

AGMA Health Fund

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July 13, 2020

IMPORTANT BENEFITS ANNOUNCEMENT TO ARTISTS PARTICIPATING IN THE AGMA HEALTH FUND PLAN B

Dear Plan B Participant:

The Trustees of the AGMA Health Fund are pleased to announce the continuation of the program that allows eligible Plan B participants to apply their individual account balance toward the purchase of the Standard Health Insurance coverage provided in Plan A. In addition to the reimbursement of uninsured medical expenses, Plan B accounts have always been available to help participants pay premiums for the purchase of health insurance coverage from other sources. The ability to “buy-in” to Plan A should significantly broaden the opportunities for the purchase of health insurance, as that can often be a challenge for an individual. This program has recently been expanded to allow members two eligibility periods each year, one ending June 30 and the new one ending December 31. **Please check your online records (www.asonet.com) to see if you have qualified to “buy-in” as described below.**

The AGMA Standard Health Insurance Plan provides comprehensive hospital/medical benefits and prescription drug coverage and optional dental benefits through a group insurance contract issued by Aetna, Inc. The Standard Plan hospital/medical coverage is in an Open Access Managed Choice plan, permitting enrollees to use any physician or provider. However, enrollees using Aetna’s extensive physician and provider network can obtain more generous benefits than using a non-network provider.

In order for a Plan B individual account balance to be used for this purpose, a participant must, in a relatively recent period of time, have a reasonable amount of employment that requires employer contributions to their individual account. Specifically, in order to purchase AGMA Health Fund Plan A Insurance coverage, starting September 1, 2020, the next point of entry, you must meet **ONE** of the following requirements:

- (1) Have a minimum of \$1,200 in employer contributions to your Plan B Individual Account based on Covered Employment between July 1, 2018 and June 30, 2020,

OR

- (2) Have at least 32 weeks of Covered Employment under Plan B in the period from July 1, 2018 and June 30, 2020,

To qualify for eligibility in future years, or for participants who did not meet the eligibility requirements as of the June 30, 2020 cut-off, a similar, rolling two-year covered employment test will determine eligibility to start Plan A Health Insurance on each succeeding September 1 or March 1.

If you enroll in the Plan A Health Insurance Coverage starting September 1, 2020, your eligibility will continue for two years so long as you maintain continuous enrollment in Plan A. After two years, you will have to requalify, using one of the two aforementioned tests, but within updated Covered Employment test periods. If you stop paying for Plan A before two years, you will need to wait until the next

September 1 or March 1 to resume coverage and must again meet the eligibility requirements at that time in order to resume coverage. **If you are interested in purchasing Plan A Health Insurance Coverage, you must notify the Fund Office in writing or by e-mail, at the applicable address noted above, no later than Monday, August 24, 2020.**

You will be able to use contributions in your Plan B individual account to pay the premiums. Any premium costs above your account balance will be billed to you directly and must be prepaid each quarter.

The following are the costs of the Standard Health Insurance Plan for the period September 1, 2019 through August 31, 2020 (please note that these costs are subject to change, generally on September 1 each year and will be billed according to the rates in effect at the time of enrollment):

For participants in Plan A coverage, which includes Aetna's Open Access Managed Choice medical plan and prescription coverage, the current monthly costs are \$1,108.09 for individual coverage or \$2,794.04 for family coverage. If you enroll in the Standard Health plan and elect the optional dental coverage, the current monthly costs are \$1,129.06 for individual coverage or \$2,859.48 for family coverage.

You also have the option of purchasing only the Dental Plan, starting September 1, 2020, by meeting **ONE** of the following requirements:

- (1) Have a minimum of \$300 in employer contributions to your Plan B Individual Account based on Covered Employment between July 1, 2018 and June 30, 2020,

OR

- (2) Have at least 8 weeks of Covered Employment under Plan B in the period from July 1, 2018 and June 30, 2020.

Dental only insurance currently costs \$23.07 per month for individual coverage or \$66.10 per month for family coverage through August 31, 2020 (please note that these costs are subject to change on September 1, 2020 and will be billed according to the rates in effect at the time of enrollment). You will be able to use contributions in your Plan B individual account to pay the premiums. Any premium costs above your account balance will be billed to you directly and must be prepaid each quarter.

If you do not enroll yourself (or your dependents) for coverage effective September 1, 2020 (or if you later let your coverage lapse), you may not enroll again under this rule until March 1, 2021 and must meet the employment requirements for the applicable period. However, you may add dependents at the next open enrollment period (in November, effective January 1). In addition, you may enroll yourself or your dependents at an earlier time if you qualify under the Special Enrollment rules set forth in the Plan A Summary Plan Description (see booklet page 10).

The Trustees may discontinue this program at any time. However, should that happen, the Trustees will provide all participants with notice of their decision to terminate the program.

If you would like additional information on this program and the coverage provided by AGMA Health Fund Plan A, please contact the Fund Office at 212-765-3664 or via Email at [info @agmafunds.org](mailto:info@agmafunds.org).

Sincerely,

Derek J. Davis
Executive Director

For The Trustees of the
AGMA Health Fund