



East End Health Plan

c/o Eastern Suffolk BOCES
 201 Sunrise Highway
 Patchogue, New York 11772
 Telephone: 631-687-3140
 Fax: 631-687-3067

December 17, 2012

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Mr. Frank Perry
 Operations Administrator

To: Medicare Primary Members
 Medicare Primary Disabled Dependents

As you know, beginning January 1, 2013 a new prescription drug benefit for **Medicare primary members** only, including Medicare primary disabled dependents, will go into effect. The prescription drug benefits for **Medicare primary members** only, including Medicare primary disabled dependents, will be provided through ***UnitedHealthcare Medicare RX***. **This Plan applies to Medicare Primary members only.** It is not available to active members, or dependents of active members of any age, or retirees, including their dependents, under the age of 65. If you believe you received this letter in error and are not Medicare Primary, please contact me immediately.

The program is considered an **Enhanced** Medicare Part D Program which provides essentially the same prescription drug program that you, as a Medicare Primary member, currently enjoy. Under some circumstances the program provides a better benefit at lower co-pays. While there may be slight differences in the coverage, the program will continue to provide quality prescription drug benefits for our Medicare primary members. Our program is superior to the standard Medicare Part D program and the requirements of the standard Medicare Part D Program, i.e. out-of-pocket costs (other than the respective co-pays), annual deductible and the "donut hole" **do not apply to our program.**

All Medicare Primary members will automatically be enrolled in the program. Starting on January 1, 2013, this plan will replace your current coverage. There is no enrollment process for you to follow. There are no forms to complete. There is nothing for you to do. However, you will be given the opportunity, until December 31, 2012, to opt out of the program by calling ***UnitedHealthcare Medicare RX for Groups*** Opt-Out Service Center at 1-866-846-9961. We do not recommend that you opt out of the program. The prescription drug program that will be provided by the EEHP is far superior to any alternative plan that you may be offered.

If you are currently using mail order to obtain a long-term supply of your maintenance drugs, you can still obtain them through ***Optum Rx Pharmacy***, the mail order center for UnitedHealthcare. If you will have refills remaining on any prescription as of December 31, 2012, these will automatically be transferred over to ***Medicare RX for Group*** as long as the open prescription is less than 12 months old and is not a controlled substance. In these cases you will need to obtain a new prescription from your physician. If you wish to continue using the mail order option you will need to contact ***Optum Rx Pharmacy***, after January 9, 2013, to arrange for your method of billing. They can be reached at 1-877-664-0241.

Participating Districts

East Quogue UFSD
 Eastern Suffolk BOCES
 Greenport UFSD
 Montauk UFSD
 New Suffolk Common S.D.
 Oysterponds UFSD
 Quogue UFSD
 Remsenburg-Speonk UFSD
 Shelter Island UFSD
 Southampton UFSD
 Southold UFSD
 Tuckahoe Common SD
 Westhampton Beach UFSD

By now you may have received a direct mailing from UnitedHealthcare providing you with a Welcome Kit which included a booklet explaining the Plan and a Summary of Benefits. Please keep in mind that the mailings you received are required by the *Center for Medicare Services* and must include information that applies to all Plans provided through Medicare and, therefore, contain information that does not apply to the EEHP's Enhanced Medicare Part D Program. **Features of the standard Medicare Part D program that do not apply to the EEHP Plan are annual deductibles, out-of-pocket costs (other than co-pays) and the "donut hole".** If you do not receive this Welcome Kit by December 21, 2012, please contact me via telephone 516-659-3138, or e-mail me at fperry@eehp.org and I will arrange for one to be sent to you.

You will be receiving from UnitedHealthcare, if you haven't already, a *Confirmation of Enrollment* letter which in addition to confirming your enrollment by Medicare, will provide you with your member ID number, and other Plan designated information to use, if necessary, prior to receiving your Identification Card. The content of this letter is mandated by *Center for Medicare Services* and will include information that is not applicable to our Plan. If you have any question about the contents of the letter, please contact *UnitedHealthcare MedicareRx for Groups* customer service number at 1-888-556-6648, or if you prefer you may contact me. Please carefully read all materials you receive from UnitedHealthcare and keep them for future reference.

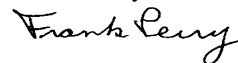
It is anticipated that your new prescription ID card will be mailed to you no later than December 21, 2012. If you do not receive your card by December 28, 2012, call the *UnitedHealthcare Medicare RX for Groups* at 1-888-556-6648.

Attached you will find some commonly asked questions regarding the Program which I hope you will find helpful in understanding how the Program will work.

As with all new programs, we anticipate that there will be "glitches" during the transition. We will make every effort to minimize any disruption or inconvenience to our members, but we ask for your patience and cooperation as we implement this program.

In the meantime if you have any questions regarding this program, please contact the *UnitedHealthcare MedicareRx for Groups* customer service number at 1-888-556-6648. If you prefer, you can contact me at 516-659-3138 or by e-mail fperry@eehp.org.

Sincerely,



Frank Perry
Operations Administrator