

September 22, 2023

Dear Friends:

This letter contains important information about The Episcopal Church Medical Trust (Medical Trust) 2024 health benefits. Please read it carefully. Our online Annual Enrollment for your 2024 health benefits will run from October 11 - November 1.

**Dental Plans**

**New Vendor: Delta Dental. Action Required!**

Delta Dental has the largest network of dentists nationwide and will be our new dental vendor for 2024! If you are enrolled in a Cigna dental plan through the Medical Trust, that coverage will not be offered after December 31, 2023. To maintain your dental coverage through the Medical Trust, you must select a Delta Dental plan option for yourself and your dependents during Annual Enrollment for 2024. Plan offerings and rates are attached. Learn more about what Delta Dental offers in the “Changes for 2024” section below.

**Medical Plans - No Changes to Current Plan Choices**

You will have the same medical plan options available to you in 2024. Whether or not you plan to make a change, we strongly encourage you to go online during Annual Enrollment and verify your personal information, dependent coverage, and plan selections, and to make changes if necessary. Plan offerings and rates are attached.

**What’s Changing for 2024**

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| *Delta Dental* | **Delta Dental is our new dental vendor for 2024! You must enroll in a Delta Dental plan during Annual Enrollment if you want dental coverage through the Medical Trust in 2024. *Cigna dental plans will no longer be offered.***  Delta Dental has the largest network of dentists nationwide. You’ll be able to access services in two Delta Dental dentist networks (PPO and Premier) or use out-of-network dentists. Your coinsurance, deductible, and maximum annual benefit will vary based on the network you use for a covered dental service. That puts you in charge of making your money go further.     * Providers in the Delta Dental PPO network and Delta Dental Premier® network have agreed to contracted rates, and you won’t be charged more than your expected share of the bill. **Using the Delta Dental PPO network offers the highest annual maximum benefit, allowing you the most savings.** * All Delta Dental plans cover no-cost-share diagnostic and preventive care and three dental cleanings a year (four cleanings based on certain conditions). * Basic and major restorative services are covered in all plans, subject to applicable coinsurance, deductibles, limitations, and exclusions. * Orthodontia services have an enhanced in-network lifetime benefit in the Premium Plan and are also offered in our Comprehensive Plan.   Learn more about what Delta Dental offers you at [*cpg.org/deltadental*](http://cpg.org/deltadental) (available in September).    You can find a dental provider, check your benefits, and access other helpful resources all in one place at [*deltadentalins.com*](https://www1.deltadentalins.com/).  Members can find more information about CPG’s medical and dental benefits at [*cpg.org/annualenrollment*](http://cpg.org/annualenrollment).  If a member would like help with Annual Enrollment, they should call our Client Services team at (800) 480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET.  **Note: The Medical Trust will no longer offer Cigna dental plans beginning in 2024.** |
| *COVID-19 provisions* | Effective January 1, 2024, member cost sharing (i.e., copays, deductibles, and coinsurance) will apply based on service type and place of service for healthcare services related to the evaluation and testing for COVID-19.    In addition, effective January 1, 2024, member cost sharing (i.e., copays, deductibles, and coinsurance) will apply based on service type and place of service for healthcare services relating to the treatment of COVID-19.    *COVID-19 over-the-counter home test kits*   * Effective January 1, 2024, eligible individuals and their dependents who are enrolled in Anthem and Cigna PPO medical plans and Kaiser EPO medical plans through the Medical Trust may receive up to four COVID-19 over the counter (OTC) home test kits per month without cost-share (i.e., copay, deductible, or coinsurance). * Eligible individuals and their dependents who are enrolled in Anthem, Cigna, and Kaiser Consumer-Directed Health Plans (CDHPs) may receive up to four COVID-19 over the counter (OTC) home test kits per month with no coinsurance after they meet their annual network deductible.   Although the Medical Trust is no longer required by law to provide any OTC home test kits at no cost, we will still allow members to receive up to four test kits per member per month as described above until further notice. |
| *Telehealth* | **Telehealth platforms for Active Members**[[1]](#footnote-1) – You can access a medical professional through *telehealth platforms* offered by Anthem, Cigna, or Kaiser using your computer or mobile device. You will need high-speed internet access, a webcam or built-in camera, and audio capability. Please remember your personal healthcare provider may not participate on the vendor’s telehealth platform.  For Anthem, Cigna, and Kaiser members, all services received via vendor telehealth platforms are available to you with no deductible, copay, or coinsurance through December 31, 2024.   * ***Anthem Blue Cross Blue Shield –*** Access [LiveHealthOnline.com](https://livehealthonline.com/) or download the LiveHealth Online mobile app in the App Store® or Google Play™. * ***Cigna –*** Access [MDLiveforCigna.com](https://www.mdliveforcigna.com/mdliveforcigna) on your computer or download the MDLIVE mobile app by searching in the App Store® or Google Play™. * ***Kaiser Permanente –*** Access Kaiser’s telehealth platform services by calling the number on the back of your member ID card. |
| *Deductible Increase for Anthem and Cigna CDHP-15* | For 2024, the Internal Revenue Service increased the minimum and maximum amounts that a high-deductible health plan (HDHP) (note that the Medical Trust refers to HDHP as CDHP) may impose as a deductible.[[2]](#footnote-2)    For 2024, the minimum amount that must be imposed as a deductible for self-only coverage under a HDHP is $1,600. The minimum amount that must be imposed as a deductible for family coverage under a HDHP is $3,200. The amounts for 2023 were $1,500 and $3,000, respectively.    Effective January 1, 2024, the Medical Trust’s Anthem and Cigna CDHP-15 network deductible for self-only coverage will be $1,600 and the network deductible for family coverage will be $3,200. The out-of-network deductible for self-only coverage will be $3,200 and the out-of-network deductible for family coverage will be $6,400. |
| Deductible increase for Anthem, Cigna, and Kaiser CDHP-20 | The Internal Revenue Service increased the minimum and maximum amounts that a high-deductible health plan (HDHP) (note that the Medical Trust refers to HDHP as CDHP) may impose as a deductible.2    For 2024, the minimum amount that must be imposed as a deductible for self-only coverage under a HDHP is $1,600. The minimum amount that must be imposed as a deductible for family coverage under a HDHP is $3,200. The amounts for 2023 were $1,500 and $3,000, respectively.    Effective January 1, 2024, the Medical Trust’s Anthem, Cigna, and Kaiser CDHP-20 network deductible for self-only coverage will be $3, 200 and the network deductible for family coverage will remain $5,450. The out-of-network deductible for self-only coverage will be $3,200 and the out-of-network deductible for family coverage will remain $6,000. |

**Details About your Benefits**

Details about your benefits, including 2024 Summaries of Benefits and Coverage, Annual Enrollment Guide, and Plan Document Handbooks are available on the Church Pension Group website at [www.cpg.org/mtdocs](http://www.cpg.org/mtdocs). You can use the “Mail It To Me” option to receive a free paper copy of the Summaries of Benefits and Coverage. Or you can call CPG’s Client Services team at (800) 480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET to request a free paper copy over the phone.

**If You Are Currently Enrolled in a Medical Trust Pan**

You will receive an Annual Enrollment letter in a green envelope approximately one week before Annual Enrollment begins. This letter will include information about how to access the enrollment site and your Annual Enrollment dates. Please save this letter. Whether or not you plan to make a change, be sure to log in to MyCPG Accounts and check that personal information is correct for yourself and your dependents. You can submit any corrections through MyCPG Accounts.

**IMPORTANT NOTE:** For 2024, you will use the same credentials (associated email address and password) you created on MyCPG Accounts to access the Annual Enrollment page. If you have not already created an account on MyCPG Accounts, please do so before Annual Enrollment begins. For assistance, contact CPG Client Services at (800) 480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET, or email [***mtcustserv@cpg.org***](mailto:mtcustserv@cpg.org).

As CPG continues to strengthen its online security, as of February 2023, users must enter their associated email address and password to access MyCPG Accounts. Usernames are no longer used to access MyCPG Accounts.

**Not a Member and Want to Enroll?**

If you are not currently participating in a Medical Trust plan and would like to enroll, please review the plan options attached. Then go online to www.cpg.org, hover over Benefits, select Active Clergy or Lay, then select Health to explore the plans and benefits. You will not receive a letter from the Medical Trust or be able to access Annual Enrollment through MyCPG, so please contact us to request an enrollment form and a copy of the Summaries of Benefits and Coverage and other important notices, or to ask any questions. If you take no action, your previous decision to decline coverage will remain in effect for 2024.

**Employee Assistance Program (EAP) with Cigna Behavioral Health**

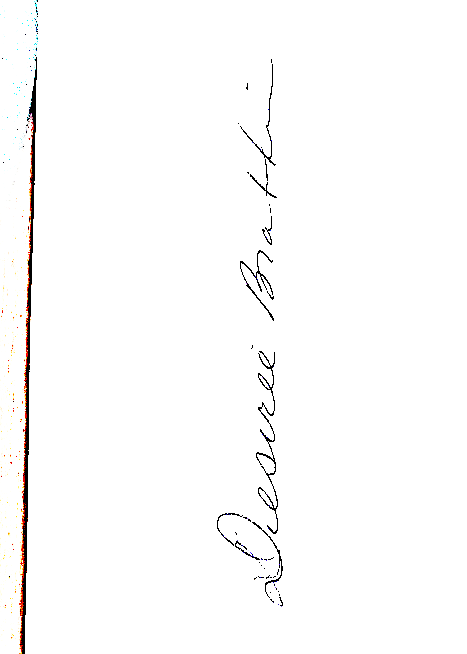
In addition to the Medical Trust health plans, your employer also offers a stand-alone EAP with Cigna Behavioral Health for qualified employees who have spousal or other qualified coverage that is not through the Medical Trust. (The EAP is already included as part of each medical plan offering). This program covers your entire household, and is paid for by your employer.

Begin to review your options now if you plan to make a change or newly enroll in a Medical Trust plan to allow yourself time to make an informed decision. This is also the time of year when you may add or remove eligible dependents without a qualifying event.

For additional information on Annual Enrollment please go to [www.cpg.org/annualenrollment](http://www.cpg.org/annualenrollment).

If you have any questions, please don’t hesitate to contact me (desiree@diocesemo.org) or Rita Benson ([rbenson@diocesemo.org](mailto:rbenson@diocesemo.org)) via e-mail or at 314-231-1220.

Sincerely,



Ms. Desiree Brattin

Canon for Finance & Adminstration

1. *Please note, telehealth can help with minor, non-life-threatening conditions. During a medical emergency, individuals should visit the nearest hospital or call 911 for assistance.* [↑](#footnote-ref-1)
2. *See* [*IRS Notice 2023-23*](https://www.irs.gov/pub/irs-drop/rp-23-23.pdf)*.* [↑](#footnote-ref-2)