

Step One: Log in



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ast name

### Plan Selection for Active Employees and Pre-65 Former Employees

These instructions will guide you through CPG's online application as you make your plan selection(s) for the coming year through *MyCPG Accounts*.

<b>1</b> Go to <i>cpg.org/mycpg.</i>	← → C	
	CHURCH PENSION GROUP	
	Sign In or Create Account	
<ul> <li>2</li> <li>Sign in with the email address on your Annual Enrollment letter in the green envelope.</li> <li>You may need to update your password to meet new security standards.</li> <li>3</li> <li>If there is no email address or you did not access your account in 2022 or later, please select Create Account and follow the prompts.</li> </ul>	Sign in       Create Account         * Personal Email       *         Enter your email       *         * Password       Show typing         Enter your password       *         Forget Password       *         • Remember this device for 10 hours. Do not select if you are on a public or shared computer.         Sign In	Sign In       Create Account         Personal Information         Client Number         XXX-XXX         Please contact Client Services at (866) 802-6333 if you have question
Enter your Client Number, found on your Annual Enrollment letter.		Confirm your identity.  Legal first name Legal
The number can make it easier to verify you during the account set-up process.	Need Help? * Required field. Please contact Client Services (855) 594-2201 Monday - Friday, 8:30AM - 8:00PM EST	* Date of birth

Need enrollment technical assistance? Call our Client Services Technical Support Team at 855-594-2201, Monday to Friday, 8:30 AM to 8:00 PM ET.

	B MyCPG Personal Information Relationships Resources Clergy Information Employment
	MyCPG / Resources / Annual Enrollment Resources
	20XX Annual Enrollment
	<ul><li>The Episcopal Church Medical Trust holds Annual Enrollment each fall to give you the opportunity to:</li><li>compare your current health plans with the available options</li></ul>
Click on the Annual Enrollment banner, or go to <b>Resources</b> tab and click the <b>Annual</b> <b>Enrollment Resources</b> quick action button.	select the plans that best meet your needs for the upcoming year     add or remove covered dependents

#### Step Three: Update your personal information

Personal Information	Relationships Resources Cler	gy Information	
	Relationships Not Started	Coverage Not Started	Review Not Sta
Person	al Information		
Please review and	d update your personal information below t	o continue the enrollment process.	
Salutation *			
The Reverend/F	Father	•	
Legal First Nam	e *	0	
	al Information ess Person Please review an salutation * The Reverend/	Personal Information Relationships Resources Cler al Information ess Not Started Personal Information Please review and update your personal information below to	Personal Information Relationships Resources Clergy Information     al Information   ess     Relationships   Not Started     Coverage   Not Started     Personal Information   Please review and update your personal information below to continue the enrollment process.   salutation *   The Reverend/Father   The Reverend/Father

Verify your Personal Information and make changes directly to the online form.

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	MyCPG Personal Information Relationships Resources	
	Personal Information Relationships Coverage Review	
	Completed     Relationships     In Progress     Not Started     Not Started	
Make sure your spousal and dependent(s) information is current by making updates on the <b>Relationships</b> screen.	Relationships Marital History <sup>Spouse</sup> There is no current spousal information on record. To update marital status or spouse's information, piece visit the <u>Marital Status Section</u> .	Support and Guidance  Furnose of this screee  Adding or updating dependents  Adding or updating market information  Adding or updating market information  Extinction of relationship hypes
Update current spousal and dependent information by clicking on the <b>Edit</b> link under their name(s).		
2 Add a new spouse or dependent only if you intend to provide them with health plan coverage. <sup>1</sup> Add a new spouse by clicking the <b>Marital Status Section</b> link.	Dependents There are no dependents on record. Click the button below to add a dependent. Add Dependent	
Add a new dependent by clicking on the <b>Add Dependent</b> button.	Previous Seve & Continue to Coverage	

<sup>1</sup>The following information is required for adding a new dependent (spouse or child): legal name, gender, date of birth, and Social Security Number or Individual Tax ID Number.

On the **Coverage** screen, your current health plan(s) will be displayed. Review your coverage.

> Select who you want to have covered under your health plan(s).

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For Medical Coverage

Check the Medical Coverage boxes in front of dependents' names if they are to receive coverage or uncheck the boxes to discontinue coverage for the new plan year.

#### For Dental Coverage

Select your dental plan<sup>1</sup> and check the boxes in front of dependents' names if you wish to enroll them in coverage for the new plan year.

Consider your plan choices and their rates and then make your plan selection(s).

<sup>1</sup>Please note that Hawaii Medical Service Association plans are bundled with dental plans.

**MyCPG** Personal Information Relationships

want to stay with your current plan, no changes are required.

SDioadmintestingone Client Number: XXX-X06-56

Personal Information

Coverage

Current Plan

Anthem BCBS BlueCard PPO 100

**Plan Reference Documents** I<sup>IIII</sup> Annual Enrollment (AE) Guide

Plan Comparison Chart

Medical Coverage

Self

🗌 Cara Walsh

Spouse

🔽 Rj Smith

Child

Self

Cara Walsh

Spouse 🔽 Rj Smith

Child

**Dental Coverage** 

Participant Selection

**Annual Enrollment Options** 

Medical Plan

Self + Child

Dental Plan Delta Dental Basic Self + Child

Completed

Resources

Coverage

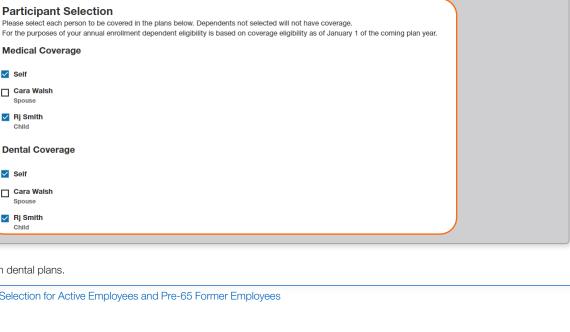
In Progress

**Relationships** 

Completed

If you want to make changes to your participants or your plans please select from options below. If you

Please select each person to be covered in the plans below. Dependents not selected will not have coverage



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Review

Not Started

Support

Purpose o Making me

Plan no lor 🖹 🛛 <u>Benefits ar</u> Understan

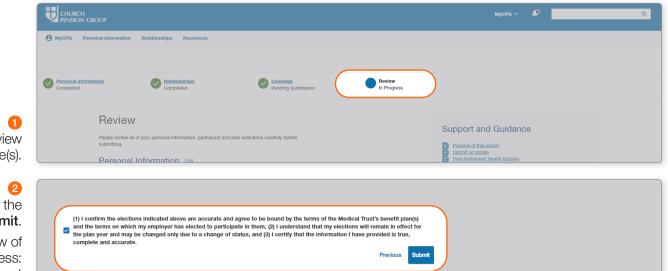
Speak with

ease review the available medical and dental cover se the radio buttons to make your selection.	age options below. If you wish to make a change			Monthly Premium
Medical Plans		Single	Self + 1	Family
Cuina Open Access Plus CDHP-40/HSA	Plan Summary	\$820.00	\$1,476.00	\$2,296.0
Cigna Open Access Plus CDHP-15/HSA	Plan Summary	\$981.00	\$1,766.00	\$2,747.0
Cigna Open Access Plus PPO 100	🕮 Plan Summary	\$1,295.00	\$2,331.00	\$3,626.0
Cigna Open Access Plus PPO 90	🕮 Plan Summary	\$1,161.00	\$2,090.00	\$3,251.0
Cigna Open Access Plus PPO 80	Plan Summary	\$1,054.00	\$1,897.00	\$2,951.0
Cigna Open Access Plus PPO 70	Plan Summary	\$961.00	\$1,730.00	\$2,691.0
Cigna Open Access Plus MSP PPO 100	👜 Plan Summary	\$1,034.00	\$1,861.00	\$2,895.0
Cigna Open Access Plus MSP PPO 90	Plan Summary	\$930.00	\$1,674.00	\$2,604.0
Cigna Open Access Plus MSP PPO 80	👜 <u>Plan Summary</u>	\$842.00	\$1,516.00	\$2,358.0

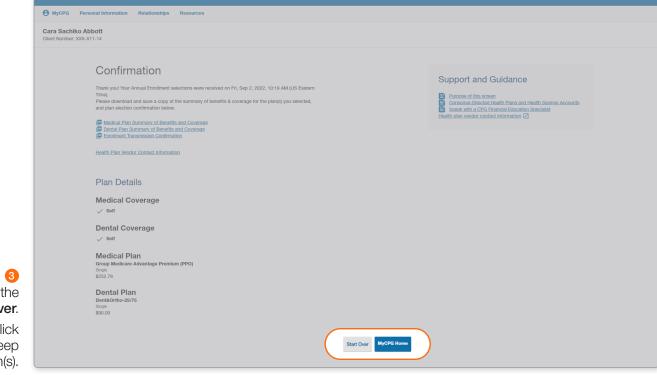
Dental Plans		Single	Self + 1	Fan
O Dint&Ortho-25/75	🕮 Plan Summary	\$89.00	\$160.00	\$249
Basic Dent-50/150	Plan Summary	\$71.00	\$128.00	\$199
O Preventive Dental	Plan Summary	\$43.00	\$77.00	\$120
O Decline Dental Coverage				
Summary				
Summary Monthly Cost 🛛				
	\$2,331.00			
Monthly Cost 0	\$2,331.00 \$42.00			
Monthly Cost				
Monthly Cost   Medical Dental	\$42.00			
Monthly Cost   Medical Dental	\$42.00			

## 3

If you do not want medical and/or dental coverage through the Medical Trust in the new plan year, check **Decline Medical Coverage** and/or **Decline Dental Coverage**.



After submitting you will receive confirmation of your plan coverage.



When you are done, make a final review of your selected health plan choice(s).

Then sign the form electronically by checking the box at the end of the form and click **Submit**. Follow the instructions to conclude the review of your plan selection process: If a red error message appears, correct the error, and click **Submit** again.

To reject all changes and restart with the original form, select **Start Over**.

A message will ask if you are sure. Click Start Over to continue or Cancel to keep your previously submitted selection(s).

# For enrollment technical assistance, please call our Client Services Technical Support Team at 855-594-2201, Monday to Friday, 8:30 AM to 8:00 PM ET.

**Refer to These Benefit Resources** For dental and additional benefits offered through the Medical Trust:

- Visit cpg.org/annualenrollment and select your status.
  - "I'm an Active Employee" (currently working)
  - "I'm a Pre-65 Former Employee" (not eligible for Medicare)

Your plan provides a Summary of Benefits and Coverage (SBC) which offers important details about the plan's benefits in a standard format to help you compare options.

- SBCs are available at cpg.org/mtdocs.
- For a free paper copy, call (800) 480-9967, Monday through Friday, 8:30 AM to 8:00 PM ET.

If you need help selecting plan(s):

- Medical<sup>1</sup>
  - Members whose plans use the Anthem and Cigna networks can call Quantum at 866-871-0629, Monday to Friday, 8:30AM to 10 PM EST.
  - Kaiser members should call the number on the back of their ID cards.
  - Members covered by the Hawaii Medical Service Association should call the number on the back of their ID cards.
- Dental—Call Delta Dental at 888-894-7059 (Monday to Friday, 8:00 AM to 8:00 PM EST) or visit *cpg.org/deltadental*.

#### **Need help with Annual Enrollment?** Call Client Services at 800-480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET. Need Help?

<sup>1</sup>Please note that as of January 1, 2025, the services of Health Advocate will no longer be available. Quantum Health will take over those services in 2025.

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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 (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.

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