

Special

Health Benefits Bulletin

Writers' Guild-Industry Health Fund

September 1, 2007

Announcing The New Nationwide Hospital/Medical Network And Elimination of Open Access Plan

Effective January 1, 2008, the medical and hospital network for Health Fund participants who reside outside of California will switch from Private Healthcare Systems (PHCS) to the Blue Cross *BlueCard*® network, a nationwide network of all local Blue Cross plans, including Blue Cross of California. This switch will create one nationwide network for all Health Fund participants. **Additionally, PHCS is discontinuing its Open Access offering, so all Open Access users will now transition to the PPO option** and will use the new national network.

Benefits of moving to a nationwide network:

- ◆ Larger selection of providers
- ◆ The convenience of one nationwide network
- ◆ Savings to you and the Health Fund

By switching to *BlueCard*®, the Health Fund will offer a larger, more diverse network to all participants. While no medical network covers all providers in every city and town, the switch to *BlueCard*® will give the option of network doctors and hospitals to more participants than ever before. The *BlueCard*® nationwide network is larger than the current outside-of-California network, PHCS. The majority of PHCS providers are already in the *BlueCard*® network and some participants who live in areas that were not previously covered by the PHCS network will now have access to a provider base under the *BlueCard*® network.

Transition of Care

To assist participants affected by this change, the Health Fund has set up a series of transition rules. If you or one of your dependents is receiving a current course of treatment from a PHCS doctor not in the *BlueCard*® network, the treatment may be covered under network terms until the immediate and necessary course of treatment ends. If your doctor is not in the *BlueCard*® network, we encourage you to contact the Health Fund as soon as possible to determine if you are eligible under these transition rules.

Please remember that, unless you are eligible under the Health Fund's transition rules, any services rendered by a non-*BlueCard*® provider after December 31, 2007 will be covered at the lower non-network rate, even if the provider was previously in the PHCS network.

How will the new network affect me?

IF YOU LIVE IN CALIFORNIA

Your network for medical and hospital providers in California has not changed. You will continue to be covered under the Blue Cross of California network. However, when you travel outside of California, you will now be covered under the *BlueCard*® network.

IF YOU LIVE OUTSIDE CALIFORNIA

Effective January 1, 2008 your network for medical and hospital providers will switch from PHCS to *BlueCard*®. When you travel to California, you will be covered under Blue Cross of California.

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A series of communications will be provided to you prior to our transition to *BlueCard*®. Please look for more details in our upcoming communications:

The "Let's Talk" Newsletter - October 2007 edition
Annual Open Enrollment packets - scheduled for mid-November mailing

New ID Cards

As part of the transition to *BlueCard*®, the Health Fund will be issuing new coverage cards to all participants. You will still have an "all-in-one" coverage card with the medical, prescription drug, dental and behavioral health claim submission information. **Your ID# has expanded to 12 digits. A 3-digit alpha prefix (WRX), followed by your current ID# (A12345678).** The new coverage cards will be mailed to all participants around mid-December. Please be sure to provide your doctor(s) with a copy of your new card. It is very important for your providers to update their file and for you and them to use the entire 12-digit ID number with all claim submissions.

We hope to make this an easy transition for all participants. In the interim, if you have any questions please contact the Health Fund at (818) 846-1015 or toll free at (800) 227-7863, and one of our Participant Service Representatives will be happy to assist you.

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BlueCard Questions & Answers

Question: *What if my current PHCS provider is not in the BlueCard® network?*

Answer: You will need to switch to a provider who is in the *BlueCard®* network to receive the higher network benefits. If your PHCS provider is interested in joining the *BlueCard®* network, he or she should contact their local Blue Cross office or call (800) 810-BLUE (2583). If you are undergoing a current course of treatment with a PHCS provider that is expected to go beyond January 1, 2008 see the information on page one for transition of

Question: *How can I find out if my current provider is in the BlueCard® network?*

Answer: You can ask your doctor directly or call (800) 810-BLUE (2583). Be sure to tell the Customer Service Representative that your three digit alpha prefix is WRX. You can also visit the Health Fund's Web site (www.wgaplans.org) and use the link for the *BlueCard®* Doctor and Hospital Finder.

Question: *Will there be changes to my benefits or coverage?*

Answer: If you are currently covered under the PPO plan or Low Option plan, there are no changes to your benefits. **If you are currently covered under the Open Access plan, as of January 1, 2008 you will be covered under the PPO plan. Open Access will no longer be available and an alternate plan will not be offered at this time.**

Question: *Will my dental, mental health, and prescription drug coverage remain the same?*

Answer: Yes. Delta Dental remains the nationwide provider for dental benefits, PacificCare Behavioral Health (PBH) remains the nationwide provider for behavioral health benefits, and Medco Health Solutions remain the nationwide provider for prescription drug benefits.

Question: *What if I need to see a doctor prior to January 1st?*

Answer: The January 1 effective date applies to services rendered by a provider after December 31, 2007. Therefore, you must use PHCS network providers through December 31, 2007. If you are undergoing a current course of treatment with a PHCS provider that is expected to go beyond January 1, see the information on page one for transition of care.

Question: *I am currently enrolled in the Open Access plan through COBRA, and on January 1, 2008, the Open Access plan is being eliminated. Will my COBRA premium amount change?*

Answer: Yes, you will be switched to the PPO COBRA rates. This will result in a higher premium amount, but for the duration of this COBRA event only, the Health Fund will subsidize half of the difference. Details will be provided in the November Open Enrollment letter.

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BlueCard Questions & Answers (continued)

Question: *I am currently in the Open Access plan, do I need to complete new enrollment forms when I am switched to the PPO plan?*

Answer: No, you will be automatically transferred to the PPO plan. Other information regarding open enrollment options will be in the Open Enrollment material you will receive in mid-November.

Question: *How do I get a list of BlueCard® providers in my area?*

Answer: You can call (800) 810-BLUE (2583). Be sure to tell the Customer Service Representative that your 3-digit alpha prefix is WRX. You can also visit the Health Fund's Web site (www.wgaplans.org) and use the link for the BlueCard® Doctor and Hospital Finder.

Question: *Is the Health Fund issuing new ID cards to all participants?*

Answer: Yes, new ID cards are being issued to all Health Fund participants. The new ID has specific claim submission information for providers located in and outside California. **Also, your ID# has expanded to 12 digits. A 3-digit alpha prefix (WRX), followed by your current ID# (A12345678). It is very important for your providers to update their file and for you and them to use the entire 12-digit ID number with all claim submissions.**

Question: *What should I do if I am currently receiving treatment from a PHCS provider who is not in the BlueCard® network?*

Answer: Inpatient confinements and certain courses of treatment, such as chemotherapy, may continue with your current provider until the confinement or course of treatment ends. To find out if your particular treatment with a PHCS provider will be covered after January 1, 2008, or if you have any questions regarding this update, contact the Health Fund Office at (818) 846-1015 or (800) 227-7863.

TIHN

THE INDUSTRY HEALTH NETWORK

For those of you in the greater Los Angeles area, The Industry Health Network (TIHN) is designed exclusively for members of the entertainment community. It provides quality care at a great price on everything from primary care visits, lab work, x-rays, and well-child care to hospitalization, surgery and anesthesia.

WHO'S ELIGIBLE?

You and your covered family members who are enrolled in the PPO plan can take advantage of TIHN anytime you're in the L.A. area. You don't have to sign up for it during Open Enrollment.

HOW DOES TIHN WORK?

- When you need medical care, you simply—
- ◆ Call one of the Centers for an appointment with a Primary Care Physician
 - ◆ Pay a minimal copay for each visit (other than hospitalization and surgery)
 - ◆ Pay no deductible or coinsurance

WHERE ARE THE TIHN CENTERS?

The Bob Hope Health Center is located in the heart of Hollywood.

335 North La Brea Avenue
Los Angeles, CA 90036-2584
(323) 634-3850

The Santa Clarita Health Center is conveniently located in Valencia.

25751 McBean Parkway, Suite 210
Valencia, CA 91355
(661) 284-3100

The Toluca Lake Health Center is housed in the Nicholl Building which is conveniently located in the heart of the media district.

4323 Riverside Drive
Burbank, CA 91505
(818) 556-2700

The Westside Health Center is conveniently located in West Los Angeles and is near Santa Monica.

1950 Sawtelle Boulevard, Suite 130
Los Angeles, CA 90025-7014
(310) 996-9355

The Jack H. Skirball Health Center is conveniently located in the heart of the San Fernando Valley.

23388 Mulholland Drive
Woodland Hills, CA 91364
(800) 876-8320
(818) 876-1050

To learn more about TIHN Centers and benefits—including maximums and limitations—call (800) 876-8320 or visit www.mptvfund.org.