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Michelle's Law Protects Student Eligibility

The Health Plan provides benefits to your eligible dependents that are age 19 through 22 only if they are attending an accredited school or college as a full-time student, and the Plan Office has received a completed Student Certification Form. Michelle's Law, which amends the Employee Retirement Income Security Act of 1974 (ERISA), prohibits the Plan from terminating coverage for a dependent child due to a medically necessary leave of absence or reduction to part-time student status. If your child suffers a serious illness or injury that causes him or her to lose student status for purposes of coverage under the Plan, please contact the Plan Office. This extension requires written certification by the dependent student's treating physician.

Reminder Of Benefit Modifications Effective 1/1/2010

Below is a brief summary of changes to the Pension and Health Plans, all of which become effective January 1, 2010. For a more detailed explanation of these changes, refer to the Summer 2008 and Summer 2009 editions of Take 2, which are available on the Plans' website: www.sagph.org.

PENSION PLAN CHANGES

Minimum Earnings Requirement For Pension Credit Increases to \$17,000

Effective January 1, 2010, the minimum earnings required to earn a Pension Credit increases from the current \$16,000 to \$17,000 in a calendar year.

New Pension Accrual Rate

Effective January 1, 2010, the pension accrual rate will be reduced from its current 3.5% to 2.0% of covered earnings. This action does not reduce or affect the benefits currently being paid to pensioners and their beneficiaries, nor does it reduce or affect the amount of vested benefits accrued prior to January 1, 2010. The new 2.0% accrual rate applies only to earnings on or after January 1, 2010.

HEALTH PLAN CHANGES

Minimum Earnings Requirement For Health Plan Eligibility Increases

Effective January 1, 2010 the amount of covered earnings required for eligibility in the Health Plan will increase as shown in the chart below. There will be no increase to the number of days of employment for Alternative Eligibility.

Minimum Health Plan Eligibility Requirements for 2010

Eligibility Commencing:	Plan I	Plan II
January 1, April 1, July 1, or October 1, 2010	\$29,250	\$14,350; or 74 days of employment; or \$10,400 if you are at least 40 years of age with 10 years of Earned Eligibility

Reminder Of Benefit Modifications Effective 1/1/2010

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Health Plan Premiums Increase

Effective January 1, 2010, Health Plan premiums will increase as shown in the chart below.

	Effective January 1, 2010
Plan I	\$83/mo or \$249/qtr
Plan II	\$98/mo or \$294/qtr
Plan II age/service	\$125/mo or \$375/qtr
Senior Performers	\$25/mo or \$75/qtr

New Senior Performer Premium

Effective January 1, 2010, all Senior Performers will be charged a premium. The premium is \$25 per month for Senior Performers with at least 20 pension credits or who had at least 10 pension credits as of December 31, 2001 and were at least age 55 or older as of December 31, 2002. Premiums for Senior Performers who have 15 to 19 pension credits and do not meet the grandfather requirements outlined above will remain at 25% of the cost of health coverage. These premiums will also apply to dependents of deceased participants who are covered under the Extended Spousal benefit. If you have Senior Performers or Extended Spousal coverage, you will receive a letter with your premium options in November.

Plan II and Lower Cost Self-Pay Non-California Hospital Coverage Limited To Network Hospitals Only

Effective January 1, 2010, there is no longer any coverage for services rendered at non-network hospitals for Plan II and Lower Cost Self-Pay participants who reside outside California.

\$250 Calendar Year Deductible Added to Mental Health and Chemical Dependency Outpatient Services

Effective January 1, 2010, there is a \$250 calendar year combined deductible for Mental Health and Chemical Dependency Outpatient Services.

Prescription Drug Deductibles Increased

Effective January 1, 2010, the deductibles for the Prescription Drug Benefits increase to \$150 per person/ \$300 per family. The deductibles apply to the Retail Pharmacy Program, Medco by Mail and Accredo, Medco's specialty pharmacy.

Coverage for Sleep Aids Limited to 21 Days Per Month

Effective January 1, 2010, medication prescribed for sleep-aid therapy is limited to a quantity sufficient to treat 21 days per month. Patients requiring medication in excess of this limit will need a prior authorization for possible approval of extended benefits from the Plan Office. Otherwise, you are responsible for the total cost of the medication above the limit.



Coverage Eliminated For Non-Sedating Antihistamines

Effective January 1, 2010, the Health Plan will eliminate coverage on all prescription non-sedating antihistamines. This includes Allegra, Clarinex, Xyzal and all other medications in this class.

Allowable Charges Reduced For Injectable and Infusion Drugs Paid Under The Major Medical Plan

Effective January 1, 2010, the Health Plan will consider charges for these medications up to a maximum of 100% of the Average Wholesale Price (AWP). Oral and topical medications dispensed in a doctor's office are not covered by the Plan.

Notice of Creditable Coverage

Screen Actors Guild – Producers Health Plan
P.O. Box 7830, Burbank, CA 91510-7830

This Notice contains important information about your current prescription drug coverage with the SAG-Producers Health Plan and the Medicare Prescription Drug Plan (PDP) coverage. Read this Notice carefully and keep it in a safe place with your important papers.

Medicare Prescription Drug Coverage (Medicare Part D)

Starting January 1, 2006, prescription drug coverage became available to everyone with Medicare through Medicare Prescription Drug Plans (PDPs). Most people have to pay a premium for Medicare drug coverage. Individuals can enroll in a Medicare PDP when they first become eligible for Medicare and each year from November 15th through December 31st. Individuals leaving employer/union coverage may be eligible for a Special Enrollment Period to sign up for a Medicare PDP.

SAG-Producers Health Plan Prescription Drug Coverage

The Health Plan will continue to provide prescription drug coverage for Medicare eligible participants during 2010. These benefits have been determined to be “creditable coverage” which means that the Health Plan is expected to pay as much in claims for all participants as standard Medicare prescription drug coverage. Because your Health Plan drug coverage is more generous than the standard Medicare drug coverage, you do not need to join a Medicare PDP as long as you have coverage under the Health Plan.

Your Choices and the Consequences

If you do not enroll in a Medicare PDP, you will continue to receive your current prescription drug benefits from the Health Plan as long as you are otherwise eligible for Plan coverage. Remember that the Health Plan also covers hospital and medical benefits. There is no separate premium for prescription drug coverage under the Health Plan.

Key Information

1. Medicare prescription drug coverage became available in 2006 to everyone with Medicare through Medicare Prescription Drug Plans and Medicare Advantage plans that offer prescription drug coverage. All Medicare Prescription Drug Plans (PDPs) provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher premium.
2. The SAG-Producers Health Plan’s existing prescription drug benefits are more generous than the standard Medicare drug benefits except under certain limited circumstances. This means it is considered creditable coverage.
3. You do not need to enroll in a Medicare PDP as long as you have coverage under the SAG-Producers Health Plan. If you do enroll in a Medicare PDP, you will not be eligible for any prescription drug coverage from the SAG-Producers Health Plan.

If you enroll in a Medicare PDP, you will no longer receive any prescription drug coverage from the Health Plan. However, you will continue to receive medical and hospital benefits from the Health Plan as long as you are otherwise eligible for Plan coverage. Remember that for most people there is a monthly premium for Medicare prescription drug coverage. If you enroll in a Medicare PDP and later drop that coverage, you can again receive your prescription drug coverage from the Health Plan, provided you are still otherwise eligible. Your Health Plan prescription drug coverage will be effective the first of the month after your Medicare PDP coverage ends.

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Notice of Creditable Coverage

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Important Note: If you drop or lose coverage with the SAG-Producers Health Plan and do not enroll in a Medicare PDP right away, you may have to pay more to enroll in a Medicare PDP later. If you go 63 days or longer without prescription drug coverage that is as good as Medicare's drug coverage, your monthly Medicare Part D premium will increase by 1% for each month that you did not have that coverage. For example, if you go 19 months without coverage, your premium for Medicare drug coverage will be 19% higher than what you would have paid had you enrolled as soon as you lost your Health Plan coverage. You will have to pay this higher premium for as long as you have Medicare coverage. In addition, you may have to wait until the next enrollment period to enroll in a Medicare PDP.

Keep This Notice

If you enroll in a Medicare PDP, you may be required to provide a copy of this Notice when you enroll to avoid paying a higher premium. This Notice verifies that you have creditable coverage with the SAG-Producers Health Plan so that you are not required to pay the higher premium.

You may request a copy of this Notice at any time by contacting the Plan Office. An updated copy of this Notice will be provided annually and at other times in the future such as before the next period you can enroll in Medicare prescription drug coverage, and if this coverage through the SAG-Producers Health Plan changes.

For More Information

Detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook which you will receive in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans. To get more information, you can:

- Visit www.medicare.gov.
- Call your State Health Insurance Assistance Program (see "Medicare & You" for phone number).
- Call 1-800-MEDICARE (1-800-633-4227).
TTY users should call (1-877-486-2048).

For individuals with limited income and assets, extra help paying for Medicare prescription drug coverage is available. Information about this help is available from the Social Security Administration:

- Visit www.socialsecurity.gov.
- Call 1-800-772-1213 (TTY 1-800-325-0778).

For more information about this Notice or the SAG-Producers Health Plan prescription drug benefits, contact the Plan Office at:

- 1-800-777-4013
- 1-818-954-9400

Benefits under the SAG-Producers Health Plan are not vested or guaranteed. They may be modified, reduced or terminated at any time by the Board of Trustees.

Notice of Availability of HIPAA Privacy Notice

The federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) provides that the Health Plan periodically remind you of your right to receive a copy of the Plan's HIPAA Privacy Notice. This notice explains how your private health insurance information is used by the Plan and your rights under HIPAA. You can find the Plan's HIPAA Privacy Notice on the Plan's website or you may request a copy by contacting the Plan Office.



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**SCREEN ACTORS GUILD-
PRODUCERS PENSION
AND HEALTH PLANS**

PO Box 7830
Burbank, CA 91510-7830



**New Voice Prompts
For Automated
Information Center**
(formerly called Interactive Voice
Response System or IVR)
Effective 11/9/2009

The Automated Information Center (AIC) is available via touch-tone phone 7 days a week, 24 hours a day. Voice prompts direct participants through a menu of options available in the AIC. Please be advised that effective 11/9/2009, the current AIC menu and voice prompts will change. Once you know the new extensions, you can bypass the voice prompts in the future.

PENSION AND HEALTH PLANS DIRECTORY

Burbank Plan Office: (818) 954-9400 or (800) 777-4013
Fax: (818) 953-2525
E-mail address: psd@sagph.org
website: www.sagph.org

IF YOU NEED:ASK FOR:

- Benefit and Eligibility Information.....** Participant Services
- Pension Plan Information** Pension Department,
Ext. 2020
- Information on Medical Claims.....** Participant Services
- Information on Dental Claims**
 - Delta Dental – Member Services..... (800) 846-7418
 - Directories..... (800) 846-7418
- Information on Prescription Drugs**
 - Medco Health..... (800) 903-4728
 - Prescription Pre-Authorizations..... (800) 753-2851
- 24/7 Toll-Free Nurseline** (866) 670-0691
- NEW YORK Plan Office** (212) 599-6010
275 Madison Ave. #1819, New York, NY 10016