



DEPARTMENT OF FINANCIAL SERVICES

Division of Rehabilitation and Liquidation
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**Si necesita una versión en español de este aviso, visite el sitio web de la
División de Rehabilitación y Liquidación www.myfloridacfo.com/division/receiver.**
(If you need a Spanish version of this notice, visit the Receiver's website at www.myfloridacfo.com/division/receiver)

NOTICE TO MEMBERS – JUNE 20, 2014
REGARDING THE LIQUIDATION OF PHYSICIANS UNITED PLAN, INC. (PUP)

We are sending you this letter because our records indicate that you are a member of Physicians United Plan, Inc., a Florida health maintenance organization which provided health care coverage to approximately 50,000 Medicare members. On June 9, 2014, Physicians United Plan, Inc., (PUP) was ordered into receivership for purposes of rehabilitation by the Second Judicial Circuit Court (the “Court”) in Tallahassee, Florida. The Florida Department of Financial Services is the Court appointed Receiver of PUP. Additionally without further court action, PUP has been ordered liquidated effective 12:01 a.m. on July 1, 2014.

Medicare contracts and premiums are administered through the Federal Centers for Medicare & Medicaid Services (“CMS”). The rehabilitation order was entered to allow the Receiver to conserve the assets of PUP and assist CMS in its efforts to provide continued health care coverage for PUP’s members. Unfortunately, PUP’s financial condition prohibited any realistic chance for a successful rehabilitation of the company.

POLICY CANCELLATION:

By Court Order, effective at 12:01 a.m. on July 1, 2014, PUP has been ordered liquidated. **As a result of the impending liquidation of Physicians United Plan, Inc. (PUP) and termination of its contract with CMS, CMS retroactively enrolled all PUP members into Original Medicare Fee-for-Service (FFS) and a Prescription Drug Plan (PDP) effective June 1, 2014.** CMS will send you more information about this change in the very near future. As a PUP member, you should very carefully read any letters you receive from the Receiver or CMS. These letters will provide you with extremely important information regarding the continuation of your health care coverage, including arrangements made for continued prescription drug coverage, and will explain your other Medicare options.

Beneficiaries currently in the hospital or receiving treatments such as chemotherapy, dialysis, or organ transplantation will be able to continue with such care. **Remember, you will need to closely**

read the information and follow any instructions which are provided in letters you receive from CMS regarding your continued health care and prescription drug coverage after June 1, 2014.

SPECIAL ELECTION PERIOD:

As a result of the receivership of PUP, all beneficiaries enrolled in PUP have a Special Election Period until August 31, 2014 to enroll in a plan of their choosing. All dual eligible or those eligible for the Low Income Subsidy can enroll in another plan at any time. A beneficiary that selects another Medicare Advantage or Medicare Advantage-Prescription Drug plan will be covered under the new plan effective the first day of the next month after they enroll. Please contact 1-800-MEDICARE (1-800-633-4227) for more information regarding these matters and/or to make a new plan selection.

A few more points/reminders about your health care coverage from June 1, 2014:

- As a result of the impending liquidation of Physicians United Plan, Inc. (PUP) and termination of its contract with CMS, CMS has retroactively enrolled all PUP members into Original Medicare FFS and a Prescription Drug Plan **effective June 1, 2014.**
- Until further notice from CMS or the new pharmacy plan you are enrolled in, please continue to present your PUP pharmacy card at the pharmacy to obtain any needed prescriptions until July 1, 2014. If you have any difficulty in obtaining prescriptions, please ask your pharmacist to assist you by doing an “electronic lookup” for your name/new pharmacy plan on the Medicare system to which they have access.
- The Receiver emailed a notice to all of PUP’s medical providers which informed them of the retroactive enrollment and the Special Election Period. This notice:
 - Advised providers who have delivered services to members on or after June 1, 2014 to submit claims for those services to CMS under Medicare Fee-for-Service.
 - Advised providers who were reluctant to provide health services to PUP members to continue to see those individuals and submit the claims for such services to CMS under Original Medicare for prompt payment after June 23, 2014.

CONTACT INFORMATION:

For **Medicare** information: If you need more information regarding your retroactive Medicare enrollment, Medicare in general, other Medicare Advantage plans, or coverage options from 12:01 a.m. on June 1, 2014, please visit www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227). Please also call this number if you have not received a letter from CMS but think you should have. TTY users should call 1-877-486-2048. A Customer Service Representative will be able to answer your Medicare questions.

For **Medicare Supplement** information: If you need information regarding Medicare Supplement options, please contact the Department of Financial Services at 1-877-693-5236 (Florida only) or 850-413-3089.

For **Receivership** information: For additional information about the PUP Receivership, or about the receivership process in general, please contact the Receiver by calling the Florida Department of Financial Services at 1-800-882-3054 (Florida only) or 850-413-3081 or use the "Contact Us" form found on the Receiver's website at www.myfloridacfo.com/division/receiver.

The following are some questions which are commonly asked by all members of an insolvent HMO such as PUP. We hope the questions and answers will be helpful to you in providing information regarding the PUP receivership proceeding.

COMMONLY ASKED QUESTIONS:

1. Do I have health care coverage now?

YES. CMS has retroactively enrolled all PUP members into Original Medicare Fee-for-Service (FFS) and a Prescription Drug Plan (PDP) effective June 1, 2014. CMS is sending you a separate letter regarding this retroactive enrollment and your options for continued health care coverage from July 1, 2014. Before you receive this letter from CMS you can call 1-800-MEDICARE (1-800-633-4227) for more information. REMEMBER: Benefits received under PUP may not be the same as those received under Original Medicare FFS. You may find that you are responsible for paying for a portion or all of the services you obtained starting June 1, 2014, while under Original Medicare FFS until you obtain a replacement Medicare Advantage plan or purchase a Medicare Supplement. Again, please call 1-800-MEDICARE (1-800-633-4227) to discuss your options with CMS.

2. If I need to go to the hospital or receive other emergency care, who will authorize the medical treatment?

If you have a medical emergency (you believe your health is in serious danger):

- Get medical help as quickly as possible. Call 911 for help or go to the nearest emergency room. You do not need to get permission or authorization from your primary care physician or other provider.
- Make sure that your provider knows about your emergency so that they can be involved in following up on your emergency care. You or someone else should call to tell your primary care physician about your emergency care as soon as possible, preferably within 48 hours.
- Please refer to the letter you receive from CMS for details regarding your health care coverage starting on June 1, 2014.

3. My doctor is refusing to treat me or is demanding immediate payment from me prior to providing medical services. What should I do?

As of June 1, 2014, CMS retroactively enrolled all PUP members into Original Medicare Fee-for-Service (FFS) and a Prescription Drug Plan (PDP). Therefore, have your provider contact or bill Medicare for services. As you are a Medicare member, you may also call 1-800-MEDICARE (1-800-633-4227) for assistance.

4. I need to fill a prescription. Which pharmacy should I use?

Until July 1, 2014, or until further notice from CMS, you should continue to use the pharmacy you used as a member of PUP and present your PUP pharmacy card. If you need additional assistance, please call 1-800-MEDICARE (1-800-633-4227) for assistance.

5. Can Providers seek payment from PUP members for debt owed by PUP for medical services?

No. Under Section 641.3154, Florida Statutes, HMO members are not liable to any provider of health care services for any services covered by the HMO. Additionally, health care providers and their representatives are prohibited from attempting to collect payment from the HMO members for such services. If you are contacted by a health care provider for such payment, you should inform the provider of this law. You may also want to send a letter regarding this problem, with a copy of any bills you receive from such providers, to the Receiver of Physicians United Plan, Inc., at 2020 Capital Circle SE, Suite 310, Tallahassee, FL 32301. If the provider or his representatives continue to pressure you for payment, please contact the Receiver at 1-800-882-3054 (Florida only) or 850-413-3081. Although the Receiver cannot represent you against the provider, we can assist you in informing the provider of the relevant laws.

6. How do I file a claim in the PUP Receivership for services provided prior to June 1, 2014?

The deadline for filing a claim in the PUP Receivership is June 9, 2015. Information regarding the method for filing a claim in the receivership proceeding will be available on the Receiver's website, www.myfloridacfo.com/division/receiver. For additional information about the PUP Receivership, or about the receivership process in general, please contact the Receiver by calling the Florida Department of Financial Services at 1-800-882-3054 (Florida only) or 850-413-3081 or use the "Contact Us" form found on the Receiver's website at www.myfloridacfo.com/division/receiver.