

retiree

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Edward W. Hysyk
President

wrapup

Since the last issue of the PEP Talk where I discussed the new NYC Medicare Advantage Plus Plan for Medicare-eligible retirees, the Retirees Association conducted three Zoom meetings to discuss the new plan and one to discuss the opt-out process whereby one chooses to remain in their current medical plan. These meetings attracted more than 1,700 retirees. Also, the last issue of the newsletter contained three charts that compared Senior Care 2021 with Senior Care as of Jan. 1, 2022, against the NYC Medicare Advantage Plus Plan.

If you need to refer to this or any past articles, you can go directly to our website at www.dc37retireesassociation.org and obtain the latest verifiable information that we have on the new plan and its proposed implementation. You can also sign up for our email blast at the same website.

As a result of a lawsuit filed by a group of retirees and supported by your Association, a judge has issued a temporary restraining order that froze the Oct. 31, 2021, opt-out deadline. As of Nov. 10, no new date had been set by the judge who wanted to see a new roll-out plan for this program. He ruled that the old roll-out plan was insufficient, irrational, not timely, and was done on a rush-rush basis. The judge asked that the City Office of Labor Relations (OLR) and the Municipal Labor Committee (MLC) submit a new plan to the plaintiffs in the lawsuit and to him. It would be a grave mistake to assume that this new medical plan is “going away”.

So does this mean that the new plan will not go into effect on Jan. 1, 2022, as scheduled? We simply do not know the answer to that important question. At this time, it appears that it would be doubtful, however, that the program will start as planned on Jan. 1, 2022.

If you still want to submit an opt-out form, I would suggest you do so. Forms are available online at www.nyc.gov/olr; please make sure you use the correct form. One form is for those who want to remain in their current GHI Senior Care and the other is for those who want to remain in other plans, such as HIP-VIP, DC 37 Med Team, etc.

If you submitted an opt-out form and wish to cancel that form, you can do that by calling 1.833.325.1190. Just tell customer assistance that you want to rescind the form you submitted. By doing that, you agree to go into the new Medicare Advantage Plus Plan whenever it begins.

During our Zoom meetings, many retirees had similar questions about the new plan and the implementation process. In an effort to address these concerns, we are publishing the most frequently asked questions and answers that we know as of Nov. 10. As I said at the beginning of this article, things are in flux and the best way to obtain the latest and most accurate information is by visiting our website and signing up to be on our email blast list. Please visit the OLR website at www.nyc.gov/olr and click on the “Health” button and then on the “Retiree” button.

By the way, even if the new medical program is delayed, copays are scheduled to begin for GHI Senior Care on Jan. 1, 2022. There is no reason why this will not be implemented as scheduled.

On Oct. 15, OLR paid the IRMAA part of the Medicare Part B reimbursement to retirees who filed their paperwork/forms electronically via leapfile. This IRMAA reimbursement was for the calendar year 2020. If you filed your

paperwork/forms via snail mail, I am not aware of any payments being processed by OLR.

I wish to take the time to wish all of our members peace and good health in the New Year 2022. Happy Thanksgiving, Happy Hanukkah, Merry Christmas, Happy Kwanza, and a Happy New Year!

ANSWERS TO FREQUENTLY ASKED QUESTIONS ABOUT THE NEW YORK CITY MEDICARE ADVANTAGE PLUS PLAN

- If you want the NYC Medicare Advantage Plus Plan, you don't have to do anything. You don't have to process any applications or forms. You will be automatically enrolled in the plan.
- Once a year after Jan. 1, 2022, during the fall change period, you will be able to change your plan back to GHI Senior Care at a monthly premium cost of approximately \$194.40 per person per month, or \$388.80 per family per month for the year 2022. After 2022 that is questionable.
- Currently (before 12/31/21) you can use your once-in-a-lifetime change to enroll in any of the 12 sponsored NYC OLR health plans. NOTE: Some plans have geographical restrictions.
- After Jan. 1, 2022, your unused once-in-a-lifetime change will still be valid.
- Both you and your Medicare eligible spouse/domestic partner must be in the same plan.
- If your spouse is not Medicare eligible, they will remain in the same plan they were enrolled in before 12/31/2021. When they reach Medicare age, they will be automatically transferred into the new plan.
- If you do not turn 65 before 12/31/2022, you will have a choice between the new plan or the GHI Senior Care plan at the referenced premium. You will have no other choice if you wish to remain in a City-sponsored health plan.
- Whatever plan you choose, your DC 37 prescription drug plan, dental plan, and optical plan will remain the same. They will be **premium free**.
- In order to receive Medicare Part B reimbursement, you must stay in a NYC OLR sponsored health plan. The new Medicare Advantage Plus Plan qualifies for Medicare Part B reimbursement.
- The new plan is accepted in all 50 states and in the territories and possessions of the United States.
- The new plan also covers medical emergencies overseas. Medicare does not. However, this is not a substitute for travel insurance.
- Under the Affordable Care Act (ACA) any treatment/therapies you undergo in 2021 can be continued in 2022 under the new plan.

I suggest you look carefully at the comparison between the future GHI Senior Plan (after 01/01/22) and the NYC Medicare Advantage Plus Plan before you decide to opt out and pay the monthly premium.

If you are not sure whether your medical providers will accept the new plan, you can call Customer Service at 1.833.325.1090 Monday-Friday from 8 a.m. to 9 p.m. Please avoid the hours between 10 a.m. and 3 p.m. when they experience heavy call traffic. However, if your current doctors accept Medicare, they should accept this plan because already about 75% of all providers who accept Medicare are enrolled in this network.