Your 2023 Retiree Annual Enrollment

Your health plan enrollment is an important decision. These instructions will help you enroll in The Episcopal Church Medical Trust (Medical Trust) retiree health benefits for 2023.

PLEASE SAVE THIS LETTER

Client ID #: «Client_Number»

2023 Annual Enrollment Is October 17 to November 14, 2022

You will need this letter to complete your Annual Enrollment for 2023. Please read it carefully, along with the Annual Notice of Change that you will receive from UnitedHealthcare in early October.

Medical Plan

The Medical Trust offers a UnitedHealthcare® Group Medicare Advantage (PPO) plan to provide eligible retirees and their eligible dependents with health and prescription drug coverage. This group plan is custom designed for the Medical Trust and should not be confused with individual Medicare Advantage plans available in the marketplace.

In addition to delivering all the benefits of Medicare Part A, Part B, and Part D in a single plan, this Group Medicare Advantage plan provides coverage for hearing aids, travel insurance, fitness programs, and other benefits that are important to overall health.

The UnitedHealthcare Group Medicare Advantage (PPO) plan is a national plan that allows retirees to see any provider (in-network or out-of-network) at the same cost, as long as they have not opted out of or been excluded or precluded from Medicare. The plan also offers such benefits as caregiver support and personalized concierge service.

For more information about these benefits, visit retiree.uhc.com/ECMT or call UnitedHealthcare Customer Service at (866) 519-5401, TTY 711, 8:00 AM to 8:00 PM local time, seven days a week (translation services available upon request).
Additional Benefits
The UnitedHealthcare Group Medicare Advantage (PPO) plan includes additional benefits provided by the Medical Trust at no extra cost to you. To learn more, please visit cpg.org/GMAenrollment.

- EyeMed vision benefits provide coverage for an annual eye exam, and cost savings on prescription glasses or contact lenses.
- Health Advocate helps you navigate the complexity of the healthcare system.
- The Cigna Employee Assistance Program (EAP) provides support for emotional, physical, and legal issues.

UnitedHealthcare Group Medicare Advantage (PPO) Plan Options
You have two plan options:

<table>
<thead>
<tr>
<th>Plan Option</th>
<th>Deductible</th>
<th>Out-of-Pocket Maximum*</th>
</tr>
</thead>
<tbody>
<tr>
<td>GMA Premium (PPO)</td>
<td>$0 (none)</td>
<td>$1,500 per person</td>
</tr>
<tr>
<td>GMA Comprehensive (PPO)</td>
<td>$0 (none)</td>
<td>$2,000 per person</td>
</tr>
</tbody>
</table>

In addition to the difference in the annual maximum out-of-pocket costs, some of the cost shares for certain services and/or products are different under the two plan options. Please refer to the summary of benefits for a side-by-side comparison at retiree.uhc.com/ECMT or call UnitedHealthcare Customer Service at (866) 519-5401, TTY 711, 8:00 AM to 8:00 PM local time, seven days a week (translation services available upon request).

*Your Out-of-Pocket Maximum does not include any cost-share related to (1) pharmacy benefits and (2) services not otherwise covered by Medicare.

Note: Both plan options include Part D prescription drug coverage. If you enroll in this UnitedHealthcare Group Medicare Advantage (PPO) plan and you have an existing Medicare Part D prescription drug plan not provided by the Medical Trust, Medicare may disenroll you from that Medicare Part D plan because you can be enrolled in only one Medicare Part D plan at a time.

Retirees enrolled in TRICARE For Life can also be enrolled in the UnitedHealthcare Group Medical Advantage (PPO) plan offered through the Medical Trust.

Dental Plan
The Medical Trust offers three dental plan options through Cigna Dental: Dental & Orthodontia, Basic, and Preventive. Each plan option covers three in-network cleanings per year at no cost to you. Out-of-network cleanings are also covered, but you may have some cost share.

To learn more about the dental options available to you, visit cpg.org/dentaloptions.

Clergy Medicare Health Subsidy and Plan Premiums
Eligible clergy beneficiaries of The Church Pension Fund Clergy Pension Plan (Clergy Pension Plan) receive a monthly subsidy to help cover the cost of purchasing a Group Medicare Advantage plan and/or group dental coverage. Retired clergy with at least 10 years of credited service under the Clergy Pension Plan—and their eligible spouses—are eligible for the subsidy.

If applicable to you, the 2023 Medicare Health subsidy approved by The Church Pension Fund Board of Trustees may be used to cover or offset all or a portion of the cost of the GMA Premium (PPO) plan option, the GMA Comprehensive (PPO) plan option, and/or dental coverage for eligible retired clergy and their eligible spouses/dependents. The monthly health subsidy information is available at cpg.org/2023subsidy.
**Medical Plan Option**

<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Monthly Premium*</th>
</tr>
</thead>
<tbody>
<tr>
<td>GMA Premium (PPO)</td>
<td>$286 per person</td>
</tr>
<tr>
<td>GMA Comprehensive (PPO)</td>
<td>$196 per person</td>
</tr>
</tbody>
</table>

*Includes cost for Medical, Rx, Vision, EAP, Health Advocate, and plan administration. The Medical Trust is no longer offering plans without prescription coverage.

**Dental Plan Option**

<table>
<thead>
<tr>
<th>Plan Type</th>
<th>Monthly Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dental &amp; Orthodontia (PPO)</td>
<td>$90 per person</td>
</tr>
<tr>
<td>Basic Dental (PPO)</td>
<td>$74 per person</td>
</tr>
<tr>
<td>Preventive Dental (PPO)</td>
<td>$61 per person</td>
</tr>
</tbody>
</table>

**Note:**
If you and your eligible spouse/dependent don’t select a plan option by November 14, 2022, you will remain enrolled in your current GMA plan option and your current dental plan option for the plan year starting in January 2023.

**How to Enroll**

1. **Step 1** Read your UnitedHealthcare Annual Notice of Change coming to you in early October.
   The Annual Notice of Change will include details on the current plan you are enrolled in for the 2022 plan year.
2. **Step 2** Use the Annual Enrollment website to make your elections for 2023.
   See the enclosed Annual Enrollment Website Guide for information on how to enroll online, **October 17 to November 14, 2022**.
3. **Step 3** Review your information to make sure it is correct.
   Please review your personal information, dependent information, and plan elections carefully.

**Member Assistance, Information, and Resources**

**UnitedHealthcare Group Medicare Advantage (PPO) Plan**

- The UnitedHealthcare Group Medicare Advantage (PPO) Annual Notice of Change will arrive in early October.
- Visit [retiree.uhc.com/ECMT](http://retiree.uhc.com/ECMT) or call UnitedHealthcare Customer Service at (866) 519-5401, TTY 711, 8:00 AM to 8:00 PM local time, seven days a week (translation services available upon request).

**Dental and Additional Benefits Offered Through the Medical Trust**

- Visit [cpg.org/GMAenrollment](http://cpg.org/GMAenrollment).

**Enrollment Assistance**

- For help enrolling or for questions about your Medicare health subsidy, call Church Pension Group Client Services at (800) 480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET.
Pension Deduction Agreement and Authorization

As a condition of your continued enrollment in the applicable health coverage(s), you authorize The Church Pension Fund to deduct from your pension benefit the amount of your monthly contribution(s) for the health coverage(s) in which you and any eligible dependents are enrolled and to pay such amount(s) to The Episcopal Church Clergy and Employees’ Benefit Trust (ECCEBT). You acknowledge that your participation in this retiree health program is optional and that you authorize this deduction from your pension benefit voluntarily and without any duress or undue influence by the ECCEBT, The Episcopal Church Medical Trust, or any of its affiliates. You acknowledge that this deduction is for your benefit and that you have received written notice of all terms and conditions of the payment and/or its benefits and the details of the manner in which deductions will be made.

You understand that future cost increases will automatically be withheld from your pension benefit, as long as you remain in the same plan(s) or are defaulted to a replacement plan(s), without additional authorization. You understand that whenever there is a substantial change in the terms or conditions of the payment, including but not limited to any change in the amount of the deduction, or a substantial change in the benefits of the deduction or the details in the manner in which deductions are made, you will be notified prior to the implementation of the change.

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.

CPF currently offers a post-retirement health subsidy to eligible clergy and eligible spouses. However, CPF is required to maintain sufficient liquidity and assets to pay its pension and other benefit plan obligations. Given uncertain financial markets and their impact on assets, CPF has reserved the right, at its discretion, to modify or discontinue the post-retirement health subsidy at any time.

Out-of-network/non-contracted providers are under no obligation to treat UnitedHealthcare Group Medicare Advantage (PPO) plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information.

Benefits, features and/or devices vary by plan/area. Limitations and exclusions apply.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in these plans depends on the plan’s contract renewal with Medicare.

Neither The Church Pension Fund nor any of its affiliates (collectively, “CPG”) is responsible for the content, performance, or security of any website referenced herein that is outside the www.cpg.org domain or that is not otherwise associated with a CPG entity.

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Guide to Making Annual Enrollment Plan Selections for Post-65 Former Employees

These instructions will guide you through CPG’s online application as you make your plan selection(s) for the coming year through MyCPG Accounts.

Step One Log in to MyCPG Accounts for Annual Enrollment

A. Type annualenrollment.cpg.org into your web browser.

B. Log in to your account—The following screen will be displayed. Sign in with your username and password.
   - If you do not have an account, click “Create Account.” Enter your Client ID number (included in your Annual Enrollment letter) when prompted, and follow instructions to set up your username and password.
   - You may also contact the Client Services Technical Support Team at (855) 594-2201, Monday to Friday, 8:30 AM to 8:00 PM ET.
Step Two  
**Update Your Personal Information**  
Verify your Personal Information and changes directly to the online form.

![Personal Information Screen]

Step Three  
**Update Your Relationships Information**  
Make sure your spousal and dependent(s) information is current by making updates on the “Relationships” screen.

- Update current spousal and dependent information by clicking on the “Edit” link under their name(s).

- Add a new spouse or dependent only if you intend to provide them with health plan coverage.¹
  - Add a new spouse by clicking the “Marital Status Section” link.
  - Add a new dependent by clicking on the “Add Dependent” button.

![Relationships Screen]

¹ The following information is required for adding a new dependent (spouse or child): Legal name, gender, date of birth, and Social Security Number or Individual Tax ID Number.
Step Four

Make Your Health Plan Selections

On the “Coverage” screen, your current health plan(s) will be displayed. Review your coverage.

Select who you want to have covered under your healthcare plan(s) for 2023:

- Check the Medical Coverage and/or Dental Coverage boxes in front of dependents’ names if they are to receive coverage or uncheck the boxes to discontinue coverage for 2023.

Review your plan choices and their rates and make your plan selection(s).
Step Five

Review and Confirm Your Coverage

When you are done, review your selected health plan choice(s).

Then sign the form electronically by checking the box at the end of the form and click “Submit.”

Follow the instructions to conclude the review of your plan selection process:
• If a red error message appears, correct the error, and click “Submit” again.

To reject all changes and restart with the original form, select “Start Over.”
• A message will ask if you are sure. Click “Start Over” to continue or “Cancel” to keep your previously submitted selection(s).
For enrollment assistance, please call our Client Services Technical Support Team at (855) 594-2201, Monday to Friday, 8:30 AM to 8:00 PM ET.

Refer to These Online Benefit Resources
The Church Pension Group website can help you understand and make the best use of your benefits.

Visit [cpg.org/annualenrollment](http://cpg.org/annualenrollment) and select your status:

- “I’m a Post-65 Former Employee” (eligible for Medicare)

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