# 9/25/2020 Joint Benefits Committee Report CUCRA/CUCEA Virtual Joint Meeting at UC Santa Cruz October 28, 2020 Virtual Meetings

This JBC report presents our comments and questions about four issues that are important for the members of the Associations represented by CUCRA and CUCEA. We also wish to stress that these issues are of vital interest to active UC employees because they may affect their expected post-employment benefits.

We are all living in difficult times with the Covid-19 lockdown, and this pandemic has forced the University to make major changes in how it carries out its mission of teaching, research, and public service. The wildfires have also affected and caused great losses for UC employees and retirees. Recognizing these serious difficulties, including retirements and separations of key employees, JBC continues to ask UC to work toward the best interests of the members of CUCRA and CUCEA and applauds the efforts being made.

JBC devotes this report to the future by emphasizing: Pension/Savings Choice, RASC, Via Benefits, and Health Benefits Advisory Committee (HBAC).

Although we recognize the factors that prevented adequate UCOP response to our previous reports, we wish to emphasize the importance of receiving some written acknowledgement of the issues raised as we represent all retirees and attempt to keep them informed through their individual Associations.

# 1. Comments, suggestions, and questions about Pension/Savings Choice

We have considered this issue in our two most recent reports, and there is no need to repeat the analysis at this time. However, we have received no response from UCOP, and we ask our representatives on the University of California Retirement System Advisory Board (UCRS AB) to bring the issue to the next meeting of the Board.

## 2. RASC

The JBC is looking forward to hearing from Acting Vice President Cheryl Lloyd at the October 2020 meeting. We hope there will be a good discussion about RASC's present challenges, and about UCRAYS and Covid-19 in dealing with its ongoing responsibilities concerning retirement applications, survivor benefits, and general interface for the many questions from Retirees and soon to be Retirees.

The JBC is particularly interested in what obstacles still exist for RASC? Is RASC getting the IT support that it needs? Is there enough staff support? Does the organization of RASC allow nimble and effective response to problems?

## 3. Via Benefits

This continues as a JBC issue, our concerns are well discussed on our April 2020 report. Members of JBC have written to the Academic leadership about the issues with out-of-state Medicare plans.

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In further researching this issue, JBC noted that the University's Retiree Health Benefit Actuarial Valuation Report to the Regents' Committee on Finance, since the inception of Via Benefits includes the statement from Deloitte Consulting: "The university will provide a maximum annual contribution of \$3,000 per member, subject to Graduated Eligibility, to the HRA. Each year, the administration will reassess the maximum annual contribution to determine if an adjustment should be made." (November 13, 2019)

What has the analysis shown since inception in making this reassessment? Why has the \$3,000 per person maximum reimbursement for out of state retirees remained constant over the past seven years, despite the tremendous increases in health insurance? How much does it cost out of state retirees using Via Benefits for both their medical care and prescription drug coverage annually?

### 4. HBAC

Roger Anderson (CUCEA) and Frank Trueba (CUCRA) are Emeriti and Retiree representatives to the Health Benefits Advisory Committee. This group has met during most months from June 2019 to the present and talking points from the recent Committee meetings are found on the CUCRA and CUCEA websites. The HBAC is nearly ready to conclude its work, and with a meeting in September and another in October its report should be done.

The HBAC primary interest is Active employee health benefits, but these benefits are used by a significant fraction of Emeriti and Retirees. These Retiree beneficiaries include pre-Medicare people who are too young to collect Medicare benefits and non-Medicare people who are older than 65, but do not have Medicare. Over time the population in these groups will decrease, but now they must be recognized. Any increase in the employee costs for health insurance will most likely affect Retirees.

We should know much more by the October CUCRA/CUCEA meeting.

Respectfully submitted by the Joint Benefits Committee:

Adrian Harris (UCLA)
Randy Scott (UCOP)
Joel Dimsdale (UCSD)
Dan Mitchell (UCLA)
Louise Taylor (UCB)
Larry Pitts (UCSF/UCOP)
Chair, Roger Anderson (UCSC)
Marianne Schnaubelt (UCI)
Henry Powell (UCSD)
Joe Lewis (UCOP)

Jo Anne Boorkman (UCD)

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CUCRA Chair
CUCEA Chair
CUCRA Chair-Elect
CUCEA Chair-Elect