

Subject: HEADS UP! Get ready for 2025 Annual Enrollment
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From: Annual Enrollment-The Episcopal Church Medical Trust
To: emailarchives

Web Version



2025 Annual Enrollment



HEADS UP! Get ready for 2025 Annual Enrollment

Dear Annual Enrollment Administrator:

Annual Enrollment is just a few weeks away. To help you prepare, we're sharing important deadlines and documents plus information about our new healthcare coordination vendor.

Introducing Quantum Health

Beginning January 1, 2025, Quantum Health (Quantum) will be available to guide active and pre-65 former employees covered by plans through the Anthem and Cigna networks* as they navigate today's complex healthcare system.

Annual Enrollment Support

During Annual Enrollment this year, Quantum will help **members of our plans utilizing the Anthem and Cigna networks** to

- review existing benefits,
- understand plan options, and
- choose the right plans for themselves and their families.

In December, after Annual Enrollment, members will receive new ID cards (with a NEW plan number) that next year they MUST share with their doctors, pharmacists, and other providers—except dentists—as their old cards will not work after 12/31/2024.

**Members covered by Kaiser Permanente and by the Hawaii Medical Service Association 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.*

Annual Enrollment Timeline

What Happens	When It Happens
Group administrators choose group health plan renewals	August 29 – September 20
New This Year: Institution Sub-selection	September 23 – October 4
Annual Enrollment (active and pre-65 former employees)	October 16 – November 15
Annual Enrollment (post-65 former employees)	October 23 – November 22

If you have questions about your members' Annual Enrollment materials, please contact your [benefits relationship manager](#).

Member Communications

We will be mailing the following letters to members during the periods indicated:

1. **Annual Enrollment Letters:** late September
2. **Annual Enrollment Letters for post-65 former employees:** late September
3. **Dependent Aging-Out Letters:** late October

If your Participating Group opted out of receiving Annual Enrollment communications, **your employees will not receive Annual Enrollment letters from us, and you will be responsible for providing them with information about Annual Enrollment.**

As we finalize materials, we will post them to the [Administrators' Resource Center](#) and to [Annual Enrollment Administrator Central](#).

Important Reminders

1. Beginning August 29, 2024, a *Summary of Benefits and Coverage (SBC)* for each of the health plans offered by The Episcopal Church Medical Trust (the Medical Trust) for 2025 will be available at cpg.org/mtdocs.
2. In September, we will mail—and post to MAP—updated versions of the following legally required compliance notices, which you should provide to employees not currently enrolled in a Medical Trust plan:
 - *Notice of Creditable Coverage*
 - *Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)*
 - *HIPAA Notice of Special Enrollment Rights*
3. [The Administrative Policy Manual](#) explains health plan eligibility and details the obligations of Participating Groups and benefit administrators.

As always, thank you for the time and effort you put into ensuring that your employees have the necessary tools to make informed decisions about their healthcare benefits.

Faithfully,

Your Annual Enrollment Team

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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 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.

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