



**The East End Educator's
Choice for Quality
Health Insurance**

MEMBER RESOURCES

Medical: United Health Care
888-607-5214
www.myuhc.com

Prescription Drugs: Caremark
800-966-5772
www.caremark.com

Vision Benefits: Davis Vision
800-283-9374
www.davisvision.com

Flex Benefits: JJ Stanis Co.
516-465-3900
www.jjstanisco.com

EEHP Offices:
631-687-3140
www.eehp.org

East End Health Plan
c/o Eastern Suffolk BOCES
201 Sunrise Highway
Patchogue, NY 11772

** VISIT THE EAST END HEALTH PLAN WEBSITE AT WWW.EEHP.ORG **



EAST END HEALTH PLAN NEWS & NOTES

Autumn 2006 A Periodic Publication from the East End Health Plan

EAST END HEALTH PLAN FLEXIBLE BENEFITS SEC 125

Consider your annual out-of-pocket costs for health care related expenses. If you add together your co-payments to doctors and specialists, your dental procedures, and costs for eyewear not included in your plan, the costs do add up annually, even with a comprehensive benefit plan like EEHP.

Using pre-tax dollars to pay these expenses saves significant money over the course of the year. The East End Health Plan Flexible Spending Account/Section 125 Benefit can help you by allowing you to save money before taxes are levied. This enables you to use the money from your Flexible Spending Account (FSA) to pay for your health related expenses before you have paid taxes on your earnings.

Only active employees can enroll in the FSA. The FSA is not available to retirees.

The East End Health Plan Trustees have made an amendment to the plan, encouraging more members to participate and improving plan efficiency. The following changes will occur over the next 18 months:

Beginning January 1, 2007, the plan year will be shortened and end on September 30, 2007. The Health Care and Dependent Care Reimbursement maximum will be pro-rated for this 9 month period.

The new plan year will begin on October 1, 2007 and run the entire year until September 30, 2008. During this period, the Health Care and Dependent Care reimbursement maximum will be restored to their original amounts for plan year 2007-2008 and all future plan years.

East End Health Plan hopes that this change will allow you to better manage your F S A accounts and we encourage you to participate in this advantageous benefit.

Contact your District's Health Plan Coordinator for more information on how to participate in the East End Health Plan Flexible Benefits Program.



GENERIC PRESCRIPTIONS: SAME QUALITY, BIG SAVINGS

You have just dropped a prescription off at your pharmacy, and the person behind the counter asks you, "Is it all right to substitute this prescription medicine for the generic equivalent?" What do you say? What should you do?

The best thing you can do is to know the facts *before* you are in that situation. You may have questions about generics, but this is all you really need to know:

Generic medicines are proven to be safe and effective by the Food and Drug Administration (FDA) before they can be sold.

What is a brand name drug and what is a generic?

A brand name drug is one that is discovered, created, and researched by a brand name pharmaceutical manufacturer. Once they have discovered a chemical that has potential to become a new medicine, the brand name company will usually get a patent for the medicine and its brand name. Once the patent is granted, the brand manufacturer has approximately 20 years to research, develop, secure FDA approval, and sell the medicine with no competition from other manufacturers. When the patent expires, other manufacturers can get FDA approval and market the same medicine under its generic name.

Brand name and generic equivalent drugs work exactly the same due to the fact that they are made of the same active ingredients. Ensuring the generic is equal to its brand name drug counterpart is the job of the FDA. The FDA has set high standards to make sure all approved generic medicines are the *therapeutic equivalent* of their brand name counterparts. That means a generic drug can be substituted and it will produce the same clinical effect, and meet the same safety profile and other standards, as the brand name drug.

The FDA is very strict in their review of a generic medicine *before* it goes to market. In most cases, the average person would not be able to tell the difference between a generic and a brand name drug, other than its size, color or shape. (In fact, United

** VISIT THE EAST END HEALTH PLAN WEBSITE AT WWW.EEHP.ORG **



States trademark laws require that generics look different from their brand name equivalents.

An example of a commonly prescribed brand name drug with a generic equivalent is the cholesterol lowering agent Zocor. Zocor is a Non-Preferred drug, with a retail cost of \$30. The generic equivalent, Simvastatin, costs EEHP members only \$5 at the pharmacy, a savings of \$25 per 34 day supply for your prescription!

So, what do you do?

You know the generic medicine is safe and effective. **If you want to save an average of 60%* on your prescription, you'll say YES!**

The best thing about generics is how much money you can save. In our pharmacy benefit plan, we pay the lowest co-pay whenever we fill a prescription with a generic. And remember, you're not sacrificing a thing. You can *Count on Generics* for quality and effectiveness with BIG savings.

To find out whether a prescription drug is available in a generic form or to determine the FDA status of a generic drug, visit these web sites: <http://www.fda.gov/cder/org/appovals/default.htm> or http://www.fda.gov/cder/consumerinfo/generic_info/generic_question.htm

To learn more about generics and how they impact your health and financial well being, visit Caremark at www.caremark.com/countongenerics.

For your information, your EEHP Prescription drug benefit co-payment levels are:

Retail
\$ 5 Generic
\$ 15 Preferred Brands
\$ 30 Non-Preferred Brands

Mail-Order/90 Day Supply
\$ 5 Generic
\$ 20 Preferred Brands
\$ 40 Non-Preferred Brands



YOUR NEW PHARMACY ID CARD AND NUMBER

In order to improve the efficiency in which the East End Health Plan provides you with your prescription drug benefit, the EEHP Trustees have decided to utilize a separate ID card for our drug program.

You should have received two East End Health Plan/Caremark ID cards with a new unique ID number in the mail during September.

Your social security number may be used in case you forget your new Pharmacy ID #, or if you lose your cards, however, for privacy and security purposes, we encourage you to use your unique ID #. If you have previously registered at caremark.com using your social security number, you need not register again, as your unique ID # will be automatically linked to your social security number.

Remember to show your new pharmacy ID Card at your pharmacy whenever you fill prescriptions.

If you have any question regarding your prescription coverage, please contact an EEHP/Caremark Customer Care representative at 1-800-966-5772, 24 hours a day, 7 days a week.

You can also use caremark.com to order your maintenance prescription refills, check your medicine coverage cost, and more.

myuhc.com*

INFORMATION ON CALL WHEN YOU REGISTER FOR MYUHC.COM

Have you registered for myuhc.com yet?

The tools at myuhc.com are both practical and personalized, so you

can get the most from your EEHP benefits. Register at myuhc.com and connect to current, comprehensive information about your benefits and health care interests. Here are some of the features you can access once you register:

1. Review your medical claims online. View and print copies of your medical claims.
2. Learn more about your coverage. Check your current eligibility, co-pays, deductibles, and out-of-pocket costs.
3. Print a temporary ID Card, or request a replacement at anytime.
4. Get information about hospitals and physicians. Evaluate hospitals on quality of care and patient safety measures. Identify in-network physicians and hospitals.
5. Learn about health conditions, treatments, and procedures.
6. Medical information in plain English gets right to the point, from reliable sources.
7. Compare costs for treatments and health plan options. Compare in and out-of-network costs for particular procedures, so you are best prepared with knowledge about your financial exposure.
8. Connect online with a registered nurse who can answer your questions. See postings from nurses, physicians, and other health professionals who answer questions submitted by other myuhc.com users.
9. Access your monthly Health Statement.

Register for myuhc.com today

NEW, SIMPLER EXPLANATION OF BENEFITS FOR EEHP MEMBERS

The East End Health Plan, in partnership with our third party administrator UnitedHealthcare, strives to make the health care experience simpler and easy to understand. One way we are doing this is by introducing a new Explanation of Benefits, also known as your Health Statement.

Instead of receiving a separate Explanation of Benefits (EOB) for each individual claim, members will receive just one Health Statement each month. It shows all claims processed for that period, as well as remaining balances for deductibles and out-of-pocket expenses. If there are no claims for a given month, no statement will be mailed. Now, you will have one, easy-to-read record of claims for a more complete view of health care expenses.

Members can still access EOBs online at myuhc.com. Your monthly Health Statement is available at myuhc.com also.

The Health Statement:

- Is easy to understand
- Recaps claims for the month
- Summarizes information for all members of the household
- Provides remaining deductible and out-of-pocket expense balances
- Offers health care consumer alerts and money-saving tips
- Arrives monthly, unless no claims have been processed

- Reduces paperwork and confusion
- Makes it easier to manage your plan
- Available online at myuhc.com

To stop mail delivery of Health Statements, or to continue to receive paper Explanation of Benefits for each claim filed, go online to myuhc.com, "Manage My Account/Set Mail Preferences", or call 888-607-5214



"RETIREES KORNER"

Reminder:

The claim year ends on December 31 and all claims for services provided in 2006 must be filed and received by March 31, 2007, in order to be acted upon. Remember that if you have claims for health services on or before June 30, 2006, you must file your EEHP claim through Vytra at:

EEHP
*c/o Vytra Health Plans
Claims Department
PO Box 9091
Melville, NY 11747-9091*

If the health services were provided on or after July 1, 2006 the claim must be filed through UnitedHealthcare at:

EEHP
*c/o UnitedHealthcare
PO Box 740800
Atlanta, GA 30374-0800*

Earlier in this newsletter, the MYUHC.COM feature of the EEHP/UnitedHealthcare services was reviewed. This is a most valuable tool for retirees. There is a wealth of information to find, once you have

registered on line. For example, you can check your deductible amount, out of pocket expenses, or check on a pending claim. You can get help choosing a doctor or you can research a prescription drug that you are taking. You can also research the health care topics important to you. You may want to read on wellness and health. In fact, there is so much to view and read that you will be amazed and pleased with the access to information that you will have. Of course, access is provided 24 hours a day seven days a week, so go online and check it out!

EEHP is always interested in hearing from our members. We want to know how EEHP - UHC is working for you. Do you have a problem that does not seem to get resolved? Did you have a good experience using EEHP - UHC? We want to know. Retirees can e-mail to: eehpretirees1@verizon.net, or, as always, you can write. The address is:

**EEHP c/o Eastern Suffolk BOCES,
201 Sunrise Highway, Patchogue, NY
11705**

EEHP WEB SITE RE-DESIGN UNDERWAY

In order to improve communications and update information, our website, www.eehp.org, is currently being re-designed to provide our members with updated and more useful information. It will be easier to navigate and more user friendly. So, we ask for your patience as we complete our "reconstruction".

Stay happy and stay healthy!!