

SUMMARY OF MATERIAL MODIFICATIONS

TO: All Covered Plan
Participants

FROM: The Writers' Guild-
Industry Health Fund



This document is a Summary of Material Modification (SMM), intended to notify you of changes to your benefits under the Writers' Guild-Industry Health Fund.

These changes include:

- Coverage for certain medically necessary Transgender Services, which are being added to the Plan effective June 1, 2016. Preauthorization will be required for some services to be covered.

TRANSGENDER SERVICES

The Writers' Guild-Industry Health Fund ("the Fund") will begin to cover new benefits for certain medically necessary Transgender Services beginning June 1, 2016.

Services and supplies provided in connection with gender transition will be covered, when you have been diagnosed with gender identity disorder or gender dysphoria by a physician. This coverage is provided according to the terms and conditions of the Plan that apply to all other covered medical conditions, including medical necessity requirements, utilization management, and exclusions (e.g. cosmetic services).

Coverage includes medically necessary services related to gender transition such as:

- Transgender surgery (also known as gender reassignment surgery);
- Continuous hormone replacement therapy (hormones of the desired gender);
- Laboratory testing to monitor the safety of continuous hormone therapy;
- Diagnosis of, and psychotherapy for, gender identity disorders/dysphoria and associated co-morbid psychiatric diagnoses.

Coverage is provided and payable according to the Plan benefits that applies to that specific service. For example, transgender surgery, if medically necessary and meeting the guidelines of the Plan, would be covered on the same basis as any other covered, medically necessary surgery; hormone therapy would be covered under the plan's prescription drug benefits; psychotherapy would be covered under the mental health benefit. If coverage for a specific service, such as face lift is not included, the service will not be covered.

Not all charges are eligible. Thus, for example, services that are not medically necessary and or services considered cosmetic are excluded.

Examples of cosmetic services or non-covered expenses include, but are not limited to:

1. Blepharoplasty
2. Breast augmentation
3. Breast implants
4. Drugs for hair loss or hair growth
5. Drugs for sexual performance or cosmetic purposes
6. Facial bone reconstruction
7. Face Lift
8. Hair removal/hairplasty
9. Liposuction
10. Lip reduction/enhancement
11. Puberty suppression therapy
12. Rhinoplasty
13. Sperm or gamete procurement for future infertility or storage of sperm, gametes or embryos
14. Treatment received outside the United States
15. Transportation, meals, lodging or similar expenses
16. Voice therapy and voice modification surgery

Surgery related to transgender services (including transgender surgery/gender reassignment surgery) are subject to prior authorization in order for coverage to be provided. Transgender surgeries not pre-authorized by Anthem Blue Cross' Utilization Department will not be covered.

Preauthorization coverage criteria:

1. Transgender surgery must be performed at a facility designated and approved by the Fund and by a qualified provider
2. The treatment plan must conform to Harry Benjamin International Gender Dysphoria standards
3. The treatment plan must conform to the most recent edition of World Professional Association for Transgender Health (WPATH), Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People
4. For surgical intervention, the patient must be 18 years or older
5. Before surgery, the patient must, among other things, complete 12 months of successful continuous full time real-life experience in the desired gender

The above is not an all-inclusive list. Contact the Fund Office for specific and detailed guidelines regarding benefits for treatment of gender identity disorder/gender dysphoria.

For information about these guidelines or to obtain a proper review, have your provider contact Anthem Blue Cross' Utilization Department at (800) 274-7767.

For individuals with gender dysphoria who are not planning reassignment surgery, contact the Fund Office for Plan benefits.

This summary is intended to satisfy the requirement for issuance of a SMM. You should take the time to read this SMM carefully and keep it with the Summary Plan Description ("SPD") that was previously provided to you. If you need another copy of the SPD or if you have any questions regarding this change to the Plan, please contact the Fund Office during normal business hours at: (818) 846-1015 or toll-free (800) 227-7863 or email your questions to: Participantservices@wgaplans.org.