

**RETIREE SUPPORT GROUP OF CONTRA COSTA COUNTY
MINUTES**

October 5, 2017

Pacheco Community Center, Martinez, CA

1. Opening -

The meeting was called to order at 10:05 AM. Alan Schulze led the Pledge of Allegiance. Chair Pat Patterson welcomed members and introduced members here for the first time. A quorum was present for the meeting.

2. Minutes from the August 3, 2017, meeting - It was moved and seconded to approve the minutes from the last meeting; motion passed unanimously.

3. Treasurer's Report - Terry Mann

All bills have been paid to date and all checks have been deposited. At their last meeting, the Board voted to have the Treasurer share balances of accounts openly. Also, based on the advice of a professional parliamentarian, RSG will no longer vote to "accept" or "approve" the report of the Treasurer.

4. Status Reports -

Louie Kroll: With Jack's help, Louie is working to find a speaker for the December meeting.

Steve Ojena: There have been 42 visitors to the website in the past month. Steve asked members if they like the new website. Pat noted that Steve is changing some of the pages on the website.

Jack Funk: Nothing new to report on clawback. Everything is off the table on individuals who are going to have a hearing. In the meantime, there has been no change. Jack said he is working on finding a gerontologist to be the speaker at the December meeting.

Pat for Mike Sloan: In the CalPERS long term care case, the parties are close to wrapping up the fact discovery portion of their trial. CalPERS plans to take more depositions in the next two months. Discovery should be completed by July 3, 2018. A tentative trial date has been set for November 19, 2018, but that date may be pushed out until early 2019. The partial settlement for some of the plaintiffs (represented by Towers Watson) was heard in September and a further hearing on the proposed settlement should take place in October. If the Court agrees with the settlement, a notice with additional details will be sent to class members after the hearing.

5. Nominations of Officers - Alan Schulze

Elections Chair, Alan Schulze explained that RSG has seven elected positions, the two-year terms for which are staggered. This year, the following positions are open for nominations: Chair, Secretary, and Directors at large #1 and #3. The responsibilities for these positions are described in the Bylaws in parts VIII and IX.

Alan opened nominations:

Chair: Pat Patterson was nominated. No further nominations for Chair were made.

Secretary: Elaine Grothmann was nominated and no further nominations were made.

Director #1: Glenda Edwards was nominated and no further nominations were made.

Director #3: Louie Kroll was nominated and no further nominations were made. Alan closed nominations for officers for 2017. Alan explained that had multiple nominations been made for any position, an election would have taken place. Per the Bylaws, when only one person is nominated that person is considered to be elected by acclamation. Pat said that at the end of this new term, he will have served as Chair for 8-years, so he will consider retiring from the position.

6. Board follow-up of member suggestions from last meeting - Pat Patterson

Pat gave members a recap of Board discussion of suggestions for growing the membership made at the last meeting.

- a) Allow spouses of members to be members of RSG without paying separate dues: This would require amending the bylaws. The Board discussed that this would only be a “numbers game” in that the number of members may increase without actually increasing actual membership.
- b) Create a Facebook page: In the last “Between Meeting News” the Board asked for a volunteer to take this duty on because the members of the Board lack the expertise and the time to do it. This proposal was dropped for lack of support.
- c) Do outreach to non-member retirees through CCCERA: The Board has created a mailing to have CCCERA send out to everyone not already a member of RSG. The mailing should take place sometime in October.
- d) Offer insurance benefits to RSG members: There are insurers who offer supplemental plans for health issues, even veterinary care for pets. Anyone interested in accessing this should make sure that any plan chosen does not affect their County health plans. Board member, Glenda Edwards will research what is available and report back to the Board.
- e) Alan Schulze noted that as a Veteran, he uses the CCCREA insurance for his hearing aids. The County VA reps are very good counselors who can help you decide what benefits you can use. Their offices are at 10 Douglas Dr. in Martinez. Louie suggested that we might want to have someone from that office speak at a future meeting. If you have Veterans’ Benefits available to you, it is worth going in to apply because they can supply things like glasses and hearing aids even if you don’t use VA health care. VA categorizes veterans in groups 1 through 7 with category 1 being full benefits. If you know of any veterans, encourage them to apply. Pat asked Alan to send him information about this that can be put into the “Between Meeting News.”

7. Guest Speaker* - Ann Elliott, Benefits Manager for Contra Costa County

Ann brought some of her staff who work with retiree benefits with her: Dawn, Destinee, and Walter. These are the people retirees will talk to if they call the Benefits Unit with questions. Also in attendance was Jim O’Gara from Kaiser Permanente.

Open Enrollment this year is October 23rd to November 9th. There will be some changes. If you don’t want to change your plan when you receive the open enrollment information, do nothing. You only need to complete the form in the packet if you want to make a change in your health care provider.

This year, for the first time, enrollment changes will be online for ACTIVE employees. They are using a new People-soft program that will allow employees the ability to make the changes they want to make online. Her staff has been fully trained in the use of the software and will be busier as they give “hands on” assistance to employees. This will change the system significantly. She has been working on this system for the past 2-1/2 years because of the complexity of County programs. Only current employees will be able to use the system this year. They hope to work on a system for retirees in the future. In the meantime, retirees will continue to use the manual system they have used in the past. Ann said she hopes to have an online system for retirees in place by 2019.

The open enrollment packets should be out by October 16th this year. If you don’t want a change, do nothing.

Any health care plans available to current employees will be available to retirees. This includes the Teamsters’ plan. If a plan goes away for active employees, it will also no longer be available to retirees. There is a joint employee / management committee working on rates. There is currently a large number of plans offered but it is sometimes difficult to work with insurers who don’t get a large number of enrollees into their plans. They may need to remove some of the

plans in the future. Some insurers have reduced the number of different plans they offer. Her unit will monitor this and make information available.

No information on programs will be out until they send the packets out. Everything will be posted to the website the week before October 16th. Retirees over 65 will not be able to go on Teamsters' programs. Only Early Retirees can enroll in the Teamsters plan.

There was a question regarding whether or not CCHP will pick up the Medicare supplements. If CCHP sends a member to another facility, Medicare pays first then the County insurance picks up what Medicare doesn't cover. As long as CCHP takes Medicare, they will have to pick up their share of outside expenses.

The County has three plans contracted through Kaiser, but the Teamsters' plan is totally separate from this. The Teamsters negotiate their own plan directly with Kaiser.

The largest number of enrollees is enrolled in Kaiser, next in CCHP, the smallest number is in Health Net. Pooling actives and retirees gives the County a large number of enrollees to negotiate for with insurers. Higher utilization with a lower number of enrollees in a plan means higher premiums for that plan. At some point in the future, they may survey members to find out what they like about the plans they are enrolled in. They may also talk to CCHP about providing more options. They got 2500 responses from a survey they did with active employees. John Muir Medical came up, and Benefits may try to work something out with them. Everyone wants lower premiums and lower co-pays, but the lower the co-pays are the higher the premiums have to be.

Portability is a difficult issue even when providers have a presence in multiple states. Insurers are licensed separately in each state so they are different plan providers. Kaiser Northern California and Southern California are under the same State licensing program, so retirees can be served in either Northern or Southern regions. Not every program has facilities everywhere, so PPO's can't even cover all areas.

For individuals on Medicare, Medicare always pays first on the bill for services. Generally speaking, in most places the retiree plan is available in the area where the employer is. When an employer has facilities in multiple states, they have to contract with all their employees. This is why Contra Costa County plans are localized. Ann said she doesn't foresee any large expansion of services in the future. There have been people who have gotten services outside of the area, and Medicare has picked up their portion. Sometimes CCHP will pick up a share.

In response to a question about whether or not Rite Aid will continue to be the pharmacy supplier for CCHP after their merger and closings, Ann said she didn't know. She went on to say, however, that CCHP plan B is starting to outgrow itself. It was designed to get retirees in for regular appointments, but some retirees are using it only for the pharmacy benefits. Some participants are regularly using CCHP Plan B to go outside of the network which is driving up the costs.

Ann asked Dawn to respond to some of the questions. There is some confusion when early retirees haven't gotten Medicare yet. The Benefits Unit receives a report every month. When a retiree will be turning 65 in that month, they send out a packet regarding Medicare eligibility. Medicare Advantage plans must be approved. Retirees must apply for both Medicare parts A and B. "A" is hospital benefits and "B" pays for doctor visits. The current Medicare premium is \$130 per month. If you go on Medicare and have a child on your health plan the child will no longer be eligible when he or she turns 24. Social Security Administration looks at income and charges more or less for Medicare based on your tax returns. You link your Medicare to whatever plan you choose, and you are required to use the services of that plan. You must use the facilities of whatever plan you choose to be able to use your insurance. Medicare only contributes to glasses / optometry post cataract surgery. Otherwise, it's your insurance plan that pays toward these items.

Each insurance plan negotiates with the County for a set rate for the next 12-months. Medicare Plan B premiums are based on income and are uniform throughout the country.

The County has gone to a 30-day window to make “life event” changes such as adding a child or spouse to the plan. The window used to be 60-days because they reflected CalPERS rules when they first set plans up. Now their new system processes everything electronically and changes move through smoothly. Some people used to wait until the end of the 60-day window to make changes, and this caused operational problems with making the changes. Now, members must make their changes within a 30-day window for them to be able to activate a change outside of open enrollment.

Jim O’Gara told the group that Medicare cards will be changing. Social Security Administration is removing Social Security Numbers from Medicare cards and replacing them with a unique number assigned to each Medicare participant. They are rolling changes out by region. Starting in 2018, everyone on Medicare will get a new permanent code with the new Medicare number. It will still be a paper card with a blue stripe on top and a red stripe on the bottom. If you want a plastic card, you can have the paper card laminated yourself.

You will only need to submit the new Medicare number when signing up for Kaiser Senior Advantage. Kaiser is ready to use the new numbers, attaching them to Kaiser membership records. Note that your Social Security Number won’t change; the new Medicare card will just no longer show it to protect you from identity theft.

It should take a year for Social Security to fully roll-out this change. Be sure to safely dispose of your old card when you receive your new card. Make sure Social Security has your current address. Also, make sure you also quickly report any change of address to the Benefits Unit.

If you move to an area, even within California, where there is no nearby Kaiser facility, Kaiser may stop your coverage. Don’t stop paying your Medicare premiums, though. The dividing line for Northern and Southern California Kaiser plans is Bakersfield, which is part of the Southern California Region. Medicare is strict about making sure recipients have access to the health care program they choose. Kaiser is a “health delivery insurance” not a stand-alone insurance company. Jim said he’ll keep in mind when discussion come up that members want to use Kaiser as an insurance when there are no Kaiser facilities nearby. The range of services Medicare approves is broad, and Kaiser has most available to members. Some remote areas have their own health plans that you can contract with. Kaiser goes as far North in California as Santa Rosa and Roseville. If you’re a Kaiser member temporarily out of the Kaiser service area and need medical attention, there’s a phone number of the back of your Kaiser card you can call to have it approved.

If you go to VA for hearing aids, etc., they are probably not billing Kaiser for the equipment. If you have an emergency outside the territory, show the provider your Kaiser card, and they can bill Kaiser for the services they provide. Typically, they only allow out of area care for a maximum of 60-days.

“Silver Sneakers” is a program for gym memberships for seniors. Jim said it can provide discounts at gyms for membership or a home fitness kit. But this is strictly a Kaiser program and there is a separate premium you must pay to get it. If the County provided it, they would have to pay the fee for every person covered under the plan whether or not they use the gym benefits. This would raise the plan premiums for everyone.

If you have further questions, you can leave them in their general mailbox: benefits@hrd.cccounty.us. Or, you can call their office phone number: 925-335-1746. When you call, identify yourself as a retiree. You will speak to Dawn, Destinee, or Walter, their new team-member.

In lieu of receiving an honorarium for speaking at today’s RSG meeting, Ann asked that a

donation be made to the Food Bank of Contra Costa and Solano. Terry, our Treasurer, will send a donation of \$100 to the Food Bank in Ann's name.

8. Group Information Sharing - Pat Patterson

A member shared that you are no longer allowed to get any deferred compensation payments if you are working part time /temporary. Can RSG look into this? Pat said we can find out more about it.

Will Emes has been doing coffee for our meetings and can no longer do it. Pat asked for a volunteer to let him know if interested in taking this over. If no one volunteers, we won't have coffee for meetings. Pat said he is there early to set up chairs for the meeting and can't take on this additional task.

The meeting was adjourned at 12:00 PM.

Respectfully Submitted,
Elaine Grothmann,
Secretary

*The Board of Directors of the Retiree Support Group of Contra Costa County invites guest speakers to our bi-monthly meetings to provide stimulating and current information about subjects that we believe will be of interest to our members. The Board's presentation of these guest speakers does not constitute an endorsement of the opinions and views expressed by these guest speakers. The opinions and expressions of our guest speakers are their own and do not necessarily represent the views and opinions of the Board of Directors or of the Retiree Support Group.