

RISE Delaware Update for September 2nd

SEBC Education Campaign

Dear RISE Delaware supporters:

The next phase in our campaign to fully secure our current Medicfill (Medicare Supplement) benefits is educating the SEBC members over the next few weeks about the problems with Medicare Advantage. We are encouraging you to help and to express your concerns to them.

Below are some bulleted points for idea generation. We encourage being relatively short and focused so they might actually read your emails. You can select an idea or two from below (or use one of your own) but with so many people, different points will together create a complete and compelling picture. You can always include a helpful article as support (by link or attachment), and an illustration or personal story if you want.

The next SEBC meeting is scheduled for October 2, 2023 and we want to set the stage for a civil, yet robust exchange, about the problems of Medicare Advantage. SEBC members will need to be educated and fortified enough to stand up to the Administration Co-Chairs.

We know that Medicare Advantage Plans are problematic for many reasons:

- MA plans have limited networks. If you don't live close to network providers, you will incur extra charges when you go out of network because you need to see a doctor. This issue is problematic, particularly for Retirees who are living outside of Delaware.
- Retirees were promised the benefit of a Medicare Supplemental plan (Medicfill) as a result of their time and commitment to the State of Delaware and other municipalities and participating groups. Retirees kept their side of the bargain. The State should keep its promise to them.

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- Many doctors and hospitals will not accept Medicare Advantage plans because of the paperwork and low reimbursement rates.
- Medicare Advantage plans delay and deny care through pre-authorization procedures. Retirees who are ill should not have to fight delays and challenge denials for care while they are fighting for their lives. The Highmark contract the State executed included 2,030 prior authorizations for surgeries, other medical procedures, diagnostics, and prescriptions!
- MA plans take away your doctors' ability to determine the medical care appropriate for you and when this care should be delivered.
- MA plans are deceptive about their costs. Their premiums are low, but they have hidden, unknown costs when you need care. They come in the form of annual "out-of-pocket" deductibles, "co-pays," "cost-sharing," and "co-insurance." MA plans can decide "after the fact" that your treatment was not "medically necessary" and deny payment altogether, leaving you on the hook for additional payments for which you never expected to be responsible.
- MA are draining the federal Trust Fund at a faster rate than Traditional Medicare.

Of course, please feel free to raise additional concerns about Medicare Advantage.

We thank you for your continued support and participation. Your messages will again be critical, this time with SEBC members.

All the best,
Lisa Diller

The email addresses of the SEBC members:

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RISE Delaware: Retirees Investing in Social Equity Delaware

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<https://www.facebook.com/RiseDelaware>

<https://www.gofundme.com/f/rise-delaware-round-2-legal-and-other-costs>

Our Web site: www.risede.com

Checks may be made payable to: RISE Delaware

Address: RISE Delaware, P.O. Box 7262, Newark, DE 19714

Public Meeting Calendar: State of Delaware

<https://publicmeetings.delaware.gov/#/>

