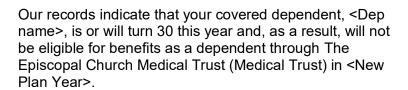


19 East 34th Street New York, NY 10016 www.cpg.org

<Name>
<Address>
<Citv>. <State> <ZIP>

<Mail Date>

Dear Member:



When you enroll this fall for <New Plan Year> benefits, you will not be able to enroll this dependent. Discontinuing coverage for your dependent may cause your contribution and your coverage tier to change (e.g., to single or employee +1).



Maximum Age for Benefits Eligibility

The Medical Trust offers medical and dental coverage to eligible dependent children until the end of the calendar year in which they turn 30, unless they became disabled before age 25. Medical Trust plans cover dependents for four years beyond the requirement set by the Affordable Care Act.

Coverage Options

The Medical Trust allows dependent children who have reached the age of 30 to voluntarily continue medical and/or dental coverage at their own expense for up to 36 months, beginning January 1, <New Plan Year>, through the Medical Trust's Extension of Benefits (EOB) program. We are notifying your dependent in a separate letter about the opportunity to participate in the EOB program.

Unless your dependent elects to participate in the EOB program, your dependent's last day of medical and/or dental coverage with the Medical Trust will be December 31, <Current Plan Year>.

We encourage your dependent to explore other coverage options for <New Plan Year>, which may include:

- · Medical and dental plans offered by their employer
- Qualified health plans available on the federal or state Health Insurance Marketplace (sometimes known as health insurance "exchanges") established under the Affordable Care Act (information available at healthcare.gov)
- Individual policies offered by private insurance companies.
- Medicaid, if they meet certain requirements (details at medicaid.gov)

If you have any questions about the termination of your dependent's Medical Trust coverage, please contact Client Services at 800-480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET, or email *mtcustserv@cpg.org*.

¹Medical coverage also includes pharmacy and vision. Check your health plan handbook for a list of all medical benefits included.

Sincerely,

The Episcopal Church Medical Trust Team

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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 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 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.

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