



THE EPISCOPAL DIOCESE OF NORTH CAROLINA

200 WEST MORGAN STREET, SUITE 300 RALEIGH, NORTH CAROLINA 27601-1338 TELEPHONE 919-834-7474

September 15, 2023

TO: Rectors/Vicars, Sr. Wardens, Treasurers, and Parish Administrators

FROM: Maria Gillespie, Chief Financial Officer

SUBJECT: 2024 Healthcare Insurance Premiums

This letter contains important information about the 2024 healthcare benefit offerings and the Annual Enrollment process. Please share this information with your employees. You can also find this information on the Diocesan website at: www.episdionc.org/insurance

**Annual Enrollment for 2024 will run from October 26 - November 15, 2023.
Annual Enrollment is MANDATORY if you wish to continue Dental coverage.**

New Vendor: Delta Dental! Action Required!

Members must actively enroll in a Delta Dental plan if they wish to have dental coverage through the Medical Trust. If members are currently enrolled in a Cigna Dental plan through the Medical Trust, that coverage is going away on December 31, 2023. They **must** select a Delta Dental plan option for themselves and their dependents during Annual Enrollment for 2024.

We are requesting mandatory Annual Enrollment participation this year for all members.

Medical Plans

We will be offering the following Medical plans to our employees in 2024 through The Episcopal Church Medical Trust.

2024 Monthly Medical Insurance Premiums:

All Medical Insurance Plans Include Vision, Hearing, Health Advocate, Travel Assistance, and EAP Coverage

Plan Name Select Plan Name for Summary of Benefits Document	Single	Plus Spouse	Plus Child	Family (2 + dependents)	% Increase
Anthem BCBS High Deductible 40/HSA	803.00	1,445.00	1,445.00	2,248.00	7.48%
Anthem BCBS High Deductible 20/HSA	860.00	1,548.00	1,548.00	2,408.00	7.50%
Anthem BCBS High Deductible 15/HSA	1,102.00	1,984.00	1,984.00	3,086.00	7.00%
Anthem BCBS BlueCard PPO 70	1,020.00	1,836.00	1,836.00	2,856.00	6.02%
Anthem BCBS BlueCard PPO 80	1,140.00	2,052.00	2,052.00	3,192.00	7.04%
Anthem BCBS BlueCard PPO 90	1,255.00	2,259.00	2,259.00	3,514.00	7.00%
Anthem BCBS BlueCard MSP PPO 70 (Age 65+. Employer: 19 or fewer Employees)	829.00	1,492.00	1,492.00	2,321.00	6.96%
Anthem BCBS BlueCard MSP PPO 80 (Age 65+. Employer: 19 or fewer Employees)	912.00	1,642.00	1,642.00	2,554.00	7.04%
Anthem BCBS BlueCard MSP PPO 90 (Age 65+. Employer: 19 or fewer Employees)	1,000.00	1,800.00	1,800.00	2,800.00	6.95%

Dental Plans

Dental Plans Are Changing!

Delta Dental has the largest network of dentists nationwide and will be our new dental vendor for 2024. Members will be able to access services in two Delta Dental dentist networks (PPO and Premier) or use out-of-network dentists. Their coinsurance, deductible, and maximum annual benefit will vary based on the network they use for a covered dental service. Learn more about what Delta Dental offers in the "What's New for 2024" section below.

We will offer the following Delta Dental plans through the Medical Trust:

2024 Monthly Dental Premiums:

Plan Name	Single	Plus Spouse	Plus Child	Family (2 + dependents)	% Increase
NEW Delta Dental Basic DDBA	37.00	67.00	67.00	104.00	0.00%
NEW Delta Dental Comprehensive DCOM	63.00	113.00	113.00	176.00	0.00%
NEW Delta Dental Premium DPRE	82.00	148.00	148.00	230.00	0.00%

2024 Monthly Employee Assistance Program (EAP) Premium: (Employees enrolled in the Episcopal Church Medical Trust Plans automatically receive this benefit. EAP Only Coverage applies to employees that are eligible to participate, but have elected not to enroll in a Medical Plan with the Episcopal Church Medical Trust.)

Plan Name	Single	Plus Spouse	Plus Child	Family (2 + dependents)	% Increase
EAP ONLY - Cigna	4.00	4.00	4.00	4.00	0.00%

Life Insurance and Pension are mandatory for all eligible employees (regularly scheduled to work at least 20 hours/week or 1,000 hours a year). The Diocese renegotiated the life insurance contract in 2018 lowering the premium to \$.25/thousand. The amount of coverage should be equal to one year's pension based compensation to the maximum amount of \$150,000 for eligible clergy and lay employees. Please find the benefits eligibility guidelines here on our website. www.episdionc.org/benefits-eligibility-and-resources

WHAT YOU NEED TO KNOW ABOUT ANNUAL ENROLLMENT

DURING THE ANNUAL ENROLLMENT PERIOD

- Current plan members may change their plan selections for the following year.
- Eligible non-participating employees have the option to enroll in a Medical Trust plan.
- Eligible dependents may be added or removed from a member's plan without the need to demonstrate a qualifying event.
- Ineligible employees' coverage should be terminated.

CURRENTLY ENROLLED EMPLOYEES

Currently enrolled employees (plan members) will receive an Annual Enrollment letter in a green envelope from the Medical Trust approximately one week before our Annual Enrollment period. This letter will include information about how to access the enrollment site and their Annual Enrollment dates. Please instruct your employees to save this letter. In your communications, please encourage your employees to begin reviewing their options and to

research plans early. If an employee takes no action, and their current medical plan is offered for 2024, their medical plan selections will automatically carry over to 2024, and any applicable rate increases will apply. **However, this year Annual Enrollment is active and mandatory for all employees enrolled in dental coverage.**

IMPORTANT NOTE: Members **must** actively enroll in a Delta Dental plan if they wish to have dental coverage through the Medical Trust. If members are currently enrolled in a Cigna Dental plan through the Medical Trust, that coverage is going away on December 31, 2023. They **must** select a Delta Dental plan option for themselves and their dependents during Annual Enrollment for 2024.

ACCESSING THE ANNUAL ENROLLMENT WEBSITE

For 2024, you will use the same username and password you created on MyCPG Accounts to access the Annual Enrollment website. If you have not already created an account on MyCPG Accounts, please do so before Annual Enrollment begins. (You will need your Client ID number to create an account.) 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.

NEW HIRES AFTER ANNUAL ENROLLMENT BEGINS

New hires and other employees who enroll in a Medical Trust plan for the first time after the Annual Enrollment letter mailing list is created will not receive an Annual Enrollment letter however, they will be able to participate in the Medical Trust's Annual Enrollment through the enrollment website. If the employee wishes to make a change to their plan enrollment for 2024, they will need to log in to the Annual Enrollment website or contact us at benefits@episdionc.org for assistance. Members may contact the CPG Client Services team to access their Client ID number.

NON-PARTICIPATING EMPLOYEES

Eligible employees and dependents who are not currently enrolled in a Medical Trust plan may enroll during the Annual Enrollment Period for the 2024 plan year. If you are a parish administrator with access to the CPG MAP, then please set the employee up in the CPG system first and then submit a completed enrollment form to the diocese as the enrollment process must be handled by the diocesan plan administrator. Please submit all new enrollment forms to the diocesan benefits office email Benefits@episdionc.org by October 25, 2023.

NOTE: Materials are not mailed to potential members, please send a communication to inform these employees that they and their eligible dependents may enroll, share the plans and rates available to them, and direct them to applicable legal notices and *Summaries of Benefits and Coverage* available at www.cpg.org/mtdocs

PLAN DOCUMENTS

2024 Summaries of Benefits and Coverage and Plan Document Handbooks containing more information about the available plans may be found on the Church Pension Group website at www.cpg.org/mtdocs. Please remember that you are responsible for providing newly eligible employees with a copy of all applicable Regulatory Notices and Summaries of Benefits and Coverage.

NEW PLANS

Please note that the Medical Trust is offering new dental plan options with Delta Dental in 2024.

Members must actively enroll in a Delta Dental plan if they wish to have dental coverage through the Medical Trust. Members currently enrolled in a Cigna dental plan offered by the Medical Trust will **not** have dental coverage if they do not actively participate in Annual Enrollment and select a Delta Dental plan option.

There are no new medical plans for 2024.

FOR ADVICE ON SELECTING A HEALTHCARE PLAN, CONTACT HEALTH ADVOCATE

Health Advocate representatives can help all members review their 2024 plan choices. Call (866) 695-8622, 24 hours a day, 7 days a week.

EMPLOYEE ASSISTANCE PROGRAM (EAP) WITH CIGNA BEHAVIORAL HEALTH

In addition to the health plans, we offer a stand-alone EAP that you may elect to offer to your employees who opt out of medical coverage. (The EAP benefit is included with the medical plans)

NOTE: If the EAP is offered on a stand-alone basis, the employer must pay for the EAP-only coverage. Requiring employees to contribute towards the cost of the EAP-only coverage would violate the Affordable Care Act and the employer could be subject to significant penalties. Eligibility for the stand-alone EAP program is limited to qualified non-members. Since these employees will not have the ability to select the EAP on a stand-alone basis during Annual Enrollment, enrollments must be completed by the diocesan group administrator. Please submit all new enrollment forms via email to Benefits@episdionc.org by October 25, 2023.

The Cigna Employee Assistance Program (EAP) includes access to Talkspace® virtual behavioral health!

- Connect with a licensed therapist or psychiatrist online, by video, or text using Talkspace, available for Cigna EAP members, ages 13 and up.
- Visit **mycigna.com** to access Talkspace virtual behavioral health

WHAT'S NEW FOR 2024

NEW DENTAL VENDOR: 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 www.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 www.deltadentalins.com

If a member would like help with Annual Enrollment, they should call the CPG Client Services team at (800) 480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET.

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

You can access a medical professional through telehealth platforms offered by Anthem 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 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 or download the LiveHealth Online mobile app in the App Store® or Google Play™.

DEDUCTIBLE INCREASE FOR ANTHEM BCBS CDHP-HSA15, CDHP-HSA 20 PLANS

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.

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.

CDHP-HSA 15 Plan

- Effective January 1, 2024, the Medical Trust's Anthem CDHP-15 network deductible will increase.
 - Self-only coverage will be \$1,600; Self-only coverage out-of-network deductible will be \$3,200
 - Family coverage will be \$3,200; Family coverage out-of-network deductible will be \$6,400

CDHP-HSA 20 Plan

- Effective January 1, 2024, the Medical Trust's Anthem CDHP-20 network deductible will increase.
 - Self-only coverage will be \$3,200; Self-only coverage out-of-network deductible will be \$3,200
 - Family coverage will be \$5,450; Family coverage out-of-network deductible will be \$6,000

- ❖ For additional Annual Enrollment resources, please visit our website:
www.episdionc.org/insurance
- ❖ Please email your Annual Enrollment questions and enrollment requests to our Benefits and Finance Coordinator, Erin Sweeney at Benefits@episdionc.org

You're invited to join us during Annual Enrollment Office Hours

Mondays from 4:00-5:00pm EST

- October 23
- October 30
- November 6
- November 13

Erin Sweeney, Diocesan Benefits and Finance Coordinator, will be holding four Annual Enrollment Open Zoom Meetings on Mondays, beginning October 23 – November 13 from 4:00-5:00pm EST. You are invited to join during any of the sessions and bring your questions regarding Annual Enrollment. Please find the Zoom Meeting Link below.

Join Zoom Meeting

<https://us06web.zoom.us/j/81851388908>

Meeting ID: 818 5138 8908

One tap mobile

+16465588656,,81851388908# US (New York)

+16469313860,,81851388908# US

Dial by your location

• +1 646 558 8656 US (New York)

• +1 646 931 3860 US

• +1 301 715 8592 US (Washington DC)

Find your local number: <https://us06web.zoom.us/j/81851388908>

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 employees. 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.

This material is not a substitute for professional medical advice or treatment. CPG does not provide any healthcare services and, therefore, cannot guarantee any results or outcomes. Always seek the advice of a healthcare professional with any questions about your personal healthcare, including diet and exercise.

Neither The Church Pension Fund nor any of its affiliates (collectively, "CPG") is responsible for the content, performance, or security of any website referenced herein that is outside the www.cpg.org domain or that is not otherwise associated with a CPG entity.