

CASEBP

Catskill Area Schools Employee Benefit Plan

PO Box 383, Grand Gorge, NY 12434

Phone: 607-588-8917
or 800-962-6294
Fax: 607-588-8916

NOTICE OF MASTECTOMY PLAN COVERAGE

Dear Health Plan Participant:

Your plan, as required by the Women's Health and Cancer Act of 1998 and New York State Insurance Law 3221, provides coverage for lymph node dissection or lumpectomy for the treatment of breast cancer or a mastectomy and mastectomy related services, including all stages of reconstruction and surgery to achieve symmetry between the breasts, prosthesis and complications resulting from a mastectomy, including lymphedema.

Such coverage may be subject to annual deductible and co-insurance. Please consult with CASEBP at 1-800-962-6294 or 607-588-8917 for more specific information.