



The Corinthian Plan
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2026 Renewal Cover Letter – The Corinthian Plan

Dear Congregational/Conference Representative and Corinthian Plan Participant,

Grace and peace to each of you. I hope this letter finds you well.

As with each year this letter will give updates and changes to The Corinthian Plan (TCP) benefits. *For those of you receiving this letter please pass on a copy of this letter to all participating staff. There are significant changes for congregational and conference staff will need to know. Please review the necessary information promptly so you can make necessary choices and contact us with questions.*

In 2007 the MC USA delegates passed a resolution mandating the MC USA Executive Board to establish health coverage for pastors and staff of congregations and conference staff. The TCP (CEP) health coverage and other benefits came online in 2010. The goal of TCP is to provide the best coverage at the best cost, mitigating increases and keeping benefits as strong as possible. Staff and Church Benefits Board continue with these goals.

As you no doubt know, the health coverage world is under a lot of pressure from a number of different quarters. Premium increases across the industry are larger than usual from the ACA to private coverage. The Corinthian Plan is also facing these pressures of increased medical costs, higher claims in the past couple of years, and changing governmental priorities supporting the medical industry. We recognize these changes, and high premium increases will be a challenge for your congregation or conference office. The [blog](#) I wrote in August gives an outline of these pressures.

I will keep most comments in this year's letter succinct, though there is a lot to report. A two-page addendum will follow this letter that gives specifics on the significant changes to the structure of the Plan.

As each year the instruction pages give helpful outline and information to sift through the packet more efficiently. Some documents you will only find online. These documents will be noted by the following wording in the right-hand column: "(available on The Corinthian Plan webpage)."

Please return your renewal form by **November 21, 2025. This year be sure to choose the deductible level as there are changes to the levels. Also, let us know if the contact person in your congregation/conference has changed. As always contact information for me, your Area Advocate or Everence staff are listed in the packet.**

I. Health Coverage Premiums and Plan changes – 2026

(Note: For specific description of changes see the two-page addendum to this cover letter.)

A. Deductible Level Option Changes (Please review and choose your deductible level)

The Corinthian Plan is reducing the deductible levels from four to two options. A majority of TCP participants are on the \$3,000 Single/\$6,000 Family deductible. This deductible will remain the same as a non-embedded (aggregate) deductible. The other three deductibles will

no longer be offered. The second deductible being offered is a \$5,000 Single/ \$10,000 Family embedded deductible. Congregations will need to choose one of the two deductibles offered. **If a group does not choose a deductible level, nor cancel coverage, they will be placed in the \$3,000 Single/ \$6,000 Family deductible. Please see addendum for a description of deductible changes and how the embedded plan works differently than the non-embedded deductible.**

- B. Coinsurance.** After the deductible is met, the Plan will begin to pay at a 90/10 ratio for the next \$10,000 of covered medical expenses for Single coverage and the next \$20,000 for Family coverage. This is a change from previous years where after the deductible is met the Plan would pay all covered medical expenses. **Please see addendum following this letter for more specific information.**
- C. Premium increases.** When setting premiums the goal of The Corinthian Plan is to project a gain of zero and loss of zero. The Corinthian Plan projects claims, and medical expenses based on trends and claims experience. This year will not feel that way, but the same process was in place. The addendum and my blog give a further explanation of this. Below is the same informational format that I give each year.
 - The base rate is the projected premium increase *before* demographics (age of staff, location, gender) for each of your congregational/conference staff. For 2026 the **base rate** increase is **19.9%**. *You will still experience further change to your premium due to staff being a year older, gender, and location. Also, adding to or reducing staff, as well as whether the added or leaving staff are older or younger, affect premium costs. Please be in touch with any questions.*

Dental and Vision Premiums – 2026

A. Dental Plan (Optional)

The TCP self-funded Dental Plan *will remain the same again this year. Benefits will remain the same (\$1,300 Single/ \$2,100 Family).*

- A. Vision Coverage (Optional).** Rates for the VSP Signature Plan and the Choice Plan rates will remain the same this year.

TCP Health Coverage and Prescription Changes

- A. New Highmark ID Cards and Highmark Phone Number.** Because of changes to the health coverage plan Highmark will be issuing new ID cards for 2026. The new Highmark phone number for 2026 is 800-226-2239.
- B. Coverage of GLP-1 medication for weight loss** will be different for 2026. If you are currently on a GLP-1 medication expect a notice from Express Scripts in the mail regarding this coverage 60 days before January 1st, 2026 renewal. TCP continues to contract with Express Scripts as the Pharmacy Benefits Manager.
- C. Highmark BCBS Well360 Connect.** TCP has chosen not to continue participating in Well360 Connect. In last year's letter it was noted that these services are designed to support participants in navigating the health care system and support for conditions such as Diabetes or following a surgery. Let us know if you experience disruption because of this change.

Life and Accidental Death and Dismemberment Coverage Increase

- A. TCP has increased** the amount insured for the Life and Accidental Death and Dismemberment to \$100,000. This will mean a small increase in the cost of these fees.

Wellness Incentives

- A. The Wellness Incentive** year ends February 28th, 2026. Beginning March 2026 only those on health coverage or with waived coverage will be eligible for the Wellness Incentive. Spouses without health coverage will no longer be eligible. The Incentive for a Wellness/Annual exam

will remain one option. A second Incentive option will continue to be a conversation with one of our Wellbeing Specialists or taking a retreat (6 hour minimum). The Personal Wellbeing Plan and Conference Accountability Plans will no longer be eligible for the Incentive.

The Corinthian Plan Fair Balance Fund

- **The Fair Balance Fund subsidies** are direct mutual aid funded by each participating congregation. The Fair Balance Fund currently supports fifteen congregations that each receive a subsidy to help pay their health coverage premium. Currently, almost \$11,000 a month goes out to support these congregations. Given the sizable premium increase TCP will seek to accommodate as many congregations as possible with a subsidy. If your congregation struggles to cover monthly premiums, contact TCP Director, Duncan Smith.

Other Notes

- **Preventive Benefits** All those with health coverage will receive the Highmark 2026 Preventive Benefits Schedule with the updated health summary plan description. This lists the benefits, such as an annual exam that the health plan covers without further cost toward health care participants' deductible
- **Remember to please inform myself or Denise Henke at Everence of any staff changes as soon as you know them.** This way, we can offer help to both congregation and staff on your options at the time of transition. Staff lose their eligibility for The Corinthian Plan at the end of the month of their last day of active employment.
- **Congregations Cultivating Pastor Wellbeing.** This checklist helps congregational leadership reflect on how they are supporting their pastors and staff. Go to the following webpage: <http://mennoniteusa.org/wellbeing-in-ministry/> and click on the link for the checklist.

Renewal Packet

The packet includes all the information about making changes for 2026 and information about benefits. You can also find renewal documents for The Corinthian Plan, as well as other information at <http://mennoniteusa.org/what-we-do/the-corinthian-plan/>.

Let Us Help You

If you have questions about the enclosed material, contact Denise Henke at Everence, your Corinthian Plan Area Advocate (Joe Christophel, Teresa Pickens), the Wellness Coordinator (Ingrid Friesen Moser), or you can be in touch with me, Duncan Smith. Contact information is included in this packet (Attachment #1). We are eager to assist you in any way we can.

We welcome your input as to how The Corinthian Plan is or is not meeting your health coverage needs.

May you know the grace and peace of Christ as individuals, in your congregations, and conferences.



Duncan Smith, Director, The Corinthian Plan, Mennonite Church USA

- TCP Plan Overview document with a summary of TCP benefits and structure can be found at the top of the TCP [webpage](http://mennoniteusa.org). ([The Corinthian Plan | Mennonite Church USA \(mennoniteusa.org\)](http://mennoniteusa.org))

Summary of Major Changes to TCP Congregational Employee Plan for 2026

Health coverage costs are expected to rise more significantly in 2026 due to a combination of national and plan-specific factors. The expiration of ACA premium tax credits and the impact of tariffs have driven medical costs beyond typical annual increases. At the same time, reduced government support is straining the broader healthcare system — smaller hospitals, for example, may raise patient fees to offset funding gaps.

These pressures are contributing to premium increases across the country, affecting ACA plans, private coverage, and The Corinthian Plan (TCP). In addition, TCP has experienced higher-than-usual claims over the past two years. The Church Benefits Board has carefully reviewed several options to address these challenges.

We recognize that these changes may be difficult for congregations. MC USA and Everence (our Third-Party Administrator) are committed to helping you understand and prepare for what is ahead.

More details will be provided in the upcoming renewal packet.

- I. **Larger Premium Increase** than usual → Base Rate Increase is 19.9%. (Age, Location, and Gender demographics added after base rate.)

- II. **Reducing Deductible Level Options from 4 to 2.**
 - A. **Current deductible levels** – \$1,650 Single/\$3,300 Family; \$2,000 S/\$4,000 F; \$3,000 S/\$6,000 F; \$4,000 S/\$8,000 F

 - B. **New levels**
 1. \$3,000 Single/\$6,000 Family Non-Embedded Plan
 2. \$5,000 Single/\$10,000 Family Embedded Plan.

See page two for explanations of deductibles and definitions of embedded and non-Embedded.

- III. (CEP/TCP \$3,000 Single/ \$6,000 Family is similar to Gold on the ACA and the \$5,000S/\$10,000F is similar to Silver on the ACA)

- IV. **New Coinsurance** Additional out-of- Pocket will be paid on the next \$10,000 of medical expenses for Single coverage and \$20,000 of Family Coverage. The Plan will pay 90%, the Participant 10%. After an additional \$1,000 for Single and \$2,000 for Family coverage, the out of pocket is reached and the Plan pays all medical expenses. (This is a change from past years when there were no additional expenses after the deductible was reached.)

- V. **Wellness Incentives** Current Incentives remain in place through February of 2026. Beginning March of 2026 only those on health or waving health coverage will be eligible. (Those eligible can earn \$300, two Incentives \$150.)

Description of Deductible choices for TCP Congregational Employee Plan (CEP)

Congregations may choose from the following deductible options:

- A. **\$3,000 Individual (self-only) Ded. (non-embedded) ***
ninety%/10% of \$10,000 Coinsurance
\$4,000 Out of Pocket Limit (includes Ded & Coins)
- B. **\$6,000 Family Deductible (non-embedded) ***
90%/10% Coinsurance of \$20,000 Coinsurance
\$8,000 Out of Pocket Limit (includes Ded & Coins)
- C. **\$5,000 Individual Deductible (embedded)****
90%/10% of \$10,000 Coinsurance
\$6,000 Out of Pocket Limit (includes Ded & Coins)
- D. **\$10,000 Family Deductible (embedded)***
90%/10% of \$20,000 Coinsurance
\$12,000 Out of Pocket Limit (includes Ded & Coins)

*Non-Embedded Deductible: If you are enrolled in a "Family plan", with your non-embedded deductible, the entire family deductible must be satisfied before claims reimbursement begins.

*Non-Embedded Out-of-Pocket and Total Maximum Out-of-Pocket Limit: With your non-embedded out-of-pocket limit, the entire family's out-of-pocket limit must be satisfied before additional claims reimbursement begins. (This includes the Plan paying 90% and the participant 10% until an out of pocket is met.)

**Embedded Deductible: If you are enrolled in a "Family plan", with your embedded deductible, once an individual's deductible is satisfied, claim reimbursement for covered services will begin for that member. Once the family deductible is satisfied collectively by covered family members, claim reimbursement will begin for all covered family members.

**Embedded Out-of-Pocket and Total Maximum Out-of-Pocket Limit: With your embedded out-of-pocket limit, once an individual's out-of-pocket is satisfied, claim reimbursement for covered services will increase to 100% that member. Once the family's out-of-pocket is satisfied collectively by covered family members, then 100% claim reimbursement for covered services will begin for all covered family members.