

FOR YOUR BENEFIT...

The Newsletter for Motion Picture Industry Pension and Health Plans Participants

Volume 12, No. 2

Summer 2002

2002 SPDS DESIGNED TO BE READER-FRIENDLY

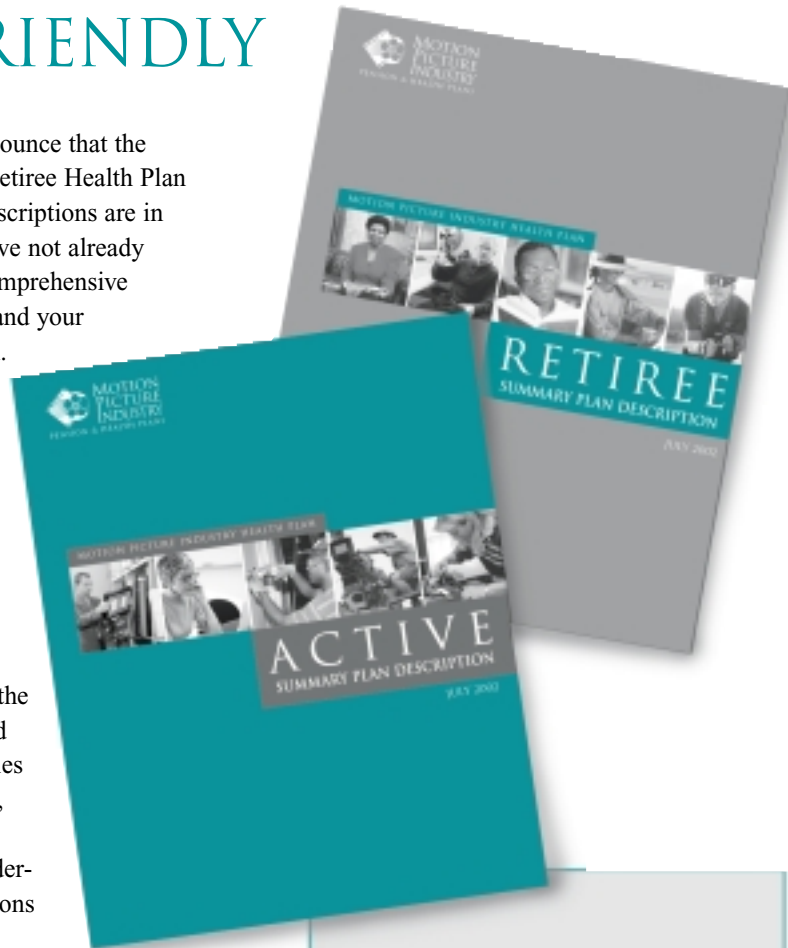
We're pleased to announce that the 2002 Active and Retiree Health Plan Summary Plan Descriptions are in the mail. If you have not already received your new guide to the comprehensive Plan of Benefits available to you and your eligible dependents, you will soon.

In addition to benefit enhancements and other content updates, you'll notice a new look and organizational format designed to make the information more understandable and accessible for our Participants.

The documents themselves are necessarily long to accommodate the detail you need to fully understand your benefits. With the complexities of providing so much information, we have added some practical new features to present it in a reader-friendly manner that provides options for locating specific information.

New to this book are a glossary and an index, as well as an overall table of contents which identifies major topics. In addition, there are individual tables of contents located at the beginning of each main section addressing details of Plan eligibility, Health Plan options, Dental Plan options and additional health benefits. As in previous editions, we have included comparison charts for medical, hospital and dental benefits.

These new books will serve as a resource to answer your questions concerning your comprehensive medical, hospital, wellness program, prescription drug, vision, dental and life insurance coverage. We have provided pockets in both the Active and Retiree Summary Plan Descriptions as a handy storage for Plan newsletters and updates as they are published.



If you haven't received your 2002 Summary Plan Description by the end of July, please call us.

Participants in Southern California:
818 or 310.769.0007, Ext. 251.

All other Participants:
888.369.2007, Ext. 251.

As always, we welcome your comments and suggestions. E-mail us at communications@mpiphp.org or call us at 818 or 310.769.0007, Ext. 316.

Participants residing outside Southern California may call us toll free at 888.369.2007, Ext. 316.

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Dates to Remember

The Plan Office will be closed in observance of the following holiday:

Labor Day
September 2, 2002

**A Little Technology
+ A Lot of Customer
Service**

= MPIPHP Access 24-7

As an MPI Participant, you can now access your Health Plan information at your convenience day or night over the phone or on our website. It's easy and convenient, and it's saving Participants a great deal of time!

If you prefer the phone, simply call our West Coast Office, press "7" to get to our automated telephone system, and answer the phone prompts. You'll be able to verify your eligibility status and that of your dependents, as well as medical and dental enrollment, and Bank of Hours information. You can even verify your recent payment information if you participate in COBRA benefits.

If you'd rather let your fingers do the walking on a keyboard, visit us on our website. All you need is a browser that supports a 128-bit encryption. From our site you can download forms, check on your reported hours, confirm coverage for your dependents and much more. It's as simple as signing in and following the prompts.

If you're a first-time visitor to our website, you'll need to go to the site and request a temporary password that will be mailed to you within two weeks. Once you have that, you'll have secure access to your personal data day or night. It's that simple.

**818 or 310.769.0007
www.mpiphp.org**

NEW PROVIDER NETWORKS OFFER CHIROPRACTIC CARE

Beginning July 1, 2002, Blue Cross and American Specialty Health Networks (ASH Networks) became the official preferred providers for chiropractic care for all Participants and their eligible dependents.

Inside or outside of California, Participants and their eligible dependents may now choose from conveniently located networks of over 10,000 licensed and approved chiropractors.

Your chiropractic benefits remain unchanged. The Plan pays for diagnostic x-rays (plain films) and chiropractic treatment to any part

HMO Participants

Participants and their eligible dependents who have enrolled in one of the Plan's HMO options may self-refer to an ASH Networks chiropractor for a \$10 per visit co-payment. ASH Networks pays all eligible charges, minus the co-payment, directly to the approved provider. Use of a non-network chiropractor is not a covered benefit.

Benefits in Detail

The new chiropractic benefits are explained in detail in the 2002 Summary Plan Descriptions recently mailed to Participants' homes.

For benefit coverage information, contact the Health Plan at 818 or

310.769.0007,

Ext. 244. For

help in locating

a chiropractor or

for further help

in understanding

this benefit, contact

the following:

X-rays for chiropractic care are a covered benefit, but MRIs ordered by a chiropractor are not.

of the body. MRIs ordered by a chiropractor are not a covered benefit. All Active and Retired Participants are eligible for up to 24 visits per calendar year, regardless of condition(s).

MPIHP/Blue Cross Participants (Non-HMO)

Whether you live inside or outside of California, you pay no out-of-pocket expenses if your chiropractor is part of the Blue Cross Preferred Provider Network. Although you may go to the chiropractor of your choice, the Plan will reimburse only accredited chiropractors at the Blue Cross Prudent Buyer rate. If s/he is not part of the provider network, you will be responsible for any remaining balance after the Health Plan payment.

MPIHP/Blue Cross Participants (Non-HMO) in California

- www.bluecrossca.com
- 800.888.4825

MPIHP/Blue Cross Participants (Non-HMO) Outside California

- www.bluecares.com
- 800.810.2583

HMO Participants

- www.ashnetworks.com
- 800.678.9133

Please Note: Chiropractic benefits listed do not affect the established benefits of those former East Coast Local 644 and 666 Participants who retired prior to the January 1, 1999 merger with MPIHP.

THE LONG-TERM CARE DILEMMA

Recognizing that long-term care is a serious issue impacting many families, Motion Picture Industry Health Plan (MPIHP) is considering how best to assist Participants in planning for potential long-term care needs.

According to a 1997 publication by the Health Insurance Association of America, 49 percent of all people reaching age 65 in this country will spend some time in a nursing home or will require assistance at home. The Washington Post reported even higher numbers, estimating that 60 percent of those over age 65 will require long-term care during their lifetime. Seven of 10 married couples will be impacted.

Obviously, the risks are great and the potential financial toll on individuals and families could be devastating. According to statistics published in 1991 by the U.S. Department of Health and Human Services, the cost of nursing home care was about \$100 per day. Based on an average stay of 2 1/2 years, that translates conservatively into a total cost of \$100,000, without consideration for inflation. And home health care can be even more expensive if around-the-clock clinical care is necessary.

It is a common misconception that Medicare and Medicaid will cover these costs. The reality is these plans will pay only a fraction, if any. Medicaid, enacted to provide health care services for the impoverished, comes into play only when personal finances are depleted to a minimum eligibility level. Regulations for qualification continue to become more restrictive.

To encourage Americans to plan for their own long-term care needs, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) provides tax incentives to those who purchase long-term care insurance. Many states also offer tax incentives for the purchase of qualified long-term care coverage.

Offering asset protection, tax savings and choice, long-term care insures individuals for the various levels of skilled nursing, intermediate and custodial care. It provides

for home health care, adult day care, respite care, assisted living care, nursing home care and assistance with activities of daily living.

MPIHP anticipates offering Participants the opportunity to purchase long-term care insurance at group rates and with attractive terms for themselves and their loved ones. We are currently in discussion with CNA, one of the country's top long-term care insurance providers. We anticipate making this voluntary benefit option available to our Participants in the fall.

To make plans for your own families' needs, watch your mail for further details on this option.



FASHION FETISH GOT YOUR FEET SCREAMING FOR HELP?

Pointy-toed, high-heeled shoes are back in fashion, and so, therefore, are aching feet. If your feet are screaming for help, no matter what the cause, remember that your MPIHP benefit provides Podiatry services, including Orthotics, when provided by a licensed Podiatrist or an M.D. Eligible MPIHP/Blue Cross Participants may go to the podiatrist or M.D. of their choice for podiatric services. The Health Plan will pay for covered services at the established rates.

The Industry Health Network offers fully-credentialed podiatrists contracted to provide care to MPIHP/Blue Cross Health Plan Participants and their eligible dependents through the Motion Picture & Television Fund Health Centers. Fully-credentialed podiatrists offer a full range of foot care services, from removing painful corns and calluses to surgically repairing bunions and hammer toes. With a referral to a Network provider from an MPTF

Health Center physician, there is no out-of-pocket expense for covered services. Make a note, however, that preauthorization is required for all MRIs of the foot.

Participants who have selected one of the HMO plan options have podiatric benefits through their selected HMO. For further information, please contact the Plan Office Medical Review Department at 818 or 310.769.0007, Ext. 286.

UNDERSTAND COORDINATION RULES TO MAXIMIZE BENEFITS

Many families are covered under more than one health plan. With the complexities associated with benefits administration, multiple coverage can cause confusion unless a benefit coordination system is understood in advance.

To avoid misunderstanding at the time of benefit payments, the Health Plan has established a detailed plan that includes an order of payment priority – which plan pays what and when. A comprehensive explanation of these benefit determination rules is included in both the Active and Retiree Health Plan Summary Plan Descriptions. You are urged to review this information in detail to ensure you are doing everything possible to get the most from all your benefits.

A few points to remember include:

- If you, your spouse or eligible dependent(s) have an employer group health plan available at no cost, that group plan is the primary payer for that employed individual. If s/he has chosen not to enroll, the Health Plan's payable amount will be reduced by the estimated value of the benefits that plan would have paid.
- If the primary carrier for you, your spouse or eligible dependent child is an HMO or PPO plan, but you choose to be treated by a non-HMO/PPO provider for services that are available from that network, the Plan will make no payment as a secondary payer. The Health Plan must receive a written denial from the HMO/PPO carrier to

consider a coordination of benefit payment for out-of-pocket deductibles and those services that are not available through the HMO/PPO provider.

- If you and your dependents are covered under a state's Medicaid program, the Plan will be the primary payer and will pay benefits before Medicaid.
- In cases of divorce or separation where both parents have health plans, specific prioritization rules have been established to identify primary coverage for the children.

Participants to Receive Personal ID Numbers

Beginning July 1, 2002, Motion Picture Industry Pension and Health Plans (MPIPHP) will begin identifying Participants through Personal Identification, or "PID" numbers, in addition to their Social Security Numbers.

In response to California Senate Bill 168, the identity theft bill, MPIPHP will use Personal ID numbers when sending information to Participants instead of Social Security Numbers. Personal ID numbers will have the same number of digits as Social Security Numbers.

By July 1, 2002, Social Security Numbers will no longer be included on any Pension documents mailed to homes, including Pension checks. And by January 1, 2003, the Health Plan will no longer include Social Security Numbers on documents mailed to homes, including health benefit cards.

Participants will still need their Social Security Numbers when accessing personal information on the Plans' Telephone Information System and on the website.

SAVINGS AVAILABLE THROUGH BLUE CROSS NETWORK FACILITIES

For potentially significant out-of-pocket savings, Participants should pay close attention when choosing a hospital or surgery center. It is your choice as to which facility you use, but there are varying out-of-pocket expenses associated with using a Blue Cross Prudent Buyer, Blue Cross National Network, Blue Cross contracted or non-Blue Cross contracted facility. Be sure you know the difference in advance.

MPIHP has contracted with Blue Cross to obtain reduced costs through Prudent Buyer network facilities in California and the Blue Cross National Network facilities throughout the country. Receiving services at these lower fees enables the Plan to provide 100 percent coverage for eligible expenses incurred at one of these network hospitals or at the Motion Picture and Television Fund Hospital in Woodland Hills, California.

In California, there are Blue Cross contracted hospitals that do not participate in the Prudent Buyer network. When

a Participant uses one of these facilities, the Plan will pay 90 percent of the contract benefits. The Participant will be responsible for the 10 percent coinsurance.

For hospitals and surgical facilities that are not contracted with Blue Cross at all, the Plan will pay 75 percent of covered services. The Participant is responsible for the remaining 25 percent.

If the physician will be billing a separate fee for a surgical suite for procedures performed in his/her office, the same contracting questions should be posed. Again, Participants can benefit by using contracted facilities that are part of the Prudent Buyer or National networks.

To check the contract status of a facility, please contact Blue Cross in California at 800.888.4825. Outside California, call 800.810.BLUE (2583).

PLAN UPDATE

Updates to Your Summary Plan Description

Volume 12, No. 2

Summer 2002

This Plan Update contains important information about your rights under the Motion Picture Industry Pension and Health Plans and under ERISA. Please keep it with your Summary Plan Description for future reference.

SMOOTH BEHAVIORAL HEALTH SERVICES TRANSITION IS PRIORITY ONE

Effective July 1, 2002, the Motion Picture Industry Health Plan (MPIHP) is now providing mental health and chemical dependency benefits for Active and Retired Participants and their eligible dependents through PacifiCare Behavioral Health (PBH).

Both MPIHP and PBH are committed to a smooth and seamless transition of services, with minimal disruption to patients in care at the time of transition. Patients and their effective treatment are the first priority.

During this transition, patients in Behavioral Health treatment may request an authorization for continued care. If your provider is not a part of the PBH network, PBH will work with the provider to make the appropriate arrangements to transition your care, if needed. Contact PBH within 30 days after the change in coverage.

If your provider is not a member of the PBH network and would like to join, s/he should contact PBH for application information.

For those who wish to take advantage of the comprehensive benefits available through PBH, a complete list of participating providers is included on their website, or simply call their toll-free customer service number anytime, day or night.

Preauthorization for services is required. Except in cases approved under the transition plan or in a true emergency, if you do not use the PBH network of providers and fail to obtain preauthorization, you will not be reimbursed for expenses incurred. Contact PBH through their toll-free number to obtain that authorization.

Outpatient Care benefits for Active and Retired Participants include 30 visits per calendar year. A \$25 co-payment applies for each of the 30 allowed visits/sessions. Inpatient and Alternative Levels of Care, including Residential and Partial/Day Treatment, have no deductible, with 100 percent coverage provided. Active Participants receive up to 50 Inpatient days of treatment per calendar year. Retired Participants are allowed 14 Inpatient days per lifetime.

Please note there will be no change for Participants who have selected one of the Health Maintenance Organizations (HMOs) offered by the Plan. They will continue to use their HMO for mental health and chemical dependency benefits.

Further details of the Mental Health and Chemical Dependency benefits available through PBH are included in the 2002 Active and Retiree Health Plan Summary Plan Descriptions recently mailed out. In addition, you may obtain a complete description of these benefits by contacting PBH for a copy of the Combined Evidence of Coverage and Disclosure Form booklet.

PacifiCare[®]
Behavioral Health

888.661.9141 (toll-free)

www.pbhi.com

HELP WITH DEVELOPMENTAL DISABILITIES AND DISORDERS

PacifiCare Behavioral Health (PBH) can assist families whose lives may be affected by a developmental disability or disorder. Your new PBH benefit covers assessment, evaluation and assistance in getting your child the care needed. For information about these services, contact PBH at 888.661.9141.

Pervasive Developmental Disorders

PBH provides preauthorized coverage for behavioral health care services related to Pervasive Development Disorders such as Autism and Asperger's. This includes assessment, evaluation and ongoing treatment of psychiatric conditions.

continued on page 6



Directory of Topics

Behavioral Health Services Transition

MPIHP Offers Convenient Source for Injectable Drugs

Prescription Medications for Extended Out-of-Country Stays

Telephone Access to MPIHP

In California
818 or 310.769.0007

Outside So. California
888.369.2007

Participant Services Extension 244
7 a.m. to 5 p.m.
Claims Inquiries
Health Benefits

Pension Department Extension 627
8 a.m. to 5 p.m.
Death Benefit
Pension History Print-outs
Refund of Employee Contributions
Retirement
Retirement Benefit Calculation Statements

Eligibility Department Extension 263
8 a.m. to 4:30 p.m.
Address Changes
Adding Dependents
Plan Enrollments

Medical Review Extension 286
8 a.m. to 4:30 p.m.
Case Management
Health Claims
Home Intravenous Therapy
Independent Medical Examination
Nursing Care
Preauthorization
Second Surgical Opinion

MPIHP OFFERS CONVENIENT SOURCE FOR INJECTABLE DRUGS

Participants have access to a new convenient and cost-effective pharmacy benefit beginning August 1, 2002. Through AdvancePCS Specialty Rx™ MPIHP will soon offer a single, reliable source for your injectable drugs and supplies.

Delivered right to your door, AdvanceRx offers competitive pricing and low co-payments.

This full-service specialty pharmacy program is customer-focused. Participants will receive informative care management materials and have telephone access to pharmacists and other health care experts. A convenient claims assistance service and easy ordering through a dedicated, toll-free phone line, round out this comprehensive benefit package.

Simply call 866.295.APRx (2779) after August 1 to get started.

Developmental Disabilities and Disorders

continued from page 5

PacifiCare Behavioral Health will treat formal psychiatric symptoms and disorders through medication management, therapy and family counseling related to behavioral problems.

Your behavioral health benefit does not cover services that are by law the responsibility of Regional Centers or school districts. This coverage also excludes Occupational Therapy, Speech Therapy, clubhouse-type programs that are primarily recreational/social in nature, medical and neurological work-ups, genetic testing, imaging and laboratory studies.

Attention Deficit Hyperactivity Disorder (ADHD)

PBH provides coverage for preauthorized evaluation and assessment of ADHD by a PBH provider, and ongoing medication management and psychotherapy. PBH coverage excludes Continuous Performance Testing as a diagnostic tool, as well as neurofeedback or biofeedback as treatment interventions for ADHD. Imaging studies such as CT, MRI and PET scans are not covered by PBH.

Testing

PBH provides coverage for preauthorized psychiatric testing for the purpose of assessing psychiatric disorders to determine whether treatment is medically necessary. PBH does not cover neuropsychological testing for the purposes of assessing cognitive impairment following stroke or other brain injury. Coverage also excludes testing for Learning Disabilities and academic achievement, as such testing is provided by the school district.

Some or all of the services not covered under your PBH behavioral health benefit may be covered under your medical plan. Please contact MPIHP for more information. 818 or 310.769.0007, Ext. 286.

PRESCRIPTION MEDICATIONS FOR EXTENDED OUT-OF-COUNTRY STAYS

If you will be out of the country for an extended period, it will be necessary to plan ahead for purchase of your prescription medications. If your trip is less than 60 days, simply get a 60-day prescription from your physician and have it filled at your local AdvancePCS pharmacy. Mail order service is another alternative. Since the service is limited to delivery to U.S. addresses only, you must fill your prescription prior to leaving, up to a maximum supply of 90 days.

Remember, if you have recently filled a 60- or 90-day prescription, you may not be eligible to refill that same prescription until the supply is used.

If, however, you will be out of the country for an extended period, there now is another option, with a few simple steps to follow:

- 1) Pay for the required additional prescription(s) yourself at your local AdvancePCS pharmacy.
- 2) Retain the pharmacy receipt(s), which indicates the medication(s) purchased along with the quantity received and dollar amount paid.
- 3) Upon return to the U.S., forward the following information to the West Coast MPIHP Plan Office, Medical Review Department, at P.O. Box 1999, Studio City, California 91614-0999:
 - a. The prescription receipt(s),
 - b. A completed AdvancePCS Standard Claim Form which can be obtained by calling 800.966.5772, and
 - c. A signed statement indicating that the medications were used while you were out of the country.

The Health Plan will instruct AdvancePCS to reimburse the Participant, less any co-payments that apply, as long as the following conditions are met:

- 1) The Participant was eligible for Plan benefits during the time period the medications were used.
- 2) There are no duplicate prescriptions or duplicate quantities of the medications processed for those dates of service.

Planning for Your Future – Are You Ready?

Whether retirement is just around the corner or years away, now is the best time to plan for it. So, if you are an Active, Vested Participant of any age, the Plans encourage you to register today to attend our “Planning for Your Future” seminar.

REGISTRATION FORM

PLANNING FOR YOUR FUTURE

A Seminar for Active, Vested Participants

- Yes, I would like to attend the Planning for Your Future seminar
I understand that seating is on a first-come, first-served basis.

(You must fill in the spouse's portion of this form, even if s/he is not attending) Please write legibly.

Participant's Name _____

Participant's Social Security Number _____ Date of Birth _____

Spouse's Name _____

My spouse is is not a Plan Participant

*(If spouse is also a Plan Participant, a separate form must be completed.
For additional forms, download a copy of this newsletter from our website, www.mpiphp.org,
or call us at 818 or 310.769.0007, Ext. 251)*

Participant's Signature _____

Participant's Daytime Telephone _____

Participant's E-mail Address _____

(If you wish to receive your registration confirmation by E-mail)

**Please mail this registration form and a check (payable to MPIPHP)
in the amount of \$10 per person attending to:**

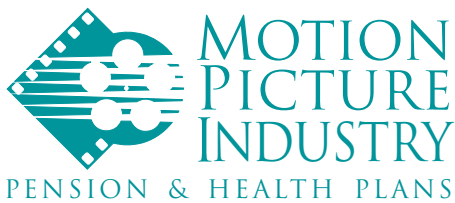
Planning for Your Future Seminar
c/o MPIPHP
P.O. Box 1999
Studio City, CA 91614-0999

- Date:** Saturday, August 17, 2002
Check-in: 7 a.m. (continental breakfast will be provided)
Program: 8 a.m. - Noon (time approximate)
Place: The Sportsmen's Lodge
12833 Ventura Blvd.
Studio City, CA
Parking: \$3.50 per car
Cost: \$10 per person (Non-refundable)

This helpful seminar offers something for every age group. Learn from the experts about planning for your short- and long-term goals, from saving for your child's education to retiring with the pension and health care benefits that will meet your needs. Get help with calculating your current and retirement benefits options, including Social Security, pension, Medicare and supplemental health coverage.

The future you want is in your hands. Take action today. Fill out the form above and mail it to our Studio City Plan Office along with a check for \$10 per registrant. Reservations will not be accepted by phone. For further information, contact us at communications@mpiphp.org.

Remember, space is limited and these seminars always fill up quickly, so early registration will ensure your participation.



Presorted
First Class Mail
U.S. Postage
PAID
Permit No. 355
Inglewood, CA

P.O. Box 1999, Studio City, California 91614-0999

Address Service Requested

Check out our website at
www.mpiphp.org

WE THOUGHT YOU'D LIKE TO KNOW...

This newsletter contains important information about your rights under the Motion Picture Industry Pension and Health Plans and under ERISA. Please keep it with your Summary Plan Description for future reference.

Main Office

11365 Ventura Blvd., P.O. Box 1999
Studio City, CA 91614-0999
Main Phone: 818 or 310.769.0007
Outside So. California: 888.369.2007
Main Fax: 818.508.4714

New York Office

80 Eighth Ave., 14th Floor
New York, NY 10011-5151
Main Phone: 212.627.7232
Main Fax: 212.647.7317

Website: www.mpiphp.org

For Your Benefit is published 4 times a year for Motion Picture Industry Pension and Health Plans Participants.

Please send your comments and suggestions to:
MPIP&HP — Attn: *For Your Benefit*
P.O. Box 1999
Studio City, CA
91614-0999

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Qualifying Periods for Monthly Eligibility

Qualifying Periods		Eligibility Periods	
10/21/01	- 4/20/02	7/1/02	- 12/31/02
11/25/01	- 5/25/02	8/1/02	- 1/31/03
12/23/01	- 6/22/02	9/1/02	- 2/28/03
1/27/02	- 7/20/02	10/1/02	- 3/31/03
2/24/02	- 8/24/02	11/1/02	- 4/30/03
3/24/02	- 9/21/02	12/1/02	- 5/31/03
4/21/02	- 10/26/02	1/1/03	- 6/30/03
5/26/02	- 11/23/02	2/1/03	- 7/31/03
6/23/02	- 12/21/02	3/1/03	- 8/31/03
7/21/02	- 1/25/03	4/1/03	- 9/30/03
8/25/02	- 2/22/03	5/1/03	- 10/31/03
9/22/02	- 3/22/03	6/1/03	- 11/30/03
10/27/02	- 4/19/03	7/1/03	- 12/31/03
11/24/02	- 5/24/03	8/1/03	- 1/31/04
12/22/02	- 6/21/03	9/1/03	- 2/29/04
1/26/03	- 7/26/03	10/1/03	- 3/31/04
2/23/03	- 8/23/03	11/1/03	- 4/30/04
3/23/03	- 9/20/03	12/1/03	- 5/31/04
4/20/03	- 10/25/03	1/1/04	- 6/30/04
5/25/03	- 11/22/03	2/1/04	- 7/31/04
6/22/03	- 12/20/03	3/1/04	- 8/31/04