the following duties:
 - *Will confer signing authority on a bank account maintained by Employer;*
 - *Will involve the handling of cash or checks on a regular basis;*
 - *Will access proprietary or confidential information or records; or*
 - *Will provide access to financial activities or operations of Employer.*
 - *Will operate a company vehicle.*
 - Note: This background check is processed through Lay Personnel and is not the same background check conducted through Livescan with Safe Environment.



LAY PERSONNEL BACKGROUND CHECK



Diocese of Sacramento — Human Resources Services

REQUEST FOR BACKGROUND CHECK

Background check requested by:

Parish/School/Agency
(circle one)

City

Hiring Person

Name & Title

Contact Information

Phone

Email

Fax

Applicant's Name

Position Applied For

MVR Screening Required by the position: ☐ Yes ☐ Only a Back-Up ☐ No

Fax completed form to (916) 733-0238 or scan and email to personnel@scd.org with the following:

- ✓ Applicant's signed Disclosure & Authorization form
- ✓ Applicant's signed Background Information form
- ✓ Page 3 of the Employment Application (Employment History)

Questions: Call Lay Personnel at (916) 733-0239

**Please Note: Parish / School/ Agency will be billed upon completion of background check.*

**Additional fees may apply for searches and/or pre-adverse and adverse letters.*



LAY PERSONNEL BACKGROUND CHECK CONT'D

*To be filled out by Employer

*Copy to Applicant

NOTICE REGARDING CREDIT CHECKS PER CALIFORNIA LAW:

Pursuant to Section 1024.5 of the California Labor Code, the Company informs you that it may obtain a credit report about you from the above named entity, because you are seeking to work in the following position:

- ☐ An employee covered by the executive exemption set forth in subparagraph (1) of paragraph (A) of Section 1 of Wage Order 4 of the Industrial Welfare Commission;
- ☐ A position in the state Department of Justice;
- ☐ A sworn peace officer or other law enforcement;
- ☐ A position for which the information contained in the report is required by law to be disclosed or obtained;
- ☐ A position that involves regular access to specified personal information for any purpose other than the routine solicitation and processing of credit card applications in a retail establishment, such as bank or credit card account information, social security number, or date of birth;
- ☐ A position which the person can enter into financial transactions on behalf of the company;
- ☐ A position that involves access to confidential or proprietary information;
- ☐ A position that involves regular access to \$10,000 or more of cash;
- ☐ A position that involves operating a company vehicle; OR
- ☐ The Company will not obtain a consumer credit report on you.



LAY PERSONNEL BACKGROUND CHECK CONT'D

- All forms for the Background Check can be found by accessing the following link: <https://www.scd.org/lay-personnel/lay-personnel-policies-and-forms#background>



SAFE ENVIRONMENT

LIVE SCAN AND SAFE HAVEN TRAINING

- Employee vs. Volunteer
 - Employee cleared DoJ and FBI
 - Volunteer cleared DoJ only
 - High School Coaches always DoJ and FBI
- Parishes and Schools are cleared under different codes – information on fingerprinting cannot be shared between parishes and schools.
- School Employee vs. Parish Employee
 - Parish with school on site – all employees must complete both requirements
 - Employee Live Scan Verification Form
 - What to do if employee is working at multiple sites
- Compliance Reports
 - Sent out automatically the first of the month to the site's Safe Environment Contact
 - 3 reports:
 - ✓ Staff Complete (all requirements met)
 - ✓ Volunteer complete (all requirements met)
 - ✓ In Progress (volunteer and staff missing one of the requirements – either fingerprinting or training)
- Safe Haven Training
 - Offered through Catholic Mutual Group
 - Must be renewed every 3 years



SEXUAL HARASSMENT TRAINING

- Sexual Harassment Training must be renewed every odd year for the Sacramento Diocese.
- All employees will be required to complete the training.
 - Employees must complete the one hour training
 - Supervisors must complete the two hour training
- All training will need to be completed in the Fall of 2023.
 - Audits will begin in November of 2023.
- All training is accessed through CMG. More information can be found through the following link:
 - <https://www.scd.org/sites/default/files/2020-12/SCD-Sexual-Harassment-Training.pdf>



LOA'S AND WC CASES

- LOA forms are required to be completed anytime an employee is out of work for more than 7 days.
 - LOA Forms and information can be found by accessing the following link: <https://www.scd.org/lay-personnel/leave-absence>
- WC Paperwork must be completed immediately after an accident.
 - WC Forms and information can be found by accessing the following link: <https://www.scd.org/lay-personnel/workers-compensation-forms>
 - *LWP Claims Solutions*
Robin Mays, Senior Claims Adjustor
Phone: 916-609-3665
Email: r_mays@lwpclaims.com
 - Note: A WC incident requiring the employee to be off of work for more than 7 consecutive days will also require the leave of absence paperwork to be completed.
- **All accommodation/restriction request must be reviewed with the HR Director before returning the employee back to work.**



INSURANCE STOPLOSS

- Must remove employee from our benefits if out longer than 6 months
 - Per our policy, *“An employee taking medical/family leave will be allowed to continue participating in any employee benefit plans in which he/she was enrolled before the first day of the leave (for the duration of the approved leave up to the maximum of 6 months) at the level and under the conditions of coverage as if the employee had continued in employment for the duration of such leave.”*
 - After the 6 month period must offer Continuation of Coverage
- Loss of reimbursement if we do not follow our policy



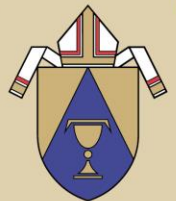
TERMINATION REQUIREMENTS

- All terminations **must** have prior approval from the HR Director and Legal. Failure to receive approval will result with the loss of liability insurance provided by Catholic Mutual.
 - This includes any lay-off's.
- Only exception is when an employee voluntarily resigns.
- Completing documents at the time of termination
 - Separation Checklist PT690 From



ADP ROLLOUT

- We will be using the electronic time keeping system with ADP
 - Wrapping up the transition process
 - No exemptions
- Electronic Approvals
 - Direct supervisor must review and approve the timesheet after the employee (i.e. Pastor, Principal)
 - *This is an organizations largest expense and must be approved for the payroll administrator to administer the pay*
 - If there are changes with the supervisor or payroll processor a PT200 needs to be completed before the changes in Time and Attendance can be made.
- Punch Corrections and Edits must be requested by the employee using the PT503 Form
 - Everything is tracked in ADP, we can see what was entered, by who and when
- Ensures compliant with Labor Laws
 - Meal premiums cannot be removed
 - OT obligations will be met
 - Wage and Hour Claims are not covered by Catholic Mutual



MISC. PAYROLL ITEMS

- Minimum Wage Increase Jan. 1, 2023:
 - New hourly minimum of \$15.50/hour.
 - New salary minimum of \$64,480 annually.
 - ***Please Note: If the employee is a teacher, the rates above do not apply to them as they have a different pay scale that is released from the Catholic School Department.***
- Advised COLA Increase July 1, 2023:
 - 4.5% increase
- Bonuses
 - While we do not advise providing bonuses, if a bonus is provided it must be processed through payroll.
- Stipends
 - Employees cannot be paid stipends. They earn wages and must be provided wages in accordance with labor laws.
- W-2's can only be obtain from employed site or payroll processor not the Pastoral Center



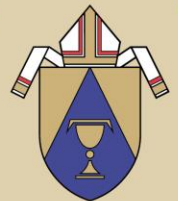
PAY TRANSPARENCY LAWS

- January 1, 2023, California's new pay transparency law requiring pay scales in job openings.
- **Required Pay Transparency in Job Posting:**
 - Now must include a position's **salary or hourly wage range** (not including bonuses or equity-based compensation) in any internal or external job posting. This requirement extends to job postings published by a third party at an employer's request.
- **Expansion of pay scale disclosures upon request:**
 - Current employees who request the pay scale for the position in which they are currently employed, must be provided with the position's salary or hourly wage range.
 - *The employee should place the request in writing using the PT 656 Form.*
 - *You will need to respond to the employee in a reasonable timely fashion.*
- Failure to comply with these requirements may subject the employer to a civil penalty up to \$10,000 per violation.



BREAKROOM POSTINGS

- All sites have been provided with custom made California and Federal Employment Notice Posters
 - Religious employers have a religious exemption for some laws, we should not be posting laws that do not apply to us
- Action to take:
 - Remove all posters not provided by the Diocese
 - Cancel any subscriptions or orders through outside vendors, if you haven't done so already



COVID-19 ITEMS

- Occurrence Reporting
 - When the employer knows or reasonably should know that an employee has tested positive for COVID-19, the employer must report to LWP Claims Solutions.
 - *The Occurrence Report must be completed within 24 hours of notification and sent to LWP*
- California Department of Public Health and Employer requirements
- COVID Resources
 - <https://www.scd.org/lay-personnel/coronavirus-covid-19>



EQUIFAX

- All unemployment claims must be submitted to Equifax.
- Equifax Workforce Solutions

Attention: Liza Parodi

Fax: (866) 219-8832

Phone: (833) 946-0624 ext. 7691

Email: liza.parodi@equifax.com



THE WORK NUMBER

- All Employment Verifications should be conducted through The Work Number.
- Accessing The Work Number
 - Start by going to www.theworknumber.com
 - Select “Log In” and follow the simple prompts
 - Enter the Employer code 26785
 - *If this is your first time – pick “Register Now”*
 - *If a returning user – enter your username and password you set up.*
 - The screens prompts will walk you through all the steps to help verify your identity and keep your account private while offering helpful messages if you have problems.
- A more detailed guide can be found by accessing the following link:

https://www.scd.org/sites/default/files/2021-03/Employee_Guide%20to%20The%20Work%20Number%20%28March%202021%29_0.pdf



WEEKLY NEWS ON WEBSITE

- Important to read:
 - Updates from all departments
- Always available on the website if not emailed to you (left hand side of home page)
 - Distributed on Mondays (unless it is a holiday)

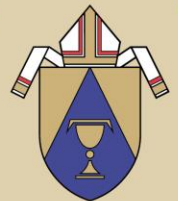


MISCELLANEOUS BOOKKEEPING ITEMS



MISCELLANEOUS BOOKKEEPING ITEMS

- Review of Due Dates Flyer
- Define 535 vs 540 and 585
- Capital Projects Rules and Insurance Requirements
- Documentation for Contractors (DE 542)
- Welfare & Property Exemptions
- Correct use of AP & AR in QuickBooks



WRAP –UP AND QUESTIONS?

