

AFTRA
Health &
Retirement
Funds

**AFTRA H&R
& You –**



It's a Partnership

Your H&R benefits
keep working for
you when you keep
us informed.

AFTRA H&R & You – It's a Partnership

The AFTRA Health & Retirement Funds provides valuable protection for you and your family, so it's important to understand your benefits and how they work. But, understanding is a shared responsibility – between AFTRA H&R and you.

AFTRA H&R is committed to this partnership and to providing you with up-to-date information about your health and retirement plans including resources to help you understand the often complicated world of benefits.

But, for US to provide the best services we need YOU to promptly inform us about changes in your life that may affect your benefits. It's easy: just call Participant Services at 1-800-562-4690. They'll walk you through the process, provide any forms you may need to complete – and tell you about any documentation we may need.

Your H&R benefits keep working for you when you keep us informed. It's a partnership!

If You Move

If you move, you must update your address and contact information with **both** the Union and the AFTRA H&R office since AFTRA H&R is a separate legal entity from AFTRA. Download an Enrollment/Change Form from www.aftrahr.com or write to the AFTRA H&R office in New York. Be sure to include your new address and your Social Security and/or H&R Funds number, which is the number that appears on your Health ID cards.

When a Life Event Occurs

Under the AFTRA Health Plan you may be permitted to make certain changes to your Health Plan enrollment not only at the beginning of, but during each enrollment cycle (four calendar quarters) if one of these life events occur:

- marriage, birth or adoption, placement for adoption, legal separation or divorce
- when your dependent child is no longer eligible as a dependent because he or she reaches ages 21, or experiences a change in full-time student status between ages 21 and 23
- loss of primary health coverage with another health plan or exhaustion of COBRA coverage for you or one of your dependents (that is, if you previously qualified for coverage under the AFTRA Health Plan but did not enroll because you had this other coverage)
- disability
- retirement
- death

You must inform the AFTRA H&R office – within **30** calendar days of a life event when you want to add dependents to your AFTRA Health Plan coverage or within **60** days of an event that would result in a loss of AFTRA Health Plan coverage – by mailing a written notice and any required supporting documentation to the AFTRA H&R office. If you don't, you risk a delay in coverage to a new family member and, in the case of a dropped dependent, you will not be able to enroll him/her in COBRA continuation coverage. You could then be responsible for benefits that are incorrectly paid by the Health Plan after that dependent lost his or her eligibility.



When You Change Business Managers or Other Representatives

You can designate a business manager, agent or other authorized representative to handle your AFTRA H&R affairs by completing an Authorization Form available through our website or by calling Participant Services. HIPAA privacy regulations prohibit the Health Fund from releasing any protected health information (PHI) to a representative unless we have a completed authorization form signed by you.

Make sure your representative understands that it is important to review the information we send on your behalf and share it with you. Some of it may be time sensitive or require specific action. Failure to respond during a required time period may result in reduced or denied benefits. **Finally, if you change your business manager or agent or they change their mailing address, notify the AFTRA H&R office promptly by calling Participant Services so we can update our records accordingly.**

When You Are Eligible For Both the SAG-PHP and the AFTRA Health Plan

If you are considering declining or dropping coverage in the AFTRA Health Plan because you qualify for coverage under the Screen Actors Guild-Producers Health Plan (SAG-PHP), contact Participant Services for important information on coordination of benefits among multiple plans. The rules determining multiple coverage are complex. Making an informed decision about coordination options may significantly improve your health claim reimbursements.

When You Need to Change Your Beneficiary

A Life Insurance benefit of \$30,000 is available if you are enrolled in the Individual or Family Health Plan, and is payable to your designated beneficiary should you die while covered by the Plan. There is a separate benefit that may be payable to a beneficiary under the Retirement Plan upon your death. To designate or change your beneficiary, contact Participant Services at 1-800-562-4690. *(Note: These benefits are payable upon the death of the participant only, not their dependents.)*

You must submit the required the Health Plan and/or Retirement Plan forms to designate or change your beneficiary. Be sure to complete both forms – changes to your beneficiary on one Plan form will not transfer automatically to the other Plan.

Why You Need to Pay Your Premiums on Time

Generally, Health Plan premium payments are due the 15th of the month **before** the start of each new quarter. If your payment is not received by the start of a new quarter, health coverage for you and your dependents cannot begin (if you have qualified for the first time) or be continued (if you have previously qualified and enrolled). However, if your payment is received by the last day of the first month of the new quarter, your coverage will begin retroactive to the start of the quarter. **This does not change the due date of your premium and you will not be covered until your payment is received. Payments received after the grace period will not be accepted and you will have to submit a written appeal to the Trustees' Appeals Committee to request coverage.**

When You Are Scheduled for Hospitalization

You or your doctor must call CareAllies at 1-800-768-4695 to arrange for a hospital admission. Failure to pre-authorize a hospitalization can result in a 20% reduction of the hospital benefit which otherwise would be payable.

Provider Contact Information

■ Pre-Certification, Private Duty Nursing, or Case Management Information

Contact CareAllies at 1-800-768-4695 or visit www.mycareallies.com

■ Preferred Providers, Physicians and Hospitals

Outside of California: Contact CIGNA at 1-800-768-4695 or visit www.sharedadministration.com, then select Medical Shared Administration PPO Provider Directory.

■ Preferred Providers, Physicians and Hospitals

In California in the Anthem Blue Cross network: Contact Participant Services at 1-800-562-4690

■ Prescription Drug Program

Call Medco at 1-800-903-8343 (retail drugs) or 1-800-473-3455 (mail order) or visit www.medco.com

■ Dental Program

Call The Guardian at 1-800-765-6405 or visit www.geoaccess.com/directoriesonline/theguardiandental

■ Mental Health/Chemical Dependency Programs

Call ValueOptions at 1-800-704-1421 or visit www.achievesolutions.net

■ Life Insurance; Accidental Death & Dismemberment

Call Aetna Life Insurance Company at 1-866-825-6944

Questions?

AFTRA H&R gives you many ways to learn about your coverage. For general plan information, contact our Participant Services department at 1-800-562-4690. You can also visit our website at www.aftrahr.com, or you can contact our AFTRA Health Plan providers directly for more information about the services they provide on behalf of the Plan.

Please note: The information provided in this brochure is summarized and is not a complete description of the actual terms and provisions of the Plans. If any conflict arises between the information contained in this brochure and the actual Plan documents, the Plan documents will govern in all cases.

AFTRA H&R Funds
261 Madison Avenue, 8th floor, New York, NY 10016
Phone: 1-800-562-4690
Fax: 212-499-4925
webpage@aftrahr.com
www.aftrahr.com

