DRAFT – For Consideration

Proposal Title	**Reintroduce Teladoc (R034)**
Health Plan Affected	Retiree Health Plan
Proposed Effective Date	January 1, 2026
Reviewed By	RHPAB Modernization Committee; RHPAB
Review Date	June 13, 2025; July 21, 2025

1) Background

The Division of Retirement and Benefits (Division) is considering providing access to additional telemedicine provider options by offering Teladoc services for acute care, dermatology, and behavioral health through Aetna, the medical plan's current claims administrator. Teladoc services have been offered to AlaskaCare Employee Health Plan members since September 1, 2018, and were temporarily available to AlaskaCare Retiree Health Plan (Plan) members during the COVID pandemic. Teladoc was discontinued for Plan members due to minimal use. However, in recent years, retirees aged 65 and over residing in Alaska have reported increased difficulty in accessing timely care from providers who accept Medicare. By reintroducing Teladoc as a provider option, the Division seeks to assist retirees currently experiencing difficulty in finding a provider by expanding access to timely and affordable virtual care.

2) Objectives

Increase virtual provider options for members to access timely and affordable care, as Teladoc provides access to board-certified, state-licensed doctors for treatment of non-emergent conditions 24/7/365. It's anticipated the increased virtual provider option would be particularly helpful for members who experience difficulty in timely accessing a provider who accepts Medicare, those in rural locations, or those who have limited mobility.

3) Summary of Proposed Changes and Analysis

The Division proposes reintroducing Teladoc services for acute care, dermatology, and behavioral health with a $25 member copay.

Teladoc Visit	Total	Member Copay	Plan Paid
Acute Care	$58	$25	$33
Dermatology	$85	$25	$60
Psychiatry (initial visit)	$215	$25	$190
Psychiatry (subsequent visits)	$100	$25	$75
Counseling	$90	$25	$65

4) Actuarial and Financial Impacts

Segal, the Division's contracted benefit consultant, indicates the addition would be considered an expansion of provider options and does not impact the current Plan benefits. Segal indicated the anticipated financial impact of this change, based on the most recent retiree medical and pharmacy claims projection of $856,400,000 for 2025 (dated September 2024), and trended forward at 7% to $916,400,000 for 2026, equates to an annual cost increase to the Plan of between 0.01% to 0.02%, or $100,000 - $200,000.