

# REACTA HOT TOPICS

9/12/2025

VOLUME 9, NUMBER 3

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## **UPDATE REGARDING DELTA HEALTH SYSTEMS**

Robin Rose, REACTA President, Merri Furler, REACTA Vice President and Health and Welfare Benefits Trust Liaison, and Denise Jennex, CTA Liaison to REACTA, met this week (via Zoom) with the representatives from our new third-party administrator, Delta Health Systems. Our collective first impression was that they were proactive and wanted to learn about REACTA's perspective regarding the transition from Zenith to Delta Health Systems. We were transparent about the past problems we have had with Zenith. And, not surprising, we learned that Zenith has not been readily forthcoming with data. Delta is still trying to find out what data they have, what they need, and what is missing.

Following is a synopsis from our meeting:

- We informed them that some REACTA members have experienced an issue where their dependent's ID cards and eligibility do not show up in the Anthem system. We gave them specific names to research.
- Express Scripts information is not on the new Anthem ID cards due to Express Scripts having their own ID cards. Health insurance providers can contact Express Scripts directly for information, or Delta if needed.
- There may be a delay with the October Medicare Part B quarterly reimbursement due to incomplete data from Zenith, such as names and

ACH numbers for automatic deposit. Delta is manually comparing each record to match the data. Because they work with other groups, including unions who also issue reimbursements, they are familiar with the process, but they understandably do not want to send money to the wrong account. They have not as of yet received the signed Medicare Reimbursement Affidavits from Zenith.

- With regards to Life Insurance premium billing statements, again they are not up to date with information from Zenith. However, they are working with CTA's Department of Human Resources on this issue. As in the past, no insurance policies will be cancelled while these billing issues get resolved.
- There likely will be a claims processing delay due to Delta executing a complete audit of all claims previously handled by Zenith. Zenith stopped processing claims on 8/29/25 and any outstanding claims prior to that date will be handled by Delta. Delta Health Systems will also have access to all historical claims data.
- Open enrollment will be taking place in October in which Delta will advertise and process changes. You will receive this information via US mail.
- The phone number provided by Delta is specific to the CTA Trust; however, there is not a dedicated person(s) handling Trust participant issues. All of their Customer Service Reps have access to our plan and benefits (Zenith had multiple departments and not a coordinated database), therefore any of them should be able to answer questions. If you are not satisfied with the answers, make sure to ask to speak to a supervisor.

Understandably, there is much consternation with the change in plan administrators. As a reminder, the Trustees of the CTA Health and Benefits Trust make these decisions and not REACTA. REACTA's role as an advocate is to clarify, or when needed, request information needed by REACTA members to utilize their insurance benefits. REACTA also notifies our members when we learn of new information.

At the meeting we forged an agreement between REACTA and Delta Health Systems to form a partnership to further open dialogue as we move forward. We agreed to hold quarterly meetings in order to accomplish this goal.

Although there have been some glitches in this transition; overall, there have been fewer issues than working with Zenith during their transition from Earhart. With that in mind, we recommend patience as we navigate this new territory.