



DEPARTMENT OF FINANCIAL SERVICES

Division of Rehabilitation and Liquidation
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la División de Rehabilitación y Liquidación**

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(If you need a Spanish version of this notice, visit the Receiver's website at
www.myfloridacfo.com/division/receiver)

NOTICE TO MEMBERS --- MARCH 26, 2013

REGARDING THE LIQUIDATION OF UNIVERSAL HEALTH CARE, INC.

We are sending you this letter because our records indicate that you are a member of Universal Health Care, Inc., a Florida health maintenance organization which provided health care coverage to approximately 40,000 Medicare and 60,000 Medicaid members, some of whom were also enrolled in the Nursing Home Diversion Program. On March 21, 2013, Universal Health Care, Inc., ("UHC") 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 UHC.

Medicare contracts and premiums are administered through the Federal Centers for Medicare & Medicaid Services ("CMS"). Medicaid contracts and premiums are administered through the Florida Agency for Health Care Administration ("AHCA"). The Nursing Home Diversion Program is administered through the Florida Department of Elder Affairs ("Elder Affairs"). The rehabilitation order was entered to allow the Receiver to conserve the assets of UHC and assist CMS, AHCA and Elder Affairs in their efforts to provide continued health care coverage for UHC's members. Unfortunately, UHC's financial condition prohibited any realistic chance for a successful rehabilitation of the company.

POLICY CANCELLATION EFFECTIVE 12:01 A.M. ON APRIL 1, 2013:

By Court Order, effective at 12:01 a.m. on April 1, 2013, UHC has been ordered liquidated. Your health care coverage with UHC is cancelled as of that time/date. **IMPORTANT: UHC members will receive continued health care coverage from 12:01 a.m. on April 1, 2013, through arrangements made by CMS, AHCA and Elder Affairs.** The Florida Department of Financial Services, as Receiver of UHC, is working with CMS, AHCA and Elder Affairs to assist in their efforts to provide a smooth transition for UHC's members to other health care coverage beginning on April 1, 2013. **As a UHC member, you should very carefully read any letters you receive from the**

Receiver, CMS, AHCA, or Elder Affairs. These letters will provide you with extremely important information regarding the continuation of your health care coverage from April 1, 2013, including arrangements made for continued prescription drug coverage, as well as explain your other Medicare/Medicaid options.

Beneficiaries currently in the hospital or receiving skilled nursing care or 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 or AHCA regarding your continued health care and prescription drug coverage from April 1, 2013.**

CONTACT INFORMATION:

For **Medicare** information: If you need more information regarding Medicare, other Medicare Advantage plans, or coverage options from 12:01 a.m. on April 1, 2013, 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/Medigap/Medicaid questions.

For **Medicaid** information: If you need more information regarding Medicaid plans or coverage options from 12:01 a.m. on April 1, 2013, please visit www.ahca.myflorida.com or call 1-866-454-3959 or 1-866-467-4970 (TDD) if in Broward, Baker, Clay, Duval and Nassau Counties. Medicaid recipients in all other counties should call 1-888-367-6554.

For Receivership information: For additional information about the UHC Receivership, or about the receivership process in general, please contact the Receiver using the "[Contact Us](#)" form found on the Receiver's website at www.myfloridacfo.com/division/receiver. You may also call the Florida Department of Financial Services at 1-800-882-3054 (Florida only) or 850/413-3081.

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

COMMONLY ASKED QUESTIONS:

1. Do I have health care coverage now?

YES. Please refer to the letter you receive from CMS, AHCA and Elder Affairs for details regarding your continued health care coverage following the cancellation of your coverage with Universal as of 12:01 a.m. on April 1, 2013. If you are a Medicare member and do not enroll in another health plan, starting April 1, 2013 you will have coverage through Original Medicare and a standalone prescription drug plan (PDP). Before you receive this letter from CMS you can call 1-800-MEDICARE (1-800-633-4227) for more information.

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.
- Until 12:01 a.m. on April 1, 2013, you should also notify UHC's Customer Services Department at 1-866-690-4842.
- Please refer to the letter you receive from CMS or AHCA for details regarding your continued health care coverage from 12:01 a.m. on April 1, 2013.

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

Until April 1, 2013, please call UHC's Customer Services Department at: 1-866-690-4842. On and after April 1, 2013, you should follow the instructions which are provided in the letter you receive from CMS or AHCA. If 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 April 1, 2013, you should continue to use the pharmacy you used as a member of UHC until further notice from either CMS or AHCA. If you are a Medicare member, you will receive a letter from CMS about your new prescription drug plan (PDP). You will also receive a new prescription insurance card from your new PDP. If you need to fill a prescription on or after April 1, 2013, but you have not yet received your new card, your pharmacist may be able to get the necessary information to fill your prescription from CMS, or you can call 1-800-MEDICARE (1-800-633-4227) for assistance.

5. I am a Medicare member who asked Universal to cover a drug that I still need but I have not received a response from them. What should I do?

Because your coverage in Universal is ending April 1, 2013, CMS is arranging for enrollment in a different Medicare prescription drug plan. You will receive information from Medicare and from your new company. You should contact the new plan regarding your prescription needs, including any pending coverage determination or exceptions requests. If you have a pending request for reimbursement, your request will be forwarded to CMS' Independent Review Entity (IRE) and you will receive their decision directly.

6. Can Providers seek payment from UHC members for debt owed by UHC 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 Universal Health Care, 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.

We appreciate your continued cooperation in these matters.