

Retiree Health Plan Advisory Board (RHPAB) Public Comments for calendar year 2021

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RHPAB Public Comment for January 2021

Dear Alaska Retirement & Benefits Town Hall Team,

I am writing regarding a topic I broached mid-summer 2020. And to (hopefully) get a status update. In that Town Hall, I shared a brief backgrounder pertaining to my medical challenges last year and in 2019. I also related the urgent need for those of us with Medicare as primary insurer and Aetna as secondary, to be able to afford (or no-cost) access to gym/fitness center; in my case, to The Alaska Club West – Silver Fitness membership

For me and doubtless thousands of other Alaska retirees, this new year **BEGS** for the overall health and wellness such a gym/fitness center membership would bring, wherever an Alaska retiree may reside.

It categorically and has been proven beneficial: physically, mentally, spiritually and physiologically.

I know I speak for a majority of retirees, when I say, the cost of a gym membership remains fairly prohibitive.

I am passionate about solving the conundrum of why such a blazingly simple fact about enhancing, if not prolonging, the quality of life for so many should be so mired down in bureaucracy

I may be incorrect, but believe Aetna will not "contribute" their share if the primary (for most retirees) Medicare does not cover their share and so the conundrum to both navigate and solve.

I know many retirees will appreciate someone going to bat for them. I humbly request to be part of the solution. I volunteer to pen a letter to whomever you suggest at Medicare and thus Aetna.

I am sure I will be adding to other such letters sent before, extolling the proven need and benefit for the overall toning of mind, body and spirit. Perhaps with enough letters, there may be much needed change towards getting in shape on all levels.

My friends, this is most likely done via participation in a gym/fitness center membership, combined with a healthy lifestyle and nutrition all would bring.

I thank you for your time and consideration. Please feel free to circulate my letter as you deem appropriate. I look forward to your reply.

Respectfully submitted, Lawrence "Larry" Yerich From: Mari

Sent: Wednesday, January 13, 2021 12:08 PM

To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>

Subject: Rolfing

I have used Rolfing for over 10 years to eliminate or dramatically reduce pain in my body. It was very nice when the Kenai Peninsula School District insurance just automatically covered the Rolfing service—I was very disappointed when my retirement benefits did not.

Examples of my results with Rolfing



I highly recommend a Rolfing to friends and family. I find the treatments to be amazing by lessening or eliminating so many problems. It would be of great benefit to have our insurance cover this awesome procedure.

From: Martha H

Subject: Rolfing Document

Date: January 20, 2021 at 4:45:35 PM AKST



Please find my document attached. Let me know if I can clarify or expand on anything. Thank you for allowing me this opportunity to help the State of Alaska retirees in their desire to have insurance reimburse for Rolfing/Laser Therapy.

Mark Hutton 907-252-4621

From: Sandy

Sent: Saturday, January 23, 2021 10:56 AM

To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>

Subject: DVA Plan suggestion

Dear Board Members,

In the 2020 Retiree DVA Plan, the booklet first outlines the comparison of the plan structure; deducible, coinsurance and maximum benefits. For coinsurance, there are 3 classes listed: Class I (preventive), Class II (restorative) and Class III (prosthetic) and both plans have the same percentage covered – 100%, 80%, 50% respectively.

I consulted several dental providers, and also did a bit of research. It is understood in the profession and accepted by practitioners, that each class of service is defined and specific – *in italics*

Class I (preventive) includes cleanings Class II (restorative) refers to fillings Class III (prosthetic) covers crowns

But in the Coverage Details on the next page there is an anomaly: Periodontal Maintenance is covered as a Class I service under the Standard Plan, but as a Class II service under the Legacy Plan. Periodontal Maintenance is a targeted cleaning; it is 'preventive' and does not include a repair or rebuild or 'fix' of any dental condition. There is no justifiable reason to consider Maintenance as 'Restorative' in one plan but not the other. It should rightfully be designated as preventive and covered as a Class I service in both plans.

I request that you include Periodontal Maintenance as a Class I service in all future Retiree DVA Plans. Thank you very much for your time and attention, and for your service on the Board, Sandy Burd

RHPAB Public Comment for February 2021

From: Deborah Greenberg

Sent: Thursday, February 4, 2021 5:36 AM

Subject: Public Comment for 2/4/2021 Advisory Meeting/2-million-dollar limit

Please, transmit the following letter in lieu of Public Comment for 2/4/2021 Advisory Meeting regarding the 2-million-dollar lifetime limit for health care. ~ Thank you.

In regard to the lifetime maximum, insurance is only successful if you have it when you most need it.

RHPAB Public Comment for March 2021 - None

RHPAB Public Comment for April 2021

From: Jan Kirk

Sent: Saturday, April 10, 2021 9:02 AM

To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>

Subject: Silver Sneakers Exercise Program

I live in a small town in south central Missouri. We have no gym options except the small YMCA. They DO have a Silver Sneakers Exercise Program but none of the ones that are currently covered by our retirement benefits. I would just like to have my opinion considered that it would be a great advantage for us small town folk to have Silver Sneakers covered under our benefits.

Any chance that might happen in the near future?

Janis A Kirk

RHPAB Public Comment for May 2021

From: Ivan Widom

Sent: Friday, May 7, 2021 3:20 PM

To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>

Subject: State of Alaska harassment of retirees

When will the State of Alaska quit trying to change retiree benefits?

Ever since I can remember, the State of Alaska has been trying to limit & reduce retiree benefits.

This causes bad relationships between the retirees & the State.

It also costs the members to come up with funds to fight the State in court.

Thanks, Ivan Widom

RHPAB Public Comment for June 2021

From: Therese Lewandowski

Sent: Tuesday, June 15, 2021 7:30 AM

To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>

Subject: Modernization Provisions

Hello RHPAB Advisory Board Members,

I recently had a "wellness exam."

At the time I didn't stop to think this wouldn't be covered under a preventive care provision. Even if it had a copay I thought it was worth it.

My doctor informed me that unless we submitted a pap smear we couldn't get the visit covered. Well that's ridiculous for an older woman.

I wrote to my local representative and she explained preventive care as a wellness exam is not covered but mammogram, prostrate and paps are covered so the wellness visit was billed accordingly.

I am writing to encourage you all to strongly advise the state to include an annual "wellness exam" under covered costs. At least copay.

I appreciate the Alaska Care health insurance I've had these past 4 years.

This crazy insurance cost

system. The ACA would've covered it too but the premiums at the time were pretty high for me.

Please add wellness exams to the Alaska Care health insurance list. Prevention, we know, works.

Respectfully,

Therese Lewandowski

Retired admin. assistant, Kachemak Bay Campus/KPC/UAA

From: Dorne Hawxhurst

Sent: Tuesday, June 8, 2021 10:33 AM

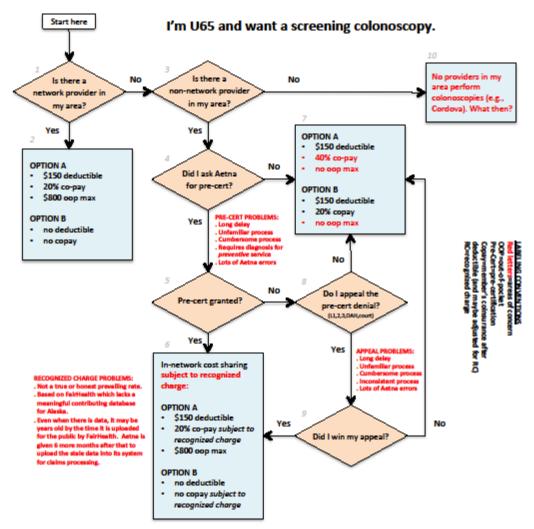
To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>

Subject: Comments on the Preventive Coverage Proposal [Hawxhurst]

To the RHPAB:

Please see my personal comments about the expanded preventive coverage proposal in red lettering on the attached diagram. I used colonoscopies as an illustrative example.

Thank you for your hard work, Dorne Hawxhurst AlaskaCare Retiree



QUESTIONS AND CONCERNS:

- a) Why should U65 members have to pay for services that are free for O65 members?
- b) Will colonoscopy benefits include facility and hidden providers too (e.g., surgery center, anesthesiologist, pathologist)?
- c) What benefits if a screening colonoscopy turns into a diagnostic colonoscopy?
- d) How will I know where and how to find the "recognized charge" (RC)? Also, RC for what geo-zip? Also, will the RC be based on "derived" data?
- e) If the only provider in my area is non-network, may I instead get a travel benefit to see a network provider elsewhere? If yes, may I bypass travel pre-certification?
- f) What if there are no providers in my area who perform colonoscopies and I have no choice but to travel to see a provider? Would that travel and service be covered and, if yes, would it be subject pre-certification?
- g) If pre-cert is not requested, do I lose coverage entirely? For an example showing how complicated pre-cert can be for active employees, see the Alaska Court System's website under "healthcare advocate" forms.
- h) Why require pre-cert at all for preventive coverage?

DRB "expanded preventive coverage proposal" for U65 retires who wants a screening colonoscopy | 6-8-21 | Hawxhurst Comments to RHPAB | P. 1 of 1

From: Patricia Olsen

Sent: Friday, June 4, 2021 3:39 PM

To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>

Subject: Retiree Health Plan

I read with interest the Spring 2021 NEA-Alaska/Retired newsletter. First, thank you all for working on the Advisory Board. This is an extremely important issue for me as well as many of our retired members. If I understand, you are looking for suggestions for possible changes. I look forward to reviewing the Medicare Advantage Program, if that's what you choose to present.

A coverage I would like to see included is acupuncture. I believe now it is only covered when used in lieu of anesthetic for surgery. A member mentioned to me that she thought acupuncture was also covered for chronic back pain lasting for more than 12 weeks, but I am not certain. I think acupuncture is a good alternative management strategy that can reduce medication use and cost, provide education in another way to patients about self management for conditions and prevention strategies from another source, and promote wellbeing. If at all possible, I would appreciate a look at this for our plan.

Sincerely,	

Thank you.

Patricia Olsen

RHPAB Public Comment for July 2021 – None

RHPAB Public Comment for August 2021 - None