

Retired NYC Employees Offer Strong Pushback on Health Care Issue at City Hall Hearing

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- Marianne Pizzitola, president of the NYC Organization of Public Service Retirees, said many ex-city workers who want to stay on traditional Medicare cannot afford the \$191 monthly fee. Photo Credit: Twitter

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Edited by: Fern Sidman

New York City is getting closer to putting more than 250,000 retired city workers on a new health care plan and retirees are pushing back. On Monday, thousands gathered at City Hall for the hearings related to a planned switch from retirees' current Medicare plans to a wholly privatized plan called Medicare Advantage. This proposal has received staunchly negative feedback from some retirees since it was proposed in an agreement between the city's labor unions and former Mayor Bill de Blasio's



In the latest turn in the saga, the Adams administration has asked the City Council to amend the city Administrative Code so that the original plan – switching to Medicare Advantage but allowing retirees to opt out for a cost could proceed, as was reported by City & State.

Members of Mayor Adams' administration faced jeers and hours of critical questioning during the Monday City Hall hearing on his questionable attempt to compel retired municipal workers to reach into their own pockets to pay for some forms of health insurance, as was reported by the Daily News.

Council members at the hearing also voiced a range of concerns, and not one of them came out saying they're ready to support the bill that would alter the underlying law, known as Section 12-126 of the Administrative Code, according to the Daily News report. Several members committed to voting against the bill if it ever comes up for a vote.

"I unequivocally say we should vote no on this, and I unequivocally support our retirees," said Brooklyn Councilman Charles Barron, one of chamber's most left-leaning Democrats.

In a January 8th editorial in the New York Post, it stated that "the courts have ruled that Mayor Adams has the power to simply enroll 250,000 eligible retirees in a high-quality Medicare Advantage plan and save the city \$600 million a year, thanks in part to the federal subsidies available for such coverage. He'd like to give each retiree the option to keep the current city-funded Senior Care Plus plan, albeit at a cost of \$191/month to cover the higher price."

Medicare Advantage is an alternative to traditional Medicare that is provided by private companies that the federal government contracts with, according to the City & State report. The plans tend to offer lower premiums but can also come with narrower networks and higher out-of-pocket cost, which has rubbed city retirees the wrong way as they live in budgeted pensions.

At the request of the mayor, Council Member Carmen De La Rosa, who chairs the Committee on Civil



have them automatically enrolled in Medicare Advantage as the sole plan on January 29. We are deeply concerned with the challenges in our health care program for municipal retirees and employees.

While many of the underlying problems that created this situation require comprehensive solutions from all levels of government, the City must confront this dilemma to the maximum extent possible within its own authority. This must include support for low-income retirees to truly access choice in their healthcare coverage, reigning in the runaway costs of care that created this crisis, and guaranteeing an insurance program that benefits all of our dedicated public servants.

“The Council will consider the proposed legislation to preserve healthcare coverage choice for retirees at a Civil Service and Labor Committee hearing next week that is open to the public and all stakeholders. We are working to examine the major outstanding questions, the details of the Medicare Advantage plan that is moving forward regardless of any potential Council action, and how the City fulfills its health care commitments to all employees and retirees.”

City & State reported that in March, a judge ruled in favor of retirees, citing a section of the city’s Administrative Code that requires the city to pay the entire cost of health insurance for employees, retirees and dependents. The ruling, which was upheld on appeal, said that the city could still proceed with the switch to Medicare Advantage but that it couldn’t force retirees to pay to maintain their current coverage if they wanted to opt out.

According to a January 4th report in the New York Daily News, they pointed to studies including an audit from the inspector general for the Department of Health and Human Services in which the retirees have said Advantage plans would water down their benefits and put them at risk of being denied “medically necessary” care due to the public-private administration.

Marianne Pizzitola, president of the NYC Organization of Public Service Retirees, said many ex-city workers who want to stay on traditional Medicare cannot afford the \$191 monthly fee that would come with it if the mayor gets his way, according to the Daily News report, She pleaded with Speaker Adams to stand up to him.

“If Speaker Adams moves forward, she will be risking the lives of thousands of retirees by forcing them to choose between critical healthcare and bankruptcy,” Pizzitola said last Tuesday. “And that’s not a choice.”

In her testimony during the hearing at City Hall on Monday, Ms. Pizzitola said in opposition to Intro Bill Number 874, “There is no emergency and the City isn’t going bankrupt. And if it is going bankrupt, why would you take healthcare from retirees, while still in a pandemic, to fix it? Not even in the fiscal crisis of the 70s did the City take away a retiree benefit. If you change the administrative code, the City will have



someone has to look at it. We also identified that there are options that the city can look at for potential savings through the Center for Medicare and Medicaid Innovation (CMMI) to tap federal funds. There is a way to move forward with the current code and protect the retirees from being taken advantage of.”

In a letter to the editor sent to the New York Post, Maureen Sharkey of Brooklyn wrote: “When you take a city job, at least in the rank and file, it is usually not for big bucks (“Facing NYC’s Retiree-Health Crisis,” Editorial, Nov. 15). It’s for security. You know you will have a pension, small as it may be. You also have a union that is supposed to back you up and help with job issues as well as cost-of-living increases when the contracts become due — which never arrive on time.

All that said, we also were given a medical benefits package meant to be there for us when we retired. How can the city realize only now that it’s in a crisis regarding paying for this promised benefit? The people who signed up for retiree medical benefits should not see them changed. We signed up with health benefits to follow our retirement, and we should have them.”


Peter Janosik of Staten Island wrote, “New York City guaranteed us a level of health care when we retired, yet now is going to give us less and make us pay more. Mayor Adams’ new plan is nothing but a dirty back-room political deal. New York City’s retired workers are getting royally screwed. Let Adams find other ways to save money rather than by picking my pocket. Retired workers earned the current level of health care with our 25-plus years of service. We stayed in city jobs — even though they paid less than private sector jobs — for these benefits.”

Adding to the palpable angst of New York City government retirees are the positions that leaders of the two largest city labor unions have taken. Henry Garrido, the Executive Director of District Council 37, NYC’s largest municipal employees union with 125,000 members and nearly 50,000 retirees, appears to be taking the mayor’s side on this matter that is of paramount importance to his membership. So too is the case with UFT president Michael Mulgrew.

On September 29th, Garrido told his members, “we need permanent, long-term solutions. That includes amending old laws that favor insurance companies and pressuring hospitals to change their behavior or be pulled out of network. It means holding accountable those we elected to office to ensure adequate healthcare funding is available for our benefits. And it means transitioning our retirees to the Medicare Advantage plan, which provides premium-free access with more coverage than the current plan and will result in an estimated \$600 million in annual savings.”

On December 15th, it was reported that UFT President Mulgrew said in a letter to the Retired Teachers Chapter members regarding an arbitrator’s ruling on the creation of a new Medicare Advantage plan for city retirees.



3  Create a real accountability system that ensures that Aetna delivers all rights and benefits to retirees as agreed upon in the agreement; and set up a clear, fast process to rectify any issues.

4 – Ensure there is an expedited appeals process for denial of care where specialists in the particular field/procedure make the final determination. ·

5 – Ensure every retiree, regardless of pre-existing conditions, is accepted in the new plan.

Mulgrew concluded his letter by saying, “you have my promise that the UFT will not move forward with the new plan until we have agreed on a high-quality plan our retirees deserve.”

Former UFT delegate assembly member, Martin Rosenthal, said, “if teachers will lose their Senior Care and that actually comes to fruition, then from what I understand this will go to court to be adjudicated. I certainly hope that Mulgrew is not using this as a scare tactic. Union members feel they are being hoodwinked and I can definitely see their point.”

He added, “We don’t have the final draft of the Medicare Advantage Plan, so who knows what will happen. There was a New York Times expose focusing on how really bad Medicare Advantage plans are across the country in terms of denying essential medical coverage and that is highly problematic and very disconcerting.”

