



Musicians Health Fund

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**VERY IMPORTANT NOTICE TO PARTICIPANTS OF THE
LOCAL 802 MUSICIANS HEALTH FUND
Important Information Regarding Your Health Fund Benefits**

This document is being sent to remind you of a recent change to the plan of benefits (the “Plan”) of the Local 802 Musicians Health Fund (the “Fund”) and also is a Summary of Material Modifications (“SMM”) intended to notify you of a new benefit being offered by the Plan. You should take the time to read this SMM carefully and keep it with the copy of the summary plan description (“SPD”) that was previously provided to you. If you have any questions regarding this notice, please contact the Fund Office at (212) 245-4802.

April 24, 2017

Dear Participant and Family,

Reminder: Aetna Network and Claims Administrator

As we previously announced in a notice to Fund participants in December 2016 (copy enclosed), effective as of March 1, 2017 all of the Fund’s hospital and medical benefits are provided on a self-insured basis and are administered by Aetna. In addition, the Fund contracted with Aetna to use its Choice POS II network of hospital and medical providers for both Plans A and A+.

We are providing the enclosed benefits summary to help you navigate the Aetna benefit program. Please note that this benefits summary reflects some differences in certain benefits because of the change and consolidation of claims administration to Aetna. You should keep this summary with your current SPD (as well as the enclosed notice and the updated Summaries of Benefits and Coverage (SBCs) previously provided to you).

If you are eligible for coverage, you already have received new Aetna ID cards in the mail. You should use these ID cards whenever you visit a health care provider. As a reminder, in order to avoid higher out-of-pocket costs and balance bills, you should confirm that your health care providers participate in the Aetna Choice POS II network by calling the number on the back of your ID card prior to receiving services, or by looking up the providers on www.aetna.com ([click on the “Find a Doctor” tab](#)). Additionally, if you have any questions about your benefits or claims that are incurred on or after March 1, 2017, you should contact Aetna directly at the phone number provided on your Aetna ID card.

New Telemedicine Benefit Beginning May 1, 2017

We are pleased to announce that, effective May 1, 2017, the Fund will offer a telemedicine service through Aetna called Teledoc. Teledoc is a telephone and online based physician consultation service available 24 hours a day, 365 days a year. It is a convenient and affordable

option that allows you to talk to a doctor who can diagnose, recommend treatment and prescribe medication, when appropriate, for many common medical issues. Teledoc does not replace your primary care physician. Rather, it is designed to improve your family's access to quality acute medical care at times when your physician's office is closed or does not have an available appointment time that works with your schedule. At the same time, telemedicine has been shown to help minimize costs for members and benefit plans by preventing unnecessary emergency room and urgent care visits.

Teledoc is the first and largest telemedicine provider in the U.S. It was founded in 2002 and provides more than 12.5 million members with access to U.S.-based, licensed physicians by phone and/or video. While the Teledoc physicians cannot prescribe controlled substances, they can provide general prescription services to your local pharmacy for medical conditions such as cold and flu symptoms, bronchitis, allergies, sinus problems, ear infections and respiratory infections, to name a few. Teledoc is a HIPAA compliant medical service provider and follows NCQA credentialing standards for all physicians.

In the future, you will receive additional information from Aetna about Teledoc including contact information, how to set up an account and how to request a consultation. In the interim, please visit www.teledoc.com/aetna to learn more.

As always, if you need assistance or have any questions regarding Fund benefits, please contact the Fund Office at (212) 245-4802.

Sincerely,

Board of Trustees
Local 802 Musicians Health Fund

This SMM is intended to provide you with an easy-to-understand description of certain changes to the Plan. A full description of benefits available from the Fund is set out in the SPD (as amended by prior SMMs), except to the extent that this SMM explicitly modifies the SPD.

The Board of Trustees reserves the right, in its sole and absolute discretion, to amend, modify or terminate any benefits provided under the Fund, in whole or in part, at any time and for any reason, in accordance with the applicable amendment procedures established under the SPD and the Agreement and Declaration of Trust establishing the Fund (the "Trust Agreement"). The Trust Agreement and the SPD are available at the Fund Office and may be inspected by you free of charge during normal business hours. No individual other than the Board of Trustees (or its duly authorized designee) has any authority to interpret the Plan documents, make any promises to you about benefits under the Plan, or to change any provision of the Plan. Only the Board of Trustees (or its duly authorized designee) has the exclusive right and power, in its sole and absolute discretion, to interpret the terms of the Plan and decide all matters, legal and/or factual, arising under the Plan.