

Keep traditional Medicare

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To The Editor:

Why did over 65,000 NYC Retirees opt out of the proposed Medicare Advantage Plan (MAP) and support traditional Medicare (TM)? The closed-door deal between NYC and the Municipal Labor Committee back in June 2021 exposed the inherent weaknesses of the MAP that forces retirees to pay more and sadly make it harder to get healthcare.

Unlike MAP, TM had no co-pays. Under TM, members can see any doctor accepting Medicare, but MA plans have networks; if your doctor is not in network, members may have to pay up front and hope the service is determined to be medically necessary so they get reimbursed. Not all doctors who accept Medicare have to accept the MAP.

The MAP requires prior authorizations for tests and procedures. According to the American Medical Association, prior authorizations leads to delayed medical care and patient injury.

Shockingly, providers can drop out of MAP at any time, with no advance warning—this doesn't happen with TM. MAP administrators make the decisions about rehab and skilled nursing facility admissions and length of stay. In TM, doctors make the decisions.

If the federal CMS subsidy that funds the MAP is ever reduced, the city would have to decide to pay the difference, pass the cost to retirees or renege on the benefit altogether. MA perks like fit-bits, meals and medical rides require a "qualified event" and prior authorizations and medical rides are offered through Access2Ride, which is not available in all areas, must be booked 48 hours in advance, and be within a 30-mile radius. NYC can save enormously by keeping traditional Medicare and self-insuring like other municipalities and companies do.

Keep traditional Medicare. City workers deserve no less.

Joseph Campbell