Action: We are asking you to set a 24-hour period during which you can get the maximum number of sub-chapter members to call their Congressional Representatives to either thank them for their vote against the federal budget or express their frustration about their vote in favor. (The voting record is attached to the email.)

<u>Background:</u> The House passed a budget bill establishing the budget for the 2025 fiscal year and setting forth budgetary levels for the fiscal years 2026 through 2034.

This bill proposed cutting trillions of dollars in federal spending in order to pay for trillions in tax cuts, while also increasing federal funding within certain areas. The bill passed the passed the House, with a 217-215 vote, however, nothing can be done with the bill until Senate approval.

<u>Goal</u>: We need to ensure that the IL Congressional Delegation understands that AFSCME Retirees are watching their votes and will hold them accountable. We have a powerful voice when we use it in a concerted way, which is especially necessary at a time when many vulnerable seniors feel that their safety net programs like Medicaid, Meals-On-Wheels, LIHEAP etc, are being cut or eliminated.

<u>State Budget</u>: The IL General Assembly is entering their last month of session (hopefully). At this time, talks are ongoing over tier 2 pensions changes. We are cautiously optimistic.

State & University Insurance Changes: CMS has sent out correspondence that states that effective July 1, 2025, retirees or their covered dependents will now be required to enroll in the state's MAPD plan upon becoming Medicare eligible, regardless of whether one of them is not yet Medicare eligible. Medicare eligible retirees or their Medicare eligible dependents who are currently enrolled in the State Employee Group Insurance Program (SEGIP) are being directed to enroll in the TRAIL MAPD program during May. Retirees are being told that failure to elect the MAPD program will result in termination of coverage effective July 1.

AFSCME has a grievance pending regarding the unilateral decision by the state to impose this benefit change, a clear violation of the union contract. On multiple occasions, we have called on the state to reverse its course of action. Unfortunately, CMS has proceeded with implementation, including sending out communications to retired state employees.

AFSCME believes we should prevail before an independent arbitrator. However, we do not yet have a date for the arbitration hearing. Therefore, we do recommend that all impacted retirees take action in May to maintain coverage.

Also: For all AETNA TRAIL members, AFSCME members and staff identified a billing discrepancy provided at some rural health clinics. A retiree was charged more than the standard 15% coinsurance rate for medical services received.

We made clear that the union was prepared to move forward with a grievance. As a result, we are pleased to report that the member's claims will be recalculated—and more importantly, going forward, CMS and Aetna have agreed that the contracted 15% coinsurance will be applied to all in-network services, including those provided at rural health clinics.