

Writers' Guild-Industry Health Fund Health Benefit Changes

Summary of Material Modification

May 1, 2013

A Message from the Board of Trustees

This document is a Summary of Material Modification (“SMM”) intended to notify you of important changes to certain benefits under the Writers’ Guild-Industry Health Fund (“WGIHF” or “Plans”).

Changes Regarding Vision Care Benefits

The Board of Trustees is pleased to announce the following change to our vision benefits. Effective July 1, 2013, a new vision program, **administered by Davis Vision**, will replace the Plan’s current \$200 Vision benefit¹.

All eligible participants (excluding participants covered under the Low Option Plan) will automatically be enrolled in the new vision program.

Davis Vision will offer to the Writers’ Guild-Industry Health Fund, a nationwide network of more than 35,000 eye care and eyewear providers, including independent optometrists, ophthalmologists and retail providers such as Ocular Institute of California, Empire Vision Center and Wal-Mart/Sam’s Club. A list of participating providers in your immediate area will be included in your welcome kit from Davis Vision.

The vision program offers:

- The broadest array of “paid-in-full” coverage
- Low member out-of-pocket cost
- The highest benefit allowances compared with other standard vision plans
- Total member flexibility to:
 - choose any frame at their provider's office
 - select the most popular lens options at significant savings
 - visit any of their network providers at more than 35,000 points of access (retail or private practice)
- The highest use of “covered-in-full” frame coverage

In mid-June, Davis Vision will send you a Welcome Kit² that will include the following information:

- Davis Vision Participant ID card
- Summary of Vision Benefits, including additional discounted lens options and coatings
- Frequently Asked Questions
- Local Participating Provider Listing
- Davis Vision website registration for WGIHF³

¹ Current Plan’s \$200 benefits apply only to vision services rendered from 1/1/13 through 6/30/13.

² When you receive your welcome kit, be sure to remove your Davis Vision ID card and place it in your wallet.

³ Upon receipt of your Davis Vision ID card you can go to the Davis Vision website, member login to register. You will be able to check eligibility, view vision benefits, see the frame collection that are available through the network providers, print a new paper ID card and locate a Davis Vision network provider by accessing www.davisvision.com.



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To receive services from a Davis Vision network provider:

- Call a network provider to schedule an appointment
- Identify yourself as a Writers' Guild-Industry Health Fund – Davis Vision participant
- Tell the provider's office your participant identification number (WRXA# noted on your ID card)

That's all there is to it. The provider's office will verify your eligibility for services. No claim form (when using a network provider) or the ID card does not need to be presented to the provider to receive benefits.

The chart below outlines the Davis Vision In-Network benefit.

IN-NETWORK BENEFITS⁴	
Eye Examination	Each Calendar Year. Covered in full after \$10 copayment
Eyeglasses (in lieu⁵ of contact lenses)	
Spectacle Lenses	Each Calendar Year. Covered in full For standard single-vision, lined bifocal, or trifocal lenses after \$25 copayment
Frames	Each Calendar Year. Covered in full Any Fashion or Designer from Davis Vision's Collection ⁶ (value up to \$175) OR \$130 retail allowance toward any frame from provider, plus 20% off balance ⁷
Contacts Lenses (in lieu⁵ of eyeglasses)	
Contact Lens Evaluation, Fitting & Follow-up Care	Each Calendar Year Collection Contacts: Covered in full after \$25 copay OR Non Collection Contacts: Standard Contacts: Covered in full after \$25 copay Specialty Contacts ⁸ : \$60 allowance with 15% off balance ⁷ less \$25 copay
Contact Lenses	Each Calendar Year. Covered in full Any contact lenses from Davis Vision's Contact Lens Collection ⁶ OR \$130 retail allowance toward provider supplied contact lenses, plus 15% off balance ⁷

⁴ Vision benefits cannot be split between a network and out-of-network provider.

⁵ Each calendar year, eyeglasses or contacts lens are covered under the vision care benefits and not **both**.

⁶ The Davis Vision Collection is available at most participating independent provider locations. Collection is subject to change. Collection is inclusive of select toric and multifocal contacts.

⁷ Additional discounts not applicable at Walmart or Sam's Club locations.

⁸ Including, but not limited to toric, multifocal and gas permeable contact lenses.



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If at any time a Davis Vision network provider is unable to verify your eligibility for vision benefits, and you believe you are eligible, please contact the Eligibility Department of the Administrative office immediately at (818)846-1015 (follow the menu prompts).

Out-of-Network Benefits

You may receive services from an out-of-network provider, although you will receive the greatest value and maximize your benefit dollars if you select a provider who participates in the network. If you choose an out-of-network provider, you must pay the provider directly for all charges and then submit a claim for reimbursement to:

Vision Care Processing Unit
P.O. Box 1525
Latham, NY 12110

You can obtain a copy of the Vision claim forms from our website at www.wgaplans.org or on-line at www.davisvision.com or call Davis Vision at (800) 999-5431.

Claims for non-network vision care must be filed no later than 12-months after the date of service.

OUT-OF-NETWORK REIMBURSEMENT SCHEDULE⁴
Eye Examination up to \$50 / Frame up to \$70 Spectacle Lenses (per pair) up to: Single Vision \$50, Bifocal/Progressive \$65, Trifocal \$80, Lenticular \$100 Elective Contacts up to \$105, Medically Necessary Contacts up to \$225

Out-of-Network Claim Payment Deadlines

Davis Vision will notify you of its decision to pay or deny your claim within a reasonable period of time appropriate to the circumstances, but no later than 30-days after the receipt of a claim.

Davis Vision reserves the right to extend this 30-day period for a single claim, for up to an additional 15-days, if it determines that the extension is necessary due to matters beyond its control and notifies you prior to the expiration of the initial 30-day period. The notification will explain the circumstances requiring the extension of time and date by which it expects to render a decision. If this extension is necessary due to an incomplete claim form or missing required information, you will be allowed 60-days from the date of notification to provide the necessary information.

Coordination of Benefits

Davis Vision does not coordinate benefits with other vision plans.

Provider Look-Up

Effective May 1, 2013, access to the Provider "Look-Up" only will be available through the Davis Vision website at www.davisvision.com, Client Access, Client Code 4775.

This summary is intended to satisfy the requirement for issuance of a SMM under ERISA. 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.