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Your 2025 Retiree Annual Enrollment

Enrolling in a health plan is an important decision. This letter will help you enroll in medical and dental plans offered by The Episcopal Church Medical Trust for the coming year.

PLEASE SAVE THIS LETTER

Your Associated Email Address: <_____>
Your Client Number: <_____>

2025 Annual Enrollment takes place October 23 to November 22, 2024

Dear Friend:

Our records indicate that you are currently enrolled in the UnitedHealthcare® Group Medicare Advantage (GMA) PPO plan with The Episcopal Church Medical Trust (Medical Trust). If you don't make any changes to your existing **medical and/or dental** plan(s), your current choices will continue to be in effect next year, and any new rate changes will apply. However, if you wish to change coverage for 2025, you will need to complete Annual Enrollment by November 22. To do so, please **read this letter and the Annual Notice of Change** that you'll receive from UnitedHealthcare in October.

Changes to Health Coordination Services for 2025

Beginning January 1, 2025, the services of Quantum Health—the pioneer and leader in the field of care coordination—will replace those of Health Advocate. Health Advocate will aim to complete open cases by December 31 and will transfer any unresolved cases to Quantum after that date to ensure that retirees have a care coordinator by their side through this transition. To learn more, please see the enclosed flyer.

UnitedHealthcare Group Medicare Advantage (PPO) Plan

The Medical Trust offers health and prescription coverage to eligible Post-65 Former Employees and their eligible spouses/dependent(s) through a UnitedHealthcare® Group Medicare Advantage (GMA) PPO Plan. This group plan is designed specifically for the Medical Trust and should not be confused

with **individual** Medicare Advantage plans available in the marketplace.

In addition to delivering all the benefits of Medicare Parts A, B, and D, this plan covers hearing aids, travel insurance, fitness programs, and other services that are important to overall health.

Moreover, this is a national plan that allows Post-65 Former Employees to see any provider (in and out of network) at the same cost as long as the provider (1) has not opted out of or been excluded or precluded from Medicare and (2) accepts payment from UnitedHealthcare.¹ The plan also offers such benefits as caregiver support and personalized concierge service.

Additional Benefits Under the GMA Plan

This plan includes the following benefits at no extra cost:

- Coverage for an annual eye exam, prescription glasses, or contact lenses, along with cost savings through EyeMed's Insight Network
- Support with emotional, family, legal, and financial needs via the Cigna Employee Assistance Program
- Help navigating today's complex healthcare system from Quantum Health, **beginning January 1, 2025**

UnitedHealthcare Group Medicare Advantage (PPO) Plan Options

Plan Option	Deductible	Out-of-Pocket Maximum*
GMA Premium (PPO)	\$0 (none)	\$1,500 per person
GMA Comprehensive (PPO)	\$0 (none)	\$2,000 per person

**Your out-of-pocket maximum does not include any cost share related to pharmacy benefits or to services not otherwise covered by Medicare.*

In addition to the difference in annual out-of-pocket maximums shown above, some of the cost shares for certain services and/or products differ between the two plan options. For a side-by-side comparison, refer to the *Summary of Benefits* for each option at retiree.uhc.com/ECMT or call UnitedHealthcare Customer Service at 866-519-5401 (TTY 711), 8:00 AM to 8:00 PM local time, seven days a week. Translation services are available upon request.

Note: Both the Premium and Comprehensive options include Part D prescription drug coverage. If you enroll in this GMA plan and you have a Medicare Part D prescription drug plan not provided by the Medical Trust, Medicare may disenroll you from that plan because you can be enrolled in **only one** Medicare Part D plan at a time. However, retirees enrolled in TRICARE For Life **can** be enrolled in this UnitedHealthcare Group Medical Advantage PPO plan and also retain their TRICARE For Life coverage.

¹If a provider refuses to bill UnitedHealthcare directly, they may ask that you pay the full allowable amount up front. In that case, you can pay the doctor and then submit a claim to UnitedHealthcare. You'll be reimbursed for the cost of the claim minus your cost share.

Impact of the Inflation Reduction Act of 2022

Certain provisions of the Inflation Reduction Act (IRA) of 2022 will become effective in 2025. These provisions will affect Post-65 Former Employees of The Episcopal Church who have medical and prescription drug coverage through the UnitedHealthcare GMA plan offered by the Medical Trust.

The IRA caps annual prescription out-of-pocket costs at \$2,000 per individual and shifts more of the costs to the GMA plan. Once a person reaches that maximum, they won't have to pay anything for prescription drugs for the remainder of the plan year. This cap constitutes a large benefit for individuals who need expensive medications.

As a result of this enhanced benefit required by law, which is administered through our UnitedHealthcare GMA (PPO) plan, 2025 premiums will rise by 30% for the GMA Comprehensive (PPO) Plan option and by 36% for the GMA Premium Plan option.

Clergy Post-Retirement Health Subsidy and Plan Premiums

To mitigate the higher cost, The Church Pension Fund has increased the monthly post-retirement health subsidy available next year to eligible retired clergy and their eligible spouses from \$317 to \$431 per person (the cost of the GMA Premium plan for 2025). If you qualify for all or part of the subsidy, you may use it to cover all or a portion of the cost of a GMA plan and/or a dental plan for yourself and your eligible spouse. Monthly post-retirement health subsidy information is available at cpgep.org/subsidy.

Medical Plan Option	Monthly Premium*
GMA Premium (PPO)	\$431 per person
GMA Comprehensive (PPO)	\$295 per person

*Includes the cost of medical, Rx, vision, EAP, Quantum Health, and plan administration.

Dental Plan

The Medical Trust offers dental coverage through Delta Dental. You can access services in two Delta Dental networks (Delta Dental PPO™ and Delta Dental Premier®) or use out-of-network dentists. You can also choose the plan option (Delta Dental Premium, Delta Dental Comprehensive, or Delta Dental Basic) that best suits your needs. Your coinsurance, deductible, and maximum annual benefit will vary based on the option you choose, whether or not you visit an in-network provider and the network you use. To learn more, visit cpgep.org/deltadental or call 888-894-7059.

Delta Dental Plan Option	Monthly Premium
Premium	\$90 per person
Comprehensive	\$74 per person
Basic	\$61 per person

Making Changes During Annual Enrollment

We encourage you to sign in to MyCPG Accounts, where you can view and change your medical and/or dental plans during Annual Enrollment. *Making changes is optional, not mandatory, for eligible Post-65 Former Employees.*

Nevertheless, we strongly recommend that enrolled spouses and/or other eligible dependents not enrolled in Medicare sign in to MyCPG Accounts to **make or confirm their own medical and/or**

dental plan selections during Annual Enrollment. To select plans for the coming year, please refer to the enclosed instructions.

Note: If you and/or your eligible spouse/dependent(s) don't select a **medical, prescription, and/or dental plan** by November 22, 2024, you will remain enrolled in your existing medical, prescription, and/or dental plans for 2025.

Pension Deduction Agreement and Authorization

If you have a pension with The Church Pension Fund, as a condition of your continued enrollment in the applicable health coverage(s), you authorize The Church Pension Fund to deduct from your pension benefit the amount of your monthly contribution(s) for the health coverage(s) in which you and any eligible dependents are enrolled and to pay such amount(s) to The Episcopal Church Clergy and Employees' Benefit Trust (ECCEBT). You acknowledge that your participation in this health program is optional and that you authorize this deduction from your pension benefit voluntarily and without any duress or undue influence by the ECCEBT, The Episcopal Church Medical Trust, or any of its affiliates. You acknowledge that this deduction is for your benefit and that you have received written notice of all terms and conditions of the payment and/or its benefits and the details of the manner in which deductions will be made.

You understand that future cost increases will automatically be withheld from your pension benefit, as long as you remain in the same plan(s) or are defaulted to a replacement plan(s), without additional authorization. You understand that whenever there is a substantial change in the terms or conditions of the payment, including but not limited to any change in the amount of the deduction, or a substantial change in the benefits of the deduction or the details in the manner in which deductions are made, you will be notified prior to the implementation of the change.

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 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 Plans 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.

The Church Pension Fund (CPF) currently offers a post-retirement health subsidy to eligible clergy and eligible spouses. However, CPF is required to maintain sufficient liquidity and assets to pay its pension and other benefit plan obligations. Given uncertain financial markets and their impact on assets, CPF has reserved the right, at its discretion, to modify or discontinue the post-retirement health subsidy at any time.

Out-of-network/non-contracted providers are under no obligation to treat UnitedHealthcare Group Medicare Advantage (PPO) plan members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information.

Benefits, features, and/or devices vary by plan/area. Limitations and exclusions apply.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in these plans depends on the plan's contract renewal with Medicare.

These documents may contain protected health information as described under the Health Insurance Portability and Accountability Act of 1996 and the regulations issued thereunder ("HIPAA"). This information is confidential and is intended only for use by the authorized individual to whom, or the entity to which, it is addressed. The recipient of this information is prohibited from disclosing this information to any other party unless required to do so by law or regulation and is required to destroy the information after its stated need has been fulfilled. If you are not the intended recipient of this information, you are hereby notified that any disclosure, copying or distribution of this information, or any action taken in reliance on this information, is strictly prohibited and may subject you to civil or criminal penalties. If you have received this information in error, please notify the sender and the Church Pension Group Privacy Officer immediately to arrange for the return or destruction of the information. Contact information for the sender is provided above and the Church Pension Group Privacy Officer may be contacted by email at privacy@cpg.org.

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