IMPORTANT NOTICE REGARDING ELIGIBILITY FOR FUND COVERAGE

This document is a Summary of Material Modifications (“SMM”) intended to notify you of important changes being made to the plan of benefits of the Local 802 Musicians Health Fund (the “Fund”). You should take the time and 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 these changes, please contact the Fund Office at 212-245-4802.

May 1, 2015

Dear Participant and Family

Current Eligibility Requirements

As you know, effective October 1, 2014, the Board of Trustees adopted three new benefit plans with new eligibility requirements. Under the new eligibility rules, to qualify for Plan A+ for the 6-Month Coverage Period beginning September 1, 2015 and ending February 29, 2016, you must have at least $4,500 in employer contributions during the 6-Month Eligibility Period from January 1 through June 30, 2015. To qualify for Plan A for the 6-Month Coverage Period from September 1, 2015 through February 29, 2016, you must have at least $2,000 in employer contributions during the 6-Month Eligibility Period from January 1 through June 30, 2015. If you have at least $500 in employer contributions during the 6-Month Eligibility Period, you will be eligible for Plan B.

Temporary Buy-Up Options

In order to lessen the impact of the changes in plan design and eligibility requirements announced last year, the Board of Trustees previously adopted a temporary transitional rule pursuant to which an eligible Participant could purchase a higher level of coverage than (s)he otherwise qualifies for, as follows:

1. **Buy-Up to Plan A+.** A Participant who had at least $4,300 (but less than $4,500) of employer contributions during the 6-Month Eligibility Period ending June 30, 2014 or December 31, 2014 was eligible to buy up to Plan A+ for the corresponding Coverage
Periods (which began October 1, 2014 and March 1, 2015) by contributing the shortfall \( i.e., \) $200 or less to the Fund.

2. **Buy-Up to Plan A.** A Participant who had at least $1,400 (but less than $2,000) of employer contributions during the 6-Month Eligibility Period ending June 30, 2014 or December 31, 2014 was eligible to buy up to Plan A for the corresponding Coverage Periods (which began October 1, 2014 and March 1, 2015) by contributing the shortfall \( i.e., \) $600 or less) to the Fund.

### One-Time Extension of Temporary Buy-Up Option

Although these buy-up options were originally limited to the two Eligibility and Coverage Periods described above, the Board has agreed to extend the temporary buy-up option for one more Eligibility and Coverage Period. Thus,

- A Participant with at least $4,300 of employer contributions during the Eligibility Period from January 1, 2015 through June 30, 2015 will be able to buy up to Plan A+ for the Coverage Period September 1, 2015 through February 29, 2016 by contributing the shortfall \( i.e., \) $200 or less) to the Fund; and

- A Participant with at least $1,400 of employer contributions during the Eligibility Period from January 1, 2015 through June 30, 2015 will be able to buy up to Plan A for the Coverage Period September 1, 2015 through February 29, 2016 by contributing the shortfall \( i.e., \) $600 or less) to the Fund.

Note, the buy-up payment is in addition to the required Participant contributions for each Plan option.

You will be notified if you qualify for the buy-up option based on the employer contributions received on your behalf for the period between January 1 and June 30, 2015. The election to purchase the higher level of coverage must be made by the applicable due date communicated by the Fund Office.

If you have questions regarding any of the above, please contact the Fund Office at 212-245-4802.

Sincerely,

Board of Trustees
Local 802 Musicians Health Fund
The Board of Trustees reserves the right, in its sole and absolute discretion, to amend, modify or terminate the Plan, or 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 Plan and the Agreement and Declaration of Trust establishing the Fund (the “Trust Agreement”). The Trust Agreement and the full Plan documents 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 Fund, 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 Fund.