



EAST END HEALTH PLAN NEWS & NOTES

Spring 2010

A Periodic Publication from the East End Health Plan

EAST END HEALTH PLAN SETS NEW PREMIUMS EFFECTIVE JULY 2010

The East End Health Plan Board of Trustees met recently to approve new rates for the 2010/11 School Year. A priority of the Plan has always been to provide comprehensive benefits at a cost effective price. The Trustees will continue to closely monitor the operations of the Plan so that the rate of increase in future premiums is as low as possible. The monthly rates which will go into effect as of July 1, 2010 through June 30, 2011 will be:

Individual Policy:	\$626
Family Policy:	\$1,416

In addition to the above rates, the rates for those retirees in the Plan who have Primary Coverage through Medicare will be as follows:

Individual Covered by Medicare:	\$501
One Spouse Covered by Medicare/ One Not Covered by Medicare:	\$1,291
Both Spouses Covered by Medicare:	\$1,166

COBRA RATES:

Individual Policy:	\$638.52
Family Policy:	\$1,444.32

Remember that if you pay your premiums directly, such as Retirees, Cobra Enrollees or if as an Active Enrollee, your district requires that you pay a premium contribution, the amount you pay depends on the contract agreement that you have with the school district where you are/were employed. If you have questions regarding this, please contact the Health Plan Coordinator at your district.

EAST END HEALTH PLAN BENEFIT CHANGES

In an effort to keep the East End Health Plan's benefits comparable with other plans and to help keep the rate of increase of the Plan's premiums to a minimum, the Trustees did approve some benefit changes that will go into effect as of July 1, 2010. These changes are as follows:

- The current \$15 provider co-payment will change to \$18. This includes all of the services that currently have a \$15 co-pay.
- The prescription drug co-payments will change. The generic drug co-pays will decrease, and the brand name drug co-pays will increase. Effective 7/1/2010 the new prescription drug co-payments will be:

Prescription Drug Retail Benefit A 30 day supply of prescription drugs is available at a retail pharmacy subject to the following co-payments :

	Current <u>Co-Pay</u>	7/1/10 <u>Co-Pay</u>
Generic Drugs:	\$5	\$2
Preferred Brand Name Drugs:	\$15	\$20
Non-Preferred Brand Name Drugs:	\$30	\$40

Prescription Drug Mail Order Benefit A 90 day supply of maintenance drugs is available from the mail order pharmacy subject to the following co-payments:

	Current <u>Co-Pay</u>	7/1/10 <u>Co-Pay</u>
Generic Drugs:	\$5	\$2
Preferred Brand Name Drugs:	\$20	\$25
Non-Preferred Brand Name Drugs:	\$40	\$50

**EAST END HEALTH PLAN
BENEFIT CHANGES (contd.)**

The Varivax Vaccine is now a covered benefit under the East End Health Plan. The Varivax Vaccine is associated with the prevention of Shingles. In order to take advantage of this benefit you must obtain the vaccine from a pharmacy using your Caremark Drug Card. Then take this vaccine immediately to your doctor's office so that it can be administered. Due to the complexity associated with coordinating this benefit between the prescription drug and medical portions of the plan it is important that you coordinate this benefit with your doctor.

**THE EAST END HEALTH PLAN'S
COMPLIANCE WITH THE FEDERAL
MENTAL HEALTH / SUBSTANCE ABUSE
MANDATE**

As is required by federal law, the East End Health Plan is now in compliance with the Federal Mental Health/Substance Abuse Parity Mandate. Effective as of January 1, 2010, the Mental Health and Substance Abuse Benefits will be administered as indicated below. Please note that while all of the benefit limitations have been removed, the in-patient benefits still require pre-certification. In order to pre-certify an inpatient stay at a mental health or substance abuse rehabilitation facility, please contact the UHC Behavioral Health Unit at (888) 607-5214.

MENTAL HEALTH/SUBSTANCE ABUSE SERVICES

	In-Network	Out-of-Network
Substance Abuse Inpatient	Covered in Full	80% of R&C after deductible.
	Pre-Certification for the admission is required.	
	In-Network	Out-of-Network
Substance Abuse Outpatient	\$15 Co-pay	80% of R&C after deductible.
	In-Network	Out-of-Network
Mental Health Inpatient	Covered in Full	80% of R&C after deductible.
	Pre-Certification for the admission is required.	
	In-Network	Out-of-Network
Mental Health Outpatient	\$15 Co-pay	80% of R&C after deductible.

Please note that as of July 1, 2010, the out-patient co-pays noted above will change to \$18.

EAST END HEALTH PLAN SURVEY

The East End Health Plan is currently conducting a survey to obtain information regarding our member's satisfaction with the Plan and the various organizations that administer the Plan for us. It will take you only a few minutes to complete the survey. We look forward to your response and your comments.

If you are an active employee at any of the districts except the Eastern Suffolk BOCES, an email will be sent to you with the link to the survey so that you can easily access the quick survey. If you do not want to wait for the email, you can initiate the survey right now by accessing the EEHP Website (www.ehp.org) and clicking on the EEHP Survey Link.

If you are a retiree or an enrollee in the Plan that works for the Eastern Suffolk BOCES, you can either access the survey online using the logon information as shown above, or you can manually fill out the attached survey and return it to the Plan at:

East End Health Plan
c/o Locey & Cahill, LLC
309 South Franklin Street
Syracuse, NY 13202

Or you can fax it to: (315) 425-1394

**THE EAST END HEALTH PLAN
CONTINUES TO MAINTAIN ITS
RELATIONSHIPS WITH LONG ISLAND
HOSPITALS**

While there has been a lot of talk recently about Long Island Hospitals and their contracts with certain insurance plans, the East End Health Plan is very pleased to report that it continues to include all of the hospitals on Long Island as in-network facilities. This includes vitally important facilities such as Southampton Hospital, Stony Brook Medical Center, Eastern Long Island Hospital and the Peconic Hospital System. In addition to these facilities being currently in the network our Third Party Administrator (UnitedHealthcare) has multi-year agreements with these facilities that extend into the future. We are very pleased with the continued strength of our network. If there are any issues that

you currently have with our network, please feel free to include them as a comment on our survey.