

Health Plan Renewal and Annual Enrollment 101: What It Is, and What You Need to Do



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Wednesday June 28, 2023 2024 Annual Enrollment Webinar Series

AnnualEnrellment



Today's Agenda

The Journey from Planning to Enrollment

- Health Plan Renewal Planning and Annual Enrollment Timeline
- Pricing and 2024 Renewals
 - Pricing and Trends
 - Annual Renewals
- 2024 Annual Enrollment Communications
- Annual Enrollment Administration and Reports
- Questions and Discussion

Health Plan Renewal Planning and Annual Enrollment Timeline

E Overview of Our Seamless Annual Process

Final plan pricing for

the coming year

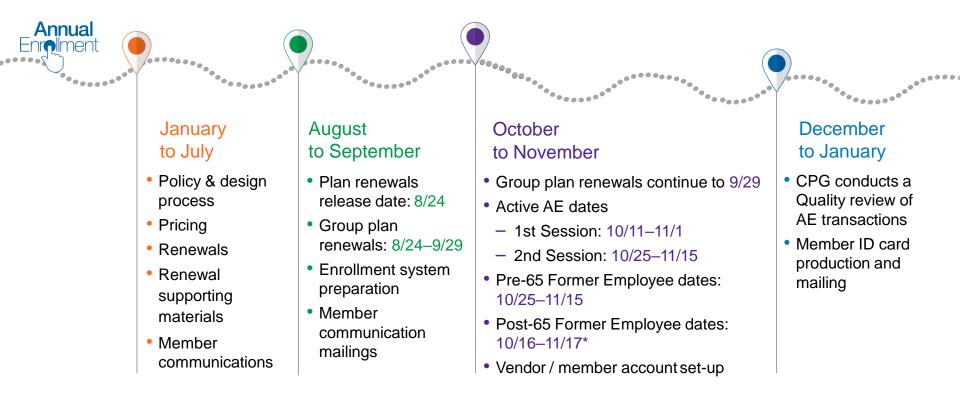
Plan Policy Annual Enrollment Pricing & Design Renewal Benchmarking Employees and Medical Plan Groups select plans Underwriting that will be offered to their families Industry trends employees review their Detailed analysis choices and enroll Client feedback of group experience

or make changes

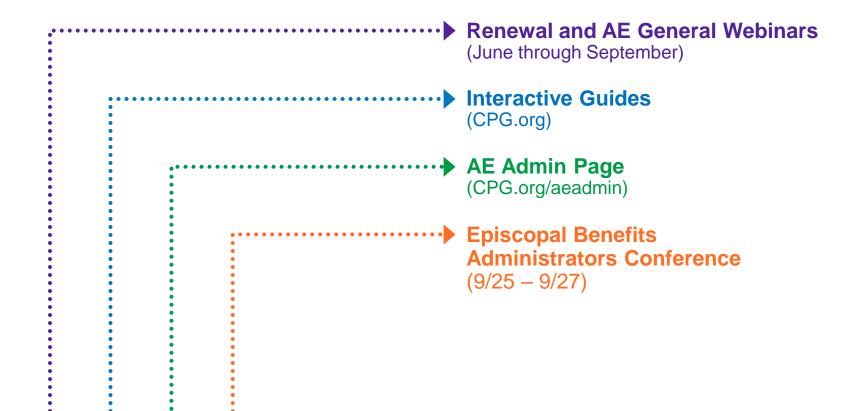
for 2024

• Evolving needs of the Church

Ξ 2024 Health Plan Renewal and Annual Enrollment Timeline \equiv



2024 Administrator Education Opportunities



E Centralized AE Admin Information on CPG.org

	CHURCH	Investment Managem	ent Contact Us Jobs	Sign In / Create Account
	ENSION GRO	UP	Q Search for subj	jects, conferences, videos
ŵ	MyCPG	Insurance	Learning	Active Clergy
Adm	th Plan Rei inistrator C	newal and Ann Central	ual Enrollmen	t
 Ne 202 Lea We 	ws & Updates 22 Annual Enrollment 1 arning Modules binars cuments & Mailings	Dmeline		
	& Updates back for news and up	dates on 2022 Renewal and	Annual Enrollment!	
2022 R	enewal and Annu	al Enrollment Timeline	for Administrators	

aug 26

anewal Selection Release Da

Plan selections are announced to Administrators by email Thursday, August 26, 2021.

CPG.org/aeadmin

- Health Plan Renewal and AE information
- AE Admin news and updates
- Education, documents, and mailings
- Calendar key dates and resources



Pricing and 2024 Renewals



Pricing Trends Overview

Pricing: Overview—Key Factors

Overall

Actual versus expected

Large claims

Projected

- Cost trend assumptions
- Known/expected changes
- Stress testing

Group Specific

Relative positioning

- Medical Trust average
- National rate Denominational Health Plan groups

Group-specifics

- Demographics/geographic factors
- Experience
- Prior rate actions

E Pricing: Focus on Cost Trend Assumptions What is medical and pharmacy cost trend?

Projected percentage increase in the cost to treat patients from one year to the next, assuming that benefits remain the same



Cost trends used to estimate what the same health plan design will cost from year to year



Cost trend influencers

- Unit cost inflation of medical products and services
- Per capita utilization or changes in the number or intensity of service usage

Pricing: Focus on Cost Trend Assumptions What are some factors that can affect healthcare trends?

Healthcare service utilization	Medical technology and drug therapies	Impact of fixed deductibles and copays	Aging of the covered population	Cost shifting from public to private plans
Price inflation or deflation	Variations in provider treatment patterns	Changing health of the covered population	Healthcare provider consolidation	Changes in federal or state legislation



EMedical Plans Offered for 2024



Seven plan options with each -Anthem and Cigna

- PPO 100
- PPO 90
- PPO 80

- CDHP 15
- CDHP 20
- CDHP 40

• PPO 70



Three plan options with Kaiser

- EPO High
- **EPO 80**
- CDHP 20

Renewal Package



Renewal Email



Renewal Supporting Materials

- Alerts administrator to go to MAP/MLPS for the Group's Plan offering and selections
- Provides a link to instructions for how to access information

- Medical Trust Renewal Letter
- Participating Group Agreement
- Administrative Policy Manual
- Medical Trust Compass Report and instructions
- AE Timeline and Letter Templates for Administrators
- Healthcare Compliance Notices
- Summaries of Benefits and Coverage (SBCs) on cpg.org
- Health Plan Comparison Chart

2024 Active Renewals

August 24 — Available in MAP/MLPS

- Review and share accordingly with your key stakeholders
- Benefits Relationship Management Team resources available to assist you with questions
- Determine your 2024 Plan offering and make elections in MAP/MLPS

Plan Selection Timing

Plan Selection Deadline:
 September 29

Communicating to Your Related Entities and Employees

Letter Templates



Customizable templates to help facilitate communications to your group about plans, rates, dates, etc.

- Template #1: Memo to rectors, parish administrators, or other benefits personnel
- Template #2: Letter to employees (members and non-participating employees)

Plan Comparison Chart



Provides side-by-side benefit details to help members compare their options

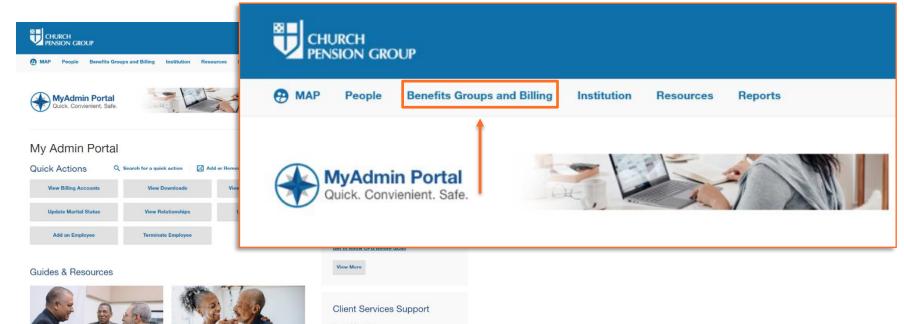
Annual Enrollment Guide



Helps employees make their annual plan elections

Group Plan Selection

My Admin Portal (MAP)



Hours of Operation Monday – Friday 8:30 AM – 8:00 PM Administrator Support (855) 215-5990

Employment Events

Life Events

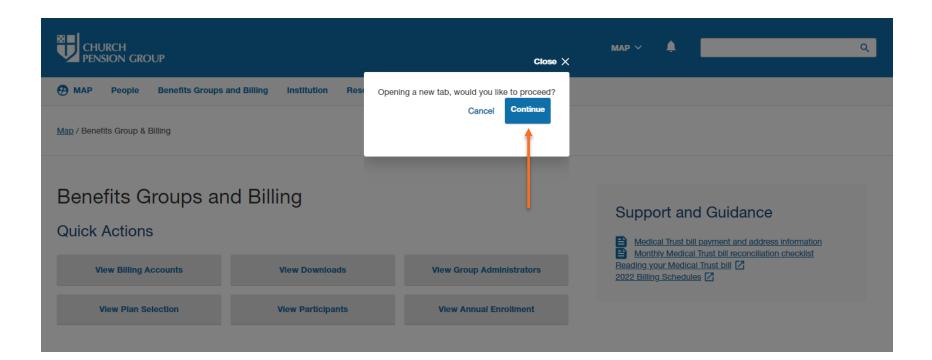
Benefits Groups and Billing



Guides and Resources



Entering MLPS



Plan Selection Page: Making Selections Review your offering

Plan Name	Plan Code	Enroll			Rates					Rates			Ele	ection	
		Total	Single	Plus Sps	Plus Child	Family	Final % Chg	Single	Plus Sps	Plus Child	Family	Final % Chg	Accept	Decline	
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To complete Plan Selections:

- 1. Click Accept or Decline next to each plan (do not leave any blank radials)
- 2. Click Submit
- 3. Finished!

Example 2 Plan Selection Page: Additional Option Requests Submitting a request for additional options

To request an Additional Option:

- 1. Leave radial buttons blank
- 2. Click check mark in Additional Option Requested box
- 3. Enter comments in the Plan Request box

4. Click Submit

	Plan Code	Enroll	_		2016 Rates		2	Ra		2017 Rates				Election
		Total	Single	Plus Sps	Plus Child	Family	Final % Chg	Single	Plus Sps	Plus Child	Family	Final % Chg	Accept	Decline
Anthem BCBS High Deductible Health Plan	MHDE	67	357	893	893	893	11.91	800	1840	1840	1840	109.52	0	0
Anthem PPO 80/60	MSPZ	100	520	1300	1300	1300	12.07	624	1435	1435	1435	14.09	0.0	(a)(Q)(c)
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Anthem BCBS High Deductible Plan 15	MHDG							624	1435	1435	1435	11.26	00	0
Anthem BCBS High Deductible Plan 40	MHBR							388	892	892	892	11.28	0	0.0
Anthem BCBS PPO 70 SLV	MPSI					C 0		536	1233	1233	1233	11.16	0.	
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Additional Option Req	uested											_	Submi ar Cha	

Plan Selection Page: Additional Option Requests Viewing Tier and Rx Changes

- If you request a multiple Tier and/or Rx pricing, upon receiving notice that your additional request is ready, you will need to review your new offering
 - 1. Adjust values for Rate Tiers / Rx Options to changes
 - 2. Click View Plans (to complete use previous instructions)
 - 3. Finished!

Diocese of Effective Date: Rate Tiers 2 R	x Option	Stand	ard 💽	View	Plans				
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Option 1 Click here to download your Plan Sel Plan Name Anthem BCBS High Deductible Health Plan Anthem PPO 80/60 Anthem BCBS EPO80	Plan Code MHDE	Total	357	893	893		Chg 11.91	Single	

MLPS—Plan Selection Page

Medicare Secondary Payer Small Employer Exception (MSP SEE) Status

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Anthem BCBS BlueCard PPO 100	MPP1																0	0
Anthem BCBS BlueCard PPO 90	MPP2																	0
Anthem BCBS CDHP-20/HSA	MHDE																0	
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Anthem BCBS BlueCard MSP PPO 100	MSG9																0	
Anthem BCBS BlueCard MSP PPO 70	MS12																	
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Anthem BCBS BlueCard PPO 80	MPP3																0	0
Anthem BCBS CDHP-15/HSA	MHDG																0	0
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Cigna Open Access Plus CDHP-40/HSA	MCDG																0	
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Cigna Open Access Plus MSP PPO 70	MGM4																	
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Cigna Open Access Plus MSP PPO 90	MGM2																	
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E Plans Going Away

Should a Participating Group elect to no longer offer a medical plan in 2024 that they offer in 2023

Employees are required to make a plan selection during Annual Enrollment or they will lose coverage Tools and reports to help group administrator manage members in plans going away

Changes to Participating Group plan selections may affect the plan types and networks available to members of the Participating Group



2024 Annual Enrollment Communications



2024 Member Education Opportunities

Opportunity 1 Benefits Relationship Management Team education sessions (by request)
Opportunity 2 Health plan member services (for current enrollees)
Opportunity 3 Enrollment support via Health Advocate

2024 Annual Enrollment Letter



2024 Annual Enrollment Member Letter Estimated Mail Dates

Active Members: Session 1: Late September Session 2: Mid October

Retirees: Late September

Annual Enrollment Communication and Member Education Materials



Show employees where to find materials, resources and additional information.



I'm an Active

(currently working²)

Get Resources For Me

Employee

I'm an Early Retiree

(not eligible for Medicare)

Get Resources For Me

I'm a Betiree

I'm a Retiree (eligible for Medicare) Get Resources For Me

Member Annual Enrollment Website

Sign In or Create Account Sign In Create Account Comparison Contact Client ID are no longer used to sign in to MyCPG Cocumpts or My Admin Portal. instead, use the email address associated with your account and your password. Contact Client Services if you presonal Email the rev smith@gmail.com Password Password		CHURCH PENSION GROUP	
Note: Username and Client ID are no longer used to sign in to MyCPG Accounts or My Admin Portal. Instead, use the email address associated with your account and your password. Contact Client Services if you experience difficulty signing in. Personal Email the.rev.smith@gmail.com Password Enter your password Show typ Enter your password Remember this device for 10 hours. Do not select if you are on a public or shared computer.		Sign In or Create Account	
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Sign In	_		
		Sign In	
Help? * Dequir	d Help?		* Required

Encourage employees to log into the AE website.

Check personal data, even if no intent to change coverage.

Please contact Client Services (855) 594-2201 Monday - Friday, 8:30AM - 8:00PM EST

field.

Helping Employees Prepare

Employee Cost



Explain any employee cost share toward monthly contributions

Reminder



Remind employees about plans going away, if applicable, and the need to select another plan or will lose coverage

- Explain your decisions to change plan and vendor options
- Remember to monitor your employees' AE activity to make sure they select another plan

Helping Employees Prepare



Explain:

- the differences between:
 - Traditional plans and CDHPs, if applicable
 - HealthEquity, or other selected HSA custodian
- HSA funding rules and any employer contributions



- Explain network and outof-network* deductibles and out-of-pocket maximums
- The plan comparison chart can help employees choose



Include reminders about benefits included in the plans

- Telehealth
- Vision
- Pharmacy
- EAP
- Health Advocate
- Hinge Health

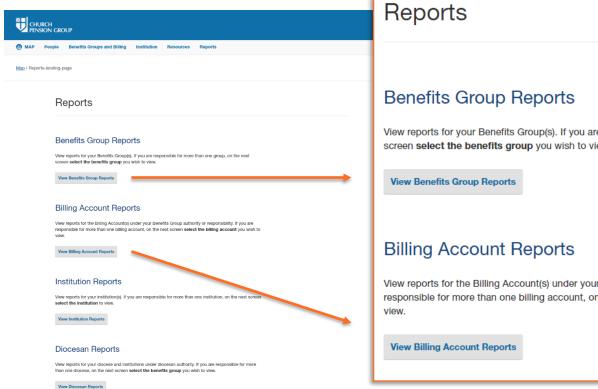
*Only network benefits are available if a Kaiser plan is offered.



Annual Enrollment Administration and Reports



E Accessing AE Reports



View reports for your Benefits Group(s). If you are responsible for more than one group, on the next screen select the benefits group you wish to view.

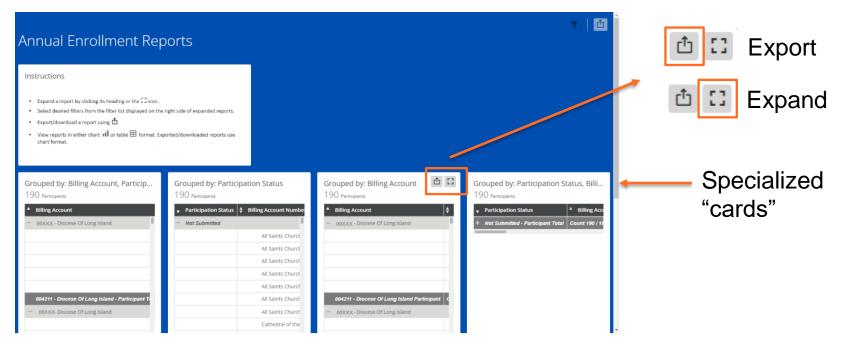
View reports for the Billing Account(s) under your Benefits Group authority or responsibility. If you are responsible for more than one billing account, on the next screen select the billing account you wish to

E Assessing AE Reports, cont.

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	Billing account: 0114001110 Diocese Of Chicago Change billing accounts	
Benefits Group Reports	MAP / Benefits Group & Billing / Billing Accounts / Reports	
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	Annual Enrollment Report Download employee list	Annual Enrollment Report
		Download employee list

E AE Reports—DOMO Dashboard

All AE institution and member information is now available on the DOMO Dashboard



EXPARE Reports—Expand a Card

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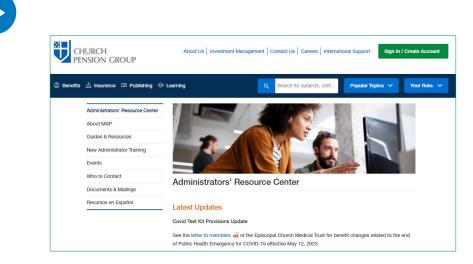
EXAE Reports—Expanded Card Filtering You can dynamically filter information

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EXPORTS AE Reports Export Data

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Stay Tuned for More Information Annual Enrollment Resources



Register for upcoming webinars on ARC at cpg.org/arc

Important Disclosures

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.