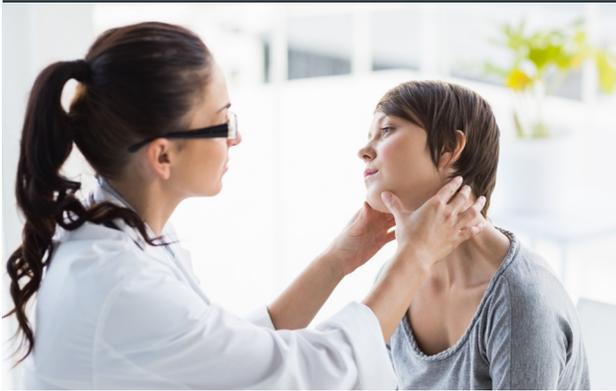


SAG·AFTRA HEALTH PLAN



NEWSLETTER Fall 2018



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URGENT SYMPTOMS OR INJURY? YOU HAVE OPTIONS FOR CARE.

When you need quick relief, your benefits include several convenient options to avoid long waits in crowded emergency rooms.

URGENT CARE: Most urgent care centers offer excellent minor injury and illness care such as:

- Sprains, strains and broken bones (X-ray onsite)
- Cuts that may need stitches or repair
- Complications from asthma, diabetes or infections
- Abdominal pain, diarrhea, vomiting and other flu-like symptoms

Urgent care facilities typically have shorter wait times, and your out-of-pocket costs will generally be lower than if you visit an emergency room. If you have never visited your local urgent care, do your research ahead of time. Call your local center and ask:

- Do you accept my insurance?
- Do you have a physician onsite that is trained in emergency care?
- What type of lab services and testing do you offer onsite?
- Do you offer onsite X-rays, EKG and other diagnostic equipment?
- On average, what are your patients' wait time for care?
- What are your hours of operation?

A quality urgent care center is a great alternative for getting the timely care you need for yourself and your family.

EMERGENCY ROOM COSTS VS OFFICE VISIT/URGENT CARE		
Plan I	In Network	Out of Network
Emergency Room	90% after \$100 copay; emergency room copay is waived if immediately confined	Not covered*
Office Visit/ Urgent Care	No deductible; 100% after \$25 copay	70%
Plan II	In Network	Out of Network
Emergency Room	80% after \$100 copay; emergency room copay is waived if immediately confined	Not covered*
Office Visit/ Urgent Care	No deductible; 100% after \$25 copay	60%

*Emergency treatment within 72 hours after an accident or within 24 hours of a sudden and serious illness will be covered at the In-Network Level of Benefits.



KNOW THE EFFECTS OF DIABETES

Diabetes is a disorder of metabolism — the way the body uses digested food for growth and energy. Most of the food you eat is broken down into glucose. Glucose is a form of sugar in the blood that provides energy to all your body's cells.

After digestion, glucose passes into the bloodstream, but it needs insulin to help it get into the body's cells. Insulin is a hormone made by the pancreas, a large gland near the stomach.

In people with diabetes, the pancreas makes little or no insulin, or the cells don't correctly take in the insulin that is made. When this happens, glucose builds up in the blood, overflows into the urine, and passes out of the body. That's why people with diabetes have too much glucose in their blood.

Types of diabetes

Type 1 diabetes is an autoimmune disease. This means the immune system, which normally fights infections in the body, attacks a part of the body instead. With

type 1 diabetes, the immune system attacks and destroys the cells in the pancreas that make insulin. No one understands why the body gets attacked this way. Type 1 diabetes comes on quickly and usually affects children and young adults.

Type 2 diabetes starts when the fat, muscle and liver cells in the body do not use insulin properly. The cells become resistant to insulin, and the pancreas just can't make enough insulin to move the glucose from the bloodstream into the body's cells. Being overweight and not exercising make it more likely you will get type 2 diabetes.

We are learning more and more about the causes of type 2 diabetes as well. Type 2 diabetes accounts for 90% of the diabetes cases in the U.S. It is known that being overweight or obese significantly increases your chance of getting type 2 diabetes. Knowing how to manage the health factors that can be controlled is very important. Eating healthy and staying active are keys to avoiding this disease.

THE COLD, HARD FACTS ABOUT MIGRAINES

Let's not sugarcoat it. Over 45 million Americans suffer from regular headaches; 28 million suffer from migraines. In the last three months, 20% of women and 10% of men have had at least one migraine. If those numbers aren't bleak enough, consider this: migraines tend to be hereditary. When both parents have a history of migraines, there is a 70% chance that their children will also develop migraines. How can you tell if it's a migraine?

The hallmark of a migraine is throbbing pain that is usually worse on one side of the head.

You may also experience some of these symptoms:

- Pounding or throbbing headache that often begins as a dull ache
- Sensitivity to light, noise and smells
- Nausea, vomiting, and stomach pain
- Loss of appetite
- Feeling very warm or cold
- Paleness
- Fatigue
- Dizziness
- Blurred vision
- Diarrhea

Most migraines last about four hours, but severe ones can last up to a week. How often they come can vary a lot for each person. Generally, migraine sufferers get two to four a month.

Or is it just a headache?

You may not know that a migraine is not technically a headache. A headache is just one possible symptom of a migraine. *When you get a headache, ask yourself:*

- Has it limited your activities for a day or more?
- Are you nauseous or sick to your stomach?
- Does light bother you?

If so, you might have a migraine. If you see these or the symptoms above, talk to your doctor to rule out more serious problems, and to find treatment.



LIVEHEALTH ONLINE: THE DOCTOR WILL SEE YOU NOW

A doctor's care is at your fingertips with LiveHealth Online. This benefit includes:

- A face-to-face doctor's visit on your phone, tablet or desktop
- Short term prescriptions if needed

As an in-network benefit beginning January 1, 2019 your copay will be only \$25 (\$49 without insurance) and your existing benefits will apply. LiveHealth Online is available 24 hours a day, seven days a week. Register to access LiveHealth at www.livehealthonline.com and follow the simple instructions. You can also download the app. In less than five minutes you'll be face to face with your doctor.

BREATHING EASY ISN'T ALWAYS EASY

Managing Asthma

Having certain lung infections early in your life can make you more likely to develop asthma. So can being around tobacco smoke and other allergy triggers (allergens) at a young age. Your family history also plays a part. If one or both of your parents have asthma, you are likely to have it, too.

If you have asthma, your airways are always a bit swollen. That makes you react to triggers more than other people do. Your doctor can help you figure out what triggers your asthma attacks.

The most common ones are:

- Animal dander
- Cigarette smoke
- Cockroaches
- Cold air or changes in weather
- Dust mites
- Gastroesophageal reflux disease (GERD); heartburn
- Infections like colds, bronchitis or pneumonia
- Medicines like aspirin and beta blockers
- Mold
- Pollen
- Pollution
- Stress, laughing hard, crying
- Strong smells from painting, cooking, perfumes, etc.

When you're exposed to a trigger:

- Your airways may swell up more than normal.
- Your airways may make more mucus than normal.
- Your muscles around the airways may tighten.

All of these changes keep you from getting enough air

into your lungs — and getting enough oxygen in your blood. This can prevent vital organs from working, which can cause death.

To manage your asthma, your doctor may talk to you about:

- A quick-relief drug or long-term control drug that may be right for you.
- A peak flow meter, a small tool that measures how quickly and forcefully you can breathe out after taking a deep breath. It can give you an early warning that an asthma attack is about to happen.

Also, you and your doctor will work together to create an action plan. The plan has two parts. Part one is a plan for normal days. Part two is an emergency plan for when you have attacks. Once you have a plan, pay close attention to your asthma to make sure it does not get worse.

Is your asthma under control?

If you have asthma attacks more often or they're getting worse, see your doctor to change your treatment plan.

Other signs that your asthma is not well controlled are:

- You are losing sleep.
- You are missing school or work.
- Your peak flow meter shows a low number, or the number changes a lot from day to day.
- You have to use your quick-relief inhaler more often. More than twice a week is too often.
- Your medicines don't seem to work well anymore.
- You have to go to your doctor or the emergency room because of an attack.
- You have to stay in the hospital because of your asthma.

[Learn more at WebMD's Asthma Health Center at webmd.com.](http://webmd.com)



2019 BENEFIT NEWS

ANNUAL INCREASE IN EARNINGS REQUIREMENTS FOR ELIGIBILITY

Per the Summary Plan Description, the minimum requirements for earned eligibility will increase by 2% each year, with the exception of Plan II Age and Service earnings requirement, which increased by more than 2% in 2018 with no additional increases scheduled through 2020. The minimum earnings thresholds listed below are for eligibility beginning on or after January 1, 2019.

MINIMUM EARNINGS REQUIREMENTS: SCHEDULED INCREASE IN 2019			
Plan I	Plan II (Earnings)	Plan II (Days)	Plan II (Age & Service)
\$34,330	\$17,690	82 days	\$13,000 with 10 Health Plan Years and age 40 or over

Retiree Health Credit Earning Increase

On January 1 of every year through 2022, the covered earnings threshold to earn a retiree health credit is scheduled to increase by \$1,000. You must earn at least \$24,000 in covered earnings during the 2019 calendar year to earn a retiree health credit for the year.

Plan Premiums

Although premiums for most participants will remain the same in 2019, there will be an increase for participants receiving benefits through COBRA and senior performers with less than 20 retiree health credits.

2019 COBRA PREMIUMS			2019 SENIOR PERFORMERS AND SURVIVING DEPENDENTS PREMIUMS		
Options	Plan I	Plan II	Number of retiree health credits	With no spouse or with spouse age 65 and over	With spouse under age 65
Individual only	\$832/month	\$592/month	20+ Health Credits	\$60/month**	\$120/month**
Individual plus 1 dependent	\$1,506/month	\$1,044/month		Less than 20 Health Credits*	\$187/month**
Individual plus 2+ dependents	\$2,114/month	\$1,452/month			

* Please refer to the senior performers eligibility requirements on page 24 of the SPD.

**Includes coverage for dependent children.



Save this page for future reference.

SAG·AFTRA HEALTH PLAN NEWSLETTER

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East Coast Office: 275 Madison Avenue,
Suite 1819, New York, New York 10016

MENTAL HEALTH/SUBSTANCE ABUSE COVERAGE

Beacon Health Phone: (866) 277-5383

DENTAL INFORMATION AND CLAIMS

Delta Dental Phone: (800) 846-7418

PRESCRIPTION DRUG

Express Scripts: (800) 903-4728

Prescription Prior Authorizations: (800) 753-2851

MOVING?

When you move, it is important that you notify the SAG-AFTRA Health Plan so that you will continue receiving information about your eligibility and benefits. The Health Plan is separate from the union and requires a separate notice for address changes. **You can change your address by:**

- Logging in to your Benefits Manager at <https://my.sagaftraplans.org/health>.
- Calling the Plan at (800) 777-4013.
- Writing or faxing a letter to the Plan.



Log in to your Benefits Manager for access to all of your information at <https://my.sagaftraplans.org/health>.