

**2026 Annual Enrollment**

**Administrator Letter Templates**

You play an important part in ensuring that Annual Enrollment goes smoothly for The Episcopal Church’s employees.

When employees are informed in advance of plan options and costs, they’re able to research and select the plan that best suits their needs for the coming year. And when benefits administrators in local parishes and institutions know what plans and rates will be available, they have time to prepare budgets and correspondence for the year ahead. To support your administrative and communication needs, we have developed these customizable Annual Enrollment letter templates.

**Letter Templates**

You can customize these templates with your 2026 health plan selections, rates, and other information and use them to communicate with benefits personnel and employees about Annual Enrollment.

**Template #2:** *Letter to Employees (Members and Nonparticipating Employees)*

**Template #3:** *Letter to Employees Who Will Become Ineligible for Coverage for the Upcoming Plan Year*

**How to Use the Templates**

* Customizable areas appear in **red**. Enter information specific to your organization in these areas, double-check all rates, and then delete any red sections that don’t apply.
* Explanatory notes appear in **blue** and should be deleted from the letters before distribution.

Download your group-specific enrollment form from My Admin Portal ([*MAP*](https://authenticate.cpg.org/login?state=hKFo2SA0aEV6Z2pCSTRMUEVZMGVqaFROWThuQnVKdHJKQjVVQaFupWxvZ2luo3RpZNkgUHhCOGVILWlYYXVWWlU1MW9TeXRpUV9hMWk1Q1NsQnWjY2lk2SAwenROc21yTUFGbmR5bnpEdnBsVDF5OW14WG03bUFjNw&client=0ztNsmrMAFndynzDvplT1y9mxXm7mAc7&protocol=oauth2&connection=cpg-to-auth0-database&audience=cpg-business-api-prod&redirect_uri=https%3A%2F%2Fwww.cpg.org%2Fservices&scope=openid%20profile%20email%20offline_access&response_type=code&response_mode=query&nonce=ZktPY3dTREJiX2h2N3FCc01ueVV3Q2pCVGtVZXJ5azVEOThSTVRGaE5OaQ%3D%3D&code_challenge=8nLMz3Y0rC53uBjpcidaFAycavddebApY-aUPDLW4Z0&code_challenge_method=S256&auth0Client=eyJuYW1lIjoiYXV0aDAtcmVhY3QiLCJ2ZXJzaW9uIjoiMS41LjAifQ%3D%3D)) via the Medical & Life Participant System (MLPS) and send it with the letter for eligible employees who are not currently enrolled.

**Template #2 – Letter to Employees (Members and Nonparticipating Employees)**

<Date>

Dear <Name>:

This letter contains important information about the 2026 health benefits available from The Episcopal Church Medical Trust (Medical Trust). Please read it carefully and contact me with any questions.

Online Annual Enrollment for your 2026 Medical Trust health benefits takes place from October 15 to November 7.

**Medical Plans**

You will be able to choose from the following medical plans through the Medical Trust:

|  |  |  |  |
| --- | --- | --- | --- |
| **EDSD 2026 Employee Medical Plan (Monthly)** | **Single** | **Plus One** | **Family** |
| Anthem CDHP 15 (base plan) |  54.90  |  507.90  |  1,105.90  |
| Anthem CDHP 20 |  -  |  237.90  |  685.90  |
| Anthem BlueCard PPO 80 |  22.48  |  546.48  |  1,232.48  |
| Anthem BlueCard MSP PPO 80\* |  -  |  117.48  |  565.48  |
| Kaiser EPO 80 |  1.48  |  508.48  |  1,173.48  |

**Dental Plans**

|  |  |  |  |
| --- | --- | --- | --- |
| **EDSD 2026 Employee Dental Plan (Monthly)** | **Single** | **Plus One** | **Family** |
| Delta Dental Comprehensive (base plan) |  -  |  54.00  |  121.00  |
| Delta Dental Basic |  -  |  27.00  |  79.00  |
| Delta Dental Premium |  23.00  |  95.00  |  185.00  |

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

**Changes for 2026**

|  |  |
| --- | --- |
| Deductible increase for Anthem and Cigna CDHP-15 | The IRS increased the minimum amount that a high-deductible health plan (HDHP) must impose as a deductible.[[1]](#footnote-2) (Note that the Medical Trust refers to HDHPs as CDHPs.)  For 2026, the minimum amounts that must be imposed as deductibles under an HDHP are $1,700 for self-only coverage and $3,400 for family coverage. The amounts for 2025 were $1,650 and $3,300, respectively.Effective January 1, 2026, the Medical Trust’s Anthem and Cigna CDHP-15 network deductibles will be $1,700 for self-only coverage and $3,400 for family coverage. The out-of-network deductibles will be $3,400 and $6,800, respectively.  |
| Deductible Increase for Anthem, Cigna, & Kaiser CDHP-20 | For 2026, the minimum amounts that must be imposed as deductibles under an HDHP are $1,700 for self-only coverage and $3,400 for family coverage. The amounts for 2025 were $1,650 and $3,300, respectively.  Effective January 1, 2026, the Medical Trust’s Anthem, Cigna, and Kaiser CDHP-20 network deductibles will be $1,700 for self-only coverage and $3,400 for family coverage. The out-of-network deductibles will be $3,400 and $6,800, respectively. |

**Details About Your Benefits**

Details about your benefits, including 2026 *Summaries of Benefits and Coverage,* the *Annual Enrollment Guide*, and Plan Document Handbooks, are available on the Church Pension Group website at [*cpg.org/mtdocs*](http://www.cpg.org/mtdocs). To receive a free paper copy of the *Summaries of Benefits and Coverage*, use the “Mail It to Me” option at [*cpg.org/mtdocs*](https://www.cpg.org/forms-and-publications/publications/health-plans) or call CPG’s Client Services at 800-480-9967, Monday to Friday, 8:30 AM to 8:00 PM ET.

Insert red text for the group to choose according to its situation:

Please note that our Medical Trust health plan option(s) will change:

**Plans No Longer Offered**

We will no longer offer the following plan/plans in 2026:

Kaiser EPO High Option

Anthem BCBS PPO 90

Anthem BCBS MSP PPO 90 (Small employers only- Medicare Supplemental for 65+)

**If you are currently enrolled in any of these plans, you must select another plan to continue medical or dental coverage (as applicable) in 2026.**

**If You Are Enrolled in a Medical Trust Plan**

Approximately one week before your Annual Enrollment session, you will receive an Annual Enrollment letter in a green envelope with information about your Annual Enrollment dates and how to access the enrollment site. Please save this letter. Whether or not you plan to make a change, be sure to log in to MyCPG Accounts and check that your personal information and that of your dependents is correct. You can submit any corrections through MyCPG Accounts and/or by notifying me.

Please note that if you take no action and your current plan(s) are being offered for 2026, your current plan selections will automatically carry over to 2026, and any applicable rate increases will apply. If your plan is going away for 2026, you will need to sign in to MyCPG Accounts and make plan selections or notify me for assistance.

**New Hires After Annual Enrollment Begins**

If you enrolled in a Medical Trust plan for the first time after the Annual Enrollment letter mailing list is created (generally in early September), you will not receive an Annual Enrollment letter; however, you will be able to participate in the Medical Trust’s Annual Enrollment through MyCPG Accounts. If you do not make a change during Annual Enrollment, your plan selections will carry over into 2026. If you wish to make a change to your medical or dental plan enrollment for 2026 or if your medical or dental plan is no longer being offered for 2026, you must log in to MyCPG Accounts and make plan selections or contact me for assistance. You may contact CPG Client Services for assistance accessing your login credentials.

**IMPORTANT NOTE:** For 2026, you will use the same credentials (associated email address and password) you created on MyCPG Accounts to access the Annual Enrollment page. If you have not already created an account on MyCPG Accounts, please do so before Annual Enrollment begins. For assistance, contact TECH at 855-594-2201, Monday to Friday, 8:30 AM to 8:00 PM ET, or email *mtcustserv@cpg.org*.

If you plan to make a change or enroll for the first time in a Medical Trust plan, begin to review your options now so that you’ll have enough 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. To further explore plans and benefits, visit [*cpg.org*](https://www.cpg.org/), hover over **Benefits**, select **Active Clergy** or **Lay**, then select **Health**. You will not receive a letter from the Medical Trust or be able to access Annual Enrollment through MyCPG, so please contact me with any questions and/or to request an enrollment form and a copy of the *Summaries of Benefits and Coverage* and other important notices. If you take no action, your previous decision to decline coverage will remain in effect for 2026.

During Annual Enrollment, Quantum will be available at 866-871-0629 to Anthem and Cigna network members (and potential members) who want help reviewing existing benefits, understanding plan options, and choosing the right plan for themselves and their families.

Note: You may want to add information about your organization’s funding policy for members and dependents.

**Employee Assistance Program (EAP) with Cigna Behavioral Health**

In addition to the Medical Trust health plans, your employer also offers a standalone EAP through Cigna for eligible employees who have spousal or qualified coverage through an entity other than the Medical Trust. This program covers your entire household and is paid for by your employer.

Note: If an employer chooses to offer the Cigna EAP on a standalone basis, all eligible employees who are not enrolled in Medical Trust medical coverage must be enrolled, and **the employer** must pay for the EAP-only coverage. Requiring employees to contribute toward the cost of EAP-only coverage would violate the Affordable Care Act, and the employer could be subject to significant penalties. Eligibility for the standalone EAP is limited to qualified nonmembers (e.g., an employee who is on a spousal plan and has opted out of Medical Trust coverage). Since these employees won’t be able to select the EAP on a standalone basis during Annual Enrollment, enrollments must be completed by their group administrator with My Admin Portal (MAP) enrollment access.

Include the following as appropriate:

**Informational Meetings**

Join our online presentation for employees:

October 15, 2025 4:00 Register at <https://edsd.org/event/2026-employee-information-for-annual-enrolment/>.

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

Sincerely,

Group Administrator Name

Phone / ***Email***

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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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**Template #3 – Letter to employees who will become ineligible for coverage for the upcoming plan year**

<Date>

Dear <Name>:

This letter contains important information about the 2026 health benefits available through The Episcopal Church Medical Trust (Medical Trust). Please read it carefully and contact me with any questions.

The Episcopal Health Plan (EHP) of the Medical Trust sets eligibility criteria for active employees. Both exempt and non-exempt employees are eligible to enroll in the EHP if they are normally scheduled to work 1,000 or more compensated hours per plan year or if they are treated as full-time employees under the Employer Shared Responsibility Provisions under the Affordable Care Act (sometimes called the “Pay or Play Rules”), but only for the applicable stability period.

Since you do not meet this eligibility criteria, you are <not/no longer> eligible for coverage under the active EHP effective <coverage end date>. You will receive information about the Extension of Benefits program from the Medical Trust.

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

Sincerely,

Group Administrator Name

Phone / ***Email***

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1. *See* [*IRS Rev. Proc. 2025-19*](https://www.irs.gov/pub/irs-drop/rp-25-19.pdf)*.* [↑](#footnote-ref-2)