

Retiree Health Plan Advisory Board (RHPAB) Public Comment from September 2019

From: Gerald Lusk [REDACTED]
Sent: Saturday, September 28, 2019 1:10 PM
To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>
Subject: Dental

It makes no sense to switch to the 2014 offering. Stay with 2013.

Gerald Lusk
Retiree

From: WillFiles [REDACTED]
Sent: Saturday, September 28, 2019 2:36 PM
To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>
Subject: Dental plans

To Whom It May Concern,
As a TRS retiree, I am very interested in and affected by our Dental Plan.

It would appear that the Constitutional or Legacy Plan is by far the most desirable plan. Therefore that is my choice. I would not recommend the so called Standard Plan, due to the numerous limitations, and the relatively meaningless enhancements.

Thank you for your consideration of reinstating the Legacy Plan as soon as practicable.

Yours respectfully,
Will Files

[REDACTED]

From: Kathleen Wendt [REDACTED]
Sent: Saturday, September 28, 2019 3:20 PM
To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>
Subject: Why?

I don't understand, if it is "Unconstitutional" why is that the default plan and why is it even an option? Also what is the price difference? Maybe I missed that somewhere and why would we have an increase if the new plan is unconstitutional?

What about the optical? Are there major changes on that as well? Seems they have bounced back and forth as I noticed a big difference in what I paid one year to what I paid in the next two years for basically the same glasses and frames.

Thank you for all you do.
Kathleen Wendt

From: Eric M [REDACTED]
Sent: Monday, September 30, 2019 11:47 AM
To: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>; AlaskaCare Retiree Plan, DOA DRB (DOA sponsored) <doa.drb.alaskacare.retiree.plan@alaska.gov>
Cc: Eric(Desktop) [REDACTED] Lora Reinbold(Senator) <Senator.Lora.Reinbold@akleg.gov>; Kelly Merrick (Ak House) <Representative.Kelly.Merrick@akleg.gov>; Sharon Jackson (AK Rep) <Representative.Sharon.Jackson@akleg.gov>

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Subject: State of AK - 2013 Original Dental Plan vs Illegal 2014 Dental plan

Importance: High

Board Members & Division of Benefits:

Recently the State of AK lost a court case that involved the dental benefits provided to retirees. Essentially the State Change the Dental Benefit Plan in 2014 which decreased the benefits to the Retirees which is why they lost the court case.. They are stating that they will appeal the ruling and in the meantime their approach is not to put the old plan back in place but rather to keep the existing plan with reduced Dental Benefits in place and propose to offer two separate plans as of January 2020... One plan will reflect the old 2013 Dental plan before the change in 2014 and the second plan will be the existing plan.

Their pitch to scare Retirees is that they are going to raise the premium (I assume as high as they can justify) on the plan that was in effect as of 2013. And the premium for the plan that they instituted in 2014 most likely will remain the same so as to try to entice Retirees to stay with the replacement plan that they put in place in 2014. As such it is the old divide and conquer tactic. I find it appalling that State Bureaucrats are allowed to do something so despicable. It is not fair!.. What the Court didn't do though is tell them that they could make **the illegal 2014 plan** the default plan if someone is not able to participate in the very short open enrollment period; they will be stuck with the 2014 Dental Plan with reduced benefits. Essentially they are attempting to circumvent the fact that they illegally implemented the 2014 Plan. **The Default Plan should be the old 2013 Dental Plan** that would make it easy for all Retirees to maintain the benefits that they were used to originally.

As a Retiree – I made the observation that in the comparison of the original 2013 Plan vs the 2014 Plan instituted by the State (see the court documents) – that many of the items that were covered in the 2013 Plan ... that are most applicable as we as retirees become older and need more frequent visits and added care were removed in the 2014 plan. It is obvious that the State is attempting to shift the costs to the retirees with little regard for the impact to us. We need the coverage that is contained within the 2013 Dental Plan given our age and need for additional dental care as we get older in our retirement ... along with living on a fixed income.

I am requesting that you become involved in these challenging circumstances and require the State follow the Court directive to put the old 2013 Dental Plan back in place as the Default Plan... and to drop their appeal of the court case... they are squandering State dollars on legal fees that could be used for other purposes... given the State deficit one would think that they would be a bit more fiscally conscious... The money they are squandering could be used to keep the rates down for the original 2013 Dental Plan.

Thanks for your assistance with this matter..

Respectively,

Eric Marchegiani

From: pstern [REDACTED]
Sent: Monday, September 30, 2019 6:08 PM
To: AlaskaCare Retiree Plan, DOA DRB (DOA sponsored) <doa.drb.alaskacare.retiree.plan@alaska.gov>
Cc: Alaska Retiree Health Plan Advisory Board (DOA sponsored) <alaskarhpab@alaska.gov>
Subject: comments on revised dental plan

The changes DRB has made to the retiree dental plan have resulted in diminished service and discriminatory reimbursement results for me.

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I go to an "out of network" dentist because he has offered my family excellent service and dental work for many years and I trust his judgement for my dental needs. Because he is "out of network" according to Moda, reimbursement for services gets a double discount calculation providing me less financial coverage than if I used an "in-network" dentist. This is discriminatory and results in diminished coverage that I have been paying for since I retired and before Moda began providing coverage.

Moda is trying to "steer" retirees to their network dentists which is trying to take away my choice, again diminished coverage from what I had when I retired.

Moda should not be discounting its "Maximum Plan Allowance" fee for service just because my dentist chooses to be out of network. The posted health plan changes, page 89, say, "The recognized charge is reduced when services are obtained by an out-of-network provider (except periodontists)." This amounts to diminishment and singles me out for discrimination as a class of out-of-network patients.

Page 90, section 8.1.4, outlines the diminished dental coverage payment for those of us using out-of-network dentists. There is no reason this is happening other than to force retirees to use other dentists. The plan has a Maximum Plan Allowance it can use for the basis of reimbursement as well as prevailing rate charges for a geographic area. Using the 80th percentile but then making the rate 75% of that is diminished service coverage.

Page 102, section 9.1.4, outlines the basis for reimbursement calculations. Bullet points 2 and 3 explain how the plan collects cost data for the geographic area and uses it to possibly pay less than a provider's filed charge.

Page 91 says "An out-of-network dentist or dental care provider has the right to bill the difference between the recognized charge and the actual charge. This difference will be the covered person's responsibility." So if I am okay with paying the difference, why does the plan insist on paying 75% of the 80th percentile. This is a double discount/diminishment.

The plan should reimburse at the 80th percentile level, with no further discount, and the EOB explains to the retiree that an out-of-network dentist may bill for the unreimbursed amount.

peter stern
