



Minutes of the ANARCP Annual General Assembly Friday 31 May 2024 at SHAPE

1 Opening Remarks

The chairman Hessel Rutten welcomed the participants (the list of 65 participants and 7 invitees is at Enclosure 1).

He stated that there was more need than ever for the existence of ANARCP to protect NATO retirees. Retirees have seen their benefits eroded over time. There is a concern that NATO, with the support of the active staff, is now planning to make all retirees contribute to the Retirees Medical Claims Fund (RMCF).

There is also a concern that many current active staff that are under the Defined Contribution Pension Scheme (DCPS) will not stay long enough to go over the 10 years and will therefore not be interested to join ANARCP thus leading to a gradual decrease of ANARCP membership. Also there are concerns about filling ANARCP EXCOM posts and no candidates were put forward for the vacant post of secretary. Marc Stevenson has stopped as secretary leaving this post currently unfilled. Marc was thanked for his excellent support over the past three years when he acted as secretary.

The treasurer Jean Vanderwal was excused due to sickness, which implied that there would be no financial status report at the meeting.

Regarding the agenda of the meeting (see Enclosure 2) it was proposed that the Allianz presentation would be moved before the ANARCP briefing on health insurance issues. Also the presentation of the chairman of the Confederation of NATO Retired Civilian Staff Associations (CNRCSA) could not be given due to sickness of Jonathan Parish, the chairperson of the CNRCSA. With those changes the agenda was approved.

2 Address by Maj Gen Rocca, Patron of ANARCP

Gen Rocca started by mentioning that in the current climate the challenges of SHAPE are to give the best possible military advice to NATO. SHAPE is also transitioning to new tasks to better support the Joint Force Commands in their roles to deter crisis and conflicts. The Head of States have also approved the new strategic concept where the emphasis is to move from crisis management to collective defence.

To support all this the civilian staff component at SHAPE is growing from 10% to 30% leading to challenges of SHAPE J1 to ensure that a proper workforce is available, both military and civilian.

Gen Rocca concluded with mentioning the importance of ANARCP as ambassadors for NATO.

3 Presentation by Chief Civilian Personnel

Mrs Magda Bara, on behalf of the chief SHAPE civilian personnel, presented an overview of the challenges of the SHAPE J1 Civilian HR department.

One of the important tasks is the implementation of the new NATO wide HR strategy that focuses on attracting the best talent, train and maintain that talent and to provide competitive benefits. In 2023, 160 new civilians were recruited and many on short-term contracts. Dealing with many different nations and cultures remains a challenge.

4 Presentation by SHAPE Civilian Staff Association

Mr André Terrasse as acting head SHAPE Civilian Staff Association (SCSA) presented an overview of current civilian staff issues.

The SCSA represents about 1000 civilians from SHAPE and NATO CI Agency spread over four locations. The number of civilians has grown last year by about 240 and is expected to increase further.

Important topics are the petition against the DCPS which was signed by about 70% of all civilian staff and the staff survey that showed that the concern about the DCPS was on top of the replies while current erosion of contract conditions was second on the list.

5 Allianz Care Presentation

A team from Allianz Care was present to address any Allianz health insurance issues (see Enclosure 3). The team was headed by Dr Bojan Popadic with support from Mrs Elke De Cauwer and Mrs Nina Karcher who was available for one-on-one sessions with insured members.

Allianz Care has a dedicated team to support NATO consisting of 30 care advisors, 44 claims officers and 5 medical advisors as well as 3 provider managers that deal with hospital contracts. The NATO contract contains about 27,500 members and in 2023 about 274,000 claims were processed containing 609,000 invoices. Of all claims 1,464 required a correction of which only 400 were due to an Allianz error.

Allianz reminded of the existence of the free of charge additional Health and Wellness services available at the Allianz MyHealth app and portal and of the Allianz Voice of the Customer questionnaire that is sent to members to ask for feedback and also mentioned that they will provide a place to comment on the Allianz MyHealth app. Allianz further mentioned that the MyHealth app and portal can be used to find preferred (cheaper) providers.

Allianz then went into a question and answer session to address specific generic issues. The main issues are listed below:

Question	Answer
When contacting the Helpdesk they do not always understand the issue and do not always have access to the patient's file	The helpdesk is 24/7 manned, but in evening hours and in weekends the helpdesk is transferred to Ireland, who sometimes have problem accessing the file servers. This should not happen and will be looked at.
Can invoices be submitted in the national language?	Yes, national languages can be used.
When will the results of the Voice of the Customer questionnaire be available and can the invitations include a different subject as the current one can be seen as spam?	Results will be available in June and the suggestion of the different title will be taken into account.
Is the MyHealth app only in English?	Yes the app is in English but most reference documents are in English and French while some documents are also available in a few other languages on request.
Are the Health and Wellness contacts only in English?	Yes only in English.
Some medical devices are denied with reference to the Belgian list of approved medical devices.	Allianz indeed uses the list of Belgium insurance companies but as a minimum and in some cases Allianz can deviate from this list when the European Medical Agency (EMA) approves medical devices for certain conditions.
Claims from hospitals in the USA are sometimes passed to the member.	In case of direct billing, the member should contact the Allianz helpdesk who can ask the local representative AETNA to take care of the hospital claim.
Claims from hospitals are currently not visible in the MyHealth environment but can be provided on request. Can the invoices from hospitals be provided in the MyHealth app and website?	Unfortunately not, as hospitals submit their claims as "batches" with personal and medical information of several insured members. Due to that, Allianz can provide hospital bills to members only upon request for the moment.
Allianz insured members are not known in Germany and cannot get electronic prescriptions through the German eRezept system. Where access is available then no prescriptions are provided. How can German members ensure that invoices will be paid without the prescription?	Allianz is aware of this, so are the members. There are 2 options that NATO members in Germany use – one is to ask the pharmacy to print out the eRezept when they print the Kassenbon or members who use the German national app where eRezept is visible take a screenshot and submit it with the claim.
Allianz insured members in the Netherlands cannot receive the necessary indication required for admission to a public nursing home. How can Allianz Care help to solve this problem?	Allianz is looking into options with the support of our local partner CZ to meet the requirements of public nursing homes in the Netherlands.

Question	Answer
How can the claim for funeral expenses be submitted? Some members mentioned that Allianz is asking for more information besides the death certificate.	More info is required in case where the lump sum for funeral expenses is asked to be paid to an account of a family member – in those cases Allianz needs inheritance confirmation. We can pay always to the bank account of the deceased member or to notary or lawyer who are handling inheritance process.
How can remaining claims be submitted for members who died and for which the account has been closed?	Claims can be submitted by email or post using the policy number of the deceased member. All medical claims incurred before the passing of the member will be reimbursed.
Allianz has prepared a list of preferred hospitals in the UK. Is use of these hospitals mandatory?	No, these hospitals are preferred as they provide medical care for NATO members under better rates. Members are still free to select the medical provider themselves.
In some nations members are faced with bank charges when reimbursements are received. Can this be resolved?	Allianz always issue payment instructions with OUR marked meaning Allianz takes all the charges and fees. However, some banks outside of the EURO zone charge additional fees after the transfer is completed.
In Germany some members that have another primary insurance only receive a final invoice from the insurance after 3 years (the accepted limit in Germany). Allianz has refused these claims as exceeding the time limit of 2 years. How can this be solved?	Allianz always reimburses medical claims even after two years if the reason for late submission was caused by delays on the side of medical provider or primary insurance. Cases in question are mistakes and members can reach out to Allianz to reprocess those claims.
In some nations a case manager is assigned to support the insured members in finding the best solution for a nursing home. Are the cost for such a case manager covered?	This is considered as administrative fee and not a medical treatment so it is excluded from cover under NATO Medical Plan.
Is there a limit to the number of sessions per year with a physiotherapist?	No, however the governing rules of the NATO Medical Plan (medical necessity and appropriateness of the treatment) still apply. Also under the Affinity Cover there is a limited number of sessions for which the additional cover applies.
One member asked why the eye drops as prescribed by a specialist to stop age dependent eye degeneration are not covered?	Only products with active pharmacological ingredient are covered. A lot of eye drops do not contain active ingredients.
After submitting a 3 rd party consent form for a partner, the details of the partner are still not visible.	This should not happen and Allianz Care will look into this when some more details are known.

Question	Answer
Some members that retired before the age of 55 with more than 10 years of service can continue with the Allianz insurance on a voluntary basis. The communication with these members is poor and is not the same as with normal members.	Allianz Care is not aware of this problem and will investigate.

6 Presentation on Health Insurances

Huib Simons in his role as ANARCP health insurance representative provided an overview of the current health insurance issues of interest to members (see Enclosure 4). The topics covered included an overview of the current medical insurance, a discussion of generic problems with the Allianz insurance, an overview of the phase 2 of the modernisation of the medical plan and an overview of the status of the Retired Medical Claims Fund (RMCF).

As per 1 January 2023 there is a Base Cover insurance for all members that provides 90% reimbursement and now also includes the NATO Wide Supplement that reimburses up to 100% for hospitalisation, serious illness conditions and for handicapped children. Those that need to pay a premium pay 1.67% of their last active salary scale. In addition voluntary Affinity Cover is available and Supplements are no longer available.

The appeals against the removal of the Supplements have been lost and no further appeals are now possible.

Several generic problems with handling claims with Allianz Care were discussed. These included problems with claiming for minor surgery when conducted as a day-time treatment and this has now been clarified that 100% cover is available when the minor surgery was conducted in an operating theatre and with presence of an anaesthetist.

Another problem was related to insufficient reimbursement under the Affinity Advance and Plus options (the two lower cover options) when only a single all-inclusive invoice is received from the hospital and when diagnostic tests are included. In that case no cover is provided under the Affinity Advance and Plus options. This is not correct and will be further discussed with NATO Head Insurances.

Other problems are related to insufficient cover in case of care in a nursing home and in particular when no serious illness indication exists. Also problems were reported with direct payments to hospitals and about claims handling in the USA. All these issues will be further discussed with Allianz Care and with NATO Head Insurances.

After the change of the NATO medical Plan on January 2023, the modernisation of the NATO Medical Plan has continued with a phase 2 of the modernisation. This will address issues like updating the list of serious illnesses, considering options for improved home care and considering options for further cost containment.

ANARCP through the CNRCSA has submitted specific proposals for improving the list of serious illnesses and for introducing home care under the long-term care cover.

The CNRCSA proposal for updating the list of serious illnesses has been accepted and a new list with a new definition of what a serious illness is will be introduced as of 1 July 2024 and will also be published in the next year's update of the NATO Benefit Guide. It is to be

noted that the list is still not all-inclusive and other serious conditions can be approved on request.

The CNRCSA proposal for including non-medical support at home under the NATO medical cover has also been accepted and when finally approved it will include a fixed monthly allowance for non-medical support at home, when three or more of the six daily activities can no longer be supported without help. In addition a limited amount will be reimbursed for making adjustments to the home that are necessary to stay home longer. Discussions are ongoing about how much and how the premium will be collected for this additional insurance that will be mandatory for all insured members.¹

The RMCF pays for the medical premiums to ensure a Continued Medical Cover for retirees. The RMCF is funded through contributions from active staff and from contributions of some retired staff and the fund is invested and also received an investment return. A 2021 study had shown that under certain conditions the RMCF could be depleted somewhere between 2043 and 2051 and the active staff association (CNCSC) has proposed that more income needs to be generated by asking contributions from all retirees, also those that currently do not pay a premium. ANARCP and the CNRCSA do not agree with this assumption and have conducted its own study of the predicted evolution of the RMCF. This study has been approved by an independent actuary, that has also done actuary studies for the committee of staff representatives in the past. The study has shown that the initial assumptions as used in the 2021 study are no longer realistic and that with other assumptions there is no immediate risk of depletion of the fund and any decision to a change in contributions does not need to be taken now. The ANARCP position is that first a common understanding of the used assumptions will be required which will include knowledge of the impact of the modernisation of the NATO medical plan, before any decisions are taken on changing the contribution from retirees.²

7 Tax Issues

The chairman Hessel Rutten reported the situation of the Belgian and Luxemburg tax situation where in both countries the possibility exists to deduct the paid medical premiums from the pension income. This has now been confirmed by the tax authorities in both nations. The Belgium retirees have already been informed and tax corrections are being made. In Luxemburg retirees will be informed shortly when the details of the arrangements are clear.

The chairman also reported two ongoing court cases in the Netherlands against the incorrect taxation of invalidity pensions and about the incorrect taxation of the regular pension. Both cases were not fully won at the first court case and both cases will go in a higher appeal. During the appeal stage both cases will seek support from AAPOCAD, ISRP and NATO HQ to explain the NATO pension rules.

¹ As an after meeting note: the new premium is now agreed at 0.3% of the last active salary scale and the new cover will be introduced as of 1 January 2025, but with an initial 6 month waiting period before payments will be made.

² As an after meeting note: unfortunately at a meeting on 3 July 2024 the NATO Administration has not taken the CNRCSA study and recommendations into account and has followed the CNCSC request and will start the work to collect premiums from all members as of 1 July 2025.

8 Report on the Confederation of NATO Retired Civilian Staff Associations (CNRCSA) Chairman

Due to unavailability of the chairman of the CNRCSA, this agenda item was cancelled, but all areas of interest to the CNRCSA are also areas of interest to ANARCP and have been covered during other agenda items.

9 ANARCP Issues – Chairman’s report

The chairman mentioned several areas of concern to ANARCP, where ANARCP, through the CNRCSA, will continue to protect the interest of retirees.

Regarding the new NATO pension scheme, the DCPS, ANARCP is very concerned about the slow progress on fixing the DCPS problems and to ensure a decent pension for future retirees. One of these problems is related to the taxation of the DCPS lump sum after retirement in Germany, which is being discussed with the German Government and while a possible solution is considered no details are available and no certainty exists for German retirees that fall under the DCPS.

Also almost no progress exists about development of an alternate pension scheme for NATO that would be more in line with the pension schemes of the other coordinated organisations and despite that this topic has been on the agenda at NATO HQ for many years the only agreement is that more studies will be conducted to look at the options. While this is not a direct issue for current retirees, ANARCP is very concerned that NATO is currently not offering a decent pension scheme.

Another area of concern is the pressure of the active staff Association (CNCSC) to rebalance the premium share for the RMCF between active staff and retirees. What they mean with this is that all retirees need to contribute to the RMCF also those that retired before August 2016 with 25 or more years of service and thus currently do not need to contribute. This will then also affect retirees that currently fall under the Provident Fund and thus have no monthly pension from which the premiums can be paid. With the change of the footnote to Art 51.2 of the NATO Civilian Personnel Regulations (CPR) in 2016 it was specifically chosen to not impact any retirees that retired before the change, as otherwise their vested rights would be violated. Contrary to this the NATO Administration seems convinced that changing the footnote and effecting already retired staff would be no problem. This would be a severe violation of vested rights that NATO does not seem to care about and also appeals with the NATO Administrative Tribunal do not seem to have effect anymore since the Tribunal only seems to care about the process that is followed to reach agreements. ANARCP will continue to protect the interest of retirees on this issue but is very worried that the changes will be implemented anyway.³

10 Treasurer’s report

With the ANARCP treasurer Jean Vanderwal not available at the meeting, there was no discussion on the financial results of 2023 and no presentation of the budget for 2024. The 2023 financial report has been approved by the SHAPE auditor. Normally the 2023 financial report and 2024 budget need to be approved by the General Assembly, but without the

³ As an after meeting note: the NATO Administration has approved to start the work to collect premiums from all retirees as of 1 July 2025.

presentation of the treasurer this could not happen. The General Assembly approved that the EXCOM would have delegated responsibility to approve the 2023 financial report and the 2024 budget ones available.⁴

11 Any Other Business

The NATREP reports that were discussed during the ANARCP Plenary meeting on 30 May 2024 are attached for information for all members (see Enclosure 7).

No other issues were discussed.

12 Next meeting

The next Annual General Assembly will be planned in the Spring of 2025 and invitations will be sent when a date has been selected.

All participants were thanked for their participation and all were invited for the hosted lunch.

Enclosures:

1. List of Attendees
2. ANARCP General Assembly Agenda 31 May 2024
3. Allianz Care Presentation
4. NATO Health Insurance Presentation
5. ANARCP Treasurer's Report 2023
6. ANARCP Budget 2024
7. NATREP reports

⁴As an after meeting note: the 2023 financial report and 2024 budget were approved by the EXCOM on 19 July 2024 and are attached for info (see Enclosures 5 and 6).

ATTENDEES

Acar, Süleyman - EXCOM Member and
NATREP TUR

Arbeiter, Lisa

Arzeni, Vincenzo - NATREP ITA

Bara, Magda - SHAPE J1

Bauer, Michael

Bauer, Monica

Beublet, Freddy

Beublet-Deruyver, Nadine

Buades, Paul

Burny, Philippe

Cantrill, Mike

Chambers, Geoff

Controtti, Marco - EXCOM Member

De Cauwer, Ellen - Allianz

De Cock, Marie-José

De Vries, Victor

De Winter, Claude

Declerck, Philip

Delor, Jean - Deputy NATREP BEL

Derede, Nadine

Diers, Ailsa

Diers, Juergen

Dincer, Fehmi

Duvivier, Rose-Marie

Fazzini, Hector

Flabat, Roland

Fusshoeller, Robert

Gruwez, Willy

Güçer, Yigit - Deputy NATREP TUR

Gungor, Ismet

Hennebert, Corinne

Holmen, Kirsten Marie - NATREP NOR

Huey, Alan

Karcher Samuel, Nina - Allianz

Lannagan, Martin

Lefebvre, Alain

Leroy, Véronique

Lindner, Norbert - NATREP DEU

Loeckx, Rik

Maas, Herman

Maggi, Arnaldo

Maggi, Monique

Malet, Gérard - ARO Chair

Marsh-Verle, Raymonde (Mony)

Minet, Michel

Podrecca, Fabrizio

Popadic, Bojan - Allianz

Rait, Denis - NATREP GBR

Rigas, Konstantinos

Riis, Soren

Riis Moller, Ulla

Roca, Raimundo - Deputy Chief of Staff
Support Directorate

Rubens, Carina

Russel, Ranger

Rutten, Robert Hessel - EXCOM Chair

Sabbe, Jean-Paul

Sanders, Yves - NATREP BEL

Simons, Huub - EXCOM Vice Chair and
NATREP NLD

Sindoni, Don

Smits, Gwen

Smits, Jacobus

Soltesz, Jozsef

Stevenson, Marc - EXCOM Secretary

Terrasse, André - SCSA Vice Chair

Tezcan, Isabelle

Uytendhoven, José

Van 't Wout Von Staden, Wilhelmina

Van Linden, Joëlle

Veltri, Franco - Deputy NATREP ITA

Woodcock, David - Deputy NATREP GBR

Zanasi, Graziella



Association of NATO/ACE Retired Civilian Personnel
Association du Personnel Civil Retraité OTAN/ACE


ANNUAL GENERAL ASSEMBLY OF THE ANARCP

AGENDA







Friday 31 May 2024, 09:30 hours

No.	AGENDA ITEM
1.	Opening Remarks: a. Administrative Announcements b. Approval of the Agenda
2.	Address by our Patron ACOS J1
3.	Presentation by Chief Civilian Personnel
4.	Presentation by SCSA
5.	Presentation on Health Insurances – Huub Simons Health Insurance modernisation experience, Phase 2, RMCF, Allianz claims experience
6.	Allianz Care Presentation
7.	Tax Issues
8.	Report on the Confederation of NATO Retired Civilian Staff Associations (CNRCSA) Chairman
9.	ANARCP Issues: Chairman's Report
10.	Treasurer's Report – Jean Vanderwal
11.	Any Other Business
12.	Next Meeting





Your NATO dedicated team

 30 Care Advisors	 5 Medical Advisors	 44 Claims Officers
 3 Provider Network Managers	 Claims Admin Team	 Operations Manager

Dedicated IGO team based in Allianz Care's IGO Hub in Brussels

27 nationalities, +35 languages

What we did in 2023 for NATO

Helpline 16,357 calls 33,205 e-mails	Medical Services 1,248 GOPs 12,378 e-mails
Claims 274K processed claims containing 609K invoices	NATO Modernisation support More than 20 visits to NATO agencies with onsite consultations

For over 27,500 members located worldwide



Focus on Quality & Efficiency



SLAs

- Claims SLA maintained during the entire 2023



Quality

- First Contact Resolution for Helpline and Medical in high 80s percentile
- 1,464 claims (0.5% of total) required correction, out of which 400 due to our error (0.15% of total)



Efficiency

- TGs over the phone – TG in provider's/member's inbox within 15 minutes (16% of all issued TGs)
- Care Package Approvals – one stop shop for complex conditions
- FastTrack process for smooth and efficient service




Complaints


- 323 complaints registered in 2023
- Complaints per contact ratio of 1/1,040 (total of 336K contacts)




Customer
driven
solutions

Allianz  Allianz Partners

Health & Wellness included at no cost









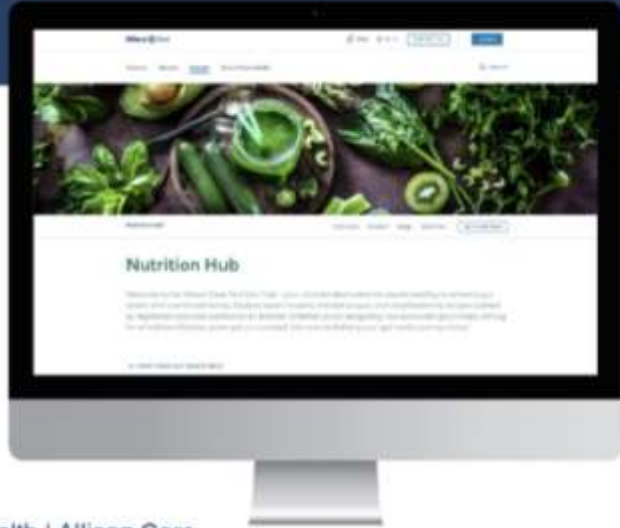
- Digital check-up
- Mind coaching
- Employee assistance Programme
- Travel Security Services
- Expert-led health & wellness webinars
- Body coaching

Allianz  Allianz Partners

Introducing the Nutrition Hub

A one-stop-shop for you to learn about gut health make healthy eating fun and accessible from anywhere

 New Research into Expat gut health	 Interactive quiz
 Expert insights and webinars	 Video & text recipes
 Diet advice	 Expat & Travel Guides



Find out more at: [Nutrition Hub: Caring for Your Gut Health | Allianz Care](#)



Let's stay in touch



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DIGITAL ACCESS TO CARE

Global telehealth services

Access to care needs to be convenient.

We're offering members worldwide the convenience of telehealth (videoconsultation or medical advice by Chat).

It's at a time and place that suits them, via our telehealth hub.



Obtain medical information 24/7 on a wide range of health topics

Book a teleconsultation with a doctor 24/7

Where teleconsultation is not available we have medical advice over the phone/Chat

Access prescriptions for non-emergency medical concerns*

Talk to a doctor via chat*


Medicines delivered to your door or collect them from your local pharmacy*

[Link](#)

* Subject to geographical availability

HEALTH & WELLNESS SUPPORT

Digital Check-Up

 Mental and Physical Health check

- Online questionnaires scientifically approved
- Individual reports for each respondent and recommendations
- Results of Psychological Wellbeing questionnaire can be discussed with a counsellor if warning signs are identified + handover towards EAP




[Link](#)

PSYCHOLOGICAL WELLBEING

- Energy
- Satisfaction
- Perception of health
- Stress management

PHYSICAL HEALTH

- Life habits
- Blood pressure
- Cholesterol levels
- Blood glucose
- Blood sugar control
- Blood pressure control
- Blood sugar

-  Secure
-  Confidential
-  Anonymous

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DIGITAL ACCESS TO CARE

HealthSteps: wellness coaching app

 An app for you to help members take steps towards a healthier life

Personalized guidance for members to :

- set fitness goal and choose an action plan,
- track activities to reach their goal,
- join challenges to keep motivated,
- and find tips on how to live and maintain a healthy life.

[More information](#)



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HEALTH & WELLNESS SUPPORT

WYSA: mind coaching app



Chat buddy and Human coaching
Immediate, confidential, high quality mental help support.

- Secure
- Confidential
- Anonymous
- Evidence-based



17

DIGITAL ACCESS TO CARE

Employee Assistance Programme

Professional advice, counselling and support helping members with:



- Stress, depression, anxiety and work/life balance
- Cross-cultural transition and cultural shock
- Legal and financial worries
- Family/parenting & relationships


[Access the platform](#)

18

DIGITAL ACCESS TO CARE

Travel Security Services

Services available 24/7 offering access to a rich pool of information, advice and support that's available whenever it's needed.



- Emergency security assistance hotline
- Country intelligence and security advice
- Daily security news updates
- Travel safety alerts and Newsletter

[Access the platform](#)

19

Health & Wellness Hub

THE WAY WE LIVE


All tools and services accessible in one place

Why connect to your health?

- Health & wellness advice and webinars

Tips, tools, infographics, quizzes, articles and guides to help members make healthier decisions when it comes to:

- Diet and nutrition
- Exercise and fitness
- Stress - Sleep
- Emotional Wellbeing
- Finding Happiness





NATO Health Insurance

31 May 2024

ANARCP Annual General Assembly

1



Overview

- NATO Medical Insurance
 - Modernisation of the NATO Medical Plan
 - Results of Appeals
- Experience with Allianz Insurance
- Phase 2 of Modernisation of NATO Medical Plan
 - Updating the list of serious illnesses
 - Improving cover for long-term care
- Retired Medical Claims Fund (RMCF)
 - Rebalancing of medical premiums

2



NATO Medical Insurance (Allianz Care)

3



Changes per 1 Jan 2023

- **Basic Insurance**
 - 90% reimbursed according to "Table of Benefits"
 - Premium is 1.67% of the last salary scale (excluding allowances)
(no premium in case of min 25 years of service and pension before 3 Aug 2016)
- **NATO Wide Supplement** now part of Basic insurance (earlier part of Supplements)
 - 100% for hospitalisation, serious illness or for handicapped children
 - Premium is included in Basic insurance
- **Affinity Cover** additional optional insurance
 - 3 options with different cover and cost (Advance, Plus and Pro)
 - Premium is dependent of cover and age and is per insured member (€150/year to €460/year)
- **Supplements A, B, C and D No longer available**

4



Appeals against deletion of Supplements B and C

- Two appeals with full support of ANARCP
- October 2022: Request for **Administrative Review** with NATO IS: Rejected because changes were not yet introduced
- February – July 2023: **Appeal procedure** with NATO Administrative Tribunal
- October 2023: **Hearing**
- November 2023: **Ruling – All objections have been rejected**
 - The statutory authority to adjust the coverage may adjust medical insurance without a specific request
 - The signed agreement to continue Supplements after retirement is not a contract
 - There was sufficient substantiation of the reasons for abolishing the Supplements
 - There was sufficient consultation with the parties involved (including CNRCSA)
 - The higher premiums for the Affinity Cover are in accordance with the solidarity principle
- **NO appeal is possible**
 - Changes are final
- ANARCP is very concerned about the Tribunal's weak reasoning and there is little confidence that this Tribunal will rule positive for retirees or active staff members in future cases

5



Experience with Allianz Insurance

6



Allianz Claims Experience

- Number of **official complaints** in 2023 decreased to 323 of which 144 were valid complaints (60% of 2022) against more than 335,000 contacts (claims or helpdesk contacts)
- Errors that are corrected after a reported problem or mistake may not have been included in the complaints statistics
- **Allianz surveys** have been sent starting in February to test customer satisfaction and to make suggestions for any improvements
 - Suggestion for Allianz is to change the subject title as some members see this as spam
- Always **contact the Allianz Helpdesk** in case of problems with claims or for general questions
(toll free in Europe 0800 1514 8585 or e-mail: unityhelpline@e.allianz.com)
- Please **contact ANARCP** if there are any problems with the Allianz Helpdesk that are not resolved

7



Allianz Claims Experience

- Problems with **cover for Minor Surgery**
 - minor surgery when conducted in an operating theatre and under supervision of an anaesthetist is covered at 100%
 - Allianz has been requested to update the NATO Benefit Guide at the next release later this year
- Problems with **insufficient cover under Affinity Advance and Affinity Plus**
 - Affinity Advance and Plus do not provide additional cover for diagnostic tests (CT, MRI and blood tests etc), only Affinity Pro covers this
 - No additional 5% or 10% reimbursement of specialist invoice if this includes a non-specified part for diagnostic tests
 - NATO IS has been requested to come up with a solution but does not answer the request

8



Allianz Claims Experience

- Problems with **insufficient cover for nursing homes**
 - NATO IS has been requested to reconsider the daily limits for care in a nursing homes to reflect the actual cost situation
- Problems with **direct payments to hospitals**
 - If Allianz does not have a contract with the hospital, then Allianz should be requested to conclude a contract so that payments can be made directly
 - In case Allianz does have a contract, the hospital often still wants a Guarantee of Payment (GOP) to be requested from the Allianz Helpdesk
 - In some cases Allianz has stopped payments to hospitals due to overcharging
 - In some cases the hospital has stopped the contract due to no or late payments from Allianz
 - Allianz Care has to come up with a solution for improvement

9



Allianz Claims Experience

- In the **USA** there are still **problems with using AETNA** as the intermediary.
 - Providers try to submit claims through the USA AETNA system
 - Providers try to submit invoices through Allianz Canada
 - Providers do not accept the Allianz insurance and ask for pre-payment
- Increasing number of **incorrect claims handling**
 - Denied claims for invalid reasons
 - Partial reimbursements
 - Incorrect treatment categorisation
 - Delayed payments, also for pre-approved treatments
 - No replies to complaints
 - Poor or late replies to questions

10



Phase 2 of Modernisation of the NATO Medical Plan

11



Phase 2 of Modernisation

- The **NATO Administration** has started working on several **outstanding issues** that will impact the Modernisation of the NATO Medical Plan
 - Improve the **list of serious illnesses**
 - Develop plans for **additional long-term care and home care support**
 - Consider options for better **cost containment**
- The **CNRCSA** has prepared **proposals for updating the list of serious illnesses and for additional cover for long-term care**
- The active staff confederation (**CNCSC**) has **prepared a proposal to rebalance the medical premiums** for active staff and retirees staff

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Updating the list of Serious Illnesses

- The CNRCSA **proposal** includes
 - A clear definition of what a serious illness is
 - A different classification of diseases, now by category
 - A number of new diseases have been added
 - The list is never complete and is only an indication
- The **proposal has been approved** with minor changes
- The **list remains non-exhaustive** and other medical conditions of comparable seriousness will be considered for cover
- The **full list will be published** in the next version of the NATO Benefit Guide, but will be used by Allianz Care as of 1 July 2024
- Contact the Allianz Helpdesk or Medical Advisor to **submit a request for a “serious illness” indication even if it is not on the list**

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Recommendations for long-term care

- The **CNRCSA proposal** includes
 - A proposal for improving the current ceilings for care in a nursing home
 - Proposal has not yet been considered
 - A proposal for non-medical support at home
 - Includes a monthly allowance when certain activities cannot be supported without help
 - Includes a limited cover for making adjustments to the home
 - Proposal is agreed in principle, but discussion about contribution are still ongoing
 - NATO IS wants a mandatory top-up cover at a fixed monthly premium
 - CNRCSA wants to include this under the Base Cover

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Retirees Medical Claims Fund (RMCF)

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RMCF

- A study was conducted by the ISRP (International Service for Remunerations and Pensions) in 2021 to assess the future **stability** of the Retirees Medical Claim Fund (RMCF) based on certain assumptions
- Most of the assessed scenarios **indicated that the RMCF could be depleted** somewhere between 2039 and 2051 dependent on the used assumptions
- The **active staff Confederation (CNCSC) has proposed to increase the RMCF contribution of retirees** through
 - Removal of the footnote of Art 51.2 of the CPR such that all retirees need to contribute
 - Contributions from Bridgers and Invalids
 - Reductions of cover for retirees that do not contribute
- The **CNRCSA does not agree** with the conclusions of the ISRP study and the CNCSC recommendation and has **conducted its own study** with validation by the CRP actuary
 - The study shows that with updated assumptions there is no immediate risk of depletion of the RMCF
 - The impact of the modernisation on cost containment needs to be analysed
 - No decisions on changing contributions have to be made now

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ANARCP

TREASURER'S REPORT for year 2023.

all amounts in Euro

TOTAL ASSETS

Bank account 01-01-2023	15.452,30
Bank account 31-12-2023	17.463,38
Saving account 01-01-2023	157.844,76
Saving account 31-12-2023	158.184,35
Total bank assets 31-12-2023	175.647,73

INCOME : SUBSCRIPTIONS

Via NPU by listing	16.859,99
Payment by bank for 2023	2789,51
CNRCSA Travels refund	3063,40
TOTAL	22.712,9

EXPENDITURES

TRAVEL 2023 for CNRCSA	2655,70
Travel 2023 for ANARCP	306,5
Dues refund	168
Bank charges	222,87
Postage	86,2
Web site	538,45
ADP Allowance	650
Appeals	13500
Local activities	466,6
Flowers	79,5
Official meeting	2341
Miscellaneous from club meeting	-13
TOTAL Expenditures	21.001,82

On 24-01-22 CNRCSA contribution of 2 € for a amount of 2414,00€

On 30-12-2022 CNRCSA contribution for 2023 of 2€ for a amount of 2428,00€

CNRCSA contribution for 2023 was paid in 2022 and audited that way

Test: 22712,9-21001,82=1711,08€

17463,38-15452,30= 1711,08€

Our financial situation remains very stable and safe

ANARCP BUDGET 2024 in euro

Details	Budget 2024	Financial 2023
INCOME		
Fees	20.000	19.649
AGA/DINNER	2500	2341
TRAVEL confederation 2022	2780	3063,40
Interest earned	220	154,63
	25500	25208
EXPENDITURES		
ADP ALLOWANCE	1500	650
AGA/DINNER +ExCom	3000	2341
TRAVELS for ANARCP	1000	306,5
TRAVELS for CNRCSA	4000	2655,70
BANK Charges	300	222,87
NAT Rep Activities 15€/mem	1200	466,70
NAT REP act with room reserv	1000	0
FLOWERS Funerals present	150	79,5
Contribution to CNRCSA 2 €	4000	0
Website	600	538,45
Miscellaneous/reserved	8750	0
Total	25500	7260,72
Balance	0 euros	

Yearly contribution amount remain 20 euros

J.V. 24 April 2024

NATREP report of ANARCP Belgium (2023 – 2024)

We are a little bit more than 200 members. From the last twelve months, I retain these two topics :

- The question about taxation of the social contribution seems to be solved now. An agreement has been found between NATO and the Belgian administration and to my knowledge, regularizations have been done for the previous years. For the future, these social contributions are directly deducted by the NPU from the total pension paid amount as stated on our last received Tax Declaration.
- Members recognized with an invalidity have specific questions/problems and it's not obvious to find appropriate answers. It could be interesting to publish a specific document related to these cases.

Yves SANDERS

NATREP Belgium

NATREP report of ANARCP Denmark (2023 – 2024)

1 Personnel Issues

No changes to numbers etc.

2 Pension, Financial and Tax Issues:

As the previous 4 years, “Bank fees” are still not solved. I have approached NPU just before Christmas 2023 and the reply was:

However, please note that bank fees charged in Denmark, Norway, USA and Canada can be refunded to pensioners once a year to pensioners who request it and attach a proof of payment, so this shouldn't be an issue.

Jérôme Gal Pension Administrator Executive Management

Surprised that the US/CA representative never have heard about bank fees!!!

I have contacted the distribution bank “Danske Bank” last month without success. They will not provide any information to me due to the GDPR regulations. Every single pensioner will have to approach their individual's local bank and have them to raise the question to Danske Bank. Danske Bank will request a fee for an answer, if they answer.

The annual Tax Declaration was received again late in Denmark.

NPU gave ONE pensioner this information after deadline:

It has been agreed between the Denmark tax authorities and the SIRP/ISRP that the deadline for you to file your return is 1st July 2024.

Elodie BOUJEMA, Pension Administrator, Executive Management-Human Resources

It would have been nice if such information was distributed timely to all retired in Denmark. Yes, we know that we can change figures but we cannot change interest rate which is added and is extremely high, if you are late reporting.

Maybe like the above, it can be reimbursed “so this shouldn't be an issue”!!

3 NATO Health System (Allianz):

Last year after the AGA together with Bojan Popadic, we tried to find a solution on the bank fee issue as well. After one email answer in May, the only reaction I could have was an “Out of Office” reply. Finally in September Bojan Popadic answered that

“CITI bank is still investigating the issue both internally and with Danish partner banks.

In December I decided to ask my own bank to approach Citi Bank Branch in Copenhagen why the “OUR” code was changed. I provided a personal Transaction sheet as proof. NO reply from Citi Bank.

During this period the issue was coordinated with Huub Simons. Thank you Huub, for your support.

I have advised the pensioners not to forward small claims and make a remark that bank fees apply. Nevertheless one pensioner's claim was divided by Allianz into 4 payments and of course 4 times fee. He was certainly not reimbursed 90%

4 Social events:

One social / information activity has been held in 2023.

5 The Future:

As I will not be present at the meetings, I have quoted the different answers from NPU and Allianz for better understanding of the issues. I apologize for the details in my report for those who do not have similar issues.

As I indicated last year to the ANARCP Secretary, I will not continue to be your Danish National Representative.

I have briefed the Danish ANARCP members of my decision. They fully understood and accepted my decision. I promised to continue to support and provide advice on a private basis also to the non ANARCP members. There are no candidates at the moment as replacement.

Mrs Kirsten Overby (Deputy) resigned a year ago. I will resign 01 June 2024.

Thanks to all my fellows representatives and EXCOM for many hours of cozy company and serious discussions.

I wish you all the best and good luck

Gert Ladegaard Thorsen

NATREP Denmark

NATREP report of ANARCP France (2023 – 2024)

This report is from Graham Robertson, currently NATREP for France, ably supported by Günter Franzreb whose reservoir of knowledge continues to be useful to this association. Since France is a large country and our membership is spread throughout, communication with members has been mainly through email, telephone and occasionally by letter.

Previously, there were 25 members (plus dependants) on the list of those living in France including 10 Life Members. Sadly, we have lost 5 of our number since the last report. These included 3 Life Members and Christian Charnier, a previous NATREP.

We are also trying to re-establish contact with 2 Life Members. The problem is that they are not responding to emails, letters or phone calls and the Pensions Unit cannot help us. A possible route would be to ask if they are still using Allianz medical care but, at the NATREP level, we would come up against GDPR if we sought such information.

The good news is that we have 2 new members. One is a recently-retired civilian and the other is Anna, the widow of Christian Charnier.

Recently I emailed all of those members in France who are contactable to see if they had any items they wished brought up at these meetings. The few replies received were mainly supportive of the work done by ANARCP/APCROC. One member commented favourably on the speed with which Allianz turns round his claims.

The effects of the re-organisation of the medical benefits system are now becoming clearer but we still have no idea how many have taken up the Affinity offer. One comment I have received is that the Affinity offer taken up might not be appropriate for that individual. He is now able to assess the benefits against the cost to see whether he should continue with the supplement. I assume that others also might be assessing the actual benefits as their experience of the new system develops.

In summary, ANARCP/APCROC membership in France is reducing but those remaining seem generally satisfied with the efforts being made on their behalf by this association. Let me finish with my regret that a family medical problem means that I am unable to submit this report in person.

Graham Robertson

NATREP France

NATREP report of ANARCP Germany (2023 – 2024)

This has been my first year as German Representative for the ANARCP and I must say it was a very busy year. Many Requests came in and I can say that almost all were solved , also by the help from the Allianz and the NATO Pension Unit.

First some short background information about myself:

My name is Norbert Lindner and I'm 69 years old, living in Germany and being married.

Hobby's in specific, I like Cars and playing Golf and a few more other things.

I worked for NATO about 37 years at the E-3A Component in Geilenkirchen /Germany as a NATO Civilian. The last position I filled was the Configuration Manager for the Mission Software at MSEG (Mission Support Engineering Group) and in January 2020, I retired.

Here are some statistics during that time frame as the NATREP Germany May 2023-May 2024:

10 Members (or Spouse) deceased

17 New Members joined the ANARCP

Email Traffic was about 900 emails that had been send and/or received

Currently, we have about 220 ANARCP Members listed in Germany in the Age of:

from 60 years old to 70 years old about: 69 Members
from 70 years old to 80 years old about: 92 Members
from 80 years old to 90 years old about: 49 Members
from 90 years old to 100 years old about: 10 Members

During my analysis, I found out that about 13 (ANARCP) Members do not have a Computer or Smart Phone and therefore cannot be reached by email or Mobil Phone. Every time I send out a Document or Message by email, for those 13 Members in specific I send a Letter by Postal, so that they are informed the same way. Doing that, I had already a lot of positive response and they value that type of being not forgotten.

The last few months, I send out Information to the Members, like the Handbuch für Rentner und Hinterbliebene Deutsche version 2024 (Manual for next of kin) and the Pflegeversicherung, welche Schritte sollte ich machen ver. 03 DEU (Nursing home or day care what steps should I take first ver. 03 ENG). This had been very much appreciated and I received many positive responses.

It also came to my attention, that not all Members are firm with the English language and therefore when I send out Documentation, it has always a German, English and Dutch Version attached. The reason for that is, when a member deceased and the Spouse does not can read the Documentation provided in English (due to his or her background), the Spouse has then the possibility to understand what the Document is all about. Also this extra service, a lot of Members value very much.

What I currently can see, is that the Main Issue for the ANARCP Members is the Home or/and Day Care and how they can handle that in Germany (request).

A follow up letter will be prepared, based on experience from ANARCP Members and the way the Allianz supported them (of course with no names or places).

In addition, I prepared a so called NATREP Germany Continuity Binder with all important Information, for the next NATREP Germany.

Some Way ahead suggestions!

To update/modify the ANARCP Membership Form. Also that new Members can fill in the Form online. In addition to give the new Member the possibility to add a third person on the Form (Son/Daughter etc) with their email address.

To find a way to inform the still working NIC's about the ANARCP and what they stand for.

Norbert Lindner

NATREP Germany

NATREP report of ANARCP Italy (2023 – 2024)

1 Intro

Mr. Chairman, ladies, gentlemen, good afternoon. My name is Vincenzo Arzeni, and I am the NatRep for Italy.

2 Personnel Issues:

We, in Italy, are around 80 Former Staff Members (FSM).

It is not easy to know the exact number of FSMs residing in Italy because it is difficult to be informed, from the NATO Headquarters in Italy, about retired NICs.

We have established dialogue with the Human Resources Head, in JFC Naples, to improve the relationship. But we have not seen practical results yet.

Number of paying members? We are inquiring non-paying members to verify their status.

We had one deceased member.

3 Pension, Financial and Tax issues:

CPS

The Invalidity Pension, received by one of our colleagues not yet 65 years old, was recognised by our taxation office, Agenzia delle Entrate, as exempt from taxation. He wrote to the PU asking for the interruption of the payment of the Tax Adjustment until he will be 65. In spite of the document he received from Agenzia delle Entrate, the PU has put on hold his request. It appears that they would only accept changes that are validated by ISRP, as the sole interface with national tax authorities. Of course we have no visibility of their correspondence with ISRP. Meanwhile, our member continues to receive the tax adjustment.

It should be noted that ISRP has never received an Official Italian Government Document stating that our Pension is taxable but just a declaration from Agenzia delle Entrate.

Within this framework, it would be useful if ISRP would request the Italian tax authorities to provide a formal statement about the taxation of the family allowances. In Italy, those allowances are not considered as part of the personal income. However, they are included in our annual tax statement as part of our pension and are also considered in the calculation of the tax adjustment. We are therefore de facto obliged to pay taxes on those allowances. With a formal statement clarifying their exemption from taxation, allowances should be deducted from our tax statement, as per Article 42 of the Rules of the Coordinated Pension Scheme. Or, at least, they should be spelled out, leaving to us the responsibility not to pay taxes on them.

My final tax-related item refers to the annual tax statement. The NATO Pension Unit planned to provide the annual statement, for residents in Italy, during the last two weeks of June.

That would leave insufficient time to bring the figures to a tax consultant and find out how much to pay. Indeed, our deadline to pay the final increment of taxes for the previous year is 30 June.

Several colleagues complained with the NATO Pension Unit and they eventually acknowledged the problem and promised to accelerate the posting of the tax declarations. It is apparently a solved issue, but we shall know it when we actually receive the tax statement.

DCPS

Mr Chairman, as we know the DCPS is not a Pension Scheme. Due to the fact that the DCPS is going to be reviewed, in the new Scheme the Active Staff Member, if he /she has a position in his/her National Pension System, must have the possibility to continue to participate in it. This option must be included in the new DCPS and approved by all the NATO Nations.

4 NATO Health System:

The new NATO Health Policy has not caused significant changes in Italy. As I know, no Former Staff Member in Italy has signed any Affinity Product. I received no complaint about services provided by Allianz.

5 Social Events:

We had a social event for Easter 2024.

6 The Future:

We are observing a decline in membership, which is in common with all the other Associations. Being unable to receive the list of new pensioners from the local NATO Headquarters, due to privacy rules, it is difficult for us to contain this decline.

This concludes my report Mr Chairman, thank you all for your attention.

Vincenzo Arzeni

NATREP Italy

NATREP report of ANARCP the Netherlands (2023 – 2024)

1 Introduction

This report of the ANARCP National Representative of the Netherlands covers the reporting period of May 2023 until May 2024. This report is coordinated with the 8 members of the Dutch Chapter steering group who provide advice to the National Representative, Huub Simons, and deputy National Representative, Klaas van den Broek.

2 Members

The number of registered ANARCP members in the Netherlands at the end of May 2024 was 398 as compared to 382 at end April 2023. The free representation of ARO and NSPA members has stopped and the involved retired staff members were invited to join ANARCP and 5 ARO members and 1 NSPA member have become ANARCP member.

There are 66 Life Members, but 7 of those pay contribution voluntarily.

31 members have not provided an authorization for automatic deduction from their pension and have to pay their contribution on request. For 7 members the 2024 contribution has not yet been received. Reminders for payment will be sent out.

Over the reporting period May 2023 – May 2024, we were informed that 12 of our ANARCP members in the Netherlands have died. This included Gerlof Oudega, one of our members of the Dutch Chapter steering group who had advised many members in the past about local tax issues.

3 Sharing of information

During the reporting period, ANARCP-NL has issued three newsletters in July 2023, in November 2023 and in February 2024. These newsletters in Dutch provided information for our Dutch members about the status of the modernisation of the medical plan, about the local tax declaration and about pension issues. In addition several e-mail messages were sent to members with an e-mail account. 27 of the members in the Netherlands have no e-mail account and receive the newsletters by post. Printing service and stamped envelopes are provided through the NCI Agency in The Hague.

In addition a website is maintained at www.anarcp.nl where members in the Netherlands can log-in and can find former newsletters and specific information about the NATO Medical Plan, local tax issues and the manual for next of kin (in Dutch).

4 ANARCP-NL yearly meetings

On 13 March 2024 and on 19 March 2024 the Chapter in the Netherlands organised the yearly information meetings, one in Brunssum and one in The Hague. Both meetings were attended by in total 170 registered members. Topics that were addressed are the same as presented in the newsletters, but at the meeting more time existed to discuss details on how to file the tax declaration, about experiences with submitting claims with Allianz Care and in

particular to address the situation related to long-term care in the Netherlands. These live sessions are well appreciated by the members.

This year both meetings needed to be organised using commercial meeting facilities as meeting rooms at NATO facilities were not available. This resulted in a higher cost per attendee and the ANARCP EXCOM is invited to agree on the reimbursement limits for social events that considers possible meeting room charges as well as refreshments.

5 NATO Pension Unit

The tax declarations from the NATO Pensions Unit (NPU) were again too late this year. According to the NPU schedule the tax declarations should have been received before 1st March, but letters were only received 12-15 March. Electronic copies at the NATO COPS portal were initially not available due to a technical problem. While there was still time for the final tax declaration before the end of March, many members, based on the original schedule, had already contracted an accountant to submit the tax declaration in early March. All these appointments had to be changed.

As a second problem, the retirees in the Netherlands received a new form that needed to be returned to the NPU, stating that the full pension was declared for tax purposes and asking for the income of the partner. Such forms were never requested in the past because of a special arrangements with the Dutch tax authorities. Further clarification with the new Head of the NPU, Mr Dominique Beckers, confirmed that the form was not needed. Our Dutch members were informed by us accordingly.

Both these issues created a lot of questions from our members and hopefully we will see some improvements next year.

6 Taxation in the Netherlands

Some of our members in the Netherlands have submitted objections to their tax assessments. Some objections are related to the different taxation of an invalidity pension as compared to a normal pension. Other objections are related to a different interpretation of the tax law related to pensions received from one of the coordinated organisations. Two objections have resulted in court cases. To support the court cases our ANARCP chairman, Hessel Rutten, requested a statement from AAPOCAD that clarified that an invalidity pension is a normal pension and not an insurance and that also the household allowance and tax adjustment are integral part of our pension. Unfortunately during the two court cases the judges ignored the AAPOCAD statement as not representing a formal NATO position. Also both court cases were lost, leaving a next step to submit an appeal with a higher court. To support these appeals, new statements are now requested from ISRP and NATO IS to endorse the AAPOCAD statement as a formal NATO statement.

Since both these appeals are seen as test cases for others, ANARCP has advised our members in the Netherlands to submit formal objections to any received tax statements to protect the future interest in case the higher court rules favourably.

7 Modernisation of the NATO Medical Plan

As reported in the previous NATREP NL report, one of our members in the Netherlands started a formal appeal with the NATO Administrative Tribunal with a specific request to reinstate the Supplement B. In parallel a similar appeal was started by a member in Türkiye with a specific request to reinstate the Supplement C. Both appeals were extensively supported by ANARCP, both through advice, but also financially to pay for the expenses of the legal counsellor.

Unfortunately both appeals were lost, as was already reported in the ANARCP Bulletin 2024-1 of February 2024. Unfortunately no further appeals about this topic are now possible and the Supplements will not be reinstated.

As a result of the changes to the NATO Medical Plan and deletion of the Supplement B, several members have reported some problems with reimbursements that are directly related to the changes.

One of the problems is related to the cover for care in a nursing home. Some members discovered that, while they were fully covered in 2022 under the Supplement B, as of 2023 they only received 90% of the applicable daily limit, with no additional cover under the Affinity Products. Fortunately the involved members could request a serious illness indication to receive 100% of the double daily limit, which helped. However, this still left a gap of several months with insufficient cover and requests for a hardship assessment to receive an additional reimbursement are still ongoing.

Another problem is related to the fact that invoices from hospitals in the Netherlands are provided as a single invoice covering the consultation, diagnostic tests and treatment. This is no problem under the Base Cover where 90% is received, but it is a problem when claiming the additional 10% under the Affinity Cover. Especially when the lower cost Affinity Advance or Pro options are contracted, that include additional cover for specialist fees but exclude the cover for diagnostic tests, Allianz then refuses to pay anything under the Affinity Cover when a single, all-inclusive invoice is received. This is unfair to those that have taken an Affinity Cover, but this issue is still unresolved.

8 Allianz Care general issues

During the reporting period several members had reported problems with Allianz Care, mostly related to incorrect or late reimbursements. All known issues were resolved through direct contacts with Allianz management. A few issues were related to mistakes made by Allianz and mostly related to the definition of minor surgery conducted by a specialist. All these issues have also been discussed with Allianz and have been corrected.

More cases are now reported about problems with members that cannot receive treatment in a hospital since either no contract exists with Allianz Care or in case no Guarantee of Payment has been issued. While Allianz Care is usually supportive to try to find a solution in some cases members are still denied access to the hospital. These problems are a consequence of using an insurance that is not recognised in the Netherlands and causes much concern with our members.

A related problem exists for members that need access to a nursing home. Because Allianz is not recognised in the Netherlands, it is not possible to get access to one of the public nursing homes in the Netherlands. ANARCP contacts with the Dutch Ministry of Health Care

indicated that there could be a possible solution if NATO would share the Policy of the NATO Medical Plan with the Dutch Government. If the NATO Policy indicates that long-term care is sufficiently covered then there is no financial risk for the Dutch Government and access to public nursing homes could then be arranged. Unfortunately NATO HQ has denied to share the NATO Policy and has claimed that other solutions are being discussed, but no details have been provided. This is an important problem in the Netherlands that needs urgent resolution and will further be addressed through the JCB and JCB WG on Insurances.

Huub Simons

ANARCP National Representative for the Netherlands

NATREP report of ANARCP Norway (2023 – 2024)

1 Background/Intro.

ANARCP Norway is located in Oslo. Our members worked at the old HQ AFNORTH at Kolsås, the Joint Warfare Centre at Jaatta/Stavanger, SHAPE (Mons) and NCIA (The Hague). In addition to NATO pensioners, we also have several surviving spouses as members.

Most of our members live in the close vicinity of Kolsås or in the surrounding south-east Norway and a few live in the Stavanger area. One member lives in Bodø which is some 1200km by car north of Kolsås.

2 ANARCP Norway Annual Meeting 2024.

The ANARCP Norway 2024 will be held at Kolsås 23 April 2024. To be allowed into the Kolsås Military base we need a sponsor who is working at the base. Luckily, Mr Einar Thorsen, our chairman, works as consultant at the base and will be our sponsor.

Our planned agenda items are as follows:

- News from ANARCP Norway
- News from ANARCP Central
- News from CNRCSA
- News from AAPOCAD
- News from NATO Pension Unit
- Other items
- Elections
- To meet old friends and enjoy coffee and cakes together

3 Personnel Matters.

Two of our members passed away, Anne Lindvig and our former chairman over many years Jan Eiken, one member moved to The Netherlands, Johan Duister, and one newcomer, Dag Wilhelmsen, joined since our last report.

We currently have a total membership base of 32 as follows:

- AUTO deduction: 22
- Life Members: 3
- Direct Payment 2023 Dues: 7

4 Allianz

We have five members on NATO Individual Continuation. Communication from Allianz to this group has been very poor and numerous attempts at having them added to relevant Allianz mailing lists has still not given the desired result.

5 Bank Charges

We surveyed our members and the majority responded that they are not charged anything for receiving their pensions to their Norwegian bank accounts. However, 5 of the 21 respondents reported that they indeed are charged a fee for this. Surprisingly, their accounts were in 4 different banks, so no pattern has been found in this behavior from the banks. Fortunately, all 5 reported that they are reimbursed the bank charges by the Pension Unit as per the annual procedure established for this.

6 Next of Kin handbook

The Norwegian chapter has developed its own version of this document which has been very well received by the members.

This concludes our 2023/2024 NatRep Report.

Kirsten Marie Holmen

Einar C. Thorsen

ANARCP Norway

NATREP report of ANARCP Türkiye (2023 – 2024)

1 Main Issues of 2023-2024:

a. Supplement C:

Our main endeavour in 2023 was focused on the possible reinstatement of our Supplement C, a NATO Group Insurance Contract supplement specific to Türkiye. NATO IS, implementing the so-called new NATO Health Insurance System rescinded again Supplement C effective 1 January 2023, along with Supplement B for the Netherlands and Germany, and offered instead a new commercial supplement called the Affinity Products which did not meet our exact needs. They were more expensive than the supplements and offered outside the new NATO Health Insurance Contract. A pensioner colleague in Izmir lodged an appeal with the NATO Administrative Tribunal (NAT) against that component of the new NATO Health Insurance Contract in order to have Supplement C restored as of 1 January 2023.

Being heavily involved in all the health insurance developments as a result of being a member of the CNRCSA Health Insurance WG, I spent a great deal of time with my appellant colleague dealing with all the correspondence involved in order to obtain a positive decision from the NAT. Unfortunately, despite a previous favourable NAT decision on the same issue, my colleague's appeal was rejected this time mainly due to the insensitivity of a new panel of judges who seemed to support the Administration's decisions than the Administration's obligation for duty of care for a few pensioners in Izmir. The decision was an unpleasant surprise which shattered our trust in the dependability and consistency of NAT's decisions thus discouraging us from using this only venue of justice in NATO in the future.

b. Erosion of Pensions in Türkiye:

The second and perhaps more important issue concerning pensioners in Türkiye was, and still is, the erosion of pensions due to very high domestic inflation.

Salaries and pensions in Türkiye have lost their purchasing power gradually by more than 50% over the past few years due to inadequate inflation adjustments based on the monthly inflation figures published by the Turkish State Statistical Organization.

As a result, NATO salaries have become uncompetitive vis-à-vis other international organizations employing staff in Türkiye. Consequently, the NATO headquarters in Izmir experienced a serious civilian personnel retention problem which led to a salary survey in Ankara and the increase of A- and L-grade staff salaries by 100% starting from January this year through the addition of a special allowance approved in the 338th report of the CCR. However, this increase was not applied to the pensions stating that it was only a measure to restore the salaries' competitiveness and had nothing to do with inflation. It was an inexplicable justification to deny the raise to pensions which are based, as you know, on salaries according to the years of service.

I took the issue through the CNRCSA to the attention of the NATO Assistant Secretary General for Executive Management in December to request that the same increase be applied to pensions in Türkiye. However, NATO IS decided to send the issue for decision by the Committee of the Representatives of the Secretaries/Directors-General (CRSG), instead of solving it in-house in accordance with the CPRs. The issue is still unsolved and basic pensions in Türkiye remain 100% behind basic salaries for the A and L categories, while the 1 January 2024 scale for B-grade pensions recommended in the 338th Report have

not been implemented on account of the transfer to the Single Salary Spine system in 2021. The fact that both serving staff and pensioners currently suffer from the same very high domestic inflation has been disregarded. It does not seem duty of care for retired staff can find itself a place on the current NATO Administration's agenda.

c. **Outstanding Health Insurance issues:**

As a member of the CNRCSA Health Insurances Working Group, I was involved in the updating of the List of Serious Illnesses and the development of a proposal for Long-term Care and Home Care. I believe Huub Simons, as Chair of the CNRCSA Health Insurances Working Group, will inform you in detail about these and other work of the working group and progress achieved to date.

2 Routine Work 2023-2024:

a. **Relations with Allianz Care:**

Our relations with NATO's health insurance contractor were generally quite good and reimbursements were made without any major problems. Small issues were easily resolved through courteous correspondence. Recently, a problem cropped up concerning a specific health service provider in Izmir which Allianz Care believed was overcharging its customers from NATO. This inevitably caused important delays and finally the complete stoppage of the related payments. We are still working on the issue and it is not yet clear how Allianz Care will handle the outstanding invoices. I had to alert our members about the possibility of future disputes and recommended that they look for alternative health providers.

b. **Relations with our Members:**

In addition to the periodic ANARCP Bulletins, we send information mails to our members whenever we feel we should inform them or draw their attention to an important matter. Due to our membership currently consisting entirely of Turkish nationals, our correspondence is carried out mainly in Turkish. A few members who are not computer literate are contacted by our volunteer members to pass the contents of the mails orally or in print. Additionally, our members can contact me and my deputy by telephone whenever they need information, advice or help or just to have a friendly chat.

c. **Social Events:**

We had an end of year get-together in 2023 with our membership at a cafe to celebrate their new year and to discuss some of our current issues. 63 members attended this joyous event. We hope to organize two events in 2024, one get-together in early autumn and a new year dinner at the end of the year, to promote socializing among our membership and keep them abreast of developments in issues concerning the pensioners in our region.

d. **Personnel Strength:**

We closed 2023 with 71 members. This year we discovered that we had another life-time member who did not show on our list. With that addition, we now have 72 members; 11 life-time and 61 paying members.

e. **Office Space:**

We were asked to vacate our allocated office space at the Land Command Headquarters in 2022 and are currently sharing the same office room with the CSA of the actives. This is very inconvenient since we are not allowed to have our own furniture, files, computer and other equipment in the shared room. We will attempt again towards the end of the year for

the allocation of our own room through sympathetic relations with the new command group of the headquarters.

With best regards,

Süleyman Acar

ANARCP NATREP for Türkiye
ANARCP Executive Committee Member

NATREP report of ANARCP UK (2023 – 2024)

There are currently 129 members of the ANARCP in the UK chapter which includes retirees living in the UK, Spain, Portugal, Cyprus and Barbados.

My work as Nat Rep during the last year has in the main continued to support retirees in providing advice and guidance on medical and national tax related issues and progressing claims on behalf of members who, either have no internet connectivity, or in some cases have age-related difficulties with modern data communications.

One issue worth mentioning relates to bank charges where one member based in the UK has experienced a series of bank transfer charges to claims paid by Allianz. Having canvassed the UK Chapter it seems that this was largely an isolated case. Fortunately it now seems to have been resolved but whether it was an AWC or Bank related issue remains a mystery.

On the AWC standpoint, claims handling seems to be very effective and efficient and there have been no significant issues of which I am aware either from those on the Basic cover or those who elected for the Affinity based options.

Finally, in April I was asked by Allianz to forward to the UK members details of an agreement that they had reached with the Circle Health Group (which included a number of private hospitals in the UK) in order to contain costs. Whilst I emphasised that this was not mandatory and that members retained the rights to use a hospital and surgeon of their choice it nevertheless generated a mixed response. Concerns were raised that it might result in a degraded service and if it related only to claims paid directly by AWC i.e. if members who were self-paying would receive the same cost-saving benefits. These concerns were forwarded AWC and I shall follow-up these concerns in the margins of the AGA.

This concludes my report.

D M Rait

NATREP UK and Spain

NATREP report of ANARCP USA/CAN (2023 – 2024)

1 Introduction

This report consolidates information brought to my attention by ANARCP members over the past year. While some issues have been resolved, others, like the NATO-6 Special Immigration Program, remain unsolved. Additionally, issues with Allianz/AETNA have deteriorated significantly over the last five months.

2 Member Details Summary

- Total Registered Members: 45
 - Members in Canada: 10
- Member Losses:
 - Deceased Members: 3
 - Members Out of Contact: 3

Communication Challenges:

We face several communication challenges with our members:

- Non-Responsive Members: Approximately one-third of our members do not respond to emails and must be contacted via written correspondence.
- Accessibility Issues: One active member, who is nearly blind, struggles with insurance matters and cannot read.

Over the past year, I have 499 emails on file, most of which are from the recent six months. Email correspondence typically involves about 50% of our USA/CAN members, while the remaining 50% prefer phone calls or letters.

Membership Status:

- Auto-Deduct Members: 31 (4 of whom signed up in 2023)
- Self-Pay Members: 11
- Lifetime Members: 3

This summary provides an overview of the key issues and membership details for the year.

3 Allianz/AETNA/Affinity

Kudos

I would like to reiterate a point from my last report: switching from UHC to AETNA has been immensely beneficial for all of us residing in the US.

General Issues with Providers

Despite this positive change, our biggest challenge remains: getting providers in the US to understand that our AETNA insurance is different from standard American AETNA coverage.

Here's a summary of the ongoing issues:

- **Provider Confusion**: Most providers do not understand that our AETNA insurance cannot be processed using the standard AETNA software or phone number. This often leads them to assume we are uninsured.
- **Misunderstandings**: Providers are skeptical when patients insist they have insurance, as they are accustomed to encountering false claims. This skepticism is compounded by provider staff unfamiliarity with international locations like "Germany" or "Belgium." Consequently, they often treat us as uninsured or misidentify us, sometimes assuming we are French Canadian, especially in areas with many international residents like Florida.
- **Specific Incidents**: There was an incident where a provider, thinking we were insured through Allianz Canada, sent invoices there, creating an ongoing issue for over a year.

Core Problem

The vast majority of the problems our members face with insurance arise, because providers are reluctant to deviate from their standard procedures and call the number on our insurance cards.

Conclusion

This recurring issue usually subsides after repeated visits to the same provider, but reemerges whenever new staff are hired. While it is a frustrating and seemingly absurd problem, it is not one that Allianz can easily rectify.

Problems in need of Attention by Allianz

After the initial transition period, everything with Allianz ran smoothly until December 2023. Since then, members have reported increasing issues with claim reimbursements. These problems are ongoing and need urgent attention:

- **Denied Claims**: Claims are being denied for invalid reasons.
- **Partial Reimbursements**: Claims are only reimbursed partially, with reasons given that do not align with our Base Insurance Contract or the applicable Affinity product.
- **Delayed Processing**: Claims are not processed for months.
- **Poor Complaint Handling**: Complaints are not treated properly. There are no regular updates unless the patient follows up, and even then, the responses are standard and noncommittal.

- Communication: Inquiries about improperly processed or unprocessed claims, some pending for two months, receive standard, noncommittal replies. It is common to get a standard reply promising prompt resolution, which does not occur.
- Non-Reimbursement of Pre-Approved Treatments: Pre-approved treatments are not being reimbursed. Some members with serious illnesses require weekly treatments that have been pre-approved, necessitating large out-of-pocket payments. Allianz often delays these reimbursements for weeks or months, causing significant hardship for patients.

To resolve these issues, members often need to attach the Table of Benefits to Allianz correspondence, as proof. Even then, it is common for their concerns to be ignored.

For instance, in the most recent case, a member had a claim denied for invalid reasons. He submitted the correct information and attached the Table of Benefits as proof but has been ignored for two months. A request for a complaint number is currently being issued.

These issues need to be addressed promptly to ensure members receive the support and reimbursement they are entitled to under their insurance coverage.

4 Emergency Contact Information

Over the past year, we have had several incidents where members required assistance with issues necessitating Power of Attorney or Guardianship. As we age, these needs are likely to become more common.

To address this, I propose creating a form to be provided to all members. This form would explain the importance of designating someone to step in if needed and asking to provide such a contact information to the ANARCP. Having an alternate point of contact (POC) can save a great deal of pain and headaches in hardship situations.

In the past months, we had two situations where setting up emergency contact and guardianship arrangements was time-consuming and challenging. These arrangements were crucial for assisting with medical claims, death certificates, and similar issues. This problem is particularly relevant for our members in the US, many of whom have no relatives or children residing in the country.

5 NATO-6 Special Immigration Program (NATO-6 SIP)

This issue remains unresolved, and there is no positive news to report. Feedback from affected members indicates that, despite repeated promises, ACT is not keeping them informed. Therefore, it cannot be assumed that ACT is effectively handling the situation.

There have been several attempts to get ACT to take action, and while promises have been made, there has been no noticeable progress from the perspective of the affected members. This situation causes considerable hardship. Members are in limbo and cannot renew their driver's licenses or travel. For instance:

- A severely ill member is unable to pick up his medication at the pharmacy because he cannot renew his driver's license.

- Another member cannot visit his ill parent in Canada and fears he won't see his father before he passes away.

These members have relied on the SIP, selling assets in their home countries and purchasing homes here. It is difficult for them to accept that the NATO-6 SIP lapsed without NATO informing them of this lapse prior to retirement. What makes it worse is the perception among affected members that no one in NATO, especially ACT, seems to care enough to stay in contact with them or to try to find ways to help.

Conclusion

Addressing these issues is essential for improving the support and well-being of our members. Establishing emergency contact protocols and resolving ongoing immigration issues should be prioritized.

6 Declarations and Statements from NATO

A Canadian member has an ongoing dispute with the Canadian tax authorities, which required several statements from NATO to resolve. This proved difficult as the member experienced significant runaround:

- The NPU advised the member to obtain these statements from the personnel office of her former place of duty.
- The personnel office, in turn, directed her back to the NPU.

Eventually, both the former place of duty and the NPU provided some statements. However, due to being redirected several times, the member missed a crucial deadline with the Canadian tax authorities.

Additionally, another Canadian member required an updated "Certificate of Pension" to secure a loan for purchasing a house. This, too, resulted in a major headache for the member and those assisting.

Conclusion and Request for Advice

These incidents highlight the need for a clearer, more efficient process for obtaining necessary documents from NATO. Any advice on how to approach similar situations in the future would be greatly appreciated to avoid missed deadlines and undue stress for our members.

Andrea Caputa

NATREP USA/CAN