



December 23, 2009

James R. Davis, Jr.  
Director, Potomac Verizon Labor Relations  
1 E. Pratt Street  
10N17  
Baltimore, MD 21202

Re: Executive Level Grievance – Failure to Properly Default to MCN/MEP

Dear Jim,

This is an Executive Level Grievance related to Verizon's failure to properly default employees, who are currently enrolled in Carelink HMO Option #616 and Keystone HMO Option #959 and who fail to affirmatively elect an option for 2010, to the Verizon Managed Care Network and Medical Expense Plan as per the collective bargaining agreement specified in the Medical Plan Document. This grievance is filed as a result of the attached notification.

CWA demands Verizon cease and desist defaulting employees to the EPO (Exclusive Provider Option) and that all affected employees be made whole for any out-of-pocket losses they or their dependents may suffer as a result of Verizon's action of defaulting the employee to the EPO.

I would like to set up a meeting as soon as possible to discuss this issue. Please contact me on 301 809-4164 with your availability. Your attention to this matter is greatly appreciated.

Sincerely,

A handwritten signature in cursive script that reads 'Gail Evans'.

Gail Evans  
Administrative Director

GE/dt

cc: Ronald Collins  
Jimmy Tarlau  
Vivian Schmitter  
District 2 Staff  
Verizon Local Presidents

opeiu#2-afl-cio

**From:** "Tomassone, Mark" <mark.p.tomassone@verizon.com>  
**To:** <GEvans@cwa-union.org>  
**CC:** "Feldman, Clifford R (CLIFF)" <cliff.feldman@verizon.com>, "Maiale, Nanc...  
**Date:** 12/21/2009 11:01 AM  
**Subject:** Carelink and Keystone Plan Terminations  
**Attachments:** RRT Carelink Term Final.doc; RRT Keystone Term Final.doc

Gail-

This information below is in response to the committee's question regarding the Carelink and Keystone terminations. We previously advised the committee that Carelink (option # 616) and Keystone (option # 959) forced a late termination upon Verizon and these two plans will not be offered in 2010.

I have attached the letters that the Verizon Benefits Center mailed to the current participants in these plans on December 15.

The committee previously raised a question about the default option for employees who are currently in an HMO Option that is not being offered for 2010, and who did not affirmatively elect an option for 2010. We continue to believe that under these circumstances it is appropriate for employees to be defaulted into the Anthem EPO Option. In support of its assertion to the contrary, the committee referenced Sections 4 and 16 of the Verizon Managed Care Network and Medical Expense Plan for MidAtlantic Associate (Plan). We have reviewed Section 4 of the Plan and it does not contain any provision covering this situation. Section 16.3 of the Plan covers plan elections that are caused by changes that occur during the plan year, which is not the situation we are addressing.

Because Keystone is a Medicare Advantage plan and the Anthem EPO does not coordinate with Medicare, retirees enrolled in the Keystone plan will be defaulted to the company sponsored Medicare Supplemental option.

Happy Holidays! Mark



[date]

Dear Verizon Participant:

**Re: Carelink (Option 616) Terminating – ACTION MAY BE REQUIRED**

Carelink has informed Verizon that, as of January 1, 2010, it will no longer cover Verizon members.

As you are currently enrolled in Carelink (Option 616), your coverage will be changed to the National EPO option administered by Anthem as of January 1, 2010. **No action is required if you want to be covered under this option as of January 1, 2010.**

You can confirm your coverage and learn more about your new option's benefit provisions by either calling the Verizon Benefits Center or accessing *Your Benefits Resources*<sup>™</sup> Web site at [www.verizon.com/benefits](http://www.verizon.com/benefits).

If you wish to enroll in a medical option other than the National EPO option as of January 1, 2010, you must call the Verizon Benefits Center between December 21 and December 28, 2009.

If you have any questions, please call the Verizon Benefits Center. To reach the Verizon Benefits Center, have the last four digits of your social security number, your date of birth and Benefits Center password available and then dial **1-877-4VzBens**. Listen to the main menu to make your selection and then follow the prompts to reach a representative.

Sincerely,

Verizon Benefits Center



[date]

Dear Verizon Participant:

**Re: Keystone Medicare HMO (Option 959) Terminating – ACTION MAY BE REQUIRED**

Keystone Medicare HMO has informed Verizon that, as of January 1, 2010, it will no longer cover Verizon members.

As you are currently enrolled in Keystone Medicare HMO (Option 959), your coverage will be changed to the company sponsored Medicare Supplemental option as of January 1, 2010. **No action is required if you want to be covered under this option as of January 1, 2010.**

You can confirm your coverage and learn more about your new option's benefit provisions by either calling the Verizon Benefits Center or accessing *Your Benefits Resources*<sup>™</sup> Web site at [www.verizon.com/benefits](http://www.verizon.com/benefits).

You may have other medical options available to you. If you wish to enroll in a medical option other than the company sponsored Medicare Supplemental option as of January 1, 2010, you must call the Verizon Benefits Center between December 21 and December 28, 2009.

If you have any questions, please call the Verizon Benefits Center. To reach the Verizon Benefits Center, have the last four digits of your social security number, your date of birth and Benefits Center password available and then dial **1-877-4VzBens**. Listen to the main menu to make your selection and then follow the prompts to reach a representative.

Sincerely,

Verizon Benefits Center