Stay tuned for the Church Pension Group Webinar



E Important Reminders



all attendees



Questions Live Q&A at end of presentation



Recording

This webinar is being recorded and will be available in ARC at: cpg.org/arc



Health Plan Selection and Annual Enrollment: Key Dates and Plan Array Updates



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July 13, 2023 Group Health Plan Renewal & Annual Enrollment Webinar Series

Annual Enrolment



Roadmap for Today

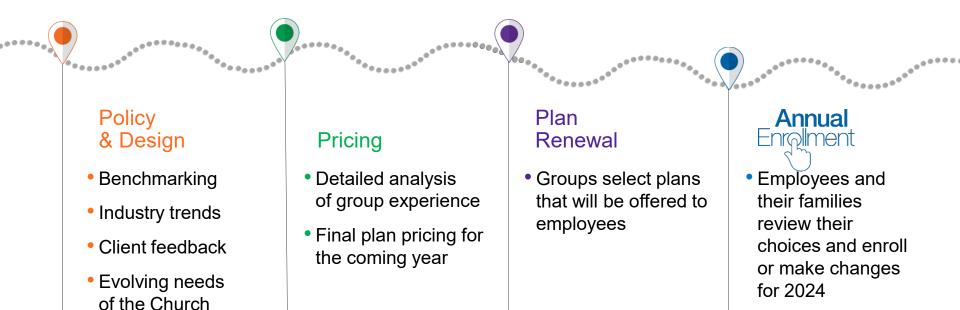
- Group Health Plan Renewal & Annual Enrollment Timeline
- Plan Array Updates
- Annual Enrollment Communications
- Reflections, Questions, and Discussions



Group Health Plan Renewal & Annual Enrollment Timeline



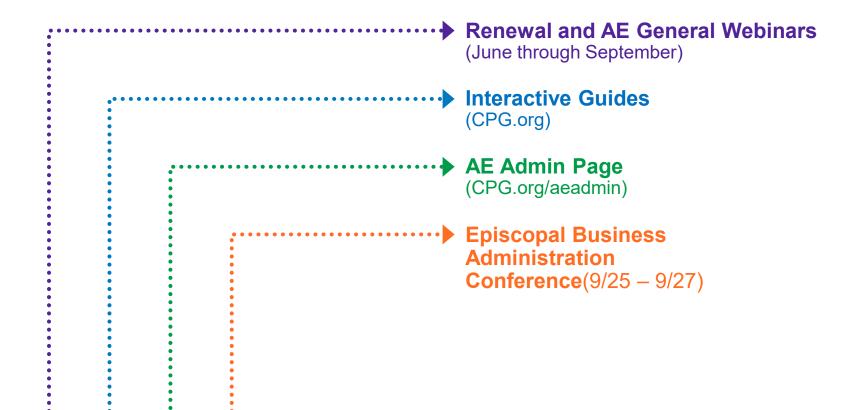
E Overview of Our Seamless Annual Process



= 2024 Health Plan Renewal and Annual Enrollment Timeline —



2024 Administrator Education Opportunities





Plan Array Updates



Dental Assessment—Overview

What?

- Conduct vendor selection process
- Benchmark current designs
- Redesign plan options
- Evaluate Dental HMO (DHMO)/ In-network only solutions

Why?

- Due diligence and financial discipline
- Provide market competitive benefit designs and cost
- Optimize in-network benefit utilization



Request for Proposal Summary \equiv

Top Considerations

- Financial stewardship
- Programs, products, and services
- Network access and provider disruption

Evaluated seven national dental vendors three finalists selected

- Cigna, Delta Dental, and MetLife
 - MetLife was deselected after finalist meetings
- Continued negotiations with Cigna and Delta Dental

E Finalist Comparison

Advantages

Cigna.

- Innovative design features (e.g., progressive annual maximum)
- Robust web tools and plan selection
- Lowest fixed cost (i.e., fees)
- Most fees at risk

- Largest national network
- Most competitive discounts
- Broadest coverage specifically in rural locations
- Lowest overall cost

- Considerations
- Leased networks
- Discount levels less competitive

- Higher fixed cost
- Webtool sufficient, but not as innovative as Cigna

E Dental Finalist Selected

Dental business awarded to Delta Dental



Lowest cost







Broader provider network



Largest dental vendor







Contract Conditions and Elements

Plan Design Considerations



am Announcement eeting letter





Delta Dental website and call center available



Annual Enrollment

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

The Way Forward

Future Vision: Healthcare Navigator

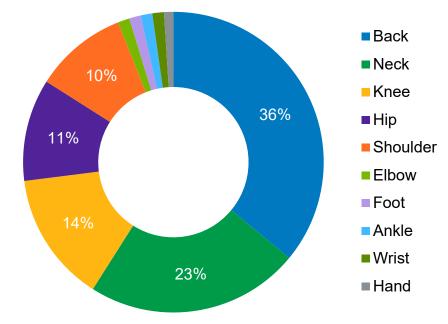
- Single point of contact
- Request for Proposal Update
- Implementation
 Timeline



Hinge Health

Hinge Health—Engagement Statistics

669 Members engaged



Hinge Health—Results

Pain reduction

45% in participants at 12 weeks Create happy employees

9/10 Satisfaction

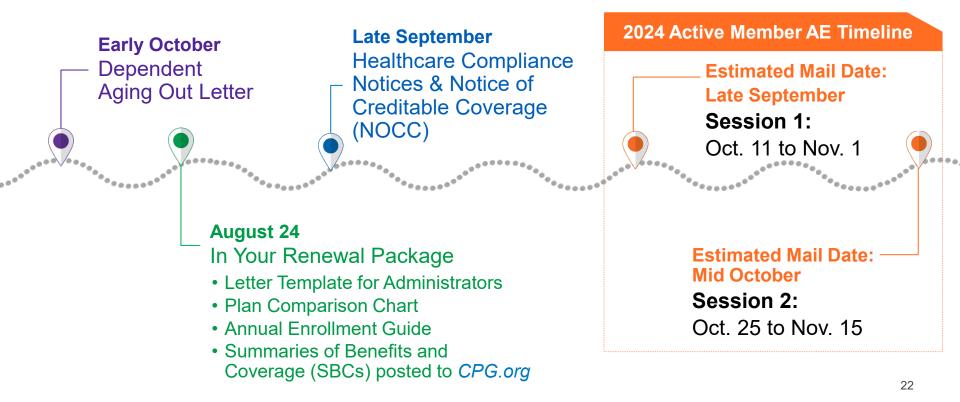


Annual Enrollment Communications & Planning



E 2024 Annual Enrollment Planning

Communicating to your related entities and employees



E 2024 Annual Enrollment Planning

Communicating to your related entities and employees

Plans Going Away

The Medical Trust is not discontinuing any Medical plans for 2024.

"Plan Going Away" applies **only** if a group chooses to not offer a plan in 2024 that they offered in 2023.

All Cigna Dental plans will no longer be offered for the 2024 plan year.

"Plan Going Away" applies for **all** employees currently enrolled in Medical Trust dental coverage.

Action Required

Dental Annual Enrollment requires employee action. No action will result in no coverage in 2024.

My Administrator Portal MAP has tools and reports to help you manage membership.

Member Changes

When Members Change Networks or Plan Types

Resources available to provide information.

Ensures continuity of care for those in treatment.

E Plans Going Away

For Dental Plans and Participating Groups electing 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 Letter

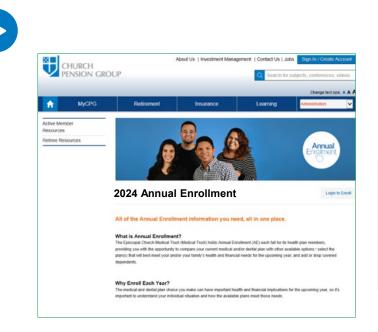


2024 Annual Enrollment Member Letter Estimated Mail Dates

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 Employee (currently working²)

Get Resources For Me



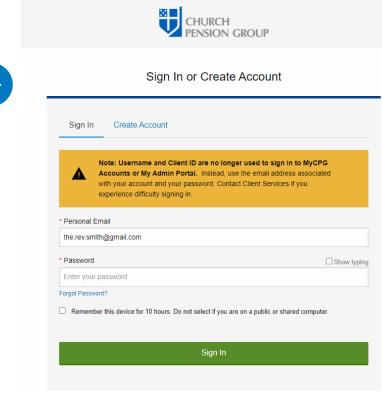
I'm an Early Retiree

(not eligible for Medicare)

Get Resources For Me

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

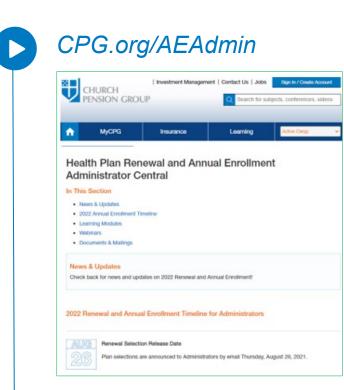
E Member Annual Enrollment Website



Encourage employees to log into the AE website.

Need Help? Please contact Client Services (855) 594-2201 Monday - Friday, 8:30AM - 8:00PM EST * Required field.

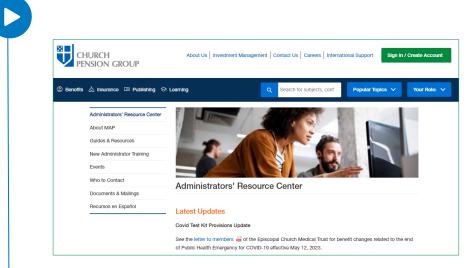
E Centralized AE Administrator Information



Central location on CPG.org

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

E Stay Tuned for More Information Annual Enrollment Resources



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

E Reflections, Questions, and Discussion



Thank You! For your participation and feedback.



E Important Disclosures

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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.