

MEMO

DATE: June 24, 2014

TO: All Lysander Board Members

CC: John Salisbury

FROM: Dan Boccoardo

SUBJECT: Town Board Web Page Information

Board Members: Although there is nothing set in stone regarding information you would like to share with the public on the website, I have looked at other government website's to gather and suggest some ideas. I will list them out in a format that will allow you to fill in the answer, or if you have some reservation about the item indicate "Further discussion" in the area as your response. Ideally, the same information characteristics should be consistent for personal data on the web site for all board members. I'm hoping to schedule a convenient time for all to discuss this (Perhaps at next work session) so there is a consensus on what exactly that information should be. Please keep in mind the following are just suggestions.

Full Name:

Address:

Year elected to Board/Term:

Education/Background:

Occupation/Skills:

Area of expertise:

Other elected offices held:

What is your Vision for Lysander?:

What are your immediate and long term goals as a Lysander Board member?:

Other career or personal areas of interest?:

A Personal Statement:

Also, please provide a digital picture of yourself that will appear on the Town Board page.

Thank you for taking the time to provide the feedback needed to shape this page. I look forward to working with all of you to move this project forward.

A Local Law amending the zoning law of the Town of Lysander, New York, to impose a temporary moratorium on zone changes in the AR-40 zoning district.

WHEREAS, traffic, drainage and agricultural land protection concerns in the AR-40 zoning district and particularly on the Cold Springs Peninsula have been raised; and

WHEREAS, the Town Board proposes to consider possible changes to the Zoning Law and the Comprehensive Plan for the Town of Lysander in respect of the AR-40 zoning district; and

WHEREAS, the Town Board of the Town of Lysander believes it is in the public interest to temporarily halt zone changes for property in the AR-40 zoning districts in the Town of Lysander while the Town Board considers new legislation and changes to plans for the AR-40 zones in the Town;

NOW, THEREFORE,

BE IT ENACTED by the Town Board of the Town of Lysander as follows:

Section 1. The Zoning Law of the Town, of Lysander is amended to add a new Section as follows:

139-148 TEMPORARY MORATORIUM ON ZONE CHANGES FOR PROPERTY IN THE AR-40 DISTRICT

(1) From the effective date of this amendment until May 15, 2015, no zone change applications shall be considered, and no zone changes shall be granted for properties in the Agricultural-Residential AR-40 zoning districts in the Town of Lysander pending a study of changes in zoning regulations and planning documents relating to the AR-40 zoning districts. The Town Board may extend the moratorium in three (3) month intervals for not more than a total of an additional six (6) months by adopting a resolution before the expiration of the moratorium or extended expiration which includes a finding that additional time is necessary to complete the study or adopt changes.

(2) Upon a written application, and after a public hearing held upon (ten) 10 days advance notice by publication in the official newspaper of the Town of Lysander, and upon evidence to be submitted by the applicant of severe economic hardship, the Town Board of the Town of Lysander may grant a temporary or permanent variance, with or without conditions, from the provisions of subsection (1) above. This subsection, in granting variance authority to the Town Board of the Town of Lysander for the purpose of this section of the Zoning Law of the Town of Lysander, New York only, shall supersede the provisions of Sections 267,267-a and 267-b of the Town Law, otherwise known as Chapter 62 of the Consolidated Laws of New York, and shall also supersede the provisions of §139-63 and §139-64 of the Zoning Law of the Town of Lysander adopted October 16, 1995 as Local Law No. 2 of 1995.

Section 2. This local law shall take effect upon filing with State.

September 2014 – October 2014 Assessors' Report

New Basic Star Registration Update: The office has received a number of calls concerning missing Star exemptions, removed as directed by DTF. They must contact DTF to appeal their determination and receive a correction if applicable. We expect to receive more calls when escrow accounts are reviewed next year. All new Basic Star exemptions in 2014 will reregister with DTF this year. Mailings are scheduled for late December.

Exemption renewals for Enhanced Star, Senior Citizen and Disability were mailed in September. They are currently being reviewed and processed as received. Reminder post cards will be mailed in January to property owners that have not renewed. The deadline is March 1st, 2015. All other exemption renewals will be mailed by mid December.

Special district and taxable value reports were created for the Town Comptroller to aid in budget preparation. An exemption impact report was also created for attachment to the budget, as required by law

The County has frozen the 2014 file to prepare rates and process January County/Town bills. Work continues on the 2015 file for next year's assessment roll.

Valuation/inventory changes are being entered as completed for 2015. Final field review will occur before March 1st, as weather permits.

Initial sales analysis has been completed and final analysis is currently being reviewed by neighborhood/property type. This will determine the appraisal work to be completed for 2015.

Digital pictures have been attached to V-4 on the County server. This will provide additional backup protection for our valuable picture file. It will also allow new pictures to be taken/attached using a tablet in the field.

TOWN OF LYSANDER
NOTICE OF PUBLIC HEARING

PLEASE TAKE NOTICE that a public hearing will be held by the Town Board of the Town of Lysander on December 15, 2014 at Lysander Town Hall, 8220 Loop Rd., Baldwinsville, New York, 13027 at 7:00 P.M. regarding the adoption of a Local Law of the Town of Lysander for the year 2014 which would create the Vehicle and Traffic Law of the Town of Lysander.

PLEASE TAKE FURTHER NOTICE that the environmental significance of said proposed Local Law will be reviewed by the Town Board of the Town of Lysander incident to and as a part of said public hearing. Copies of said proposed Local Law is available for review at the office of the Town Clerk.

By order of the Town Board of the Town of Lysander, dated November 17, 2014.

Town of Lysander,
Lisa Dell, Town Clerk

Item H,
(1-1)

David Rahrle

From: Donna Brown <dbrown@affordable-benefit.com>
Sent: Thursday, September 11, 2014 12:12 PM
To: David Rahrle
Cc: 'Damian Ulatowski'
Subject: MVP Renewal
Attachments: MVP Medicare 2015 Renewal.pdf

Importance: High

David,

Attached are the rates, plan designs and updates for your in force MVP Medicare Advantage offering for 2015

- Gold Anywhere \$331.90 up 13%
- USA Care \$390.40 up 7.6%

Please note the following plan changes for 2015. They look positive and are as follows. (changes below apply to both plans):

Preferred Diabetic test strip 0%; non-preferred 10%

No 3-day Hospital stay required for SNF

6-tier Formulary (this does not represent a change in tier copays, rather a restructuring of tiers for 2015)

CVS Caremark will be the new pharmacy benefit manager beginning January 1, 2015. Members will be receiving new ID cards in December.

Any questions please feel free to call.

Damian

Donna Brown
DBrown@Affordable-Benefit.com
Affordable Benefit Concepts, Inc.
7785 Henry Clay Blvd.
Liverpool, New York 13090
(315) 426-0540 Telephone
(315) 622-3186 Fax



H2

USACare - Buy-Up
with Part D Prescription Drug
Employer Group 2015 Benefits

BENEFITS		YOU PAY
DOCTOR VISITS		
Primary Care		\$10
Specialist		\$15
Chiropractor		\$15
Allergy Injection (allergy serum covered)		\$10 Primary Care; \$15 Specialist
Acupuncture (10 visits)		50%
PREVENTIVE CARE		
Yearly Wellness Exam		Covered in full
Medicare-covered screenings -- mammogram, prostate, Pap tests, bone mass measurement		Covered in full (Office visit copay may apply)
Pneumonia and Flu Shots		Covered in full (Office visit copay may apply)
HOSPITAL SERVICES		
Inpatient Acute Hospital Stays		Covered in full
Inpatient Mental Health Care (190 days per lifetime)		Covered in full
Observation Stays		Covered in full
OUTPATIENT SERVICES		
Ambulatory Surgical Center -- same day surgery & other services		Covered in full
Outpatient Hospital -- same day surgery & other services		Covered in full
Home Health Services		Covered in full
Hospice		Covered by Medicare
EMERGENCY CARE		
Emergency Room Care -- worldwide coverage		\$65
Urgently Needed Care -- covered anywhere in the U.S.		\$15
Ambulance Transportation		\$35 (per use)
DIAGNOSTIC SERVICES -- office visit copay may apply		
X-rays (Radiology)		\$15
Lab Tests (Diagnostic tests covered in full)		Covered in full
CT Scans, PET Scans, MRIs, Nuclear Medicine		\$15
REHABILITATION		
Skilled Nursing Facility		\$0 days 1-100
Physical, Occupational, and Speech Therapy (therapy caps apply)		\$15
MEMBER PROTECTION		YOU PAY
Maximum Annual Out-of-Pocket Protection (Excludes: Part D costs, acupuncture, eyewear, hearing aids and dental if applicable)		\$4,000 Combined

BENEFITS		YOU PAY
ADDITIONAL COVERAGE		
Diabetic Glucose Strips – Preferred vendor		0%
Diabetic Glucose Strips – Non-preferred vendor		10%
Other Diabetic Supplies		10%
Durable Medical Equipment (DME)		20%
Prosthetic Devices – such as artificial limbs, braces		20%
Part B Drugs - including chemotherapy		\$15
Eyewear Allowance	\$100 eyewear allowance every two years	
Hearing Aid Allowance	\$600 hearing aid allowance every three years	

ENHANCED PRESCRIPTION DRUG COVERAGE		
Initial Coverage Stage	Retail Pharmacy (30 day supply)	Mail Order (up to a 90 day supply)
Tier 1 – Preferred generic drugs	\$0 copayment	\$0 copayment
Tier 2 – Non-preferred Generics	\$5 copayment	\$10 copayment
Tier 3 – Preferred brand-name drugs	\$15 copayment	\$30 copayment
Tier 4 – Non-preferred drugs	\$30 copayment	\$60 copayment
Tier 5 – Specialty drugs	\$30 copayment	\$60 copayment
Tier 6 – Select vaccines	\$0 copayment	\$0 copayment
Coverage Gap Stage	If your total drug costs (paid by both you and MVP Health Plan, Inc.) reach \$2,960, you will pay either the copayments as listed above or less. You will continue to pay \$0 for Tier 1 and 6 drugs.	
Catastrophic Coverage Stage	When you have paid \$4,700 out of pocket, your cost for prescriptions is reduced to 5% or \$2.65 for generics and \$6.60 for all other drugs, whichever is greater. You will never pay more in Catastrophic Coverage than you did in the Initial Coverage stage	
Additional Coverage	Your plan also covers the following: Erectile dysfunction drugs, weight-loss agents, and additional barbiturates (butalbital/aspirin/caffeine).	

WELL-BEING PROGRAMS	
24 Hour Nurse Line	Nurse available 24 hours per day, 7 days per week to answer health questions via telephone or email.
HealthDollars sm	\$100 in HealthDollars to use toward health programs such as weight loss and smoking cessation.
The SilverSneakers [®] Fitness Program	Free fitness center membership benefits at a participating fitness center near you, including use of equipment and other amenities, at no charge.

Exclusions & Non-covered Services

Neither MVP nor Original Medicare will pay for certain items or services, including cosmetic surgery, custodial care, and experimental procedures and items. For a complete list of excluded services, refer to your Evidence of Coverage (your contract). Unless expressly indicated in the contract, all non-medically necessary services are not covered. Even if you receive the services at an emergency facility, the excluded services are still not covered.

This information is a brief summary, not a comprehensive description of benefits. For more information, refer to your Evidence of Coverage (your contract).

MVP Health Plan, Inc.
Medicare GoldAnywhere PPO 2015
 Group Customer Quote



Customer Name: Town of Lysander
Customer Number: 415006 0001
Contract Period: 1/1/2015 thru 12/31/2015
Region: Upstate NY & VT

Product Description and Rates:	
MVP PRODUCT PG150000/ RPG0114X	
BASE PLAN MCP017GR	
PCP Office Visits	In \$10; Out \$25
Specialist Office Visits	In \$15; Out \$25
Hospital Inpatient Copay	\$0 In Network / 20% OoN
Emergency Room	\$65
Skilled Nursing Facility Copay	\$0(days 1-100) In; 20% OON
Eyewear	\$100 Allowance /2 years
Hearing Aids	\$600 Allowance /3 years
Dental	Not Covered
OOP Max	\$4000 combined IN and OON
Attached Riders:	
Pharmacy Rider	RX \$0/\$5/\$15/\$30/\$30/\$0-EGWP Plus Plan-Copays Thru Gap
Copay Change Rider	Buy-Up
DME Rider	Standard Benefit
Eyewear	Eyewear Rider - \$100 Allowance every 2 years
Hearing Aids	Hearing Aid Rider - Limited \$600 every 3 years
Dental Rider	Not Covered
Contingencies:	
Group Retiree members must be enrolled in Medicare Part A and Part B to be eligible to join MVP Medicare Advantage Plans.	
Employer must contribute a minimum of 80% of the member premium.	
Minimum requirement of 3 enrolled contracts.	
Rates per Subscriber per Month	\$331.90

~ These rates are approved and guaranteed for the period 1/1/2015 through 12/31/2015 ~
Rates must be accepted no later than November 30, 2014

Name of Group Representative

Date

Signature of Group Representative



GoldAnywhere PPO - Buy-Up
with Part D Prescription Drug
Employer Group 2015 Benefits

BENEFITS	YOU PAY	
	In-Network	Out-of-Network
DOCTOR VISITS		
Primary Care	\$10	\$25
Specialist	\$15	\$25
Chiropractor	\$15	\$20
Allergy Injection (allergy serum covered)	\$10 Primary Care \$15 Specialist	\$25 Primary Care \$25 Specialist
Acupuncture (10 visits)	50%	50%
PREVENTIVE CARE		
Yearly Wellness Exam	Covered in full	\$25
Medicare-covered screenings -- mammogram, prostate, Pap tests, bone mass measurement	Covered in full (Office visit copay may apply)	Covered in full (Office visit copay may apply)
Pneumonia and Flu Shots	Covered in full (Office visit copay may apply)	Covered in full (Office visit copay may apply)
HOSPITAL SERVICES		
Inpatient Acute Hospital Stays	Covered in full	20%
Inpatient Mental Health Care (190 days per lifetime)		
Observation Stays	Covered in full	20%
OUTPATIENT SERVICES		
Ambulatory Surgical Center -- same day surgery & other services	Covered in full	20%
Outpatient Hospital -- same day surgery & other services	Covered in full	20%
Home Health Services	Covered in full	20%
Hospice	Covered by Medicare	
EMERGENCY CARE		
Emergency Room Care -- worldwide coverage	\$65	\$65
Urgently Needed Care -- covered anywhere in the U.S.	\$15	\$15
Ambulance Transportation	\$35 (per use)	\$35 (per use)
DIAGNOSTIC SERVICES -- office visit copay may apply		
X-rays (Radiology)	\$15	\$25
Lab Tests (Diagnostic tests covered in full)	Covered in full	20%
CT Scans, PET Scans, MRIs, Nuclear Medicine	\$15	20%
REHABILITATION		
Skilled Nursing Facility	\$0 days 1-100	20% days 1-100
Physical, Occupational, and Speech Therapy (therapy caps apply)	\$15	\$25

MEMBER PROTECTION		YOU PAY
Maximum Annual Out-of-Pocket Protection (Excludes: Part D costs, acupuncture, eyewear, hearing aids and dental if applicable)		\$4,000 Combined

BENEFITS		YOU PAY	
ADDITIONAL COVERAGE	In-Network	Out-of-Network	
Diabetic Glucose Strips – Preferred vendor	0%	20%	
Diabetic Glucose Strips – Non-preferred vendor	10%	20%	
Other Diabetic Supplies	10%	20%	
Durable Medical Equipment (DME)	20%	20%	
Prosthetic Devices – such as artificial limb, braces	20%	20%	
Part B Drugs - including chemotherapy	\$15	\$25	
Eyewear Allowance Hearing Aid Allowance	\$100 eyewear allowance every two years \$600 hearing aid allowance every three years		

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Tier 4 – Non-preferred drugs	\$30 copayment	\$60 copayment
Tier 5 – Specialty drugs	\$30 copayment	\$60 copayment
Tier 6 – Select vaccines	\$0 copayment	\$0 copayment
Coverage Gap Stage	If your total drug costs (paid by both you and MVP Health Plan, Inc.) reach \$2,960, you will pay either the copayments as listed above or less. You will continue to pay \$0 for Tier 1 and 6 drugs.	
Catastrophic Coverage Stage	When you have paid \$4,700 out of pocket, your cost for prescriptions is reduced to 5% or \$2.65 for generics and \$6.60 for all other drugs, whichever is greater. You will never pay more in Catastrophic Coverage than you did in the Initial Coverage stage	
Additional Coverage	Your plan also covers the following: Erectile dysfunction drugs, weight-loss agents, and additional barbiturates (butalbital/aspirin/caffeine).	

WELL-BEING PROGRAMS	
24 Hour Nurse Line	Nurse available 24 hours per day, 7 days per week to answer health questions via telephone or email.
HealthDollars SM	\$100 in HealthDollars to use toward health programs such as weight loss and smoking cessation.
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This information is a brief summary, not a comprehensive description of benefits. For more information, refer to your Evidence of Coverage (your contract).



MVP Health Plan, Inc.
 USA CARE PPO - BUY-UP
 Group Customer Quote
 ALL REGIONS

Customer Name: Town of Lysander
Customer Number: 415006_0001
Contract Period: 1/1/2015 thru 12/31/2015
Region: ALL REGIONS

Product Description and Rates:	
MVP PRODUCTS PG130217 / RPG0125X	
BASE PLAN MCP019GR	
PCP Office Visits	\$10
Specialist Office Visits	\$15
Hospital Inpatient Deductible	\$0
Emergency Room	\$65
Skilled Nursing	\$0 days 1-100
Eyewear	\$100 Allowance every 2 years
Hearing Aids	\$600 every 3 years
Dental Coverage	None
OOP Max	\$4000 combined IN and OON
Attached Riders:	
Pharmacy Rider	RX \$0/\$5/\$15/\$30/\$30/\$0-EGWP Plus Plan-Copays Thru Gap
Copay Change Rider	USA Care PPO BUY-UP Rider
Eyewear	\$100 Allowance every 2 years
Hearing Aids	\$600 every 3 years
Dental Rider	None
DME	Standard benefit
Contingencies:	
Group Retiree members must be enrolled in Medicare Part A and Part B to be eligible to join MVP Medicare Advantage Plans	
Employer must contribute a minimum of 80% of the member premium.	
Minimum requirement of 3 enrolled contracts.	
51% of retirees must live in direct bill service area.	
Retiree exclusive required.	
Rates per Subscriber per Month	\$390.40

~ These rates are approved and guaranteed for the period 1/1/2015 through 12/31/2015 ~
Rates must be accepted no later than November 30, 2014

Name of Group Representative *Date*

Signature of Group Representative