



4 Harriman Drive
Goshen, NY 10924
Phone: 845-781-4890
Fax: 845-781-8174
ouhealth.org



OFFICERS

Deborah McBride Heppes
OU BOCES-Chairwoman

Joseph Lenz
Pine Bush CSD-CFO

Patrick Cahill
Monroe Woodbury-Secy

Brad Conklin
Valley Central-Appeals

BOARD MEMBERS

Nicole DeSousa
Chester UFSD

John Fink
Cornwall CSD

Caleb Russell
Eldred CSD

Chris Slesinski
Florida UFSD

Lorine Van Put-Lamerand
Goshen CSD

Sara Hadden
Greenwood Lake UFSD

Christopher Carballo
Highland Falls-FM CSD

David Berkowitz
Kiryas Joel UFSD

Emerson Segura
Marlboro CSD

Dr Norval Connell
Middletown CSD

John Timm
Port Jervis CSD

Tabatha Biggane
Rondout Valley CSD

Walter Kaufmann
Tuxedo UFSD

Timothy Holmes
Warwick CSD

Sandra Clohessy
Washingtonville CSD

STAFF

Matthew E. Bourgeois
Plan Administrator

Ann Draughan
Health Plan Specialist

Jacqueline Sabbagh
Customer Relations

Cynthia Cannizzaro
Benefits Specialist

A Message from the Plan Administrator

The plan is aware some claims were denied by Luminare from 2025 as well as some Medicare claims from Jan-Feb 2026 after Luminare's contract expired on 12/31/25.

Anthem claims - Sage recently received a file from Anthem containing all of the claims that were denied by Luminare and will be reprocessing those claims for payment.

Out-of-Network claims - For members that submitted out-of-network claims to Luminare for acupuncture, mental health, chiropractic, etc. for reimbursement, you can resubmit those claims directly to Sage by emailing them to ouhealth@sagetpa.com

Medicare claims - members that received an invoice from their provider for claims Luminare denied from 2025 or Jan-Feb 2026, can email a copy of the invoice directly to Sage at ouhealth@sagetpa.com for processing. The claim can be mailed to Sage's address: Sage TPA, 2367 Oak Alley, Tyler, TX 75703

Medicare crossover – OUH and Sage have been working diligently with Medicare since August 2025 to replace Trustmark/Luminare with Sage on the Medicare.gov website. The new Medicare crossover with Sage should be in place on or about March 2.

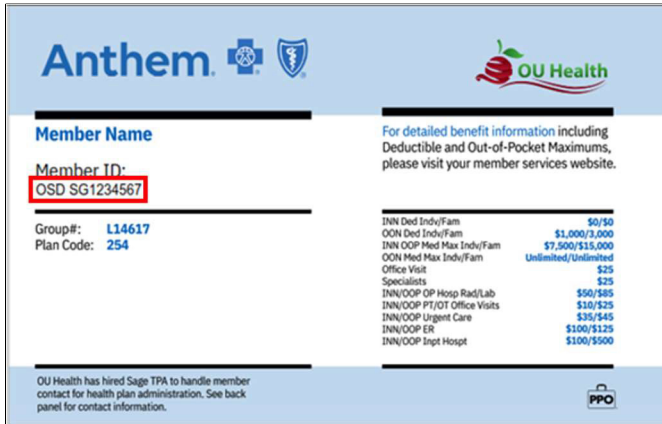
Sage anticipates, based on the volume of claims received, that the reprocessing of the claims referenced above will be completed in 30-60 days.

- If you receive a **Luminare Explanation of Benefits (EOB)** showing a denied claim related to this issue, you may **disregard it – it is not a bill**. **DO NOT** email the EOB to Sage.
- Based on this information, OU Health and Sage request that you refrain from calling about this issue in order to allow members calling with an urgent matter to reach us without delay so we can assist them.

Got a question or need to submit a claim for reimbursement?

If you need to submit a claim for reimbursement or ask a question of Sage and/or get a return phone call, you may email Sage directly at ouhealth@sagetpa.com or email OUH by going to ouhealth.org and selecting "contact us"

ACTIVE EMPLOYEES & PRE-65 RETIREES



Anthem  

Member Name

Member ID:
OSD SG1234567

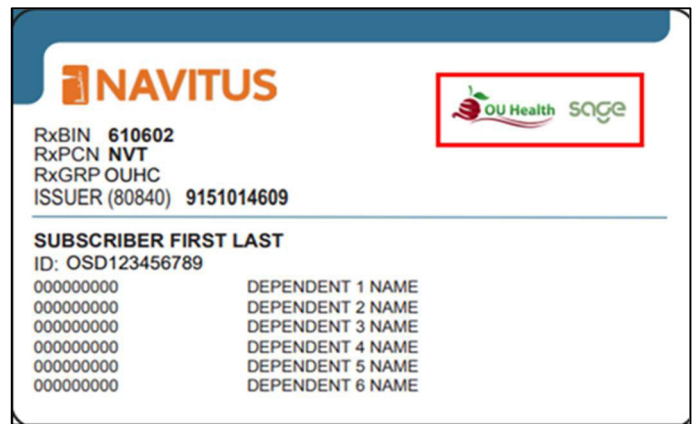
Group#: L14617
Plan Code: 254

For detailed benefit information including Deductible and Out-of-Pocket Maximums, please visit your member services website.

INN Ded Indiv/Fam	\$0/\$0
OON Ded Indiv/Fam	\$1,000/\$3,000
INN OOP Med Max Indiv/Fam	\$7,500/\$15,000
OON Med Max Indiv/Fam	Unlimited/Unlimited
Office Visit	\$25
Specialists	\$25
INN/OOP OP Hosp Rad/Lab	\$50/\$25
INN/OOP PT/OT Office Visits	\$10/\$25
INN/OOP Urgent Care	\$35/\$45
INN/OOP ER	\$100/\$125
INN/OOP Inpt Hosp	\$100/\$500

OU Health has hired Sage TPA to handle member contact for health plan administration. See back panel for contact information.





NAVITUS 

RxBIN 610602
RxPCN NVT
RxGRP OUHC
ISSUER (80840) 9151014609

SUBSCRIBER FIRST LAST
ID: OSD123456789

000000000	DEPENDENT 1 NAME
000000000	DEPENDENT 2 NAME
000000000	DEPENDENT 3 NAME
000000000	DEPENDENT 4 NAME
000000000	DEPENDENT 5 NAME
000000000	DEPENDENT 6 NAME

In an effort to provide some explanation regarding the timing of the events that occurred throughout the transition to Sage from Luminare, the Anthem medical ID cards were reviewed and approved by Anthem on 5 different occasions in December prior to the cards being sent to the printer on 12/17/25. The cards were mailed out later than expected by the printer in early January.

As those cards were received by members, Anthem then required the ID cards be reissued to include the SG designation on the ID card in order to allow Anthem to confirm member eligibility in their system. Updated cards now include a five-letter prefix (**OSDSG**) followed by

seven digits and were mailed in late January. The “updated” Anthem ID cards with the OSDSG prefix are effective 1/1/26. This prefix change only applies to the Anthem medical ID cards.

Navitus prescription ID cards with the OSD prefix are correct and do not require the added SG prefix because Anthem is not involved in the processing of prescription claims.

If you have not received your NavitusRx ID card, contact Navitus customer care at 855-673-6504. If you did not receive your medical ID card referenced above, please contact your school district to verify they have your current mailing address on file and they will have the ID card mailed to you.

Other Important Health Plan Info for You

Mental Health Counseling

Members that utilize an in-network provider can meet virtually with their provider for \$0 copays.

Flu/Covid Vaccine

These vaccines are available to all OUH members for \$0 at local pharmacies.

Blood Work at Quest Labs

Blood work at Quest Labs is available to members for a \$5 copay.

Digital Access to Your Benefits

Benefits Hero App

access insurance cards
and account information

**Scan QR Code to
download the Sage
Benefits Hero app**



Navitus App

access information on your
prescription benefits

**Scan QR Code to
download the Navitus app**



Removal of Out-of-Pocket (OOP) Maximum for Out-of-Network (OON) claims

- To encourage the use of in-network providers, the plan has removed the out-of-pocket maximum for out-of-network claims.
- Previously, after a member met their out-of-network deductible, the plan paid 75% of “reasonable and customary charges” for the service provided up to the Out-of-Pocket maximum and then paid 100% of claims once the out-of-pocket maximum was reached.
- In 2026, the plan removed the OOP maximum and will pay 75% of reasonable and customary charges after the member’s deductible is met for the calendar year.
- This change does not apply to members using an in-network provider such as Anthem, Quantum, Quest, etc. Members have only a copay when using an in-network provider.

Wellness Benefits

Weight Watchers (WW) The plan offers 6-month membership to Weight Watchers for a one-time \$25 copay. Members who wish to continue with WW after 6 months can sign up again for \$25 for another 6 months. Contact us at HealthCareSupport@ouhealth.org

Active & Fit - Active Employees can obtain a gym membership at a reduced cost of \$28 per month through Active and Fit, www.activeandfit.com - Use the link to find a participating gym near you by entering your zip code.

Independent Pharmacies provide lower Rx costs to the plan

Did you know that choosing an independent pharmacy over a chain like CVS can save you money and support your local community?

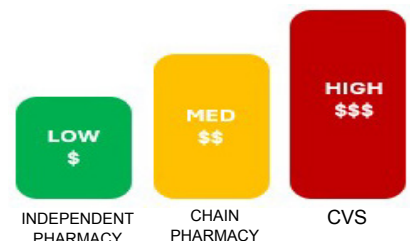
Why choose independent pharmacies:

- Lower prescription costs for plan compared to chain pharmacies
- Personalized customer service and medication counseling
- More flexibility with generic and brandname options
- Support for local businesses and your community
- Helps the plan avoid hidden fees and inflated prices for Rx fills

Cost Comparison Example:

A common generic medication might cost \$4-\$10 at an independent pharmacy, versus \$15 - \$25 at a chain pharmacy like CVS.

That savings adds up fast with over 10,000 monthly prescriptions!



“Together we can make a difference in the lives of our members.”

More Information: visit www.OUHealth.org for plan information, updates, and resources.

MEDICARE PRIMARY RETIREES



Group: Orange Ulster School Districts' Health Plan
Group #: OUHHP
Member: John Sample
ID #: **OSD** 12345678

Retiree plan
Deductibles:
\$300
(This is the minimum annual Medicare deductible, adjusted annually by Medicare or \$300, whichever is greater.)
Max out of pockets:
\$300
(This is the minimum annual Medicare deductible or \$300, whichever is greater)

Medicare Primary Plan



RxBIN: 610602
RxPCN: EGWP
RxGrp: **OUHAA001**
Issuer: (80840): 9151014609
ID: V00200123456

S9701_22_N02_001
Offered by
Dean Health Insurance, Inc.

MedicareRx
Prescription Drug Coverage

Medicare Primary members received a Sage medical ID card with an OSD prefix. **The Sage OSD cards are the correct ID cards for Medicare primary members.** The SG prefix was only required for the active employees and pre-65 retirees. When you see a provider, the provider submits your claim to Medicare and then the claim is sent to Sage via our Medicare Crossover Agreement with CMS (Center for Medicare Services). Anthem is not involved in the processing of Medicare claims for our plan.

Originally, Navitus indicated to OUH that new NavitusRx ID cards would not need to be issued. After we sent out our October communication noting that new cards would not be issued, Medicare advised Navitus to issue a new NavitusRx card for the Medicare retirees. As a result, Navitus mailed out the new Rx ID prescription cards in December.

The new group number on the NavitusRx ID card was changed to **OUHAA001**. You should present the NavitusRx card to your pharmacy.

If you did not receive the new NavitusRx ID card in December, you can contact Navitus customer care at 866-270-3877 to request a card be mailed to you.

If you have not received the medical ID card referenced above, confirm your mailing address with your school district and new cards will be mailed to you.

Digital Access for Medicare Members

Benefits Hero App

access insurance cards and account information

Scan QR Code to download the Sage Benefits Hero app



Navitus Prescription Part D Benefits Webpage

access information on your prescription benefits <https://memberportal.navitus.com/landing>

Wellness Benefits

The plan offers Silver Sneakers at no cost for retired members. Silver Sneakers® is a health and fitness program for retirees that helps you stay strong in body, mind, and spirit. silversneakers.com

Other Important Health Plan Info for Medicare Members

- **Mental Health Counseling** Members that utilize a Medicare provider for a virtual visit would be covered at 100% - No deductible would apply
- **Flu/Covid Vaccine** These vaccines are available to all OUH members for \$0 at local pharmacies.
- **Navitus Preferred Pharmacies** If you use a Navitus Preferred Pharmacy, your Tier 1 Medications (Generics and Certain Lower Cost Brands) are \$0 copay for retail 30-day and 90-day fills. Tier 2 (Preferred Brand) and Tier 3 (Non-Preferred Brand) are at a reduced cost for retail 30-day and 90-day fills. You can refer to the OU Health Plan website for links to the Navitus Preferred Pharmacies at ouhealth.org