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**FOR IMMEDIATE RELEASE**  
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## MEDIA RELEASE

### **Statement from Fresno Unified School District Responding to Allegations in Recent Letter of Demand**

An attorney for a group of Fresno Unified School District retirees has circulated a letter making unsupported claims that the District's lawful transition in 2023 to a Medicare Advantage plan breached the District's obligation to provide lifetime retiree health benefits to its former employees who met certain eligibility requirements and retired before April 17, 2006. These allegations are baseless, misleading, and have unnecessarily alarmed retirees who understandably care deeply about their health coverage.

We want to be absolutely clear: qualified retirees are receiving and will continue to receive health insurance coverage. The District's commitment to retiree health benefits has not been eliminated, reduced, or revoked. Everything that was promised to retirees in recognition of their years of service remains intact and continues to be honored today.

The issue currently affecting some retirees is not a loss of benefits or a contract violation. It is a provider network dispute, a circumstance that, while frustrating and disruptive, is not uncommon

in today's health care system and is being actively addressed. Network disruptions do not equate to the loss of coverage, eligibility, or guaranteed benefits.

We fully recognize how unsettling it can be when access to familiar providers is disrupted. Retirees deserve empathy, clear information, and solutions, not fear. Unfortunately, a handful of individuals have chosen to escalate concern by spreading incomplete and inaccurate information, including informing retirees to disenroll from their coverage before March 31. This is not correct for District group coverage. Opting out at this time would place a retiree in individual traditional Medicare rather than District-sponsored group coverage, and traditional Medicare alone does not include prescription drug or supplemental coverage unless purchased separately.

The Aetna Medicare Advantage plan currently in place for retirees resulted from a transparent and deliberate process that included retiree representatives from the Fresno Unified Retiree Association (FURA), the Fresno Unified School District, and its Joint Health Management Board (JHMB). JHMB consists of both management and union representatives, and agreement by both sides is required for it to take any action.

Before adoption of the Aetna plan, FURA utilized an independent health care consultant, Joanna Smith, CEO of Health Liaison, Inc., to advise it. She met with JHMB staff over an eighteen-month period from 2021 to 2022 to ask questions and raise concerns.

The timeline reflects a thoughtful and methodical process, not a sudden switch:

- April 20, 2021: Ms. Smith meets with JHMB professional staff. In that discussion JHMB staff shared what JHMB was evaluating for retirees and answered her questions;
- September 12, 2022: There was an additional meeting with Ms. Smith to update FURA on JHMB's progress on the retiree plan option being evaluated;
- October 6, 2022: There was a meeting with Ms. Smith and individual FURA members to present what JHMB was considering implementing. The meeting included discussion on plan design comparison, information on network access, prior authorization, coverage for dependents under 65, among other things;
- October 20, 2022: JHMB voted to move forward with Aetna;
- November 17, 2022: JHMB voted for a July 1, 2023 effective date for Aetna coverage.

From initial approval to active enrollment, implementation occurred over approximately nine months, underscoring the regulatory, operational, and logistical complexity involved.

It is also important to address how this situation has been covered publicly. Unfortunately, several reports have repeated claims from this small group and their attorney with little independent verification, and those claims are not supported by law or the facts of this situation.

The District remains committed to providing retiree benefits and working with all parties to ensure continuity of care. Retirees should not be concerned that their health care coverage is at risk.

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