

May 5, 2023

The US Department of Health and Human Services' declaration of a federal Public Health Emergency for COVID-19 is set to expire on May 11, 2023.

What's Changing

Effective May 12, 2023, eligible individuals and their dependents who are enrolled in Anthem, Cigna, and Kaiser medical plans through The Episcopal Church Medical Trust may receive up to **four** COVID over-the-counter home test kits per month without a deductible, copay, or coinsurance. Although the Medical Trust is no longer required by law to provide any free over-the-counter home test kits, we will still allow members to receive up to four test kits per member per month without a deductible, copay, or coinsurance from May 12, 2023, until further notice.

In addition, Anthem and Cigna plan members who choose to pay out of pocket for COVID-19 home test kits (e.g., at a brick-and-mortar pharmacy) and who wish to be reimbursed must seek such reimbursement through Express Scripts, and not Anthem or Cigna, beginning May 12, 2023.

What's Not Changing

Unless prohibited by further changes in federal law, the Medical Trust will continue to

- waive all copays, deductibles, and coinsurance for members for services related to the **testing and evaluation** of COVID-19 through December 31, 2023.
- waive all copays, deductibles, and *in-network* coinsurance for members for healthcare services relating to the **treatment** of COVID-19 through December 31, 2023.
- cover **COVID-19 vaccines** as a preventive service, at the cost-sharing amount that applies under the applicable medical plan.
 - As a reminder, *in-network* preventive services are covered without any member cost-sharing.

We will continue to monitor federal guidelines and regulations, and the Medical Trust may make further changes to health plan benefits as required or permissible under federal law.

We encourage you to visit our website or contact our Client Services team at Benefits@cpg.org or 866-802-6333 if you have questions.

The Episcopal Church Medical Trust

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.