

The Verizon MPPR ADVANTAGE PLAN





What's Inside

You are receiving this communication to help you prepare for changes to your medical program beginning on January 1, 2014.

Recently, we sent you a letter informing you that your current UnitedHealthcare® MPPR Medicare Supplement plan will convert to the Verizon MPPR Advantage plan (Medicare Preferred Provider plan for Retirees), a UnitedHealthcare® Group Medicare Advantage (PPO) Plan.

This transition allows Verizon to continue to provide a comprehensive benefit design while taking advantage of Medicare subsidies provided by the federal government for these types of plans. In fact, retirees who contribute towards the cost of their medical coverage today can expect to contribute the same or even less in 2014 for the MPPR Advantage plan.

This booklet provides background on the MPPR Advantage plan and outlines what you can expect.

We've taken proactive measures to ensure minimal impact to our retirees. Most of the impact relates to how your benefit is administered "behind-the-scenes" among Verizon, UnitedHealthcare® and the Medicare program.

Please keep this booklet for reference as you continue to receive additional information in the next few months.

Sincerely,





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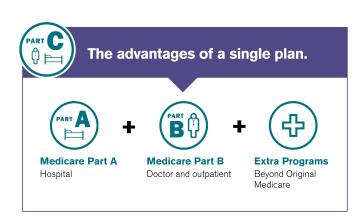
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YOUR VERIZON RETIREE MEDICAL BENEFIT

Beginning in 2014, your primary Verizon retiree medical plan will become the Verizon MPPR Advantage plan (Medicare Preferred Provider plan for Retirees), a UnitedHealthcare® Group Medicare Advantage (PPO) Plan. You may have additional options available, such as the Medicare Advantage HMO options.

The MPPR Advantage plan combines Medicare Part A (hospital benefits) and Part B (doctor and outpatient coverage) under one plan (also known as Medicare Part C).



What Will You Experience?

Beginning in 2014, all participants enrolled in the MPPR Medicare Supplement plan will automatically transition to the MPPR Advantage plan through a group enrollment process.

If you are currently enrolled in an option other than the MPPR Medicare Supplement plan (for example, a Medicare Advantage HMO), you will remain in that option, and will not be automatically enrolled in the MPPR Advantage plan for 2014. If you would like to enroll in the MPPR Advantage plan effective January 1, 2014, you will need to make this change during the 2014 annual enrollment period, which is scheduled for **November 7 through November 21, 2013**. See page 5 for more details.

PLAN FEATURES

You will experience very little change, if any, in the day-to-day usage of your benefits. In fact, you may pay less out-of-pocket for certain services under the MPPR Advantage plan.

The MPPR Advantage plan is designed to offer benefits that are consistent with the current MPPR Medicare Supplement plan.

- Preventive care will be covered at 100%.
- The \$200 annual deductible will still be \$200 and your annual out-of-pocket maximum will continue to be \$1,000 for your medical benefits.
- After you satisfy the deductible, you will pay flat-dollar copayments instead of coinsurance for many services.
- The lifetime benefit maximum will be eliminated.

Your Premium Contributions Will Not Increase

If you currently contribute towards the cost of the MPPR Medicare Supplement plan premium, you will pay the same or even less each month for the MPPR Advantage plan.

During the 2014 annual enrollment period of November 7 through November 21, 2013, you will be able to verify your 2014 contribution amounts (if applicable) online on BenefitsConnection at www.verizon.com/benefitsconnection, or by contacting the Verizon Benefits Center at 1-855-4VzBens (1-855-489-2367). Representatives are available Monday through Friday, 8 a.m. to 6 p.m. Eastern time. During annual enrollment, hours are extended to 8 p.m. Eastern time.

Your Out-of-Pocket Costs Are More Predictable

Under the MPPR Advantage plan, as you budget for routine medical expenses, you can anticipate how much you will need to pay out-of-pocket to cover your share for visits to your primary care physician (PCP) and specialists, as well as unexpected trips to urgent care and the emergency room.

Instead of waiting for an estimate of benefits statement or bill from your doctor's office after treatment, you'll know in advance exactly what flat-dollar fee you'll pay for visits like these throughout the 2014 plan year. With the MPPR Advantage plan, you will pay a flat "copayment" (or "copay") for each visit. The copayment amount varies by the type of covered health care service. See below for a brief comparison of the key cost-sharing provisions of the current MPPR Medicare Supplement plan and the MPPR Advantage plan.



What's the Difference Between Coinsurance and Copayments?

Under the current MPPR Medicare Supplement plan, you are responsible for paying your share through a "coinsurance" approach. This means your share of the cost of a covered health care service is calculated as a percent (for example, 20%, with the plan paying 80%) of the allowed amount for the service plus any deductibles you owe.

The math is usually determined at the time your provider files a claim and your share is sometimes unknown until this claim is processed and you're sent a bill for your coinsurance.

With the MPPR Advantage plan, you will know up front exactly how much you'll pay for visits to your primary care physician, specialists, urgent care or even the emergency room. Your share will be paid through a "copayment" (or "copay")—a fixed amount (for example, \$20)—for a covered health care service, usually at the time you receive the service.

Like coinsurance, copayments begin once you satisfy your annual deductible and also apply towards your annual out-of-pocket maximum.

Medical Service	MPPR Medicare Supplement Plan	MPPR Advantage Plan
Routine/Preventive Care	80% after deductible	100%
Annual Deductible	\$200	\$200
Out-of-Pocket Maximum (Including Deductible and Copays)	\$1,000	\$1,000
Lifetime Maximum	\$1,000,000	No limit
Inpatient Hospitalization	80% after deductible	80% after deductible
Primary Care Physician (PCP) Visit	80% after deductible	\$20 after deductible
Specialist Visit	80% after deductible	\$30 after deductible
Emergency Room	80% after deductible	\$65 after deductible
Urgent Care	80% after deductible	\$50 after deductible

You Can Use the Same Health Care Providers

Through the MPPR Advantage plan, you will continue to have access to all health care providers (doctors and hospitals in the United States) who participate in Medicare and accept the plan.

If you decide to see a provider who does not participate in Medicare, you will be responsible for 100% of the cost of office visits and any related tests or treatments. You will find that the majority of doctors do participate in Medicare.

If you have questions about whether or not a provider participates in Medicare and accepts the MPPR Advantage plan, visit **www.UHCRetiree.com/Verizon** or call UnitedHealthcare at **1-888-866-6934** (TTY **711**) between 8 a.m. and 8 p.m. local time, seven days a week. They can also help you find a provider in your area who accepts Medicare.

Your Prescription Drug Coverage Will Not Change

The conversion to the MPPR Advantage plan does not impact your prescription drug coverage through Express Scripts. You will continue to use your Express Scripts ID card when you pick up your prescription at the pharmacy or submit mail order requests.

You Will Be Issued One ID Card

Once your enrollment is confirmed by Medicare, UnitedHealthcare will issue you one card that covers both visits to the doctor's office and hospital (Medicare Parts A and B). Please note that you and any dependents covered by the MPPR Advantage plan will each receive individual ID cards.

You're Gaining Access to Additional Features

Through the MPPR Advantage plan, you will now have access to additional programs and services to help you manage your short- and long-term health care needs. UnitedHealthcare will provide an overview of these in the coming weeks and more information about getting started after annual enrollment.

WHAT YOU CAN EXPECT DURING ENROLLMENT

No Action Required If You Are Currently Enrolled in the MPPR Medicare Supplement Plan

Remember, if you are currently enrolled in the MPPR Medicare Supplement plan, you do not need to take any action. You will automatically be enrolled by UnitedHealthcare in the MPPR Advantage plan for 2014. Keep an eye out for more information on the MPPR Advantage plan to arrive from UnitedHealthcare (see the communication timeline on pages 6–7).

If You Are Not Enrolled in the MPPR Medicare Supplement Plan or Need to Make Changes

If you are not currently enrolled in the MPPR Medicare Supplement plan and would like to enroll in the MPPR Advantage plan for 2014, or would like to opt out or select one of the other options (if any) available to you, you should:

- Review your coverage options during the 2014 annual enrollment period, which is scheduled for November 7 through November 21, 2013, by visiting BenefitsConnection at www.verizon.com/benefitsconnection or by contacting the Verizon Benefits Center at 1-855-4VzBens (1-855-489-2367). Representatives are available Monday through Friday, 8 a.m. to 6 p.m. Eastern time. During annual enrollment, hours are extended to 8 p.m. Eastern time.
- Enroll for coverage effective January 1, 2014 by completing your enrollment during the 2014 annual enrollment period through the BenefitsConnection website or by calling the Verizon Benefits Center.

Keep in mind that you can change your election at any time by contacting the Verizon Benefits Center at least 30 days in advance of the first of the month you would like your change to be effective. If you would like a change to be effective January 1, 2014, you can make the change during the 2014 annual enrollment period, which is scheduled for November 7 through November 21, 2013.

WHEN YOU'LL RECEIVE MORE COMMUNICATION

You will receive more information on the MPPR Advantage plan from UnitedHealthcare in the coming weeks. The following timeline provides an overview of when you can expect to receive more information.

NEXT STEPS

- If you are currently enrolled in the MPPR Medicare Supplement plan, you do not need to do anything except keep your eye out for additional information.
- If you are not enrolled in the MPPR Medicare Supplement plan and would like to enroll or make changes for 2014, you will need to:
- Enroll during the annual enrollment period of November 7 through November 21, 2013 through BenefitsConnection at www.verizon.com/benefitsconnection or by contacting the Verizon Benefits Center at 1-855-4VzBens (1-855-489-2367).
 Representatives are available Monday through Friday, 8 a.m. to 6 p.m. Eastern time.
 During annual enrollment, hours are extended to 8 p.m. Eastern time.



OCTOBER NOVEMBER DECEMBER JANUARY

Pre-Enrollment Book (Sent by UnitedHealthcare)End of October

- Introduction to the MPPR Advantage plan and highlights of the plan.
- Information on plan features and extra programs.
- Required enrollment information.

2014 ANNUAL ENROLLMENT PERIOD

November 7 through November 21, 2013

Health Survey (Sent by UnitedHealthcare) End of November/Early December

Soon after enrollment you may receive a request to complete a short confidential phone survey to help UnitedHealthcare connect you with additional programs or services that are specific to your needs. If you cannot be reached, a survey will be mailed to you so you can complete and mail back to UnitedHealthcare.

Member Welcome Kit (Sent by UnitedHealthcare)Third week of December

- Benefit highlights.
- Evidence of coverage.
- Provider directory (also available online at any time).
- Member guide.

Confirmation of Enrollment Letter and ID Card (sent by UnitedHealthcare)
Fourth week of December

Ongoing Communication (Sent by UnitedHealthcare)

For those enrolling in the MPPR Advantage plan, UnitedHealthcare will continue to reach out throughout the year to help you learn more about your health and make informed health care decisions. Some of this information may include health care reminders, information on your fitness program, how to access NurseLine^{s™} and other wellness information.

OUESTIONS AND ANSWERS

1. What do I need to do to enroll in the MPPR Advantage plan?

- If you are currently enrolled in the MPPR Medicare Supplement plan, you do not need to take any action. You will automatically be enrolled by UnitedHealthcare in the MPPR Advantage plan for 2014.
- If you are not currently enrolled in the MPPR

 Medicare Supplement plan and would like to
 enroll in the MPPR Advantage plan for 2014,
 or would like to opt out or select one of the
 other options (if any), you will need to take
 action during the 2014 annual enrollment
 period from November 7 through
 November 21, 2013. Visit BenefitsConnection
 at www.verizon.com/benefitsconnection or call
 the Verizon Benefits Center at 1-855-4VzBens
 (1-855-489-2367). Representatives are available
 Monday through Friday, 8 a.m. to 6 p.m. Eastern
 time. During annual enrollment, hours are extended
 to 8 p.m. Eastern time. More details are available
 on page 5.

2. Will I have the same ID number or ID card as my covered spouse or dependent?

You and any covered dependents will receive your own individual ID cards with your own unique ID number from UnitedHealthcare in December.

You will no longer need to show your governmentissued red, white and blue Medicare ID card, but keep it in a safe place. Instead you will want to carry the MPPR Advantage plan ID card in your wallet.

3. Will my medical, prescription drug or dental benefits change with the MPPR Advantage plan?

No. In fact, you will receive additional benefits like health and wellness programs that are not part of the current MPPR Medicare Supplement plan. There will also be no changes to your prescription drug or dental coverage.

4. Do I have to switch doctors?

No. You can continue using the doctors you currently use today, as long as they accept Medicare. You will receive more information from UnitedHealthcare, which will reference a network of doctors. As mentioned on page 5, you can see any doctor who accepts Medicare. You will find that the majority of doctors do participate in Medicare.

In very limited cases, there may be providers who accept Medicare, but won't accept the MPPR Advantage plan. If this small exception applies to your provider, you will still receive coverage under the MPPR Advantage plan, but may need to take some additional steps such as:

- Paying the provider up front according to the Medicare fee schedule for the services provided; and
- Filing a claim through UnitedHealthcare for reimbursement by visiting www.UHCRetiree.com/Verizon or calling 1-888-866-6934, between 8 a.m. and 8 p.m. local time, seven days a week.

If you find yourself in this situation, call UnitedHealthcare for guidance. Again, your coverage is guaranteed under the MPPR Advantage plan as long as the provider accepts Medicare, but you may be required to take the steps outlined above to pay for services.

It is always a good idea to check with your doctor when making an appointment. Or, you can always confirm by visiting **www.UHCRetiree.com/Verizon** or calling UnitedHealthcare at **1-888-866-6934**.

5. Do I need to be enrolled in Medicare Parts A and B to be enrolled in the MPPR Advantage plan?

Yes. The federal government requires that you are enrolled in both Medicare Parts A and B and continue to pay your Part B premium to participate in the MPPR Advantage plan or any other Medicare Advantage plan. For more information on Medicare's Part B premium cost, please contact Medicare directly at **1-800-MEDICARE**, 24 hours a day, seven days a week.

6. What happens if I select another Medicare Advantage plan in addition to accepting enrollment in the MPPR Advantage plan?

The Medicare program does not allow a Medicare participant to be enrolled in more than one Medicare Advantage plan at one time. If you want to be covered by the MPPR Advantage plan, do not enroll in any other Medicare Advantage plan available on the individual market.

7. Am I covered for services if I travel outside of the United States?

Yes. This coverage has not changed. The MPPR Advantage plan will cover you for worldwide emergency services, 24 hours a day. If you become sick or injured while traveling abroad, you can seek emergency care and it will be covered, after your emergency care copayment.

FOR MORE INFORMATION

The following resources are available to you if you have additional questions.

Resource	When to Use This Resource	Contact Information
UnitedHealthcare	Ask questions about medical coverage	 www.UHCRetiree.com/Verizon 1-888-866-6934 (TTY 711)
	 Ask questions about health care providers Review plan details Review claims 	Please note that this number is new and different from the number used in 2013
		for the MPPR Medicare Supplement plan. Representatives are available from 8 a.m. to 8 p.m. local time, seven days a week.
Verizon Benefits Center	 Review current enrollment Opt out of 2014 coverage or change your coverage option Review 2014 coverage options and costs (if any) Make enrollment changes according to plan rules 	 www.verizon.com/benefitsconnection 1-855-4VzBens (1-855-489-2367) Representatives are available Monday through Friday, 8 a.m. to 6 p.m. Eastern time. During annual enrollment, hours are extended to 8 p.m. Eastern time.
Express Scripts	Ask questions about prescription drug coverageReview claims	 www.express-scripts.com 1-877-877-1878 and choose Option 1 (TTY users should call 1-800-716-3231) Customer service is available in English and other languages, 24 hours a day, seven days a week.

This document is prepared for former Bell Atlantic Management retirees and their eligible dependents who are currently Medicare-eligible and participating in the Verizon Retiree Group Health Plan for Management and Non-Union Hourly Employees.

This document, in addition to Verizon MPPR Advantage Plan materials issued by UnitedHealthcare, updates and replaces the benefit design information for the MPPR Medicare Supplement Plan in your summary plan description (SPD). This document, with Verizon MPPR Advantage Plan materials issued by UnitedHealthcare, is a summary of material modification (SMM). As explained in your SPD, Verizon reserves the right to amend, modify, suspend or terminate its group health plans at any time, at its discretion, with or without advance notice to participants, subject to any duty to bargain collectively. As always, the Verizon Employee Benefits Committee (VEBC), the Chairperson of the VEBC, or such delegate of the VEBC, as outlined by the applicable Verizon group health plan, has full discretionary authority to interpret such plan and determine eligibility for benefits in accordance with its terms and the provisions of ERISA.

