

Important Cigna Claims Update

Dear Friend:

As you know, this past January, we made an important change to our health plans and transitioned many of the services to **Quantum Health**. This change was designed to provide you with expert guidance, personalized support, and a single point of contact for your health care needs.

However, we understand the transition has caused some challenges, mostly related to a delay with claims processing and reimbursement levels on out-ofnetwork claims. We recognize that the difficulties you may have encountered are not at the level of service that you have come to expect, and we apologize for any errors or delays you may have experienced.

Please know that we are committed to resolving these issues expeditiously. In fact,

we have resolved the issue relating to out-of-network reimbursement levels. Previously submitted out-of-network claims are currently being reprocessed to

the correct benefit level, and if applicable, an explanation of benefits will be sent. We will continue to work closely with our vendors to optimize the claims handling process. If you have any questions, please do not hesitate to contact your Quantum Health

We appreciate your continued patience and support. We remain committed to

Care Coordinator at (866) 871-0629 or visit myQuantumCare.org.

providing you with the highest level of service.

Faithfully,

John Servais Senior Vice President Benefits Policy & Design

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constitute a contract or an offer for any products or services. In the event of a conflict between this material and the official plan $documents\ or\ insurance\ policies, any\ official\ plan\ documents\ or\ insurance\ policies\ will\ govern.\ The\ Church\ Pension\ Fund\ (\text{``CPF''})\ and\ its$ 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. $Church\ Pension\ Group\ Services\ Corporation\ ("CPGSC"), doing\ business\ as\ The\ Episcopal\ Church\ Medical\ Trust,\ maintains\ a\ series\ of\ Medical\ Trust,\ maintains\ a\ series\ of\ Medical\ Trust,\ Me$

health and welfare plans (the "Plans") for eligible employees of The Episcopal Church (the "Church") and their eligible dependents. The

 $Medical\ Trust\ serves\ only\ eligible\ Episcopal\ employers.\ The\ Plans\ that\ are\ self-funded\ are\ funded\ by\ the\ Episcopal\ Church\ Clergy\ and\ Medical\ Trust\ serves\ only\ eligible\ Episcopal\ employers.$ Employees' Benefit Trust, a voluntary employees' beneficiary association within the meaning of Section 501(c)(9) of the Internal Revenue The Plans are church plans within the meaning of Section 3 (33) of the Employee Retirement Income Security Act of 1974, as amended, and the plans are church plans within the meaning of Section 3 (33) of the Employee Retirement Income Security Act of 1974, as amended, and the plans are church plans within the meaning of Section 3 (33) of the Employee Retirement Income Security Act of 1974, as amended, and the plans are church plans within the meaning of Section 3 (33) of the Employee Retirement Income Security Act of 1974, as amended, and the plans are church plant are church $and \, Section \, 414(e) \, of \, the \, Internal \, Revenue \, Code. \, Not \, all \, Plans \, are \, available \, in \, all \, areas \, of \, the \, United \, States \, or \, outside \, the \, United \, States, \, and \, available \, in \, all \, areas \, of \, the \, United \, States \, or \, outside \, the \, United \, States, \, and \, available \, in \, all \, areas \, of \, the \, United \, States \, or \, outside \, the \, United \, States, \, and \, available \, in \, all \, areas \, of \, the \, United \, States \, or \, outside \, the \, United \, States, \, available \, in \, all \, areas \, of \, the \, United \, States \, or \, outside \, the \, United \, States, \, available \, in \, all \, available \, available \, in \, all \, available \,$

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 $Iaws\ that\ may\ otherwise\ apply\ to\ health\ insurance\ arrangements.\ The\ Plans\ do\ not\ cover\ all\ health care\ expenses,\ so\ members\ should\ read$ $the official Plan documents \ carefully \ to \ determine \ which benefits \ are \ covered, \ as \ well \ as \ any \ applicable \ exclusions, \ limitations, \ and \ and \ any \ applicable \ exclusions, \ limitations, \ and \ and \ any \ applicable \ exclusions, \ limitations, \ and \ and \ any \ applicable \ exclusions, \ limitations, \ and \ and \ and \ any \ applicable \ exclusions, \ limitations, \ and \ and \ any \ applicable \ exclusions, \ limitations, \ and \ and \ any \ applicable \ exclusions, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ limitations, \ and \ any \ applicable \ exclusions, \ any \ any \ and \ any \ any \ any \ any \ any \ and \ any \ an$ procedures.

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