### Health & Retirement Services of Illinois

**Newsletter October 2020** 

### **OUR NEWS LETTER**



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# Telehealth could be here for the long-term after the pandemic

by Ricardo Alonso-Zaldivar The Associated Press 31 Aug 2020

Telehealth is a bit of American ingenuity that seems to have paid off in the coronavirus pandemic. Medicare temporarily waived restrictions predating the smartphone era and now there's a push to make telemedicine widely available in the future.

Consultations via tablets, laptops and phones linked patients and doctors when society shut down in early spring. Telehealth visits dropped with the reopening, but they're still far more common than before.

Permanently expanding access will involve striking a balance between costs and quality, dealing with privacy concerns and potential fraud, and figuring out how telehealth can reach marginalized patients, including people with mental health problems.

"I don't think it is ever going to replace in-person visits, because sometimes a doctor needs to put hands on a patient," said Seema Verma, head of the Centers for Medicare and Medicaid and the Trump administration's leading advocate for telehealth.

Caveats aside, "it's almost a modern-day house call," she added.

"It's fair to say that telemedicine was in its infancy prior to the pandemic, but it's come of age this year," said Murray Aitken of the data firm IQVIA, which tracks the impact.

In the depths of the coronavirus shutdown, telehealth accounted for more than 40% of primary care visits for patients with traditional Medicare, up from a tiny 0.1% sliver before the public health emergency. As the government's flagship health care program, Medicare covers more than 60 million people, including those age 65 and older, and younger disabled people.

A recent poll of older adults by the University of Michigan Institute for Healthcare Policy & Innovation found that more than seven in 10 are interested in using telehealth for follow-ups with their doctor, and nearly two out of three feel comfortable with video conferences.

But privacy was an issue, especially for those who hadn't tried telehealth. The poll found 27% of older adults who had not had a telemedicine visit were concerned about privacy, compared with 17% of those who tried it.

Those who tried telehealth weren't completely sold. About four in five were concerned the doctor couldn't physically examine them, and 64% worried the quality wasn't as good.

"After the initial excitement, in the afterglow, patients realize 'I can't get my vaccine,' or 'You can't see this thing in the back of my throat over the computer," said Dr. Gary LeRoy of Dayton, Ohio, a primary care doctor and president of the American Academy of Family Physicians.

For Medicare beneficiary Jean Grady of Westford, Vermont, telemedicine was a relief. She needed a checkup required by Medicare to continue receiving supplies for her wearable insulin pump. Being in a high risk group for COVID-19, Grady worried about potential exposure in a doctor's waiting room, and even more about losing her diabetes supplies if she missed Medicare's checkup deadline.

"I would have had to go back to taking insulin by syringe," she said.

Grady prepared for the virtual visit by calling her clinician's tech department and downloading teleconference software. She says she would do some future visits by video, but not all. For example, people with diabetes need periodic blood tests, and their feet must be checked for signs of circulatory problems.

Still, quite a few follow-ups "could be done very efficiently and be just as useful to the physician and myself as going in and seeing them in person," Grady said.

Many private insurance plans, including those in Medicare Advantage, offer some level of telemedicine coverage.

But traditional Medicare has restricted it to rural residents, who generally had to travel to specially designated sites to connect.

Under the coronavirus public health emergency, the administration temporarily waived Medicare's restrictions so enrollees anywhere could use telemedicine. Patients could connect from home. Making such changes permanent would require legislation from Congress, but there's bipartisan interest.

Sen. Lamar Alexander, chairman of the Senate Health, Education, Labor and Pensions Committee, says he'd like to see broader access, without breaking the bank.

"Our job should be to ensure that change is done with the goals of better outcomes and better patient experiences, at a lower cost," said Alexander, R-Tenn.

That's a tall order.

Payment will be a sticky obstacle. For now, Medicare is paying clinicians on par for virtual and in-person visits.

"Policymakers seems to be in a rush to pass legislation, but I think it is worth taking a little more time," said Juliette Cubanski, a Medicare expert with the nonpartisan Kaiser Family Foundation. "Fraud is one big area that policymakers need to be cognizant of."

Fraud-busters agree.

Telehealth is so new that "we don't have at this point a real sense of where the huge risks lie," said Andrew VanLandingham, a senior lawyer with the Health and Human Services inspector general's office. "We are sort of in an experimental phase."

Despite the risks, advocates see opportunities.

Expanded Medicare telehealth could:

- help move the nation closer to a long-sought goal of treating mental health the same as physical conditions. Sen. Ron Wyden, D-Ore., wants to use telemedicine as a springboard to improve mental health care. IQVIA data shows 60% of psychiatric consults took place by telehealth during the shutdown.
- increase access for people living in remote communities, in low-income urban areas and even nursing homes. Medicare's research shows low-income beneficiaries have had similar patterns of using telehealth for primary care as program enrollees overall.
- improve co-ordination of care for people with chronic health conditions, a goal that requires patient and persistent monitoring. Chronic care accounts for most program spending.

University of Michigan health policy expert Mark Fendrick says Medicare should figure out what services add value for patients' health and taxpayers' wallets, and pay just for those.

Telehealth "was an overnight sensation," said Fendrick. "Hopefully it's not a one-hit wonder."

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## Cyber: The big 'back to school' risk that can't be overlooked

by Bethan Moorcraft 03 Sep 2020

With 'back to school' season upon us, teachers, parents and students around the world are struggling to get to grips with a hoard of new COVID-19 policies. Lots of schools are adopting hybrid models, providing both in-person and virtual learning, requiring parents to make childcare arrangements for when their children are not invited to school. There are debates ongoing around whether children should have to wear masks (both in class and on school transport), new drop-off and pick-up arrangements, and lots of new rules and regulations in place to ensure safe physical distancing between students, parents and teachers.

With all of this going on, there's one risk - heightened significantly by the coronavirus pandemic - that schools might easily overlook: cyber.

School districts worldwide have some significant cyber security shortcomings, according to Joshua Motta, (pictured), CEO of Coalition, a technology-enabled cyber insurance and security firm servicing the US and Canadian markets. Schools often lack the dedicated funding and the skilled personnel that most for-profit businesses or larger organizations have to continuously vet and improve their defenses. As a result, many schools have made basic security errors, according to Motta, or they're using outdated technology with unpatched vulnerabilities, thus "propping the door open for hackers and scammers".

"When you factor in the COVID-19 pandemic, now all of a sudden schools are opening up remote access into these networks," Motta commented. "The road has been paved for the hacker from the internet into these networks that were already maybe not in the best state [before they were opened for remote access]. So, the coronavirus pandemic is really going to have major cybersecurity implications around the world for educational institutions.

"With back to school, we expect a significant uptick in claims for our education policyholders. That's something that we've been working on diligently at Coalition over the past couple of weeks - to really do a deep dive into all of our policyholders who are in the education sector, scanning their security, going through things, reaching out to them when we're seeing issues, and just making sure that they're prepared, because we absolutely expect an uptick in claims to correspond with going back to school."

The types of issues Motta expects are nothing out of the ordinary – if you've got a finger on the pulse of cyber security trends. There will likely be an uptick in tailored phishing attacks

and scams preying on the fear, uncertainty and behavioral changes that teachers, parents and students are going through as a result of the pandemic.

The stakes are also "higher than ever" for ransomware attacks, according to Motta. He explained: "Pre-pandemic, there wasn't always a significant need for a school's network to be open across the internet. Maybe they weren't entirely secure inside of the network, but it was a local network with physical access, so the risk wasn't so severe. But with the pandemic making remote network access a requirement, it's these remote desktop protocols or these remote access configurations that I believe the vast majority of ransomware attacks will exploit. We definitely expect to see an uptick in ransomware targeting schools."

When it comes to mitigating cyber risk in schools, there's no single comprehensive source of advice for what they should do. According to Motta, it's best to start with basic cyber risk mitigation that applies to all organizations, whether they're for-profit, non-profit, education or otherwise. That includes things like segmenting the network so that only the parts necessary for remote learning are accessible over the internet, and making sure that remote access is properly secured and that appropriate controls are in place.

"One of the best ways to secure educational institutions, as it turns out, is more education," Motta told *Insurance Business*. "We need to educate teachers, parents and students – especially younger students – on how remote learning is going to work, and how the school is going to communicate. We need to make schools aware of the potential threats to students, whether it's phishing scams or even the Zoom bombing that we saw emerge in the US a couple of months ago. It's just providing more education so that people can be vigilant, they can be on the lookout for suspicious emails."

One point Motta was keen to stress is that it's barely realistic to expect educational institutions to overhaul their entire cybersecurity in the space of a few months, especially in the middle of a global pandemic. To be realistic, and acknowledging that a cyber incident could occur, one of the most practical things that educational organizations can do is make sure they have back-ups, so they can restore their functions in case something does go wrong.

"Beyond the back-ups part, they need to focus on how to limit the potential breach or compromise of student data," the Coalition CEO added. "Again, now that these networks are connected to the internet, that's more of a concern. So, going through and making sure that they're only storing data that's absolutely necessary, and doing what they can to limit permissions in their network and limit access to sensitive student data is going to be important.

"Finally, they need to assess their vendors. One of the ways in which educational institutions are scrambling to make remote learning work is by relying on third-party vendors. They're relying on technology providers to get these services, and if they're not diligent about the platforms they're choosing, they could inadvertently be exposing their students to more risk, even though they may feel like they're solving the core issue, which is how to how to pull off a hybrid education scheme."

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### What Should You Do If Your Employer Suspends Your 401(k) Match?

By Carrie Schwab-Pomerantz

### **Key Points**

- If you're thinking about stopping your 401(k) contribution because your employer suspended the match, you may want to think again.
- A 401(k) offers a lot of benefits, match or no match.
- Your current circumstances—as well as your future security—are important factors in making this
  important decision.

You've probably heard me say many times that specific financial advice depends a lot on your individual circumstances. And this is one of those questions that certainly fits that category.

The pandemic has had a major economic impact on employers as well as individuals. According to a national survey by the Plan Sponsor Council of America, more than 20 percent of large organizations had already suspended matching 401(k) contributions as of April. So, you're not alone and I'm quite sure millions of Americans are asking themselves the same question.

To me, saving for retirement should be a universal priority. The beauty of a 401(k) is that it offers tax advantages and makes regular contributions seamless. Having a match on top of that is icing on the cake—but *not* having it doesn't negate the other benefits.

But here's where your own circumstances come in. When money is tight, you may have to rethink and reprioritize. You don't want to jeopardize your future, but you also don't want to make imprudent decisions like racking up a huge credit card bill or defaulting on other commitments in order to continue contributing.

On the other hand, if your budget still allows you to make regular contributions, you definitely should. In fact, as counter-intuitive as it may seem, now could be the time to *increase* your contribution to make up for the lost match. (It's possible you've been under contributing all along!)

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It's kind of a balancing act. So before you make a decision, there are a number of things to consider.

### Start with these questions

While your present situation always impacts the way you plan for the future, in times like these you may need to take an even closer look. For instance:

- **How stable is your job?** When the company you work for, whether large or small, is looking at its balance sheet to find ways to economize, you want to be realistic about the future of that company. Are there layoffs ahead? A cutback in hours? If you think your position could be impacted, now's the time to make sure you have enough cash on hand to make it financially if your job situation changes. Which brings me to the next point.
- **Do you have an adequate emergency fund?** Today's uncertainties have brought the importance of emergency funds front and center. The standard recommendation to have enough cash easily accessible to cover three-to-six months essential expenses may even be an understatement. If your emergency fund is less than adequate, building it up should be a primary focus. Look at your budget. Can you redirect some dollars to this important fund? If there's no other way to do it, you could reassess how much you're currently contributing to your 401(k) in order to balance present financial stability with future security.
- Have your savings to date been adequate? A common employer match is 50 cents on the dollar for the first six percent of your salary. This means that if you've only been contributing up to the match, you've been contributing nine percent between you and your employer. That's good, but below the 10-15 percent that I recommend for someone in their 20's (an older person just beginning to save may need to contribute even more). If you're behind in your savings already, you'll likely have to work even harder in the future to catch up.
- How close are you to retirement? This is a crucial question. If you're far from retirement, you may feel like you have plenty of time ahead to save. But the reality is that the earlier you start saving—and the more aggressively you save—the more time you have to benefit from potential market appreciation and compound growth. Stop saving now and you've lost the power of time. Conversely, if you're close to retirement and still have a way to go to meet your savings goal, every dollar you save now is essential.

### There's more to it than the match

While getting an employer match is a definite plus—and an opportunity you never want to pass up—there's more to it than that. Yes, stopping contributions or temporarily reducing your percentage would put more dollars in your pocket and potentially help ease your cash

crunch. On the other hand, it's a trade-off, not only in terms of your future security, but also your current tax situation.

If you have a traditional 401(k), your contributions are tax-deductible, which lowers your taxable income. Decrease or completely stop those contributions and you potentially increase your tax liability. You also decrease your long-term, tax-deferred earnings potential. If you have a Roth 401(k), you don't get an immediate tax benefit, but the ability to take tax-free withdrawals in the future is huge.

### It doesn't have to be all or nothing

If you need some extra money now for essential expenses or to boost your emergency fund, reducing your contribution (rather than stopping it completely) could make sense in the short term. But promise yourself you'll recommit to saving more as soon as things turn around. Because match or no match, when it comes to long-term retirement saving, contributing as much as you can to a 401(k) is one of the best things you can do.

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### Why it's important to get your flu shot this year

Now more than ever, we all need to do our part to prevent the spread of illnesses. The best way to protect yourself from getting the flu and keep you from spreading it to others is to get vaccinated.

Once per flu season, **flu shots are covered for people with Medicare**, when you get it from your doctor, pharmacy, or other health care provider that accepts Medicare or your Medicare plan.

All places offering flu shots should be following CDC guidance to ensure you have a safe place to get vaccinated. This includes that patients wear a face covering and maintain social distance in areas like waiting rooms. Visit **CDC.gov** for more information on how to safely get a flu shot during the pandemic.

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