

Living **power**

For all who have made a living **I** and now wish to make a life

Nov/Dec 2006

Volume 22

Number 6

Retirement Systems Show Modest Gains

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The actuary for the Retirement Systems Division presented the actuarial reports for the year ending December 31, 2005 at the October meeting of the Board of Trustees of the State Retirement Systems. The reports indicate the retirement systems experienced modest gains during 2005. The available undistributed gains provide the base for Cost-Of-Living Adjustments (COLAs) in 2007. Undistributed gains represent monies in the retirement system over and above the amount necessary to meet the systems' long term obligations. Details of the reports for each of the major pension funds are presented below.

Teachers' and State Employees' Retirement System

The 2005 audit of the Teachers' and State Employees' Retirement System (TSERS) indicated that the actuarial value of System assets had grown from \$47.4 billion in 2004 to nearly \$49.7 billion at the end of 2005. The numbers of state retirees and beneficiaries receiving pay-

ments increased from 128,577 to 134,719 during the same period.

TSERS had undistributed gains at the end of 2005 equal to 0.34% of state payroll. These available gains would support a COLA for retired teachers and state employees of slightly more than 1.0%. A higher COLA would require supplemental appropriations by the General Assembly.

Local Governmental Employees' Retirement System

The assets of the Local Governmental Employees' Retirement System (LGERS) grew from \$13.4 billion to \$14.4 billion between 2004 and 2005. The number of local retirees and beneficiaries drawing payments from LGERS increased from 36,728 to 38,448 during the year.

The 2005 actuarial report indicates that the LGERS had a sufficient amount of undistributed gains to provide a COLA of approximately 2.2% for 2007. A higher COLA would require an increase in the employer contribution rate paid by participating local governments. (Cont. on page 4)



News & Views: Confusion over Vision Plans

In the September/October issue of *Living Power*, we mentioned that NCRGEA members in North Carolina are automatically covered by the NC Vision Health Plan 150. Our vision discount program is not to be confused with the State Treasurer's Superior Vision insurance program, where recipients pay a monthly insurance premium (\$9.76/retiree, \$20/retiree family per month). If you have a question about whether or not you have the Superior Vision Plan or decide you do not need it because our discount plan will cover your needs, you may reach Superior Vision through State Insurance Services at 1-800-462-7864 or www.stateinsuranceservices.com.

To use the NC Vision HealthPlan 150, you must first find a participating provider in your area. To do this, either visit www.ncvision.com or call the toll-free number 1-800-820-3132. They will ask you for your zip

code and then tell you the nearest participating providers. Most Optometric Eye Care Centers honor this discount program, as well as other private providers. Since this is a discount plan, the providers themselves decide if they want to participate in the plan. This plan is good for both you and your spouse, so we've included two membership cards (one for each of you).

The NC Vision Health Plan 150 does not work in conjunction with insurance, so if you have any type of vision insurance, you cannot use the discount program and the insurance.

While we are discussing Association benefits, remember that all NCRGEA members have access to the hearing aid discount program through HearPo, America's Hearing Benefit. If you think you or your spouse may need a hearing aid, or if you already have a hearing aid and need new batteries, try this discount program to see if it can save you money. Hearing aid discounts range from 20 to 60 percent and batteries are discounted as well. There are more than 1400 provider locations across the United States.

To use this program, call 1-888-432-7464 (888-HEARING).

Living Power is published to provide current information for NCRGEA's membership. Newsletters are printed bimonthly and mailed to all members of NCRGEA. Your comments are welcome.

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NC Vision Health Plan 150

1-800-820-3132 or www.ncvision.com

Please present card upon arrival to receive these vision discounts:

- \$49 Wellness examination
- 25% discount off eyeglasses (excludes Budget eyewear)
- 25% discount off sunglasses (if allowed by manufacturer)
- 20% discount off contact lens (excludes disposable)
- 5% discount off contact lens (1½ year supply)
- 10% discount off contact lens (1 year supply)

NC Retired Government Employees Association

Company or
Association.

Dependent
Card

NC Vision Health Plan 150

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- 10% discount off contact lens (1 year supply)

NC Retired Government Employees Association

Company or
Association.

Dependent
Card

NC VISION HEALTH PLAN 150

Members and their family are automatically enrolled in the NC Vision Health Plan 150. With this program, members and their spouses can receive eye care benefits at significant savings through participating ophthalmologists, optometrists, and opticians.

Association members and dependents (spouse and children under age 21) may obtain these benefits. The NC Vision Health 150 Plan is available ONLY through participating ophthalmologists and optometrists. To obtain a provider in your area, call 1-800-820-3132. Please listen carefully to the prompts given by the operator before making your selection. If you have questions about the program, call between the hours of 9:00 AM EST and 5:00 PM EST, press 0, and a member services representative will assist you. You may also visit their website at www.ncvision.com for the closest provider in your area. Call a selected provider to schedule an appointment and let them know you have the NC Vision Health Plan 150. At the time of your appointment, mention the name of your Association (NCRGEA) and present your NC Vision Health Plan 150 ID, association membership card, or simply print this detail sheet and present to provider. The program is easy — no claims to file or paperwork to complete. You pay the doctor directly at the time of service less any applicable discounts. Discounts may not be used in addition to other discounts, coupons, insurance, or other specials. Medical and surgical services, other than elective surgical treatments noted below, are NOT covered. Plan is subject to change or cancellation. Lenses and frames include professional services as necessary.

Eye Exam - \$49.00 Applies to wellness eye examinations not covered by insurance and when no eye disease is present. **\$49.00** eye examination includes screening fields and dilation. Additional fees for full threshold fields and contact lens examination and evaluation.

Eyeglasses - 25% discount Off total purchase, whether complete pair or just lenses or frames, including upgrades. Excludes Budget eyewear.

Sunglasses - 25% discount Includes most retail nonprescription selections, unless prohibited by manufacturer.

Contacts - 20% discount Includes all selections, except disposables.

Disposable Contacts - 5% discount Is applicable on a ½ year supply or 4 boxes. Discount available only with complete contact lens examination and evaluation. **10% discount** - This discount is applicable on 8 boxes or 1-year supply. Discount available only with complete contact lens examination and evaluation. (See special fitting and follow-up pricing below).

30-Day Fitting and Follow-up:

Disposables.....**\$46.00**

Intermediate Fit Toric & Extended Wear.....**\$86.00**

60-Day Fitting and Follow-up:

Complex Fit bi Toric.....**\$154.00**

Progress Checks - (Any type contact lenses, visits beyond and outside of the 30 or 60 day fitting period.).....\$25.00

Note: The fitting and follow-up fee of **\$46.00** for disposable also applies to daily wear. The fitting and follow-up fee of **\$86.00** for Intermediate fit applies to torics, monovision, or rigid gas permeable. The fitting and follow-up fee of **\$154.00** for complex fit applies to bi torics, bifocals, and other fits of a very complicated nature.

Elective Surgical Treatment for Nearsightedness and Astigmatism

RK & ALK

20% discount

PRK & LASIK (off surgeon's fee)

10% discount

Retirement Systems Show Modest Gains *(Continued from page 1)*

Consolidated Judicial Retirement System

The Consolidated Judicial Retirement System (CJRS) also posted a significant increase in the actuarial value of assets during 2005. The value of the CJRS assets increased from \$363.1 million to \$382.5 million while the number of members receiving pension payment rose from 420 to 449.

The actuary found that the CJRS had sufficient undistributed gains to support as much as a 3.1% Cost-Of-Living Adjust-

continuing goal of obtaining COLAs that match the rate of inflation as measured by the Consumer Price Index (CPI). Through October, the annualized inflation rate was approximately 3.3%. In all likelihood, the final CPI number for 2006 will fall in the 3.5% to 4.0% range.

In order to achieve the goal of a COLA for 2007 that matches the most recent rate of inflation, contribution rates to the retirement systems must be increased. Although all of the state's retirement systems are fully funded and well managed, they are not producing gains at the level that will consistently meet the inflation rate. The

Fiscal Year	Consumer Price Index	TSERS		LGERS	
		COLA Pct.	Employer Rate	COLA Pct.	Employer Rate
2001-02	3.4	2.0	1.97	3.7	4.8
2002-03	1.6	2.0	0.00	2.0	4.8
2003-04	2.4	1.28	0.22	3.5	4.8
2004-05	1.9	1.7	2.05	0.0	4.8
2005-06	3.3	2.0	2.34	2.5	4.8
2006-07	3.4	3.0	2.66	2.8	4.8
Totals	16.0	11.98		14.5	

ment for 2007. A portion of these gains represent an unused reserve that was carried forward from 2004.

Outlook

The N.C. Retired Governmental Employees' Association and other organizations representing retirees have a

following table shows the disparity between the CPI and retiree COLAs since 2001.

The COLAs for retired teachers and state employees were lower than the inflation rate in five of the past six years. In part, the disparity between the CPI and retiree increases reflect the negative finan-

cial markets in 2001 and 2002. However, the state's very low employer contribution rates to TSERS also limited gains in the system that could be used for COLAs.

During the 1990s, the state employer contribution rate averaged 7.7%.

In contrast, local government employers have maintained a steady contribution rate of 4.8%. As a result, the Local Governmental Employees' retirement System has generated gains that have supported higher retiree COLAs. The local employer rate has not been increased since 1997.

The Association's Legislative Committee will meet during December to establish recommended goals for the 2007 Session of the General Assembly. These goals will address the need for higher employer contributions to sustain Cost-Of-Living Adjustments on a consistent basis. Our Association, along with our partner organizations, will present recommendations to the Board of Trustees of the Retirement Systems at the Board's meeting in January.



The Association Office will be closed on November 23 - 24 for Thanksgiving and from December 22 - January 2 for the Christmas and New Year's holidays.

N.C. PENSION FUND TOPS LIST IN GOVERNING MAGAZINE

RALEIGH – In the October issue of *Governing*, the North Carolina Teachers and State Employees Retirement System (TSERS) ranks at the top of the list of state pension funds who are “ready for retirees.” The system's 108% funding level put it at the top of *Governing's* list and makes it one of the strongest state retirement plans in the nation.

While pension plans across the country are facing funding shortages, under Treasurer Moore's leadership, the North Carolina Retirement Systems have won acclaim across the nation for their strong investment returns, sound management and high funding level. In February, The Wall Street Journal named North Carolina's pension fund the second strongest in the nation. According to the article, North Carolina is one of only three state retirement funds in the country that can honestly say it has the money to pay all of its retirees and current workers. The Wall Street Journal's article was based on a report issued by the credit rating agency, Standard & Poor's.

The *Governing* list is based on data from the Public Fund Survey, where TSERS ranked as the third strongest fund out of 125 surveyed from across the country. The NC Retirement Systems serve 700,000 active and retired North Carolinians and have more than \$70 billion in assets.

Medicare Part D Enrollment Opens

(Editor's Note: The second annual enrollment period for the Medicare Part D Prescription Drug Plans opened on November 15 and will run through December 31, 2006. This year, North Carolina retirees who are eligible for Medicare have a choice of fifty-one Prescription Drug Plans (PDPs) offered by 21 private companies authorized by Medicare. Medicare beneficiaries who enrolled in Part D last year may elect to stay with their same PDP, but others who aren't satisfied with their current coverage or who failed to enroll during the initial enrollment period should make their changes in coverage during the six-week period. Also, folks with limited income and resources may qualify for extra help to pay for their prescription drugs through the Medicare prescription drug assistance program or through the Governor's new NCRx Program [see page 8]. To see if you qualify for this extra help, call NCRx at 1-888-488-6279 or contact your local Social Security Administration office. For any questions about Medicare Part D or other senior insurance products, call SHIP at 1-800-443-9354. The following article is intended to assist our members in understanding the Medicare Part D program and to answer some of the frequently asked questions raised by our members during the initial enrollment period last year.)

Introduction

The Medicare Part D Prescription Drug Plan was approved by the U.S. Congress three years ago to provide assistance to Medicare recipients who do not have access to a health insurance plan that provides prescription drug coverage. The Part D Program is funded by the Federal government but is marketed through private

insurance companies under contract with the Centers for Medicare and Medicaid Services.

There are 21 companies authorized to provide Medicare Part D Prescription Drug Plans (PDPs) in North Carolina for next year. These companies usually send information about their plans to all Medicare eligible individuals. Our members can expect to receive a great deal of information about Medicare Part D from these competing companies.

However, retired teachers and state employees will not need to enroll in any of the Part D plans because they already have prescription drug coverage through the State Health Plan. The situation for local government retirees will vary depending on whether or not these retired employees are covered by a health insurance plan that provides pharmacy benefits equal to or better than the basic Medicare Part D Plan.

Frequently Asked Questions

Q.: What is the reason retired teachers and state employees do not need to enroll in the Medicare Part D Prescription Drug Program?

A.: Retired teachers and state employees, as well as the retired governmental employees of Bladen, Rutherford, and Washington Counties, are covered by the State Health Plan which provides prescription drug benefits that are better than the coverage available under the basic Medicare Part D Plan. This is referred to as "creditable coverage". The State Health Plan has sent the annual *Notice of Credit-*

able Coverage to all Medicare eligible retirees. This Notice confirms that prescription drug coverage under the State Health Plan is superior to Medicare Part D. Retirees who are covered by the State Health Plan should keep this Notice with their important documents in the event that prescription drug coverage through the State Health Plan change in the future.

Q.: Should retired local government employees who are Medicare eligible enroll in one of the Part D prescription drug plans?

A.: For Medicare eligible local government retirees, enrollment in one of the Medicare PDPs depends on whether or not they have creditable prescription drug coverage through a health insurance plan provided by their former employer or through an individual health insurance plan. All health plans providing prescription drug benefits equal to or better than Medicare Part D are required to send a *Notice of Creditable Coverage* to members each year. Local retirees who are not sure whether they have such coverage through an employer provided health plan should contact the Human Resources office of the local government where they worked prior to retirement or their individual health insurance provider.

Q.: What about Medicare eligible spouses who are not covered by the State Health Plan and who do not have creditable prescription drug coverage under another health insurance program?

A.: Medicare eligible spouses who are

not covered by the State Health Plan or another health insurance program providing creditable prescription drug coverage should enroll in one of the Medicare Part D plans.

Q.: Where can retirees obtain more information and counseling about Medicare Part D Prescription Drug Plans?

A.: The Seniors' Health Insurance Information Program (SHIIP) located in the state Department of Insurance provides excellent information and counseling on the Medicare Part D program. There are two ways to contact SHIIP: you may call the toll-free telephone number (1-800-443-9354) and talk to a counselor or if you have access to the Internet, you can go to the SHIIP web page (www.ncdoi.com/SHIIP/Medicare/shiip_part_d.asp) and read information about the PDPs offered in North Carolina, monthly premiums for the various PDPs, and facts about the Medicare Part D program. The webpage also features a Medicare Prescription Drug Plan Finder Tool Form, which is used to identify the PDP best meeting your needs.

SHIIP has a network of volunteer counselors across the state. You can find out about counselors in your area by calling the toll-free number listed above or accessing the web page.

Many government retirees from North Carolina now live in other parts of the country. Fortunately, every state has an agency similar to SHIIP. You can access a list of these agencies in your own state at www.shiptalk.org or by calling 1-800-677-1116.

Q.: Can retirees who enrolled in a Part D Plan during the first enrollment period change to another plan during this year's open enrollment?

A.: Yes, you may select a different PDP during the current enrollment period that opened on November 15 and ends on December 31, 2006.

Q.: Must you wait until the next enrollment period (Fall, 2007) to select a Medicare Prescription Drug Plan if you are not yet eligible for Medicare?

A.: No, individuals can enroll in a Part D Plan 3 months before or after the month in which they will reach age 65. For example, an individual who will reach age 65 in May, 2007 can enroll as early as February (three months before) or as late as August (three months after) without penalty and without waiting for the open enrollment period starting in November, 2007.

Q.: Is there a penalty if a person who is eligible for Medicare Part D coverage and who does not have creditable drug coverage from another source delays enrolling in a Part D plan?

A.: Yes, there is a penalty that increases the premium by 1% for each month the individual delays their enrollment. For example, if the average monthly Part D premium for 2007 is \$30 and the person does not enroll for 6 months, the penalty would add \$1.80 to the monthly premium.

- Ed Regan

EASLEY OUTLINES PRESCRIPTION DRUG ASSISTANCE FOR SENIORS

'North Carolina Rx' Will Help Provide Low-Income Elderly the Medications They Need

On October 18, 2006, Governor Mike Easley outlined a new prescription drug assistance program to benefit low-income seniors at the Craven County Senior Services Center in New Bern. *North Carolina Rx* will provide \$24 million to help the state's elderly obtain the medications they need to stay healthy. Money from the Health and Wellness Trust Fund will be used to pay some or all of Medicare Part D premiums so qualifying low-income seniors can take advantage of the federal prescription drug program.

"Our seniors were there for us when we needed them, and it is our turn to be there for them," said Easley. "*North Carolina Rx* will help pay monthly premiums so many of the federal plans will be free or very low cost for qualifying low-income seniors. Just as important, we are providing a toll-free number as a resource for citizens trying to navigate the complicated federal system.

"When our seniors do not get their medicines, they get sick and have to go to the hospital. That is more suffering for them and more expense for the taxpayers. So *North Carolina Rx* is not only the right thing to do, it is the smart thing to do. I want to enlist everyone's assistance in getting the word out about this new program.

If you have an elderly parent, neighbor or friend who may qualify, please make sure they call our toll-free number or visit the website for information.”

Under Medicare Part D, which began last January, North Carolina seniors could choose from a variety of prescription drug insurance plans. For 2007, there will be 51 plans offered to North Carolina seniors. To participate in Part D, seniors must select a plan and pay the monthly premium. Plan premiums range in cost, from \$17.80 to \$85.90 per month for 2007. Seniors will be able to start signing up right away for the coverage that will begin on January 1, 2007.

“I am proud the Health and Wellness Trust Fund is stepping up to address some of the shortcomings of the federal Medicare Part D program,” said Lt. Gov. Beverly Perdue, chair of the Trust Fund Commission. “We hear too many stories of seniors having to choose between a light bill or food and the medications they need to live and be healthy. This assistance will help those that need it the most.”

The federal program offers full premium assistance for low cost plans to seniors with incomes below 135 percent of the federal poverty level (\$13,230 annually for an individual and \$17,820 for married couples) and very limited assets (below \$6,000 for an individual and \$9,000 for married couples). Partial federal subsidies are available to seniors with incomes below 150 percent of the poverty

level (\$14,700 a year for an individual and \$19,800 a year for married couples) and limited assets (below \$10,000 for an individual and \$20,000 for a married couple).

As seniors have been signing up for the benefits, state officials have identified some North Carolinians in need, who because of the way eligibility for federal assistance is, are left out. North Carolina Rx will make sure those seniors receive assistance from the state so they can afford coverage.

North Carolina Rx will help pay premiums for seniors with incomes up to 175 percent of the poverty level (\$17,150 for an individual and \$23,100 for married couples). The plan also increases the amount of assets seniors may have and still qualify for assistance to \$20,000 for an individual and \$30,000 for married couples. Qualifying seniors will receive a credit of \$18 per month to help pay their premium. Approximately 50,000 North Carolina low-income seniors are expected to sign up for this benefit.

In addition, *North Carolina Rx* will:

- * Provide resources to seniors who are attempting to navigate the complicated federal drug program by providing a toll-free number and a website that will link seniors with trained professionals that can help choose the best program to fit an individual’s needs and handle paperwork to make sure it is properly filed, and

- * Begin a “medication therapy man-

(Continued on page 12)

North Carolina State Health Plan and UNC Health Care System Collaborate on Wellness and Health Care Initiative

The North Carolina State Health Plan (SHP) has developed a partnership with the largest public hospital system in the state, UNC Health Care System (UNCHCS), to improve health care delivery and wellness services to State Health Plan members and UNCHCS employees and patients. The “Partnership on Wellness and Health Care” will promote excellence in the population-based care of State Health Plan members.

Through the “Partnership on Wellness and Health Care,” the State Health Plan’s healthy living initiative, known as NC HealthSmart, will be integrated into UNCHCS’s Patient Access and Efficiency initiative. “NC HealthSmart provides a variety of health resources for eligible State Health Plan members and is dedicated to building a strong partnership among members, their families and their physicians to help them achieve all their health and wellness goals,” said Dr. Nancy Henley, the State Health Plan’s medical director.

NC HealthSmart offers strategies and resources to help members manage chronic diseases, such as diabetes, heart disease, asthma, high blood pressure and chronic kidney disease. The partnership

project will further NC HealthSmart and other health care initiatives of the State Health Plan by enhancing worksite wellness programs for UNCHCS employees and improving access and efficiency in UNCHCS clinics. All patients, including State Health Plan members, will benefit from the improvements.

“This partnership is a milestone for our hospital system, physicians and patients,” said Dr. William L. Roper, CEO of the UNC Health Care System. “A partnership with a major employer group (SHP), with expected improvement in health outcomes, will further position UNC Health Care as a leader in health care quality improvement. As access improves, we envision that we will be able to serve more North Carolina citizens in an efficient and timely manner.”

Next steps for UNC Health Care System will include finalizing project plans for major initiatives in the key areas of patient access and efficiency, worksite wellness, and health risk assessments and biometric screenings for UNCHCS employees who are members of the State Health Plan.

“This strong, multidimensional ‘Partnership on Wellness and Health Care’ will help improve the health and wellbeing of State Health Plan members and UNCHCS employees and patients alike, while contributing to lowering health care costs,” said State Health Plan Executive Administrator George C. Stokes. “We are delighted to collaborate with UNC Health Care System on this vital and timely initiative.”

About the State Health Plan:

The North Carolina State Health Plan covers approximately 590,000 teachers, state employees, retirees, current and former lawmakers, state university and community college personnel, state hospital staff and their dependents. More than 300,000 active employees; more than 190,000 dependents and non-Medicare retirees; more than 90,000 retirees and their dependents, with one or more members covered primarily by Medicare; and finally, more than 2,000 COBRA participants and their dependents. Dependents include spouses and unmarried children under age 19 (or under age 26 if full-time students). The State Health Plan is self-insured and exempt from ERISA as a government-sponsored plan. Access the State Health Plan online at www.shpnc.org.

About UNC Health Care System

The UNC Health Care System is a not-for-profit integrated health care system, owned by the State of North Carolina and based in Chapel Hill. It exists to further the teaching mission of the University of North Carolina and to provide state-of-the-art patient care. A distinguishing characteristic of UNC Health Care is its association with the UNC-Chapel Hill School of Medicine, a nationally eminent research institution. This relationship gives UNC Health Care a powerful pathway for moving the results of biomedical research from medical school laboratories to patient care settings. For more information, visit www.unchealthcare.org.

UNC Hospitals is the cornerstone of UNC Health Care. People from all 100 North Carolina counties and throughout the Southeast are patients at the 708-bed facility - more than 31,000 each year. UNC Health Care extends beyond Chapel Hill and into the greater Triangle area through its network of primary care and specialty physician practices located in Orange, Wake, Durham, Chatham, Lee, Vance and Alamance counties. These offices, in addition to the UNC Family Practice Center and Ambulatory Care Center, provide the basic health care outpatient services most families need, in convenient neighborhood locations. Nearly a half-million people are cared for at UNC practices and clinics each year.

Butner Chapter Meeting

All retired North Carolina state and local (city/county) retirees in Durham, Franklin, Granville, Nash, Orange, Person, Vance and Warren counties are invited to attend the Butner chapter of the North Carolina Retired Governmental Employees' Association's semiannual meeting on Tuesday, January 9, 2007. The meeting will be held at 1:00 p.m. in the Murdoch Chapel at the Murdoch Center Campus on "C" Street in Butner.

A representative from the State Health Plan will be among the speakers, and will discuss the current PPO options as well as the traditional state plan.

You do not need to RSVP to attend. Refreshments will be served and door prizes will be awarded. For more information, call Carolyn Overton, Chapter President, at 919-575-6192 or the Association's office.

**PRESCRIPTION DRUG ASSISTANCE
FOR SENIORS**

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agement” program – in which pharmacists work with patients to make sure seniors are taking the medications they need and preventing possible drug interactions.

North Carolina Rx will work with senior centers and other programs that reach out to the elderly to provide advice and enrollment assistance.

A special web site, www.ncrx.gov and a toll-free hotline, 1-888-488-NCRX (6279), have been set up to provide information about the program and coverage.

Important Phone Numbers to Remember

NCRGEA	1-800-356-1190
MetLife Dental	1-888-466-9073
NC Retirement System	1-877-733-4191
CIGNA (Medicare Administrator)	1-800-633-4227
Seniors’ Health Insurance Information Program ..	1-800-443-9354
Medical Review of North Carolina	1-800-722-0468
NC State Health Plan	1-919-881-2300
Blue Cross/Blue Shield	1-800-422-4658
(State Health Plan Administrator)	
Social Security Administration	1-800-772-1213
State Employees’ Credit Union	1-888-732-8562
Local Government Federal Credit Union	1-888-732-8562