

Your Medical and Dental Benefits in Retirement (for clergy with retirement eligibility dates *later than* June 30, 2013)

The Episcopal Church Medical Trust (Medical Trust) offers three Medicare Supplement Health Plans and three dental plans for eligible retirees of The Church Pension Fund Clergy Pension Plan (Clergy Pension Plan) and their eligible dependents.

Medicare Supplement coverage¹

Medicare Supplement Health Plans provide you with additional healthcare coverage by helping you pay many of your out-of-pocket expenses after Medicare pays its portion. They supplement Medicare by paying a portion of Medicare copayments, coinsurance, and deductibles, and by paying for some services not covered under Medicare, such as hearing aids. Medicare Supplement coverage is available to eligible retirees and their eligible spouses, domestic partners, and dependent disabled children, subject to enrollment in Medicare Parts A and B.

All three Medical Trust Medicare Supplement Health Plans include prescription drug, vision, hearing aid, employee assistance program, fitness program, health advocacy, and travel medical protection benefits at no additional cost.

The Comprehensive Plan offers excellent coverage and is a great value for the rich benefits it provides. It offers coverage for a broad range of medical services including physician visits, hospital stays, lab work, outpatient services, prescription drugs, an annual physical, and vision benefits. The Comprehensive Plan's hearing aid benefit is \$1,000 per ear, every five years.

The Plus Plan provides similar protection to the Comprehensive Plan with some enhancements such as lower annual out-of-pocket maximums, as well as slightly lower copays for physician office visits and prescription drugs. The Plus Plan's hearing aid benefit is \$1,000 per ear, every five years.

The Premium Plan has the same features as the Plus Plan, but richer benefits for physical, occupational, and speech therapy. You pay 0% and the plan pays 100% and continues to pay even after Medicare's benefit maximum is reached for these therapy services. The Premium Plan pays up to \$2,000 per ear, every five years for hearing aids, twice the benefit of the Comprehensive and Plus plans.

¹ Health benefits are offered through plans sponsored by Church Pension Group Services Corporation (doing business as The Episcopal Church Medical Trust), 19 East 34th Street, New York, NY 10016.

Pharmacy benefits

Our Comprehensive, Plus, and Premium plans include pharmacy benefits under the Medicare Part D program with additional benefits. This coverage, called Express Scripts Medicare™ (PDP), is administered by Express Scripts, a leading pharmacy benefits manager with the nation's largest home delivery pharmacy operation. This benefit has a tiered copayment approach and lets you fill prescriptions at your local retail pharmacy or by using the Express Scripts' Pharmacy™ home delivery service.

Participant cost: Clergy who retire on or after July 1, 2013 and were not eligible to retire as of June 30, 2013, and their Eligible² Spouses or Surviving Spouses

The Church Pension Fund provides a subsidy for the purchase of post-retirement health benefits for eligible clergy who retire under the Clergy Pension Plan and their eligible spouses or surviving spouses.³ This subsidy must be used to purchase a Medicare Supplement Health Plan and/or dental plan through the Medical Trust; it is never paid directly to the retiree.

The chart below shows the monthly 2017 costs per member for the Medicare Supplement Health Plans with prescription coverage — including any applicable subsidy amounts — for participants who retire on or after July 1, 2013, and who were not eligible to retire as of June 30, 2013, and their eligible spouses or surviving spouses. For the cost of these plans without prescription coverage, please contact our Client Services team. (See page 4 for contact information.)

2017 Medicare Supplement Health Plan rates (for retirement eligibility dates *later than* June 30, 2013)

Years of Credited Service	Subsidy	Comprehensive Plan	Plus Plan	Premium Plan
5 - 9 (full cost)	\$0	\$340	\$465	\$540
10	\$170	\$170	\$295	\$370
11	\$187	\$153	\$278	\$353
12	\$204	\$136	\$261	\$336
13	\$221	\$119	\$244	\$319
14	\$238	\$102	\$227	\$302
15	\$255	\$85	\$210	\$285
16	\$272	\$68	\$193	\$268
17	\$289	\$51	\$176	\$251
18	\$306	\$34	\$159	\$234
19	\$323	\$17	\$142	\$217
20 or more	\$340	\$0	\$125	\$200

Please note: Check with the diocese you are retiring from or from which you retired to determine your actual costs for each plan before making your selection.

² To qualify for CPF's Medicare Supplement subsidy, a spouse must be enrolled in Medicare Parts A and B and be married to an eligible cleric on the day the cleric retires or dies and during a period in which the cleric earned at least three years of Credited Service under the Clergy Pension Plan.

³ The Church Pension Fund plans to continue to provide the Medicare Supplement subsidy. However, given the rising cost of medical care coupled with the uncertainty regarding the structure of Medicare in the future, this should not be viewed as a guarantee of the Medicare Supplement subsidy in perpetuity.

Rates for each plan and the amount of the Medicare Supplement subsidy are communicated to each participant during the annual open enrollment period.

To select a Medicare Supplement Health Plan without prescription drug coverage, you must submit proof of your enrollment in a Medicare Part D plan other than Express Scripts Medicare.

If you are eligible for a Medicare Supplement subsidy and you select a Medicare Supplement Health Plan that costs less than the amount of the Medicare Supplement subsidy you receive (if, for example, you choose a plan without prescription drug coverage because you already have other Medicare Part D coverage), you may apply the remaining subsidy amount toward a Medical Trust dental plan *if it is enough to cover the full cost of that dental plan*.

Value-added benefits

Our Medicare Supplement Health Plans include these benefits at no additional cost to you:

- Vision: Provided through EyeMed Vision Care, this benefit covers an annual innetwork eye exam with a \$0 copay and cost savings on prescription glasses or contact lenses.⁴
- Hearing Aids: Provided through Amplifon Hearing Health Care, the benefit
 maximums for hearing aids vary per plan. The Comprehensive and Plus plans
 provide \$1,000 per ear, every five years, and the Premium Plan provides \$2,000 per
 ear, every five years.
- Employee Assistance Program (EAP): Managed by Cigna Behavioral Health, the EAP assists you and your household members with resources, referrals, and ongoing support, including up to 10 in-person counseling sessions with a licensed clinician with a \$0 copay, and legal and financial consultations.
- Healthways SilverSneakers[®]: This benefit is a fitness program consisting of workouts and fitness instruction at more than 12,000 leading fitness locations nationwide, as well as classes at parks and recreational centers.
- **Health Advocate:** This service helps you navigate and resolve medical and administrative issues within the healthcare system. Eligible members, their spouses, dependent children, parents, and parents-in-law are covered by this service.
- UnitedHealthcare Global Assistance: This service helps you obtain emergency medical, travel, and personal security assistance 24/7 when you are working or traveling 100 or more miles away from home or outside your home country.

Dental benefits

Dental benefits are not included in the Medicare Supplement Health Plans and must be purchased separately. Eligible retirees and their eligible dependents may choose from three dental plans: Preventive, Basic, and Dental & Orthodontia. All three plans cover three in-network cleanings and related exams per year at no cost to you. The 2017 per member/per month costs for the dental plans are: Preventive, \$45; Basic, \$69; and Dental & Orthodontia, \$85.

⁴ Additional charges may apply for contact lens fit and follow-up.

More information

For more information about these benefits, log on to **www.cpg.org**, select Retired Clergy, click the Insurance tab, and then select the HEALTH link. The Medicare Supplement and Dental handbooks can be accessed directly at **www.cpg.org/mtdocs**. You may also call UnitedHealthcare at (800) 708-3052 before enrolling in a Medicare Supplement Health Plan to clarify coverage for specific conditions and procedures or to verify a provider's Medicare affiliation.

To enroll, contact us

You must be enrolled in Medicare Parts A and B to participate in our Medicare Supplement Health Plans. It is important that you contact us three months in advance of the later of your retirement date and 65th birthday — and no later than the first day of the month prior to the later of your retirement date and 65th birthday — to ensure your enrollment is processed in advance of your benefits effective date.

For more information, or to enroll in one of our Medicare Supplement Health Plans, please contact our Client Services team at (800) 480-9967, Monday – Friday, 8:30AM – 8:00PM ET (excluding holidays).

This fact sheet contains only a partial description of the Medical Trust Plans (Plans) and is intended for informational purposes only. It should not be viewed as a contract, an offer of coverage, or investment, tax, medical, or other advice. In the event of a conflict between this fact sheet and the official Plan documents (summary of benefits and coverage, Plan Guide), the official Plan documents will govern. The Church Pension Fund and its affiliates retain the right to amend, terminate, or modify the terms of any benefit plans described in this document at any time, for any reason, and, unless required by law, without notice.

The Plans are church plans within the meaning of Section 3(33) of the Employee Retirement Income Security Act and Section 414(e) of the Internal Revenue Code. Not all Plans are available in all areas of the United States, and not all Plans are available on both a self-funded and fully insured basis. The Plans do not cover all healthcare expenses, and members should read the official Plan documents carefully to determine which benefits are covered, as well as any applicable exclusions, limitations, and procedures.