



2023 Annual Enrollment



Key 2023 Renewals & Annual Enrollment Details!

Dear Annual Enrollment Administrator:

To help you prepare for Annual Enrollment, we are sharing the following key dates and reminders, along with communications that we will be mailing to members (as applicable).

Please save this email for reference and mark your calendar with the dates and activities listed below.

Key Activities and Dates

Action	When to Take Action (2022)
Group health plan renewals for 2023 <i>Your Participating Group's MAP Administrator designated to make plan selections chooses the plans for your group</i>	Aug. 25 – Sept. 30, 2022
Session 1 Annual Enrollment period	Oct. 12 – Nov. 2, 2022
Session 2 Annual Enrollment period (includes pre-65 retirees)	Oct. 26 – Nov. 16, 2022
Retiree Annual Enrollment period	Oct. 17 – Nov. 14, 2022

Important Reminders

- The [Administrative Policy Manual](#) describes The Episcopal Church Medical Trust (Medical Trust) health plan eligibility, the obligations of participating groups, and responsibilities of group benefit administrators for Annual Enrollment.
- *Summaries of Benefits and Coverage* for the Medical Trust's 2023 health plan offerings will be available at cpg.org/mtdocs starting **August 25, 2022**.
- This fall, the Medical Trust will send updated versions of legally required *Healthcare Compliance Notices* to all enrolled employees.
 - The Healthcare Compliance Notices will include the Notice of Creditable Coverage for all Medicare-eligible Medical Trust members whose prescription drug coverage is not through Medicare Part D. The notice is a regulatory requirement that confirms that the member's prescription coverage qualifies as creditable coverage and is expected to pay out at least as much as a standard Medicare prescription drug plan.
 - Employers are responsible for providing the *Premium Assistance Under Medicaid* and the *Children's Health Insurance Program (CHIP)* notices annually to all employees, whether or not they are enrolled in a Medical Trust plan.
 - We recommend that you provide employees who are not currently enrolled in a Medical Trust plan with this complete set of *Healthcare Compliance Notices* along with the *Summaries of Benefits and Coverage* and other enrollment materials to ensure that these requirements are satisfied. For more information about these requirements, please refer to the [Administrative Policy Manual](#).
 - *The Healthcare Compliances Notices* are posted on MAP and will be available to the participating group's MAP administrator designated to make plan selections as part of the group health plan renewal documents to be released on **August 25, 2022**.

Member Communications

We will be mailing the following communications to members (as applicable) on the dates indicated below. As we finalize materials, we will post them on the [Administrator's Resource Center](#) available at cpg.org/ARC and our [Health Plan Renewal and Annual Enrollment Administrator Central](#) webpage available at cpg.org/AEAdmin.

1. Dependent Aging Out Letters

Expected mail date: October 17, 2022

The Medical Trust sends Dependent Aging Out letters to dependents—and to subscribers of covered dependents—who will age out of coverage effective

January 1, 2023. The Medical Trust, through its Extension of Benefits provision, will allow dependent children who turn age 30 in 2022 to voluntarily continue medical and/or dental coverage at their own expense for up to 36 months commencing on January 1, 2023. The dependent letter also explains options for continued coverage through a qualified health plan offered through an “exchange” established under the Affordable Care Act, or through an employer-provided or individual policy. The subscriber letter advises these members that coverage will be discontinued for any dependents aging out of eligibility.

2. Annual Enrollment Letter

- *Expected mail date for **Session 1**: September 27, 2022*
- *Expected mail date for **Session 2**: October 13, 2022*

On or around these mail dates, please encourage active members to be on the lookout for the green Annual Enrollment envelopes that the Medical Trust will be sending them. The enclosed letters will include enrollment dates, Client ID numbers, and other essential information. There will be a different version for each of the two Annual Enrollment sessions. You will be able to find a generic PDF copy of your group’s letter on ARC. If you aren’t sure of your session, please contact your [IBAMS Account Specialist](#).

While we are obligated to send the Dependent Aging Out letters and *Healthcare Compliance Notices*, keep in mind that if your group has opted out of receiving Annual Enrollment communications, your employees will not receive the Annual Enrollment letter from us. It will be up to you to provide this information to them.

3. Retiree Annual Enrollment Letter

- *Expected mail date: Week of September 27, 2022*

These letters will detail rates, the post-retirement health subsidy for those eligible, and enrollment instructions should participants wish to make changes to their Group Medicare Advantage Plan health plan selections. The Medical Trust will mail the retiree Annual Enrollment letter in a green envelope, like the active member letter.

For more information about the Group Medicare Advantage Plan, please visit the [Annual Enrollment site](#) at cpg.org/annualenrollment and select the “I’m a Retiree” tile at the bottom of the page.

If you have questions about your members’ Annual Enrollment materials, please contact your [IBAMS Account Specialist](#).

If You Decide to Make Plan Changes for 2023

If your group decides not to offer some of your existing 2022 plans for 2023 (“coverage going away”), please note:

- Members enrolled in a plan that is going away must choose another plan during Annual Enrollment in order to keep their Medical Trust coverage in 2023.
- **Please monitor your members by using the “Coverage Going Away” report available to you in My Admin Portal (MAP).** If a member whose plan is going away does not make a new selection by November 16, you, as the administrator, can enroll them in their plan selection choice. This enrollment should be done in consultation with the member. We will send you an email reminder in October to check the report.
- **If the member does not enroll and you do not make a new plan selection on behalf of the member, the member (and any covered dependents) will not have health coverage through the Medical Trust beginning January 1, 2023.**

Thank you for your time and effort to ensure that your employees have the necessary tools to make informed decisions about their healthcare benefits.

As always, your IBAMS team is here to support you. If you have questions, please reach out to your [IBAMS Account Specialist](#).

Sincerely,
Your Annual Enrollment Team

[MyCPG Accounts](#)

Quick, convenient, safe.



BENEFITS | INSURANCE | PUBLISHING

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.

[Privacy Policy \(Política de privacidad\).](#)

[Profile Center \(Centro de perfiles\).](#)

Church Pension Group

19 East 34th Street, New York, NY 10016

©2022 Church Pension Group. All rights reserved.