



REFLECTIONS

A monthly source of information for beneficiaries of the Adventist Retirement Plans.

GC Session



In the April issue of Reflections we described Retiree seating arrangements at the General Conference Session in Atlanta in June. We just received new information from the session managers, who have informed us that what we have told you is no longer correct!



Instead of providing designated seating in the Upper Gate C area of the dome, in recognition of stair management for retirees, the session managers are providing approximately 400 seats at the rear of the actual dome floor for retirees. Although limited, this will allow our retirees to have opportunity to sit on the delegate level.

Denominational Retiree Seating Passes will be required for entry at Gate E of the Georgia Dome. These passes will be available on a first come first serve basis in quantities of a 1-3 per retiree family in the Business Center which is located in Room C206 of the Georgia World Congress Center. Passes will be available for retirees from all world divisions, although we expect that most will be from NAD. There will be day passes and event passes. Retirees will be allowed to self-affirm their status as denominational Retirees.



The Retiree name and number of passes issued will be recorded at the time they are picked up so that duplicate passes will not be issued to the same person(s). When tickets run out, they run out. Notwithstanding our previous statements, we will not be printing cutout passes in Reflections.

Our office is not granted authorization to issue badges. Transportation, lodging and other information regarding attendance at the session can be obtained from the session website, www.GCSession.org.

Oops!

Each quarter we publish in this magazine our “New and At Rest” column, a list of new retirees and those who have passed away during the past quarter. We have developed an extraction process which draws the individual names of new retirees and deceased retirees from our data base. The file is then reviewed and inserted into our newsletter.

Unfortunately, in March’s Reflections, there was an error in our process and we listed under the “At Rest” section a retiree who is very much alive, and who was mystified when he began receiving calls from friends all over the country. I apologize to Willard Clapp and all those who thought they’d lost a friend.

The error has helped us to locate a weakness in our extraction system, which we are working to correct. We thank Mr. Clapp for bringing this error to our attention and wish him many years of good health!

Healthcare Bill

On March 23 the President signed into law “The Patient Protection and Affordable Care Act.” In addition the House has passed the “Health Care and Education Affordability Reconciliation Act of 2010,” which is being considered by the Senate under special budget reconciliation rules.



There are many questions outstanding about the implications of the legislation as it relates to our retirees. Some issues to be aware of:

1. The Reconciliation measure, if approved by the Senate, modifies the so-called “Cadillac Plan Tax.” In a previous article I had raised this as an issue which might consider our healthcare plan too generous, and therefore subject to taxation. It looks like the dollar thresholds for taxability have been raised significantly, probably taking this issue off the table as a problem for our retirees.
2. The legislation makes provision for the shrinking and ultimate elimination of the dreaded “donut hole” or gap in Medicare D. While many of our eligible retirees make use of our Rx option, this change would make Medicare D a more palatable option for retirees, depending on what the liberalization does to Medicare D premiums.
3. Probably the major unknown for retirees in the legislation is the impact of savings budgeted to come from Medicare. Some retirees have informed us of the challenges they have in finding a new physician who is a Medicare participant. Other retirees have found that the Medicare Advantage plans are very useful. While the administration has focused on reducing waste and fraud in Medicare, there will undoubtedly be some long-term changes in the services offered by this venerable service. Current wording freezes federal payments to private Medicare Advantage plans at 2010 levels.

We will continue to provide what information we can as our guru’s seek to understand the issues and how they may impact our retirees.

SHARP Corner

This month we would like to share with you information regarding the SHARP office functions. In the SHARP office there are three fulltime employees dedicated to help answer your questions. The SHARP Assistants are Gayle Fell & Vernon Rogers. They each bring many years of customer service experience to our department and can be a valuable resource for you.



They answer the SHARP phone line and the SHARP email. Their assignments are broken up into two sections with Gayle responsible for alphabetical listing A – K and Vernon responsible for L – Z. Each of these individuals assists the retiree in the completion of the enrollment into SHARP, any changes of healthcare benefits and the communication with ARM & Medco. At any time through our SHARP phone line you may speak with either of them since calls are taken on a first come, first served basis.



Our SHARP Specialist is Lisa Turpen, RN. She is responsible for the functions of the complete SHARP team and reports to Judy Beers, Associate Administrator. Lisa is the Secretary for the SHARP Appeal Committee, assists both Gayle & Vernon in the day to day functions of the SHARP office and provides policy advice and clarification to SHARP policy. You may contact all three of them via the phone number 301-680-5036, email @ www.SHARP@nad.adventist.org. Gayle, Vernon and Lisa are pictured above.



You may also view other pictures of our staff on the NAD website at www.nadadventist.org, click on the “Resources” tab and then on “Retirement.”

PAYROLL BULLETIN BOARD

Checks/EFT Released

This Month: **May 27**

Next Month: **June 28**

Adventist Retirement Plans

Del Johnson
Administrator

Lyn Wick
Associate Administrator

Judy Beers
Associate Administrator

Maurine Wahlen
Associate Administrator

Adventist Risk Management: 1-800-447-5002
Healthcare Claims Queries

SHARP: 301-680-5036
SHARP@nad.adventist.org
Healthcare Eligibility Queries

Submit all claims to:
Adventist Risk Management—SHARP
PO Box 1928
Grapevine, TX 76099-1928

Medco Health: 1-800-841-5396
Verify pharmacy participation with
Medco Health

Payroll: 1-888-838-8955
Bulletin Board of Payroll Information

NAD Retirement Department
Fax: 301-680-6190
12501 Old Columbia Pike
Silver Spring, MD 20904-6600

Barbara Yowell: 301-680-6244
Lost checks, direct deposits, 1099R,
tax withholding, change of address,
verification of benefits for loans,
housing, Medicaid

Retirement Reception: 301-680-6249
General Retirement Office Information

Chris Meier: 301-680-6192
Reporting a death, disability reviews



www.RenewedandReady.com

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Retirees on Medicaid

For various reasons, some retirees find it necessary to apply for Medicaid—a joint federal/state health insurance program, administered by the state for the benefit of those with limited income and resources. This usually comes about when a retiree or spouse is required to go into long term care such as in a nursing home. The various states have some discretion in determining which groups of people Medicaid will cover and the financial criteria for Medicaid eligibility. Unlike Medicare, Medicaid has some provision for assisting with custodial care, under certain specific eligibility criteria.



States have various and often complex rules in determining eligibility for Medicaid. The family may need to require the services of a consultant in understanding and complying with these regulations. Our office is not trained to provide such assistance.

However if a retiree or spouse has been enrolled in Medicaid, it is important that our office be provided this information to us as soon as possible. Certain benefits and reimbursements from the Plan may be impacted. For instance, when a retiree seeks Medicaid assistance due to residency in a long-term care facility, it is not uncommon for the “well” spouse to request that the retirement benefits be divided between the two spouses in order to protect income from Medicaid “spend-down” rules for the spouse not needing the assistance of Medicaid. Some states allow for the division of the monthly benefit to ensure some income goes to the “well” spouse—but only with the approval of the applicable state agency, social service or welfare office. In such a situation, please authorize your social services agent to contact the retirement plan office for specific information about your benefits.