

<name>
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<town, state zipcode>

Client ID: 1234567890

It's almost Annual Enrollment
time for 2022 benefits!

Annual Enrollment: October 27 to November 17

Annual Enrollment is your opportunity to review your benefits to make sure they will continue to meet your needs in the upcoming year.

The well-being of you and your family is the ultimate destination. Your Episcopal Church Medical Trust (Medical Trust) benefits are part of the journey, ensuring that you have access to quality care.

Keep this brochure! It includes your Client ID number, which you will need to access your personal information.

Planning for Your Journey

Your enrollment checklist:

- Consider** upcoming healthcare needs for you and your covered family members. Are you expecting any changes in 2022? For example, are you having a baby, or do you have any upcoming surgeries or medical procedures planned?
- Compare** your group or diocese's benefit choices and costs and determine which options will best meet your needs.
- Enroll by the deadline** if you want to make changes to your current benefit choices for 2022. If your current health plan is not offered next year, you will need to enroll in a new plan.
- Review** your personal and dependent information and update, if needed.

What's Changing for 2022

COVID-19 provisions

The Medical Trust will continue to waive all copays, deductibles, and coinsurance for its members for healthcare services relating to the evaluation and testing for COVID-19 through at least December 31, 2022. In addition, the Medical Trust also will waive all copays, deductibles, and in-network coinsurance for its active members for healthcare services relating to the treatment of COVID-19 through at least December 31, 2022.¹



Not Sure Which Plan Is Right for You?

The Health Advocate® program is like having your own healthcare navigator at no cost to you!

A health advocate can help you understand your health plan options and choose a plan that's right for you.

To reach Health Advocate, visit members.healthadvocate.com or call (866) 695-8622 on weekdays from 8:00 AM to 7:00 PM ET.

¹ This deductible waiver includes our HSA-qualified Consumer-Directed Health Plans (CDHP) as permitted by IRS Notice 2020-15.



If You Change Your Health Plan Carrier for 2022 While Receiving Treatment

If you are currently receiving treatment that will continue in 2022—such as maternity, chemotherapy, or scheduled elective surgery—and you change your health plan carrier (for example, Anthem, Cigna, or Kaiser) for 2022, your care will need to be transitioned.

If you have a particular concern about a member's transition of care, Client Services and Health Advocate can assist you with your transition.

Telehealth platforms for Active Members²

You can continue to access a medical professional through telehealth platforms offered by Anthem, Cigna, or Kaiser using your computer or mobile device. You will need high-speed internet access, a webcam or built-in camera, and audio capability. Please remember that your personal healthcare provider may not participate on the vendor's telehealth platform. In response to the COVID-19 pandemic, effective March 1, 2020, all services received via vendor telehealth platforms are available to you with no deductible, copay, or coinsurance through December 31, 2022.

- **Anthem Blue Cross Blue Shield** – Access *LiveHealthOnline.com* or download the LiveHealth Online mobile app in the App Store® or Google Play™.
- **Cigna** – Access *MDLiveforCigna.com* on your computer, or download the MDLIVE mobile app by searching in the App Store or Google Play.
- **Kaiser Permanente** – Access Kaiser's telehealth platform services by calling the number on the back of your member ID card.

Virtual visits

A virtual visit is an appointment with your personal healthcare provider carried out through an electronic medium of your provider's choice (e.g., Zoom, Skype, telephonic) but that is not offered through your health plan carrier's telehealth platform (e.g., Anthem LiveHealth Online, Cigna MDLive).

The Medical Trust will continue to allow claims for virtual visits with network and out-of-network providers that do not use a telehealth platform offered by Anthem or Cigna. Prior to March 1, 2020, virtual visits with your personal healthcare provider were generally excluded from health plan coverage. The virtual visit benefit exclusion will be removed from the Medical Trust's Anthem and Cigna health plans effective January 1, 2022.

Virtual visits are covered at standard levels of benefits and member cost shares.

Note: Kaiser's healthcare model requires its members to use the Kaiser telehealth platform for telehealth services.

Cigna Dental modernization

To ensure that members have high-quality, comprehensive dental benefits, the Medical Trust has reviewed and modernized its dental plan offering with Cigna.

Effective January 1, 2022, the Medical Trust's Cigna Dental plans will include coverage for Exparel, a long-lasting, non-opioid pain management medication for patients having oral surgery. Unlike systemic medications, Exparel works directly at the surgical site to numb nerves that cause pain; it is not a narcotic, and it is not addictive.

In addition, the Medical Trust is reclassifying osseous surgery, currently considered a Major Restorative Service, as a Basic Restorative Service for all its Cigna Dental plan offerings. This means that the Medical Trust's Cigna Dental plans will reimburse these services at a higher rate starting in 2022.

Cigna EAP

The Cigna Employee Assistance Program (EAP) now includes access to Talkspace® virtual behavioral health!

- Connect with a licensed therapist or psychiatrist online, by video or by text using Talkspace, available for Cigna EAP members, ages 13 and up.
- Visit *mycigna.com* to access Talkspace virtual behavioral health.

² Please note, telehealth can help with minor, non-life-threatening conditions. During a medical emergency, individuals should visit the nearest hospital or call 911 for assistance.

If You or a Covered Family Member Has a Chronic or Serious Health Condition

The Anthem, Cigna, and Kaiser health plan options offer care management programs to help you and your covered family members get the right care at the right time. These programs can help you do the following:

- Coordinate care across multiple healthcare providers
- Manage chronic conditions
- Confirm coverage of various services
- Understand authorizations required for certain treatments
- Find answers to questions about health concerns

Contact your health plan carrier's care management programs by calling Member Services. This information is also on your member ID card:

Anthem Member Services: (844) 812-9207
Cigna Member Services: (800) 244-6224
Kaiser Member Services: (866) 213-3062



Medical ID Cards

If you change your carrier option for 2022, you'll receive a new health plan carrier ID card in the mail.

You may also access and print a health plan carrier ID card from the carrier's website or mobile app.

Learn More About Your Benefits and Enroll

If you do not make changes to your current benefit choices, they will remain the same for 2022. It may be tempting to default to the same health plan option year after year. However, taking the time to consider your healthcare needs and review and compare your options is a worthwhile investment!

Visit cpg.org/annualenrollment to learn about, evaluate, and choose your 2022 benefits. You will need your **Client ID number** to access your personal information and enroll—**you'll find that under the Annual Enrollment icon on the first page of this brochure.**

Your plan provides a *Summary of Benefits and Coverage* (SBC), which offers important details in a standard format about the plan's benefits, to help you compare options. SBCs are available at cpg.org/mtdocs. Paper copies are also available, free of charge, by calling (800) 480-9967, 8:30 AM to 8:00 PM ET.

To access the 2022 Annual Enrollment Guide with an overview of the types of plans available to you, visit cpg.org/AEGuide.

If You Don't Enroll

Your current benefit choices will continue in 2022. Any rate changes will apply.

If your current health plan will not be offered next year, **you need to select another health plan for 2022 in order to have medical benefits.**

This material is provided for informational purposes only and should not be viewed as investment, tax, or other advice. It does not constitute a contract or an offer for any products or services. In the event of a conflict between this material and the official plan documents or insurance policies, any official plan documents or insurance policies will govern. The Church Pension Fund ("CPF") and its affiliates (collectively, "CPG") retain the right to amend, terminate, or modify the terms of any benefit plan and/or insurance policy described in this material at any time, for any reason, and, unless otherwise required by applicable law, without notice.

Church Pension Group Services Corporation ("CPGSC"), doing business as The Episcopal Church Medical Trust, maintains a series of health and welfare plans (the "Plans") for eligible employees (and their eligible dependents) of The Episcopal Church (the "Church"). The Medical Trust serves only eligible Episcopal employers. The Plans that are self-funded are funded by The Episcopal Church Clergy and Employees' Benefit Trust, a voluntary employees' beneficiary association within the meaning of section 501(c)(9) of the Internal Revenue Code.

The Plans are church plans within the meaning of section 3(33) of the Employee Retirement Income Security Act of 1974, as amended, and section 414(e) of the Internal Revenue Code. Not all Plans are available in all areas of the United States or outside the United States, and not all Plans are available on both a self-funded and fully insured basis. Additionally, the Plan may be exempt from federal and state laws that may otherwise apply to health insurance arrangements. The Plans do not cover all healthcare expenses, so members should read the official Plan documents carefully to determine which benefits are covered, as well as any applicable exclusions, limitations, and procedures.