

Hi everyone! Hope all is well. Here is some important information:

Informational Update Vol 14 #4

1. 2022 Medicare Part B Reimbursement

On or around April 14, 2023, Medicare-eligible retiree members and their Medicare-eligible dependents received the annual Part B standard reimbursement for 2022 of \$2,041.20 (\$170.10 x 12 months). Those who went on Medicare sometime during 2021 will receive a pro-rated amount, although the exact date when this will happen is unknown at this time.

Those members who receive their pension payments electronically should check their bank account for the payment. Those members who receive their pensions by check, should have received the reimbursement the same way.

Unlike IRMAA, the standard reimbursement is automatic and requires no application providing the Office of Labor Relations (OLR) has a copy of your Medicare Parts A & B card. As a courtesy, the CSA Retiree Welfare Fund will send OLR a copy of your card providing you first send the Fund a copy.

2. 2022 IRMAA

Federal law requires Medicare-eligible retirees to pay a surcharge on top of the Part B standard amount and Part D (drugs) premiums if their taxable income surpasses a certain amount. This surcharge is called the Income-Related Monthly Adjustment Amount (IRMAA). Part B IRMAA is reimbursable, but unfortunately, Part D is not.

In order for you to receive the Part B IRMAA reimbursement, you must file a completed NYC IRMAA reimbursement application. The Office of Labor Relations (OLR) has said that this application will be available sometime between the end of April and the beginning of May. The CSA Retiree Chapter will let you know when the applications are available.

3. Aetna Medicare Advantage Plan (PPO) – Prior Authorization

A sensible discussion concerning Prior Authorization requires first understanding what it is in healthcare.

Prior Authorization (PA) is a process in which the health provider must obtain prior approval from your health plan before prescribing a particular medical procedure or medication. If this approval is not obtained for the treatment, your health plan may not pay the provider, leaving you responsible for the full payment. Under traditional Medicare, which rarely requires a PA, you may have to sign a waiver for a particular procedure or medication. The waiver makes you responsible to pay if Original Medicare will not pay for the treatment.

Health plans have their own rules as to which medical services require medical services. Under the new customized NYC Aetna Medicare Advantage Plan, which begins September 1, 2023, many of the services that required PA under the previous NYC Advantage Plus Plan are no longer required. These include MRIs, CT Scans, PET Scans, Diagnostic cardiology, sleep study, pain management, physical therapy, occupational therapy, speech therapy and radiation. In short, most of the PAs have now been removed.

4. Question of the Month

Q. I recently came home from the hospital after emergency surgery and have been using a Home Health Aide for my personal needs. Does the CSA Retiree Welfare Fund reimburse my costs for the aide?

A. Sorry to hear about your surgery. I'm happy to tell you that you are entitled to Home Health Aide benefits under the CSA Retiree Fund as well as the CSA Retiree Chapter. Here is how it works: after a \$100 deductible, the Fund will reimburse you up to 80% of the cost to a maximum of \$10,000. There is a lifetime maximum of \$30,000. On top of that, the CSA Retiree Chapter will pay you an additional 20% of whatever payment you receive from the Fund seamlessly. The Chapter has no deductible

To receive these benefits you will have to submit a completed Home Health Aide form (attached) to CSA Retiree Welfare Fund. The form will ask for a doctor to describe the need for an aide. Also, the aide must be certified and should be paid only by check or credit card.

Once you receive a check from the Fund, you will receive a 2nd check from the Retiree Chapter shortly thereafter.

