



# EQUITY-LEAGUE FUNDS (ELF)

PENSION, HEALTH & 401(K) TRUST FUNDS

# NOW PLAYING

FALL 2015

## New Health Plan Eligibility Rules — You May Qualify for Coverage Sooner

Due to terms negotiated in the recently ratified Production Contract, new eligibility rules are in effect. **Eleven work weeks will provide six months of health coverage and nineteen weeks will provide twelve months of coverage.** As in the past, work on any contract which provides a health contribution will count as an eligible work week.

These new rules apply to coverage commencing on or after December 1, 2015, based on accumulation periods ending in or after September 2015. (NOTE: These new eligibility rules are only guaranteed for the term of the Production Contract, which will expire on September 29, 2019.) As always, the Equity-League Health Fund staff is available to assist you if you have questions about your eligibility.

## Annual Open Enrollment — Coming in November — but Only Until November 30

Each November, and only in November, the Equity-League Health Fund holds its Annual Open Enrollment period. This is your once-a-year opportunity to make or change your decisions regarding dependent coverage and/or dental coverage. Any coverage changes you make during November will be effective Jan. 1, 2016.

**If you do not wish to make changes to your present coverage, you don't have to do anything during the Annual Open Enrollment period.**

## Understanding changes that may be made during Open Enrollment

Listed below are examples of common changes that you may make during the Annual Open Enrollment. For more detailed information about Open Enrollment, visit [equityleague.org](http://equityleague.org):

- You may switch from one of the HMO Plans to the Cigna Plan, or vice versa.
- You may add self-paid dependent coverage for any qualified dependent not already covered by the Health Fund.

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We have lots of great news for you in this issue of *Now Playing*:

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## Annual Open Enrollment

- You may also choose to add (or change) self-paid coverage for dental care.

If you want to make one or more changes, visit [equityleague.org](http://equityleague.org) to **submit your choices**, using the Self-Service Portal, **by November 30**. You must also provide any required forms and documentation, as well as pay the premium required for your new coverage, by Nov. 30, to avoid a penalty.

### Don't miss your once-a-year chance to make changes to your Health coverage!

If you miss November's Annual Open Enrollment, you will not have another opportunity to make changes until November of 2016 (with coverage changes effective Jan. 1, 2017). However, you may still add or remove a dependent at any time of the year when certain life events occur — for example, if you get married or have a child. Visit our life events pages at [equityleague.org](http://equityleague.org) for additional information.

## Enrolling late with a penalty

While you should strive to make any benefit changes during November, if you miss the November 30th deadline, **you may still make enrollment choices as late as Jan. 4, 2016 — but you will have to pay a \$100 penalty**. This penalty is in addition to the cost of the coverage for any Open Enrollment changes made. The ELF office will close early on Dec. 31, 2015 and won't reopen until Jan. 4, 2016. No changes in coverage will be permitted if we receive payments, forms, or documentation after Jan. 4, 2016.

## Questions, or Need Assistance?

For additional information, visit our Annual Open Enrollment page within the Health section of [equityleague.org](http://equityleague.org). For complete information, refer to the Equity-League Health Fund Summary Plan Description (SPD), which is also available at our website.

If you have any questions, if you encounter issues with the Self-Service Portal, or if you need other assistance, call the Health Department at (212) 869-9380 (New York City) or (800) 344-5220 (toll-free nationwide), and a representative will assist you.

## Speak To a Real Doctor Anytime, Anywhere — Beginning February 1 — Through Telemedicine

You're feeling very hot and achy. "Am I getting the flu?", you worry. But it's late Saturday night, or you are "on the road", with your regular doctor nowhere in sight. What if you could speak to a doctor, maybe even videoconference with her, right now? Wouldn't you prefer that instead of looking for a doc-in-a-box, an urgent care center — or sitting in an ER for hours?

Well now you can talk to a doctor 24/7/365, a doctor who can actually prescribe medicines or other treatments for you, and help you decide if further diagnosis and/or treatment is advisable. How?

Through the Health Fund's new pilot Telemedicine program — MDLIVE, offered through CIGNA. This new service not only offers unparalleled convenience in accessing medical help, but its only cost to you is the \$25 copay you normally pay for a visit to a network physician's office.

### Am I really talking with a doctor when I call MDLIVE?

Yes, only board certified primary care physicians and pediatricians participate in the MDLIVE network. They are selected through a credentialing process that is similar to the one used by CIGNA for developing and maintaining its physician networks.

### What services are available via telemedicine?

MDLIVE offers 24/7/365 access to consultations with board-certified primary-care physicians and pediatricians. You can communicate with the doctor via secure online videoconferencing, phone, or secure e-mail. And you are

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## Telemedicine Coverage

**only responsible for the copayment – the same as for any in-network doctor visit.** Whether you are home, at work, or traveling – or if you simply want quick and convenient access to a doctor – telemedicine will soon become an option you may want to consider.

### When should I use MDLIVE, and what can be treated?

If you have an urgent, but non-emergency situation, MDLIVE could save you a visit to an urgent care center or your doctor's office. But remember: in the event of an emergency, always visit the nearest emergency room or call 911.

MDLIVE services are also **ideal if you need advice or treatment for common illnesses and conditions, including** (but not limited to):

- Allergies
- Asthma
- Bronchitis
- Cold or flu
- Ear infections
- Rashes
- Nausea
- Respiratory infections
- Sinus problems
- Joint aches and pain
- Sports injuries
- And much more.



### When should I NOT use MDLIVE?

MDLIVE is not meant to replace your primary care physician. There are many situations in which you will want to see your regular doctor, in person. MDLIVE simply provides another option for fast, convenient care and for reliable medical advice.

And, of course, **in the event of an emergency, do not attempt to use MDLIVE.** Go to the nearest emergency room, or call 911.

MDLIVE's telemedicine services are secure and confidential, and MDLIVE fully complies with applicable federal privacy regulations. To learn more, visit the Health section at [equityleague.org](http://equityleague.org). From the main Health page, click "MDLIVE offered through Cigna: A doctor is always IN" to learn more about MDLIVE's services.

### There are a few limits on MDLIVE's availability

You should know that **there are a few states in which MDLIVE has restrictions on the services it can provide** – because of state laws or regulations. If such limitations apply in your state, you will be informed of them when you call in to use the service.

The rules of the state in which you receive your consultation are the ones that apply. Also, we regret that this service **is not available to those who are enrolled in the Fund's Medicare Supplemental program, or in an HMO.**

### How do I get started with MDLIVE?

To get started or to make an appointment after the effective date, simply call MDLIVE toll-free at (888) 726-3171 or visit [www.mdlive.com/cignacompanies](http://www.mdlive.com/cignacompanies). During registration, you'll need to complete a brief medical history and set up a payment mechanism for your copay (e.g., credit or debit card). Once you are registered, simply request a consultation and pay the copayment – online or by phone.

Like other pilot programs, ELF's coverage of telemedicine services is subject to change or cancellation.

If you have other questions about telemedicine services, please call MDLive at (888) 726-3171.

## Coverage for Gender Reassignment Treatments Is Now Available to Cigna Participants

The Equity-League Health Fund's Board of Trustees are pleased to announce that, effective Sept. 1, 2015, coverage for gender reassignment surgery and related services became available to those enrolled in the Cigna Health Plan (if you are enrolled in an HMO, coverage for such treatments are determined solely by your HMO).

Under this new benefit, covered services are available to those covered under the Cigna plan, who are 18 and older and include:

- Medically necessary gender reassignment surgeries, including both female-to-male and male-to-female reassignment procedures
- Pre- and post-surgical hormone therapies

Gender transition treatments are considered medically necessary for participants with confirmed gender dysphoria and who participate in a recognized gender identity treatment program.

**For complete information about the new benefit,**

**visit the Health section at [equityleague.org](http://equityleague.org).** From the main Health page in the "Notices" section, please click on the "Gender Reassignment" link.

If you have other questions about this new benefit, call the ELF Health Department at (212) 869-9380 (New York City) or (800) 344-5220 (toll-free nationwide), and we will be happy to help you.

### What if I'm covered by an HMO?

If you are covered under one of the Fund's available HMO Plans, **any gender reassignment coverage is determined solely by the HMO.** You can obtain an overview of your HMO's benefits at [equityleague.org](http://equityleague.org), by selecting the "Health" page then "Health Benefit Descriptions", then selecting the HMO of interest.

You can also contact the HMO directly to confirm any benefits that may be available for gender reassignment treatments.

## Participants May Use Manufacturer Coupons for Some Brand Name Medications

Earlier this year, **Cigna's Home Delivery Pharmacy (CHDP)** implemented a policy change (effective April 1, 2015) such that the CHDP pharmacy would **no longer accept new coupons for non-specialty maintenance medications.** Coupons already in the system before the effective date will be (or were) honored by Cigna until the coupon or prescription expires (or expired).

### A new exception allows you to continuing using manufacturer coupons — but only at retail pharmacies

In light of Cigna's policy change, the Equity-League Health Fund's Board of Trustees has chosen to override the Plan requirement to purchase maintenance medications from Cigna via mail order. This exception allows participants to

continue using manufacturer coupons to save money out-of-pocket, but only at retail pharmacies.

For example, suppose your physician tells you that you have ulcerative colitis. She suggests the brand name drug Lialda as a treatment option. After she tells you about Lialda's benefits and potential side effects, you mention that your prescription drug plan requires the use of generics wherever possible. Your physician responds that she generally has good results with generics, and so she prescribes a generic alternative to Lialda. After you have taken the generic for some time, you and your doctor are not satisfied with the results, so now she receives approval for coverage of Lialda in your case.

If the cost of the prescription is \$350, under the Cigna prescription drug plan, your copayment would be 20% of

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### Brand Name Medications

that, or \$70. However, the drug’s manufacturer offers you a coupon, which can be used to offset \$50 of your copay. Since Cigna will no longer accept such coupons at their mail order pharmacy, the Fund’s exception would permit you to purchase your Lialda at a retail pharmacy, using the coupon from the manufacturer.

To take advantage of this exception, you must call the ELF Health Department at (212) 869-9380 (New York City) or (800) 344-5220 (toll-free nationwide). Simply state that you want to use manufacturers’ coupons at retail pharmacies, and a representative will guide you through the steps required to do so.

### Why did Cigna change its policy?

Cigna made this change because, in the current industry environment, coupons contribute greatly to rising pharmacy costs. Consider the following statistics from the Pharmaceutical Care Management Association:

- Coupons could increase drug costs by \$32 billion for health plans and their participants between 2010 and 2025.



- Drug manufacturers are spending an average of approximately \$4 billion per year on coupon programs.

Consistent with the standard industry practice, Cigna’s Home Delivery Pharmacy continues to accept coupons for specialty medications. Specialty medications include biologics and other medications (often injectable or administered through an IV) prescribed for serious medical conditions, including cancer and certain chronic conditions, such as rheumatoid arthritis.

## New 401(k) Investment Options: 2060 Target Date Fund and Fossil-Fuel Free Parnassus Endeavor ESG Fund

The Trustees of the Equity-League Fund’s 401(k) Plan continually look for ways to improve the Plan’s available investment options. As a result, the Trustees have added two new investments for 401(k) participants: a new 2060 Target Date Fund and the Fossil-Fuel Free Parnassus Endeavor ESG fund.

More information about these investment options are listed below. And remember: you may change your investment choices at any time by visiting [mylife.jhrps.com](http://mylife.jhrps.com) and logging in or by calling a John Hancock representative at (800) 294-3575.

### Introducing the 2060 Target Date Fund

The latest addition to American Funds’ Target Date Funds was introduced on Oct. 26. The new 2060 Target Date Fund is being added to the slate of available ELF 401(k) investments, because the Plan’s youngest participants are not likely to retire before 2060.

#### This New Investment Option Has Been Added

Fund Name/ Share Class	Ticker Symbol
American Funds 2060 Target Date Retirement Fund (Class R3)	RCNTX

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## New 401(k) Investment Options

**The new 2060 Target Date Fund will be the default target date fund for those born in 1991 or later.** If you were previously placed in the American Funds 2050 Target Date Retirement Fund (Class R3) by default – and you were born in 1991 or later – your investment election and contributions were transferred to the American Funds 2060 Target Date Retirement Fund (Class R3) on the effective date.

As a reminder, target date funds are diversified investments that provide a simpler way to manage your 401(k), employing a dynamic mix of investments focused on your planned retirement date. Target date funds follow a “glide path” that changes the mix of underlying investments as you near your target retirement date – and for decades after your retirement. Generally, the mix of investments becomes more conservative over time.



### What is the Parnassus ESG Fund?

A number of participants in the 401(k) Fund have expressed an interest in an investment option offered by an investment manager that **screened for environmental, social or governance (ESG) factors** when they construct and maintain their investment portfolios. The ELF Trustees were pleased to add the Parnassus Endeavor Fund as an available investment option to the 401(k) Plan.

#### This New Investment Option Has Been Added

Fund Name/ Share Class	Ticker Symbol
Parnassus Endeavor Fund	PARWX

The Parnassus Endeavor Fund avoids investing in companies that engage in the extraction, exploration, production, manufacturing, or refining of fossil fuels. As of March 31, 2015, 0% of the fund’s assets were invested in this legacy

energy sector. Conversely, the fund seeks to add value by investing in undervalued equity securities of large capitalization companies with reputations for outstanding workplaces. The Fund has had a higher and strong long-term performance.

As noted throughout our 401(k) Plan communications, remember that past performance is no guarantee of future results. Due to market volatility, current performance may be less or higher than figures referenced in communications materials distributed by John Hancock. Investment return and principal value will fluctuate so that, upon redemption, shares may be worth more or less than their original cost. Performance data does not reflect deduction of redemption fees, which, if such fees exists, would lower performance.

For the most recent performance information for either of these new funds, or other funds available through the 401(k) Plan, please log onto the John Hancock website: [mylife.jhrps.com](http://mylife.jhrps.com) or call a John Hancock representative at (800) 294-3575.

## Reminder: Open Enrollment for the ACA's Health Insurance Marketplaces Also Begins November 1 — Contact the Artists' Health Insurance Resource Center (AHIRC) at the Actor's Fund for Assistance

For coverage in 2016, **open enrollment** for the Health Insurance Marketplaces, which were created by the **Affordable Care Act (ACA)**, is **November 1, 2015–January 31, 2016**. Having health insurance coverage throughout the year is more important than ever before because annual penalties for individuals not having the minimum required coverage during 2016 will be substantially more than what they were in 2015. For 2016, the penalty for not having coverage is the greater of \$695 per individual, or 2.5% of yearly household income. Changes in coverage and rates in your area could be significant in 2016, so now is the time to review your options.

The Artists' Health Insurance Resource Center (AHIRC) from the Actor's Fund is a recognized "navigator" for ACA Marketplace coverage, so don't hesitate to contact them if you need help with Marketplace enrollment.

Visit [www.ahirc.org](http://www.ahirc.org) or call the resource center at (212) 221-7300, ext. 265 (New York City) or (323) 933-9244 ext. 32 (Los Angeles).

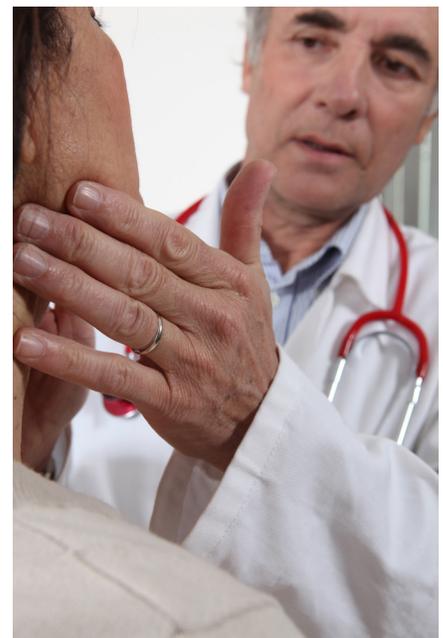
## Getting Your Annual Physical May Be Routine but It Can Be Critical — and Yes, It's Covered By the Health Fund

Making an annual visit to your physician should be part of your routine, but failing to do so can be a critical mistake, if the result is missing an important screening test, vaccination (which may be necessary at almost any age), or not receiving some crucial counseling tailored to your risk factors.

There has been a lot of back and forth in the press in recent years about the value of the traditional annual physical exam, but only you and your physician can determine what is appropriate for you.

Most health plans, including the **Equity-League Health Fund, cover annual physicals and many types of screenings**. In the case of the Equity-League Health Fund, there is no copay for immunizations and routine tests. And there is only a \$25 copay if your annual exam is done with a network physician.

So, if you haven't visited with your physician in some time, why not make an appointment to see him/her today? And after that, please make your annual visit part of your routine.



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# NOW PLAYING

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To the extent that any of the information contained in this newsletter is inconsistent with the official Plan documents (which, of course, includes the Trustees' rights to amend or modify the Plans at any time), the Plan documents will govern in all cases. No official (other than the Trustees) has any authority to interpret the Plans, or other official Plan documents, or to make any promises to you about them.