



NYPD 10-13 CLUB



of BROWARD COUNTY, FLORIDA

An organization of retired
New York City Police Officers

THE BLOTTER

GENERAL MEETING Tuesday, June 04th, 2024

Moose Lodge Family Center 6191 Rock Island Rd, Tamarac 33319

Meeting starts at 7:00 PM Sharp

The President's Message

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Warren Ostrofsky

Luz Figueroa

Alan Berkowitz

Phil Valles

Ryan Dean

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Paul Mannino** 1981

Sy Silver** 1982

Bill Schilling** 1983

Ray McDonnell** 1984/5

Mike Borrelli** 1986/95/96

Ron Kavanagh** 1987/88/92

Paul Barasch 1989/2013

Bill Bett** 1990

Paul Levy** 1990/91

Frank Tooley ** 1993/94

Richard Lapp 1997/98

Robert Izzo 1999/00

Alan Berkowitz 2001/08/11/12

Louis Weiser** 2009/10

**DENOTES DECEASED

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Michelle Gomez, Esq.

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Tim Kennedy-Assistant

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MEMBERSHIP

Phil Valles

COMMUNICATIONS

Phil Valles

WEBSITE

Ryan Dean

50 / 50 Raffle

Annette Finkelstein



The President's Message

Your next general 10-13 Meeting is 6:30 PM Tuesday June 4th, 2024 at Moose Lodge Family Center 6191 Rock Island Road, Tamarac.

All board positions, except for 2 board directors, are up for re-election. The nomination committee will be accepting nominations at the June, September and October 2024 general membership meetings. Nobody suggested any nominees at the May meeting.

I, Martin Finkelstein, will be ending my commitment as president as of December of this year. The board positions will default to the present positions if there are no nominations or an election.

We know that many of you are busy and/or not in Florida this time of year. Try to attend meetings and support your club. Board members volunteer many hours every week to perpetuate the 10-13 club and 10-13 spirit. We attend our meetings and some meetings held by other 10-13's or organizations. We do this with fraternal spirits and also to share abilities and information helpful to the administration of your club.

I hope you all are preparing for hurricane season. This organization has a good list for you to consider when preparing for the hurricane season:

<https://www.floridadisaster.org/planprepare/hurricane-supply-checklist/>

Remember that we have no general meetings in July or August. The September meeting will be 09/03/24. Although there is a summer break, your board will be working and updating you with essential information, including the next meeting and our involvement in September 11th events. Please help us, but help one another and yourselves.

Wishing you all well,
- Martin

MEMBERSHIP 2024

Membership dues for 2024 are due.
2024 dues are due by January 31st of
said year.

Annual dues are \$40 or
\$45 for new members.

(That includes your annual dues of
\$40.00 plus \$5.00
initiation/reinstatement fee).

[NYPD Broward 10-13 Membership Application](#)



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Websites: **Ryan Dean**
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Social Security: www.ssa.gov



Taps for departed members

Broward 10-13

MEMBERSHIP 2024

Membership dues for 2024 are due.
Annual dues are \$40 or \$45 for new members.
(That includes your annual dues of \$40.00 plus \$5.00 initiation/reinstatement fee).

Note: All dues are due by January 31st. Members who fail to pay dues by January 31st shall be dropped from the rolls and shall forfeit all rights and privileges of attempting membership. Any person, who failed to pay by said date, will be treated as a New Member, at the new member enrollment cost; \$45.00

If you are a current member, please simply mail a check for \$40 to the address below. If you are not a member and would like to become a member, please complete the application on the next page and mail to the club at:

NYPD BROWARD 10-13 CLUB INC.
P.O. Box 970911
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Telephone (954) 977-3880

You can also download a copy of the application by clicking this link:

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[Biden hopes seniors won't notice this cut in their benefits before the election](#)

Biden is breaking his promise to Americans while pointing fingers at Republicans

In January, President Biden wrote that he wouldn't "...allow extreme Republicans to hand out massive giveaways... while raising your costs and cutting Social Security, Medicare, and Medicaid." He's doing exactly that just months later.

Despite warnings from both Republicans and Democrats, the Biden administration's Center for Medicare and Medicaid Services finalized cuts to the popular and effective Medicare Advantage (MA) program.

MA is a public-private partnership that allows health insurance providers to deliver affordable and comprehensive medical coverage to Americans over 65 and individuals with disabilities. By trimming access to MA, Biden is breaking a core campaign promise to never slash benefits for seniors – something he has regularly repeated for three years.

The change of heart from Biden will cost seniors an extra \$33 per month. Raymond James analyst Chris Meekins told Axios: "President Biden's team is gambling that MA beneficiaries won't realize before the election the benefits Biden's team is causing them to lose come January 2025."

Republicans should help Biden's team lose that bet – given the rare popularity of MA, it shouldn't be a big lift.

Last year, 90% of voters said a candidate's plan for reducing the cost of health care would be important to them and 39% claimed they would likely cross party lines to vote for a candidate who makes reducing health care costs their top priority.

Meanwhile, a stunning 90% of seniors say they love their plan. More than 31 million Americans are enrolled in MA plans, making up over half of the total Medicare population.

MA outperforms traditional Medicare in 16 out of 16 clinical measures, making it an ideal choice for those who want control over their health care. This massive voting block needs to know that Biden is cutting their affordable, flexible health plans in favor of more expensive, government-controlled outcomes for seniors.

The MA model works, and the American people know it. MA plans provide the same benefits as traditional Medicare for just 83 cents on the dollar, making the program a good deal for taxpayers, too.

MA plans are cheaper, more efficient, and are better suited for millions of Americans than traditional Medicare plans. What's not to like? Well, anything that promotes private sector innovation over public sector dependence, according to the modern Left in America.

Biden and his allies want to cut MA in favor of more government-run, fee-for-service "Medicare-for-all" – which would mean fewer options for physicians and coverage, like vision and hearing. Recently, progressive ringleader Rep. Pramila Jayapal, D-Wash., and a coalition of 59 far-left House Democrats sent a letter to Biden arguing for "strengthening Traditional Medicare" and redirecting funds "incorrectly going to MA."

For Americans wondering what increased government control of the health care industry would look like in practice, head to your local DMV, or check out the shameful wait times at VA hospitals. It's hard to imagine the expansion of federal control over insurance options would lead to anything appealing.

In 2013, President Barack Obama famously promised, "If you like your insurance, you can keep it," as the former president furiously sold his signature legislation – the Affordable Care Act – to the American people.

However, after the infamously chaotic rollout of the program, costs skyrocketed—and Americans, in fact, could not keep their insurance nor their doctors. Even Left-leaning NPR shared an analysis naming Obama's claim the "Lie of the Year."

More than a decade later, his vice president, now President Biden, is attempting a similar health care bait-and-switch – this time promising seniors better care while pillorying MA.

Americans should know better this time around.

While Biden and the far Left continue to baselessly accuse conservatives of targeting Social Security, Medicare and Medicaid, this cut to MA is the real threat to American seniors' health care.

In true Biden – and Obama – fashion, he's breaking his promise to the American people while pointing fingers at Republicans.

This November, voters should be wary of promises of health care "reform" from the Left. If you liked your insurance, you couldn't keep it. If you like your Medicare Advantage, Biden may take it.

Appeals panel rebuffs city's Medicare effort

Municipal retirees notch another court victory, but Adams administration will appeal.

City retirees secured yet another court victory in their bid to keep their traditional Medicare and no-cost supplemental coverage.

In a unanimous decision issued Tuesday, a State Supreme Court Appellate Division panel upheld a trial court finding that switching the retired municipal workers to a cost-saving private plan and stripping them of their Medigap coverage would break long-ago guarantees city officials made to employees.

"The City has made clear, consistent, unambiguous representations — oral and written — over the course of more than 50 years, that New York City municipal worker-retirees would have the option of receiving health care in the form of traditional Medicare with a City-paid supplemental plan. Consequently, the City cannot now mandate the proposed change eliminating that choice," the four-justice panel of the Appellate Division's First Department concluded.

The panel's conclusion, upholding Manhattan Supreme Court Justice Lyle Frank's August 2023 finding, marked the fourth time that courts have sided with the retirees. The city said it would appeal the ruling.

Marianne Pizzitola, the president of the New York City Organization of Public Service Retirees, one of the lead plaintiffs in the case, lauded the decision, but called the city's attempts to switch the retirees to a private, for-profit benefits plan "shameful and, as the Court ruled today, unlawful."

"Retired City workers dedicated, and in many cases risked, their lives for the City for relatively low pay. In return, they were promised certain basic healthcare benefits when they retired," Pizzitola said in a statement.

The retirees' lawyer, Jake Gardener, said he and his team were grateful for the court's decision, which he said recognized the health-care rights of the former city workers.

"Because of the court's thoughtful, well-reasoned decision, hundreds of thousands of senior citizens and disabled first responders will be able to continue receiving the

medical care they desperately need and to which they are entitled," Gardener, a partner at Walden Macht & Haran LLP and a former FDNY firefighter, said by phone.

Adams administration officials have argued that shifting the retirees to a privately run plan would save the city as much as \$600 million annually, with the savings derived from federal subsidies available to Medicare Advantage plans. In turn, the subsidies would help replenish the city's Health Stabilization Fund, which supplements employee welfare funds.

The city intends to pursue the matter to the state's highest court.

"The city will seek the Court of Appeal's review of today's ruling," the director of public affairs for the city's Law Department, Nicholas Paolucci, said in a statement. "The city's plan, which was negotiated closely with and supported by the Municipal Labor Committee, would improve upon retirees' current plans and save \$600 million annually. This is particularly important at a time when we are already facing significant fiscal and economic challenges."

A representative for the Municipal Labor Committee, the umbrella organization of city public-sector unions, which supports the switch to a Medicare Advantage, said the heads of the various unions would be meeting with attorneys to discuss the decision.

'Significant evidentiary support'

The decision, written by Associate Justice Ellen Gesmer, underscored "the hundreds of affidavits," including from former city officials and medical professionals, along with thousands of pages of documentary evidence, in support of the retirees.

It highlighted an affidavit by Lilliam Barrios-Paoli, herself a retired longtime city official who headed several departments, including that charged with personnel. Barrios-Paoli wrote that for decades the city's human resources administrators had promised that retirees would have a choice of health plans and came to rely on those assurances.

"The guarantee of good healthcare in retirement — including the choice to participate in traditional Medicare with a City-paid supplemental plan — was an essential recruiting and retention tool," Barrios-Paoli, in a passage cited in the decision, said in her affidavit.

Resuming a theme that emerged during the panel's March 21 hearing on the matter, the decision noted that although city officials disputed claims from the retirees and health care experts, they "did not present any evidence controverting them," and instead relied "heavily" on summary health-benefit program descriptions.

"Notably, respondents submitted not a single affidavit by any City official disputing Ms. Barrios-Paoli's statements, thus effectively conceding them," Gesmer wrote.

The justices also found that the city's assertion, purportedly contained in a summary program description from 1989 but not included in the court record, that it reserved the right to change or even terminate benefits or health care plans was "insufficient

to demonstrate that the promise was either qualified or too indefinite, as the reservation of rights was not included in any other SPD.”

The panel also highlighted the retirees’ claims, in “unrebutted affidavits,” that they pursued public employment at least in part because of promises of health care, even though they could have earned more money in the private sector.

“The particular manner in which the parties chose to litigate this action before [the] Supreme Court resulted in a record with significant evidentiary support for petitioners’ position and very little support for respondents’ position,” Gesmer wrote.

Questions about your Medicare Part B & IRMAA Reimbursements?

Medicare Part B Reimbursement

The City will reimburse retirees and their eligible dependents for Medicare Part B premiums paid, excluding any penalties. You must be receiving a City pension check and be enrolled as the contract holder for City health benefits in order to receive reimbursement for Part B premiums.

For most retirees, the refund is issued automatically by the Health Benefits Program. If you are currently receiving your pension check through Electronic Fund Transfer (EFT) or direct deposit, your reimbursement will be deposited directly into your bank account. This will be separate from your pension payment. If you don’t have EFT or direct deposit, you will receive a check in the mail in June.

The reimbursement amount is based on the standard Medicare Part B premiums.

If you were eligible for Medicare Part B Reimbursement for prior years but did not enroll by providing a copy of your Medicare card, reimbursement is limited to the previous three (3) calendar years. To enroll, please complete the Medicare Part B Reimbursement Program Application.

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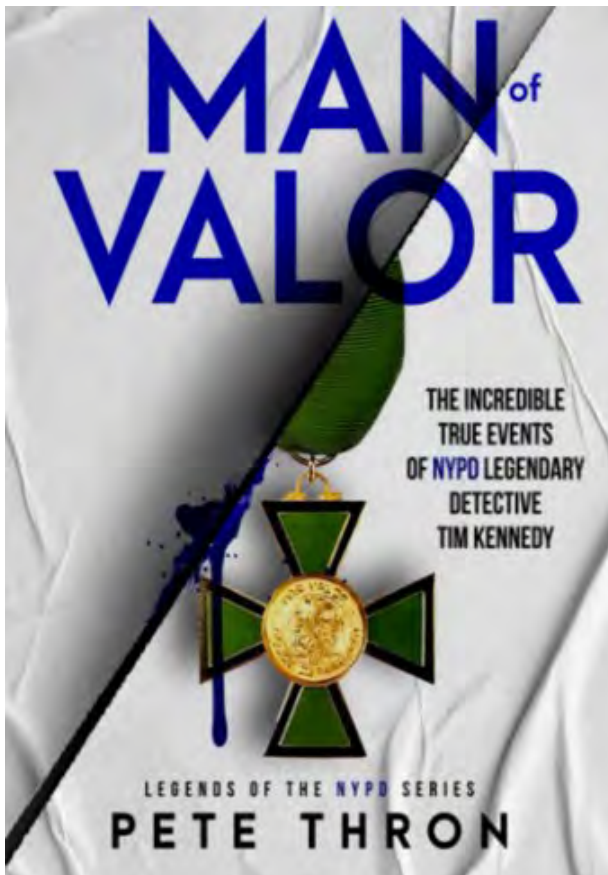


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- Applicant must be enrolled in an accredited College for the upcoming school year
- Applicant will submit a 250 word essay on “**Why they are deserving of the Kevin P. Moran – Memorial Scholarship.**”
- Certified copy of most recent transcript must be received from the applicant’s school.
- Applicant will submit a list of hours and location of community service served.

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(Applicant’s) Father’s Name _____

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All information, on this form, is correct to my knowledge.

Signature of Applicant _____

Exclusively the Board of Directors of the Club will determine final decision regarding eligibility and the winners.

This form along with essay, transcript and community service list shall be submitted no later than **November 30th** of the year in question to the Club at the following email address, NYPDbroward1013@gmail.com or address:

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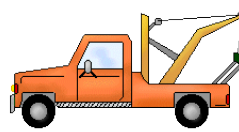
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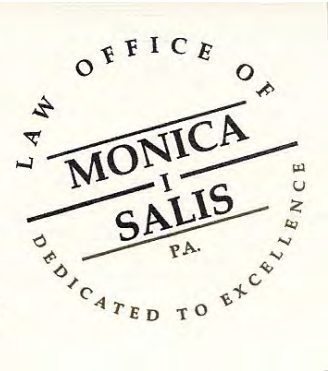
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[CLICK HERE TO VISIT THE CITY OF NEW YORK OLR FOR MORE INFO ON MEDICARE](#)

City Coverage for Medicare-Eligible Retirees

[CLICK HERE NYC OFFICE OF LABOR RELATIONS HEALTH BENEFITS FOR RETIREES](#)

In order to maintain maximum health benefits, it is essential that you join Medicare Part A (Hospital Insurance) and Part B (Medical Insurance) at your local [Social Security](#) Office as soon as you are eligible. If you do not join Medicare, you will lose whatever benefits Medicare would have provided.

The City's Health Benefits Program supplements Medicare but does not duplicate benefits available under Medicare. Medicare-eligible members must be enrolled in Medicare Parts A and B in order to be covered by a Medicare HMO plan. To enroll in Medicare and assure continuity of benefits upon becoming age 65, contact your Social Security Office during the three-month period before your 65th birthday. In order not to lose benefits, you must enroll in Medicare during this period even if you will not be receiving a Social Security check.

If you are over 65 or eligible for Medicare due to disability and did not join Medicare, contact your Social Security Office to find out when you may join. If you do not join Medicare Part B when you first become eligible, there is a 10% premium penalty for each year you were eligible but did not enroll. In addition, under certain circumstances there may be up to a 15-month delay before your Medicare Part B coverage can begin upon re-enrollment.

If you or your spouse are ineligible for Medicare Part A although over age 65 (reasons for ineligibility include non-citizenship or non-eligibility for Social Security benefits for Part A), contact us at:

NYC Health Benefits Program
40 Rector Street - 3rd Floor
New York, NY 10006

Coverage for those not eligible for Medicare Part A can be provided under certain health plans. Under this Non-Medicare eligible coverage, you continue to receive the same hospital benefits as persons not yet age 65.

If you are living outside the USA or its territories, Medicare benefits are not available. Under this Non-Medicare eligible coverage, you continue to receive the same hospital and/or medical benefits as persons not yet age 65. If you do not join and/or do not continue to pay for Medicare Part B however, you will be subject to penalties if you return to the USA and attempt to enroll.

If you are eligible for Medicare Part B as a retiree but did not file with Social Security during their enrollment period (January through March) or prior to your 65th birthday, you will receive supplemental medical coverage only, and only through GHI/EBCBS Senior Care.

Medicare Enrollment

You must notify the Health Benefits Program in writing immediately upon receipt of your or your dependent's Medicare card. Include the following information: a copy of the Medicare card and birth dates for yourself and spouse, retirement date, pension number and pension system, name of health plan, and name of union welfare fund.

If your plan does not provide coverage for Medicare enrollees, you will have the opportunity to transfer to another plan that does.

Once the Health Benefits Program is notified that you are covered by Medicare, deductions from your pension check will be adjusted, if applicable. The Health Benefits Program will then notify your health plan that you are enrolled in Medicare so that your benefits can be adjusted. If you are Medicare-eligible and are enrolling in an HMO you must complete an additional application which you must obtain directly from the HMO.

Medicare and Retiring Employees

At retirement, employees who have chosen Medicare as their primary plan or whose dependents have not been covered on their plan because their spouse/domestic partner elected Medicare as the primary plan may re-enroll in the City health benefits program. This is done by completing a Health Benefits Application and submitting it to their agency health benefits, payroll or personnel office. Also at retirement, Medicare-eligible employees for whom the City Health Benefits Program had provided primary coverage are permitted to change health plans effective on the same date as their retiree health coverage

The necessary forms for Medicare Part B reimbursement and IRMAA can be found by clicking the link below.

[City of NY-Health Benefits Program – Medicare Part B](#)

To: All members in good standing!

Please review the following information for insurance coverage to cover a self-defense related incident involving your firearm.

The Broward 10-13 has negotiated a reduced rate for "Self-Defense Liability Coverage"

Please see the attached pages for pricing. You can obtain coverage by calling the company at (262) 384-4328 and ask for our sales rep., Eva.

IMPORTANT:

This coverage is for personal/non-professional incidents. The policy specifically EXCLUDES conduct in providing any kind of law enforcement, corrections, recovery, or repossession services, **WHETHER OR NOT** for compensation or a fee, including any injury or damage caused by or arising from such conduct.

It also EXCLUDES conduct in providing security or safety services for compensation or a fee, including any injury or damage caused by or arising from such conduct.

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