AlaskaCare Retiree Town Hall

Event Summary

Date Thursday, May 16th, 2019 | 10:00 to 11:00 a.m.
Recording https://vekeo.com/event/alaskacare-45500/

Attendance Attendees were encouraged to register in advance to ensure their phone number would be called. All retirees who registered online for the event or whose phone number was on file with DRB were included on the auto-dial call list. Approximately 580 attendees participated in the call.

Presenters

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<tr>
<th>State of Alaska, Department of Administration Staff + Contractor</th>
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<tbody>
<tr>
<td>Emily Ricci Chief Health Policy Administrator, Division of Retirement and Benefits</td>
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<td>Steve Ramos Vendor Manager, Division of Retirement and Benefits</td>
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<td>Andrea Mueca Health Operations Manager, Division of Retirement and Benefits</td>
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Introduction

Emily Ricci provided a brief overview of the Town Hall format, encouraged participants to submit questions on the phone during the event or via e-mail, and reminded participants that sharing personal health information or questions about individual claims cannot be addressed publicly in this forum. Participants can submit questions before or during the event at: drbtownhall@alaska.gov. In today’s town hall event, we will answer any questions you have about your health plan.

Updates from the Division:

Retiree Health Plan Advisory Board (RHPAB)

As you may know, we here at the Division are working with the Retiree Health Plan Advisory Board to analyze and consider options for modernizing the retiree health plan. If you have ideas for changes to the plan, the board wants to hear from you! You can send your comments and suggestions to AlaskaRHPAB@alaska.gov. You can also share your ideas or suggestions on this call. The next Retiree Health Plan Advisory Board meeting will be in August. We encourage retirees to attend or listen in to any and all of the meetings.

OptumRx Call Center- Agent Verification

During our last townhall, we received a question asking how to verify if a call that comes from OptumRx is legitimate, and not a scam. If you receive a phone call from someone claiming to be an OptumRx member services representative, you can ask them to verify themselves. The person on the phone will provide you with the AlaskaCare Toll Free phone number (you can check this number against the number on the back of your card), and they can also provide you with their unique Member Services ID number. If you still do not feel comfortable speaking with the agent, the OptumRx agent will make a note in your file and suggest that you hang up the line and call in to the AlaskaCare Toll Free number so that you can feel confident in who you are speaking with. If you are concerned the call is fraudulent, please hang up and call the OptumRx AlaskaCare Toll Free number: 855-409-6999.
The next Tele Town Hall will be **Thursday, June 20th, 2019 at 10:00 a.m.** Please register online [http://doa.alaska.gov/drb/headlines/2018/08/eqwp-tele-town-hall/](http://doa.alaska.gov/drb/headlines/2018/08/eqwp-tele-town-hall/)

**Summary of Questions and Answers**

The following questions were answered during the call. Presenters answered as many questions as possible during the hour, and chose questions that were representative of the topics being asked most often, from a variety of participants from across Alaska and other locations in the U.S.

1. **Question: What might trigger a lifetime maximum not being replenished at the end of a calendar year?**

   It depends on your circumstances. You can send us an email at drbtownhall@alaska.gov to assist with your specific case. The maximum lifetime benefit for each person for all covered medical expenses is $2,000,000. At the end of each benefit year, up to $5,000 of medical benefits used is automatically restored regardless of your physical condition. If you have received more than $5,000 of covered medical benefits, your full annual spent maximum may be restored when you submit proof of good health satisfactory to the claim administrator within the following year. You can call the Aetna Concierge for assistance at 1-855-784-8646.

2. **Question: IRRMA – My available funds to not seem to match what the balance should be. I called PayFlex, but they did not resolve my question.**

   Please send an email to drbtownhall@alaska.gov and we can look into your specific account.

   Certain high-income retirees who are Medicare eligible and enrolled in the AlaskaCare enhanced Employer Group Waiver Program (EGWP) pharmacy plan are required to pay a premium surcharge associated with Medicare Part D plans, known as an Income Related Monthly Adjustment Amount, or IRMAA. This is required by Medicare and is the same type of surcharge that high-income enrollees already pay for a Medicare Part B plan. If you are an individual earning more than $85,000 per year or a married couple who earns more than $170,000 per year, you will be required to pay the IRMAA; retirees enrolled in EGWP and whose household income is below this threshold will not be subject to the IRMAA premium surcharge.

   If you are required to pay the IRMAA premium surcharge, the Division will reimburse you for the amount you are charged each month through a tax-advantaged health reimbursement arrangement (HRA) account, so the EGWP plan has no additional cost to you. Each November, Medicare eligible individuals receive a letter from Social Security that outlines your Medicare premiums. Please submit the most recent letter you’ve received from Social Security that states you are subject to IRMAA surcharge for 2019, and at what amount, to the Division. Once the Division receives a copy of your annual letter sent from Social Security, we will establish an HRA for you through PayFlex, Aetna’s subsidiary that administers the HRA on behalf of AlaskaCare. PayFlex will send you a letter that outlines how to access your HRA account information and how to set up claims for reimbursement. We encourage you to set up reimbursement on an automatic reoccurring basis, but you may elect to request reimbursement manually. Reimbursement can be made by check or through electronic funds transfer.
We are finding that retirees are sending in the SSN letter, but not completing the forms in the enrollment package. Please remember to complete the enrollment forms and return them.

3. **Question:** Please explain what the IRMAA acronym stands for.

   IRMAA is Income Related Monthly Adjustment Account.

4. **Question:** My wife would like to have dental care in Mexico. Would care be covered and do we need preapproval?

   The care may be covered. Try to get the CPT codes that will be used for the services and submit them to MODA-Delta Dental, and they will give you a benefit determination of what will be covered.

5. **Question:** I am a widow, and soon to be married again. What is the process to enroll my new wife?

   You have 120 days to provide a retiree health dependent change form, which allows you to add the dependent after the date of marriage. You can choose to add the dental, vision and audio, as well as the long-term care (LTC). If you are Tier I or Tier II, she will need to be added to be covered. Changes take place the first day of the month, following the receipt of your health dependent change form.

6. **Question:** I’m concerned with OptumRx where if I call and ask a question and get an answer and call again and get a different answer. Answers are not consistent. Sometimes the answers could cause problems for people. For example, I asked about refilling a Rx in Mexico.

   We would like to follow up on the example you provided. Please send an email to drbtownhall@alaska.gov. We are about five months into the new transition, and many of the initial issues have been worked out, but there are still issues. Our team visited the call center in Oregon and sat down with the call representatives and worked with them on the call answers, provided cultural training and reviewed response time.

7. **Question:** I am concerned about benefits and restrictions. It seems there are a number of changes being made, but we don’t know what they might be. Is there a list of the changes to the benefits in the last couple of years?

   The changes that we are considering with RHPAB have not taken effect, we are in the preliminary evaluation step. We will engage in member communication and feedback in the fall, before any changes take effect. Regarding changes in the past, such as EGWP and OptumRx, they are included in the plan booklet and a draft is put forward for members to review. We can send you a printed copy of the booklets so you can see these changes. You can also send us an email with your contact information, and we can talk to you, or your group of friends directly. 800-821-2251

8. **Question:** When you enroll for Medicare, is the DVA paid the same, and provided by the same company?

   When you turn 65 there is no change to your DVA benefits.
9. **Question:** IRMAA has been a nightmare and still not resolved. I believe the department failed to vet this particular outfit. They are difficult to get in touch with. I am concerned about having to go through this process again in a few months.

We apologize for the issues you are experiencing. We share the frustration with PayFlex. They are making some changes that will take effect June 1. They are putting a dedicated team in place for AlaskaCare members. We are hopeful that will help, and we are working with them regularly. We will rebid for another vendor if the concerns are not addressed. We would also like to streamline the process so that it is easier for retirees.

10. **Question:** What is the need for Veterans and SOA retirees, what is the need for them to stay with SSN at all, since they don’t need it.

If you are Medicare eligible and retired, the plan will pay assuming Medicare is primary. This is by state statute. Tricare is the payer of last resort. Medicare would be primary, AlaskaCare secondary and Tricare tertiary.

11. **Question:** I worked with OptumRx to switch over from my local pharmacy to mail order took me 7 weeks. I would hear different answers when I called, and issues were slow to get resolved. How can we make sure they are following through?

If you are not receiving the service you expect from one of our vendors, please contact the division and let us know. Our staff can work with you on your specific issue, to assist you, and to work with the vendor to improve overall service.

12. **Question:** Can you repeat the lifetime medical benefit restoration?

The lifetime maximum is 2 million dollars. What we are finding is that maximum can be impacted by the growing cost of health care in the US. One of the proposals we have in front of the board is removal of that lifetime maximum. Aetna will automatically add 5k back to defined benefit member accounts at the beginning of each year.

13. **Question:** I have had excellent service from OptumRx. They have reached out and called and emailed me, and I’ve had superb conversations with them.

Thank you, we really appreciate the feedback.

14. **Question:** I haven’t received my IRMAA welcome packet. Can it be found online?

It is not posted online yet but will be posted this week. Please send an email to drbtownhall@alaska.gov and we can provide you with a copy of the form.

15. **Question:** Medical Necessity form sent to Medicare for DME, once they approve it, do they automatically notify Aetna for copay processing, or does the doctor or supplier need to send in a form?

Please send this question via email to us and we will research the answer and get back to you.
16. **Question:** My Optum card says Medicare on it. When I take it to a pharmacy not in Alaska, they automatically think I am in Medicare for prescription. The problem is they immediately look at Medicare for coverage of the drug, not AlaskaCare.

You are covered under Medicare and with an AlaskaCare wrap. If a drug is not covered under Medicare, they should look for coverage under the AlaskaCare plan.

17. **Question:** Is it true you should enroll in Medicare part A and B, whether or not you plan to use it.

You should enroll in both A and B when you are eligible, because the AlaskaCare plan will assume Medicare is primary.

18. **Question:** Are colonoscopies covered or not?

It depends. Colonoscopy when they are a preventive service are not covered under the retiree plan, because the plan provisions are older and were put in place 15 years ago, when preventive care was not a focus. We are working with the RHPAB board to possibly make preventive care changes.

Colonoscopy is covered when done as a diagnostic service.

19. **Question:** Telemedicine. My wife has Parkinson’s, and we don’t have a lot of qualified people where we live. How can we receive care over the phone to consult what care may be needed?

We have provided a program called Teledoc to the AlaskaCare employee plan. We are evaluating adding it to the retiree plan through the modernization project. We are also exploring a program where a retiree member would be able to speak with a specialist on a routine basis using telemedicine, and expanding the travel benefit, both are still under consideration.

I would recommend you call the Aetna Concierge and ask them to assist you with options.

20. **Question:** Is Shingrix covered?

Yes, this is one of the changes that was made to the plan beginning January 1, 2019. The shingles vaccine is covered when received at the pharmacy.

21. **Question:** Coordination of Benefits. My husband and I are both covered. The pharmacy we go to does the coordination automatically, is that true of all pharmacies. Also, are hospital administered drugs covered under the pharmacy or medical plan.

If you are an inpatient and receive a medication, it would be covered through the medical plan.

22. **Question:** When I pass away my husband loses his coverage, correct?

It depends on which retirement benefits you have. Please contact the division to get clarification on your specific situation. There are cobra and survivor benefits that he might quality for.

Poll Question: Would you prefer to register for each event you want to attend, or register once and receive a call each month automatically?

17 % – register each time
83 % – register once