Dear Member:

Welcome to Express Scripts!

Your healthcare plan sponsor has selected us to manage your prescription-drug benefit. Our goal is to bring you better health and value. Here are some of the ways we make access to the prescription drugs you need simpler, more convenient and cost-effective ...

Save Time with Home Delivery!
Because your time is valuable, Express Scripts offers the convenience of having your maintenance medications delivered right to your home — and standard shipping is FREE! You’ll find an Express Scripts mail order form enclosed in this packet.

Get Instant Online Access to Your Prescription Information!
Take a moment to register at our secure website: www.express-scripts.com. There you’ll find easy-to-use tools that give you the ability to:

- Get detailed information on your prescription medications and benefit coverage
- See how much your prescriptions cost and find out how you could save
- Locate your nearest participating pharmacy
- Look up drug and health information

Don’t have Internet access? No problem. Simply call Member Services (the number is on the back of your Member ID Card) with any questions about your prescription benefit.

Here is important Copayment information for your Prescription coverage:

<table>
<thead>
<tr>
<th>Copayment for</th>
<th>Participating Retail Pharmacy 30-Day Supply</th>
<th>Mail or Online Pharmacy 90-Day Supply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Generic Drugs</td>
<td>$10.00</td>
<td>$20.00</td>
</tr>
<tr>
<td>Preferred Brand-Name Drugs</td>
<td>$15.00</td>
<td>$30.00</td>
</tr>
<tr>
<td>Non-Preferred Brand-Name Drugs</td>
<td>$30.00</td>
<td>$60.00</td>
</tr>
</tbody>
</table>
Delta Dental Identification Card

WE ARE PLEASED TO ISSUE YOUR DELTA DENTAL IDENTIFICATION CARD. PLEASE CARRY THIS CARD WITH YOU AND PRESENT IT TO YOUR DENTIST WHEN RECEIVING SERVICES. PLEASE USE THE TOLL-FREE PHONE NUMBERS LISTED ON THE BACK OF THIS CARD FOR INQUIRIES.

JANE JONES
123 FIRST ST
ANYTOWN NY 12345

HOFSTRA UNIVERSITY
DELTA DENTAL PPO PLUS PREMIER

Please check the card for accuracy and contact your plan administrator if corrections are required.
Important, verify your benefits online at www.myuhc.com.

Thank you for choosing UnitedHealthcare

With your new UnitedHealthcare medical membership ID card, you have access to services that can help you live a healthier life.

Your new ID card is designed to provide you a better membership experience by making it easier to read. You can begin using this new card immediately on or after your coverage effective date.

Find valuable member services on www.myuhc.com

Important and relevant health topics

Your claims and copayment information

Your rights under your benefit plan, or contact a customer care professional at the number located on the back of your card.

Gracias por elegir UnitedHealthcare

Con su nueva tarjeta de identificación médica de UnitedHealthcare, usted tiene acceso a servicios que pueden ayudarle a llevar una vida más saludable.

Su nueva tarjeta está diseñada para proporcionarle una mejor experiencia como miembro, facilitando su lectura y transferencia de información. Puede comenzar a usar esta nueva tarjeta inmediatamente el día de entrada en vigencia de su cobertura.

Verifique sus beneficios, vea sus reclamaciones, o encuentre un proveedor en www.myuhc.com 800-385-9105

Para Proveedores: www.unitedhealthcareonline.com 877-842-3210

For Members: www.myuhc.com 800-385-9105

For Providers: www.unitedhealthcareonline.com 877-842-3210

Medical Claims: PO BOX 740800, Atlanta, GA 30374-0800

This card does not guarantee coverage. To verify benefits, view claims, or find a provider, visit the websites or call.

Member ID: 999999999 201930

Payer ID 87726

HOFSTRA UNIVERSITY

UnitedHealthcare

Indemnity

Administered by UnitedHealthcare Services, LLC

Printed: 11/24/09

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Mailing/Meter Date:

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UHG JOB ID: 4840 GRP: 0201930 PV: 0175 RC: 0175 MKT: 00000

MT: 00 SA: 00 OI: 01 FORM: K2H000 CPAY: B

DALE BROWN: NO

TEMPLATE: NEW FAMILY/IND : STD FAMILY : STANDARD : STANDARD