October 6, 2022

Dear Plan Participant:

This letter contains important information about The Episcopal Church Medical Trust (Medical Trust) 2022 health benefits. Please read it carefully and contact me with any questions.

Our online Annual Enrollment for your 2022 Medical Trust health benefits is open from October 27 to November 17.

Medical Plans
You will be able to choose from the following medical plans through the Medical Trust. In 2022 participants will be responsible for 22% of the plan premium, with the diocese paying the remaining 78%. The employee share of the premium is represented in the tables below.

<table>
<thead>
<tr>
<th>Medical Plan / Monthly Rates</th>
<th>Single</th>
<th>Employee + 1</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cigna Open Access Plus CDHP-15</td>
<td>$197.12</td>
<td>$354.86</td>
<td>$551.98</td>
</tr>
<tr>
<td>Cigna Open Access Plus CDHP-20</td>
<td>$174.46</td>
<td>$313.94</td>
<td>$488.40</td>
</tr>
<tr>
<td>Cigna Open Access Plus PPO 80</td>
<td>$220.44</td>
<td>$396.88</td>
<td>$617.32</td>
</tr>
</tbody>
</table>

Participants who selected a consumer directed health plan (CDHP) will receive an annual health savings account contribution of $1,400 (single coverage) or $2,800 (family or +1 coverage), pro-rated for the participant's enrollment date. Contributions are made quarterly. Employees may also contribute to their health savings account via payroll withholding, subject to IRS limits.

The following plans are available to Medicare-enrolled employees over age 65 whose employers are eligible for the Small Employer Exemption. Check with your employer if you are uncertain of eligibility.
### Medical Plan / Monthly Rates

<table>
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<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cigna Open Access Plus PPO 80 MSP</td>
<td>$178.64</td>
<td>$321.64</td>
<td>$500.28</td>
</tr>
<tr>
<td>Cigna Open Access Plus PPO 90 MSP</td>
<td>$193.38</td>
<td>$348.04</td>
<td>$541.42</td>
</tr>
</tbody>
</table>

The monthly rates above reflect your contribution for each plan. Note that the rates shown on the Annual Enrollment website are the Medical Trust rates before your employer’s contribution and, as a result, may differ from the rates above.

### Preventive Care Incentive

It is important to the Diocese of Indianapolis that its employees and the employees of employers subject to the authority of the diocese take advantage of the free preventive care benefits included in diocesan plans. If the primary beneficiary of the plan demonstrates proof of having received preventive care services in calendar year 2022 by November 30, the Diocese of Indianapolis will refund 1% of the participant’s total annual medical insurance premium by check in December of 2022. **This benefit is worth approximately $90-$300, depending on the plan selected and number of beneficiaries.** If proof of 2022 preventive care services is provided between December 1, 2022 and January 15, 2023, the refund check will be issued in January 2022. No refund will be provided if proof is not furnished by January 15, 2023. Proof will take the form of a doctor’s note attesting that the preventive care visit occurred according to a template that will be provided on the diocesan web site. No private health information will be requested related to this incentive. The diocesan office will handle recordkeeping for both diocesan and congregational employees. Congregations are responsible for issuing the refund to their lay employees.

### Dental Plans

The following Cigna dental plans are also offered through the Medical Trust. In 2022 participants will be responsible for the premium in excess of the cost of the preventive dental plan for a single person. The employee share of the premium is represented in the table below.
### Dental Plan / Monthly Rates

<table>
<thead>
<tr>
<th></th>
<th>Single</th>
<th>Employee + 1</th>
<th>Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive Dental</td>
<td>$0</td>
<td>$33</td>
<td>$74</td>
</tr>
<tr>
<td>Basic Dental</td>
<td>$18</td>
<td>$65</td>
<td>$124</td>
</tr>
<tr>
<td>Dental &amp; Orthodontia</td>
<td>$37</td>
<td>$99</td>
<td>$177</td>
</tr>
</tbody>
</table>

The monthly rates above reflect your contribution for each plan. Note that the rates shown on the Annual Enrollment website are the Medical Trust rates before your employer’s contribution and, as a result, may differ from the rates above.

### What’s Changing for 2022

<table>
<thead>
<tr>
<th>Hours-based Eligibility</th>
<th>The Medical Trust will simplify the Episcopal Health Plan (EHP) eligibility criteria by eliminating the exempt/non-exempt status criteria and will move to an hours-based eligibility criteria for active employees. You will be eligible to enroll in the EHP, regardless of whether you are an exempt or non-exempt employee, if you are normally scheduled to work 1,000 or more compensated hours per plan year. You will receive information on the Medical Trust’s Extension of Benefits program if your coverage is terminated due to this change. <strong>Please see your group administrator if you need to confirm your eligibility.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 provisions</td>
<td>The Medical Trust will continue to waive all copays, deductibles, and coinsurance for its members for healthcare services relating to the evaluation and testing for COVID-19 through at least December 31, 2022. In addition, the Medical Trust also will waive all copays, deductibles, and in-network coinsurance for its active members for healthcare services relating to the treatment of COVID-19 through at least December 31, 2022.¹</td>
</tr>
<tr>
<td>Telehealth</td>
<td><strong>Telehealth platforms for Active Members</strong> — You can continue to 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</td>
</tr>
</tbody>
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¹ The Medical Trust will continue to waive all copays, deductibles, and coinsurance for its members for healthcare services relating to the evaluation and testing for COVID-19 through at least December 31, 2022. In addition, the Medical Trust also will waive all copays, deductibles, and in-network coinsurance for its active members for healthcare services relating to the treatment of COVID-19 through at least December 31, 2022.
webcam or built-in camera, and audio capability. Please remember your personal healthcare provider may not participate on the vendor’s telehealth platform. In response to the COVID-19 pandemic, effective March 1, 2020, all services received via vendor telehealth platforms are available to you with no deductible, copay, or coinsurance through December 31, 2022.

- **Anthem Blue Cross Blue Shield** – Access [LiveHealthOnline.com](http://LiveHealthOnline.com) or download the LiveHealth Online mobile app in the App Store® or Google Play™.
- **Cigna** – Access [MDLiveforCigna.com](http://MDLiveforCigna.com) 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.

| **Virtual visits** | A virtual visit is an appointment with your personal healthcare provider carried out through an electronic medium of your provider’s choice (e.g., Zoom, Skype, telephonic) but that is not offered through your health plan carrier’s telehealth platform (e.g., Cigna MDLive).

The Medical Trust will continue to allow claims for virtual visits with network and out-of-network providers that do not use a telehealth platform offered by Cigna. Prior to March 1, 2020, virtual visits with your personal healthcare provider were generally excluded from health plan coverage. The virtual visit benefit exclusion will be removed from the Medical Trust’s Cigna health plans effective January 1, 2022.

Virtual visits are covered at standard levels of benefits and member cost shares. |
<p>| <strong>Cigna EAP</strong> | The Cigna Employee Assistance Program (EAP) now includes access to Talkspace® virtual behavioral health! |</p>
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- 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.

**Dependent Aging Out Letters**
The Medical Trust sends Dependent Aging Out letters to dependents—and to subscribers of covered dependents—who will age out of coverage effective January 1, 2022. New for 2022, dependents who will age out of coverage will be able to continue their coverage through the Medical Trusts’ Extension of Benefits (EOB) program.

The dependent letter explains options for continued coverage through the EOB program, a qualified health plan under the Affordable Care Act, or through an employer-provided or individual policy. The subscriber letter advises subscribers that coverage will be discontinued for any dependents aging out of eligibility.

**Cigna Dental modernization**
To ensure that members have a high-quality, comprehensive dental benefits, the Medical Trust has reviewed and modernized its dental plan offering with Cigna.

Effective January 1, 2022, the Medical Trust’s Cigna Dental plans will include coverage for Exparel, a long-lasting, non-opioid pain management medication for patients having oral surgery. Unlike systemic medications, Exparel works directly at the surgical site to numb nerves that cause pain; it is not a narcotic, and it is not addictive.

In addition, the Medical Trust is reclassifying osseous surgery, currently considered a Major Restorative Service, as a Basic Restorative Service for all its Cigna Dental plan offerings. This means that the Medical Trust’s Cigna Dental plans will reimburse these services at a higher rate starting in 2022.

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**The Rt. Rev. Jennifer Baskerville-Burrows, Bishop**
1100 West 42nd Street • Indianapolis, IN 46208
(317) 926-5454 • (317) 926-5456 • (800) 669-5786
indydio.org
Details About Your Benefits
Details about your benefits, including 2022 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. You can use the “Mail It To Me” option to receive a free paper copy of the Summaries of Benefits and Coverage.

No Changes to Current Health Plan Choices
You will have the same health plan options available to you in 2022. 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.

If You Are Currently Enrolled in a Medical Trust Plan
You will receive an Annual Enrollment brochure in a green envelope approximately one week before Annual Enrollment begins. This brochure will include your Client ID number, which you will need to enroll. Please save this brochure. It also includes your Annual Enrollment dates, a checklist, benefit reminders, and how to enroll. Whether or not you plan to make a change, be sure to log in to the Medical Trust Annual Enrollment website and check that personal information is correct for yourself and your dependents. You can submit any corrections through the Medical Trust Annual Enrollment website and/or by notifying me.

IMPORTANT NOTE: For 2022, 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.

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.

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 in this letter. Then go online to www.cpg.org, select Active Clergy or Lay, hover over Insurance, then select Health to explore the plans and benefits. You will not receive a brochure from the Medical Trust, so please contact me to request an enrollment form and a copy of the Summaries of Benefits and Coverage and other important notices, or to ask any questions.

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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. This program covers your entire household and is paid for by your employer.

Informational Meetings
Join our online presentation or participate by calling in:
Tuesday, October 19, 5pm EDT
www.zoom.us | Meeting ID: 840 3245 9867 | Passcode: 978403 – *this meeting will be recorded*
Or call 312-626-6799

If you have any questions, please don’t hesitate to contact me.

Sincerely,

Brendan O’Sullivan-Hale
317-925-5454 / brendan@indydio.org

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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.
This deductible waiver includes our HSA-qualified Consumer-Directed Health Plans (CDHP) as permitted by IRS Notice 2020-15.

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.