

Ask the Welfare Fund – June 2008

Question: I am an active Day Care director in Manhattan, and HIP is my health plan. I was just diagnosed with diabetes. My endocrinologist wants me to test by blood twice a day. I was given a prescription for testing strips, and told by MEDCO that they do not cover testing strips or lancets. The cost was over \$ 60 for a month's supply of strips and lancets. How can I get some help with this costs?

Answer: Diabetes medications and testing supplies are covered by the basic health plan under a New York State mandate. You are to be provided medications and testing supplies at no cost or for a small co-payment. Since you are in HIP, please have your doctor contact Better Living Now, HIP's vendor for diabetic testing supplies, to arrange for receiving these items under your benefit. To receive your diabetic medications, with no co-payment, present your HIP card at the pharmacy. Even though the card indicates no pharmacy benefit, it should go through since this benefit is paid through your medical benefit. As always, please give me a call if you need assistance in getting these medications.

Question: I am a retired high school principal, and will turn 65 on July 4th. What happens to my GHI plan when I become Medicare eligible? What about Medicare Part-D? I am sure you have answered this before, but I do not recall the specifics. Could you answer it one more time?

Answer: Your question is the second most popular question we receive in the welfare fund, second only to "Where is the check for the claims I just submitted?". I and my staff answer this question several times a day, but it can always be answered again.

About three months before your 65th birthday, you will receive a mailing from the Social Security Administration and the City Office of Labor Relations. Social Security will offer you the opportunity to enroll in Medicare Part-B. If you are retired and have no benefits elsewhere, such as from a second job or through a spouse who is still employed, you MUST accept Part B. Sign the enclosed ID card, and send a copy to the New York City Office of Labor Relations, Medicare Premium Reimbursement, 40 Rector Street, 3rd Floor, New York, NY 10006. The City will reimburse at least the base Medicare Part B deduction (\$ 96.40 in 2008) the following year (2008 reimbursements will be made in August of 2009).

Your City-provided health plan will automatically become a Medicare supplement policy. Your prescription drug benefit will automatically become that health plan's Medicare Part-D drug plan, eliminating the need to enroll in another drug plan. In fact, as the letter from the city indicates, enrolling in a different Medicare Part-D plan could impact your city coverage.

One item on the letter from the Office of Labor Relations does not apply to CSA Retirees in the GHI Senior Care plan. This letter indicates that enrolling in another Medicare Part-D plan will remove you from being covered for 365 days of hospital care. Under a separate and long-standing agreement with the Office of Labor Relations, the CSA Retiree Welfare fund pays the premium for this benefit directly to the city on behalf of CSA Retirees. This was done back when

the premium for the drug portion of the rider was close to \$ 180 per month, and many retirees were using a spouse's drug plan because it had lower co-payments than the GHI plan. We have continued this arrangement with the City on behalf of our retirees.