

Open Enrollment

Name Address 1 Address 2 City, State Zip

Dear Friend,

The Medical Trust holds Open Enrollment (OE) each fall for its health plan members. This is a chance for you to compare your current medical and/or dental plan with other available options¹, selecting the plan(s) that will best meet your needs in 2013.

This letter contains information and resources² to help make this process easier for you, and important contact numbers for our health plan partners. Please refer to the *Need Help?* section on page 6 for any OE or healthcare related information.

Open Enrollment Basics

- Save this letter. It contains important log in information for online Open Enrollment, a benefits update for 2013, and important health plan contact numbers.
- Research your health plan choices. Your employer may have communicated the plan(s) and rate(s) that are available to you and your group. These selections will also be viewable on the Open Enrollment website when you log in.

Your Open Enrollment dates are October 31 to November 21, 2012

- Do your homework and select your plan(s) before logging in to complete your OE form. We have provided step-by-step directions for "Choosing a Medical Plan" on www.cpg.org, on our *Health Benefits* 101 pages.
- Download and compare Summaries of Benefits and Coverage for your current medical plan and other plans you are considering.³ The 2013 Summaries are on www.cpg.org/mtdocs now.
- You have three weeks to access the OE website. Once you have made your plan decisions, log in to the site using your Username and Password (on top of page 2). The site will have your contact and dependent information and your current 2012 health plan selections displayed.
- If you don't wish to make any changes, simply verify that your existing information is correct.
- If you want to make changes to your plan or personal information, you will update and save your choices right on the page.

¹ Some groups offer only a single health plan option.

² In the event of a conflict between this document and the official Plan documents, the official Plan documents will govern.
³ Only Medical Trust plan summaries are available online. For local/regional fully funded plans, consult the plan materials

available through your employer.





Your OE Username: Your OE Password:

Log in from October 31 to November 21, 2012

Note: Client Engagement will close at 3 p.m. ET on November 21, 2012 The website is open from 7 AM to 11 PM ET daily⁴

1. For direct access to the Open Enrollment website type HTTPS://OPENENROLLMENT.CPG.ORG into your web browser.⁵ Or you may go to www.cpg.org, select your status (Active Clergy or Lay), select HEALTH and then select OPEN ENROLLMENT (on the left navigation bar) to access the online Open Enrollment website log in link.



- 2. Log in with your Username and Password (above) and the last four digits of your Social Security number (SSN). Enter the password *exactly* as printed. (To see the password as you type, click on the REVEAL box.)
- 3. Verify your personal and dependent information including Social Security numbers. Make changes directly on your form. If you are covering your dependents, be sure to check the Med (medical) and/or Den (dental) boxes in front of their names.
- 4. Choose or verify your plan selection(s) under COVERAGE OPTIONS AND MONTHLY COSTS. If your group offers more than one plan, all your options will be listed in this section.
 - a. A Plan Comparison Chart is available on the site. It highlights key aspects of the Medical Trust plans your group is offering in 2013.⁶
 - b. We have also posted a PDF of our Open Enrollment Guide on the site to help you.
- 5. When done, review the page to make sure all your information is correct. Then confirm your "ELECTRONIC SIGNATURE" by checking the box at the end of your form.
- 6. Click SUBMIT at the top or bottom of the form. A message will ask: "Are you sure?"
 - a. To accept, click OK to continue your submission
 - b. To continue reviewing your changes, click CANCEL
 - c. To reject all changes and restart with the *original* form, click CLEAR CHANGES
 - d. If a red ERROR message appears, correct the error and click SUBMIT again
- 7. When processing is complete, a message will indicate the date and time your selection was received. Please print or download a copy for your records only, no need to mail it in to us.
- 8. Please take our brief OE Survey. Your feedback helps us improve the process each year.

⁴ Each day's transactions are processed overnight. We apologize for any inconvenience.

⁵ Internet Explorer versions 7 and 8 interface most effectively with the online enrollment system.

⁶ Only Medical Trust plan summaries are on our website. For local/regional fully funded plans, consult your plan's materials available through your employer.



Women's Preventive Care 2013

Preventive care and early detection are important for maintaining health. In accordance with the Affordable Care Act, this list of women's preventive care services will be available in 2013 with no copay or coinsurance. Contact your health plan (see page 6) for more information.



- Well-woman visits include an annual visit and recommended preventive services, and additional visits if women and their doctors determine they are necessary
- Breastfeeding counseling from trained providers and equipment such as breast pumps
- FDA-approved contraceptive methods and sterilization procedures. Oral contraceptives are available through your pharmacy benefit but only generic drugs are available with no copay
- Domestic violence screening and counseling
- Gestational diabetes screening for pregnant and high-risk women
- HIV screening and counseling annually
- Sexually transmitted infections counseling annually
- Human papillomavirus (HPV) testing every three years, regardless of Pap results, for women aged 30 and older

Dental Plans 2013

The Basic and Dental & Orthodontia plans' annual benefit maximums are rising to \$2,000 in 2013. Please review all dental plan design changes below.

Dental & Orthodontia Plan

- Annual Benefit Maximum rises to \$2,000 in 2013 from the current \$1,500
- The Orthodontic Lifetime Maximum remains \$1,500
- Dental implants and medically necessary night guards will now be included as covered major services (plan pays 85%) and count towards the annual benefit maximum

Basic Dental Plan

- Annual Benefit Maximum rises to \$2,000 in 2013 from the current \$1,500
- Dental implants and medically necessary night guards will now be included as covered major services (plan pays 50%) and count towards the annual benefit maximum

Preventive Dental Plan

- Sealants will be included up to age 14 as a covered preventive service (plan pays 100%)
- Annual benefits maximum remains \$1,500

Three Dental Cleanings & Exams Per Year — Each plan covers three in-network cleanings per year at no cost to you. Out-of-network cleanings are also covered, but you may have some cost share. Contact Cigna for a list of network dentists (see page 6).





Express Scripts and Medco Have Merged

We want to remind you that Express Scripts and Medco have merged. Your prescription benefit remains unchanged, and your Medco ID card remains in effect. The combined company is in the process of changing the name on many of its communications to Express Scripts, but you'll still see the Medco name as well.





You still have the same access to the same medications and pharmacies at the same copayment levels. You can use your pharmacy benefits wherever Express Scripts and Medco are accepted. Continue to use the www.medco.com website. Continue to call the customer service number, (800) 939-3781, that is on the back of your Medco ID card.

EyeMed Vision Care

We are pleased to announce that EyeMed has developed a Medical Trust specific website for Medical Trust members. Beginning October 15, please log in to www.eyemedvisioncare.com/ecmt to see information on your specific vision benefits.

Free Annual Eye Exam — Your Medical Trust benefits also include one innetwork eye exam per calendar year with a \$0 copay and benefits for prescription eyewear or contact lenses. Find a participating EyeMed provider today. EyeMed's contact information is listed on page 6.

Colonoscopy — Preventive Care or Diagnostic Procedure?

Colonoscopy for colon cancer screening often include professional fees, surgeon's fees, facility fees, laboratory fees, and anesthesiologist fees that relate to the procedure. This could result in multiple claims. When the colonoscopy is coded as routine preventive care, colonoscopies and other charges are covered at 100%.



However, if the doctor finds and removes polyps during the procedure, it becomes diagnostic and may not be covered at 100%. It may be your first screening, but if it is diagnostic rather than routine, you may have a cost share after your health plan processes the claim.



Benefits Information

Announcing a New Benefit for Medical Trust Members — The Mayo Clinic Health Assessment

To support you in your wellness journey, we are happy to announce that all Medical Trust members, their spouses, and dependents 18 years or older will have access to the Mayo Clinic Health Assessment and the EmbodyHealth website with its wellness tools and resources.

The Health Assessment is designed to provide you with personalized feedback on your health status with recommendations for improvements. You can use this tool to make positive lifestyle changes and chart your progress on the journey to better health.



Your personal access code and directions to access the site were included in a letter from the Medical Trust in September.

Online Health Benefits Resources www.cpg.org

Our website can help you understand and make the best use of your benefits. Visit www.cpg.org, select your status (Active Clergy or Lay), and click on the health link to begin exploring. Some of the resources include:

- Open Enrollment web pages
- Health Benefits 101 web pages with a new section, *Choosing a Medical Plan*, with step-by-step instructions to guide you through the process
- Glossary & Acronym Guide has many healthcare definitions and common CPG acronyms



www.cpg.org/mtdocs

Use this quick link to go directly to health plan documents and forms, including:

- The Open Enrollment Guide
- 2013 Summaries of Benefits and Coverage, redesigned to comply with the Affordable Care Act. The 2013 copies are posted on our website now
- 2012 Plan Handbooks are online now, and the 2013 handbooks will be posted on January 1, 2013

Important Contacts



Need Help?

Follow these general guidelines on who to call when you need help.

For questions specific to your diocese or group Such as your 2013 plan options and rates, contact the benefit administrator for your employer. 2013 plan options and rates are also posted on your Open Enrollment page when you log in.



- For questions specific to plan coverage
 - Consult your plan materials at www.cpg.org/mtdocs, or call your plan (see below) to clarify coverage for specific conditions or procedures, or to verify a provider's network affiliation.
- For questions specific to navigating the healthcare system Call Health Advocate (see below). There is no fee to you. They can help you understand treatments and medications, facilitate medical records transfers, resolve billing issues, negotiate fees with out-of-network providers, locate senior care programs, and estimate healthcare costs. It's like having a personal healthcare assistant by your side—at no cost to you.
- For other questions about Open Enrollment or your health benefits Contact our Client Engagement call center at (800) 480-9967, Monday to Friday 8:30 AM to 8 PM ET (5:30 AM to 5:00 PM PT), or email mtcustserv@cpg.org. Note: Client Engagement will close at 3 p.m. ET on November 21, 2012.

Health Plan Contact Information

Aetna

POS II and SelectEPO (877) 235-4005 HMO (877) 380-8584 www.aetna.com

Cigna Medical & Dental (800) 244-6224 www.cigna.com

Cigna Behavioral Health (866) 395-7794 (Mental Health and Employee Assistance Program) www.cignabehavioral.com Employer ID: Episcopal

Empire BlueCross BlueShield (800) 352-3152 www.empireblue.com/medicaltrust

EyeMed Vision Care (866) 723-0513 www.eyemedvisioncare.com/ecmt

Health Advocate (866) 695-8622 www.healthadvocate.com

Log in: Episcopal

Kaiser Permanente

Colorado: (877) 883-6698 Georgia: (866) 800-1486

Mid-Atlantic States: (877) 740-4117

Northwest: (866) 800-3402 No. California: (800) 663-1771 So. California: (800) 533-1833

www.kp.org

Express Scripts/Medco (Pharmacy Benefit) (800) 841-3361

Open enrollment hotline, select option #1

www.medco.com

UnitedHealthcare (866) 204-8533 www.myuhc.com