



TO: Clergy leadership, congregation administrators, and other benefits personnel in our parishes and missions

FROM: Lori Hardow, Benefits Coordinator
lhadow@ecww.org, phone extension 2018

RE: **2026 Health Benefits Overview**

I am pleased to provide you with these important details about annual enrollment and the 2026 health benefit offerings from The Episcopal Church Medical Trust ("Medical Trust"). Please read it carefully and contact me with any questions. You'll also find attached a version of this memo that you may use to communicate directly with your employees, particularly for larger congregations with multiple staff.

Our Annual Enrollment for 2026 will run from October 15 to November 7.

For information about eligibility for the Episcopal Health Plan, the Medicare Secondary Payer Small Employer Exception (MSP-SEE) Plan (for employers with fewer than 10 employees), and the Group Medicare Advantage Plan, refer to the Medical Trust's *Administrative Policy Manual*.

Quantum Health!

During Annual Enrollment, Quantum will be available (at 866-871-0629) to help both members and potential members (i.e., those eligible to enroll) in plans that use the Anthem network* to review existing benefits, understand plan options, and choose the right plan for themselves and their families.

**Members covered by Kaiser Permanente have comprehensive services as part of their plans and will not use the services of Quantum Health. Neither will members enrolled only in a dental plan (through Delta Dental), a disability policy (through Aflac), and/or the standalone EAP.*

No Changes to Current Medical or Dental Plan Selections

Please note that there are no changes to our current medical or dental plan options for 2026. However, members are encouraged to verify their personal information, dependent coverage, and plan selections, and to make changes if necessary by logging in to MyCPG Accounts during Annual Enrollment. If they have not already done so, all members must create an account at cpq.org/mycpq before Annual Enrollment.

2026 Medical Plans

We will offer the following medical plans to our employees through the Medical Trust.

Medical Plan / Monthly Rates	Single	Employee + 1 (spouse or child)	Family	% increase over 2025
Anthem BCBS BlueCard PPO 80 (base plan*)	\$1031	\$1856	\$2887	4.98%
Anthem BCBS BlueCard PPO 90	\$1214	\$2185	\$3399	6.02%
Anthem BCBS BlueCard PPO 100	\$1370	\$2466	\$3836	7.03%
Anthem BCBS CDHP-20/HSA **	\$821 / \$210	\$1478 / \$378	\$2299 / \$588	4.98%
Kaiser Permanente EPO 80 HMO	\$1106	\$1991	\$3098	5.05%
Kaiser Permanente EPO High HMO	\$1583	\$2849	\$4432	7.03%
Kaiser Permanente CDHP 20/HSA **	\$927 / \$104	\$1669 / \$187	\$2596 / \$291	5.02%

**The base plan is identified each year by the diocesan Personnel Commission. The current minimum standard employer contribution is 100% of the base plan premium for employee and 75% of the base plan premium for dependents of the employee.*

***If an employee selects a Consumer Directed Health Plan (CDHP) the employer is required to contribute the monthly rate difference between the CDHP plan and the designated base plan to the employees' Health Savings Account (HSA). Table shows Premium / HSA Contribution for these plans.*

2026 Delta Dental Plans

Delta Dental, the Medical Trust's dental vendor, has the largest network of dentists nationwide. In 2026, members will continue to be able to access services in two of its networks (PPO and Premier) or use out-of-network dentists. Member coinsurance, deductible, and maximum annual benefit will vary based on the network they use for a covered dental service.

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

Dental Plan / Monthly Rates	Single	Employee + 1 (spouse or child)	Family	% increase over 2025
Delta Basic Dental	\$48	\$86	\$134	0%
Delta Comprehensive (base plan*)	\$63	\$113	\$176	1.24%
Delta Premium	\$86	\$155	\$241	1.25%

** The current minimum standard employer contribution is 100% of the base dental premium for employee and 75% of the base dental premium for dependents of the employee.*

To maintain parity, minimums and premium sharing for both medical and dental insurance must be the same for all eligible lay and clergy employees of an employing unit.

What You Need to Know About Annual Enrollment

- Current members may change their plan selections for the following year. If the employee plans to maintain current medical or dental coverage, no action is required.
- 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

Approximately one week before Annual Enrollment begins, currently enrolled employees (plan members) will receive a letter in a **green envelope** from the Medical Trust with information about Annual Enrollment dates and how to access the enrollment site. Please instruct employees to save this letter and encourage them to begin reviewing their options early. If an employee takes no action and their current plan(s) are offered for 2026, their plan selection(s) will automatically carry over to 2026, and any applicable rate increases will apply.

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 [MyCPG Accounts](#). If they don't make a change during Annual Enrollment, their plan selections will carry over into 2026. If they wish to change their selections for 2026, they will need to log in to MyCPG Accounts or contact their group benefits administrator for assistance. (Members may contact the Client Services team for assistance accessing their login credentials.)

IMPORTANT REMINDER: Members will make their plan selections on [MyCPG Accounts](#) using the email address and password associated with their MyCPG Account. If they have not already done so, members must create an account before Annual Enrollment. For assistance, employees may contact CPG Client Services at 800-480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET, or email mtcustserv@cpg.org.

Non-participating Employees

Eligible employees and dependents not currently enrolled in a Medical Trust plan will not receive an Annual Enrollment letter but may enroll during Annual Enrollment for the 2026 plan year. If they do not enroll during Annual Enrollment, their previous decision to decline coverage will carry over into 2026. Please submit an enrollment form to me, as this process must be handled by the group administrator.

NOTE: Because materials won't be mailed to potential (eligible but not enrolled) members, please inform these employees that they and their eligible dependents may enroll, share the plans and rates available to them, and provide them with the applicable legal notices and Summaries of Benefits and Coverage available at cpg.org/mtdocs. You may use the enclosed template and modify as needed.

Plan Documents

2026 *Summaries of Benefits and Coverage* and Plan Document Handbooks containing plan details are available found on the Church Pension Group website at cpg.org/mtdocs.

Employee Assistance Program (EAP) with Cigna Behavioral Health

In addition to the health plans, the Medical Trust makes available a stand-alone EAP through Cigna Behavioral Health that you and may offer to employees who opt out of medical coverage for an approved reason. (Employees who enroll in Medical Trust health coverage are automatically enrolled in Cigna EAP benefits.) The 2026 monthly premium for the stand-alone EAP is \$4.

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 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.