District's Health and Welfare Benefits Team (DHWBT)



Minutes

September 17, 2025

Question – If a Retiree has a dependent who is under 26 are they enrolled in the same plan? The Retiree is enrolled in a Kaiser Senior Advantage plan and the dependent under 26 is enrolled in a traditional Kaiser plan. They both have the same co-pays.

The Committee (RPO) issues a newsletter October and January

Questions regarding Medicare reimbursements if there will be a problem with Navia reimbursing Retirees for Medicare premiums.

The Benefits team and Dr. McKinley met with Navia and put them on notice.

Navia reassured the District they would process requests for reimbursements in a timely manner. We will monitor and ensure that the problems that occurred last year do not continue.

Benefits team meets monthly with Navia to ensure that claims are being processed in a timely manner.

Benefits team will send Medicare drive letters in November for Retirees not currently enrolled in Medicare.

Retirees will receive notice on upcoming open enrollments in October as well.

Retirees will also receive Medicare reimbursement forms for Medicare in November.

We will ask Navia if Social Security numbers can be blacked out or if there is another why to identify Retiree.

Health & Welfare Committee (PRO) reviewed purpose of the committee with VC Buckner

VC Buckner introduced herself to the committee.

They were part of contract language in 2004. Retirees entitled for lifetime benefits.

They are a voice for benefit issues and assist retirees with issues that arise over social security and Medicare. They sponsor scholarships for students going to four year college with \$1,000 dollar scholarships.

PRO appoints three advisory members to Retirement board.

Question about out of network coverage that don't take Medicare.

If the previous plan covered medical expenses and the new plan do not cover, then submit a claim with Retiree First. An EOP is issued on what the plan will pay or what was denied. The District will review old plan and pay based on old plan. The District will need proof of expenses, denial (review of what was denied) and pay for what was covered in the old plan. Retiree First will issue EOP form. The retiree submits the EOP form and proof of expense for review by the District.

If an individual goes out of network, the District will not reimburse.

The District will reimburse previous claims.

MAPD (Anthem) / United America managed by Retiree Frist assist with EOP if covered by insurance.

Discussion on formulary prescriptions on what was previously approved and not approved.

If a retiree chooses to go outside insurance there is no way to determine reasonable and customary costs and what is reimbursable. There are many reasons why cost is not covered by insurance. If prescription is denied go to Retiree First or with Kaiser Senior Advantage reach out to Nautilus in SISC.

Under the old SPD any prescription drug covered that is required by laws are still covered and reimbursable.

Benefits team will review SPD limits.

What is the lifetime cap?

Next meeting Wednesday, November 17, 2025 @ 11:00 am via zoom.

Meeting was adjourned