



Local 839, IATSE The Animation Guild

New Member Orientation:
Health and Pension Plans



OUTLINE

- Basics
 - How, Who and Why of eligibility and participation
- Health Plans options
 - Medical PPO and HMO
 - Dental PPO and HMO
 - Vision
 - Prescription Drugs
- Pension Plans
 - Defined Benefit
 - Individual Account Plan
 - TAG 401(k) Plan



BASICS

- How much do I pay to be in the plan?

Absolutely nothing

Per the agreement with your employer and the IATSE, your employer is making contributions to the Health and Pension plans in your behalf. You will not see a deduction on your paycheck for health or pension contributions.



BASICS

- How do I become eligible? How do I remain eligible?

Eligibility is established after working 600 hours in a Qualifying Period. At a 40 hour week, 600 hours is 15 weeks, or 3.75 months. Once those hours have been worked, participation begins at the beginning of the corresponding Eligibility Period.

Typically, the time it takes for a new artist to start working at a union studio and then become eligible and start participating in the Health Plan is six months.

Eligibility for participation is checked every six months. To remain eligible, you must have worked 400 hours in the previous six month period.



BASICS

- What happens once I leave the union job? What is the Bank of Hours?

Once you're participating in the Plans, every hour worked over the 400 hours to remain eligible is banked for future use. This is the Bank of Hours and is limited to 450 hours.

The Bank of Hours will be used to continue participation in the plan once you no longer have enough hours to automatically continue participation. You will be able to use your Bank to extend participation for a six-month period.

Typically, artists find themselves participating in the MPI Health Plan for up to 14 months after leaving their union job. Upon leaving your union job, be sure to call TAG or MPI to determine how long you will be able to remain covered under MPI Health Plans.



BASICS

- Who in my family is covered?

Your spouse/domestic partner is covered as long as:

- They are not currently employed
- They are currently employed and their employer does not offer health coverage

If your spouse/domestic partner can be covered under their employer, they need to have at least the minimum coverage offered. This is an important cost saving measure and will be checked by the plan when you send in your initial paperwork.

Your dependent children are covered by MPI. Dependent children include step and adopted children. Dependent children have full coverage until age 19 (23 if they are a full-time student). From then, they will continue to have Health and Prescription coverage until 26 due to the Health Care Reform Act.



BASICS

- What is that big packet I received? What do I have to send in?

The packet is the Summary Plan Description (SPD) for the MPI Health Plan. It is important to take the time to go through that booklet and understand what your options and costs are. If you have not received it yet, you can download the SPD from the MPIPHP website here:

http://mpiphp.org/benefits/active_plan/MP_07_SPD_Active.pdf

In the pocket of the cover will be your application forms, the coordination of benefits forms and instructions on how to fill them out. Be sure to follow the instructions carefully and return the forms to MPI as soon as possible.

Most importantly, a supplement is also included that will outline the changes to the plan since the printing of that book.



HEALTH PLAN

- Medical Plans: 1 PPO and 2 HMO
- Dental Plans: 1 PPO and 1 HMO
- Vision coverage through VSP
- Prescription Drug coverage through Medco



HEALTH PLAN

PPO vs. HMO

HMO: Health Maintenance Organization

A Primary Care Physician will be chosen by you. This physician will determine the course of medical treatment within the network. Typically, HMOs represent the more cost effective option of health care to working individuals.

PPO: Preferred Provider Organization

All choices on doctors and visits are made by you. Certain physicians are contracted with the PPO and offer rates mandated by the organization. You have the choice of seeing the physician of your choice. However, choosing one that is a network provider will keep any extra costs from being incurred.



HEALTH PLAN

Medical Plans: 1 PPO and 2 HMO

MPI provides a chart to better inform participants of the options and breakdowns of costs between the health plan coverage choices.

http://animationguild.org/organize/MPIActive_MedDentalComparison2011.pdf



HEALTH PLAN

Medical PPO: MPI/Blue Shield

- \$30 co-pay per visit to doctor
- 90% of Usual and Customary costs covered, 10% passed to participant (In-Network Provider)
- \$1000 out-of-pocket limit per year (excluding co-pay) for all in-network visits (no limit on out-of-network)



HEALTH PLAN

Medical PPO: MPI/Blue Shield MPTF Health Centers

- \$5 per visit
- Eligible to all PPO participants are the eight Health Centers operated by the Motion Picture Television Fund (MPTF)

Burbank	Glendale	La Brea (N. LA)	Woodland Hills
Dreamworks	Valencia	Mission Hills	W. Los Angeles

<http://www.mptvfund.org/page.aspx?pid=389>

- Run like an HMO, these centers offer health care through a general practice physician who refers specialists as needed

HEALTH PLAN

Medical HMO: Kaiser Permanente and Health Net

- \$15 co-pay per visit to doctor
- Most costs covered by the network. Since you will be forced to stay within the network, few extra costs will be incurred.
- For a complete list of extra costs, be sure to check the SPD pages 75-89.



HEALTH PLAN

Dental PPO: Delta Dental PPO

- \$25 Deductible for Individuals / \$50 Deductible for Families – Per Year
- Delta pays 80% of Usual and Customary fees (U/C). 20% of costs passed to you.
- \$2000 maximum expense per year, per person
- Orthodontics
 - Eligible dependent children only
 - 50% of costs covered
 - \$1k lifetime maximum

HEALTH PLAN

Dental HMO: DeltaCare USA

- No deductible costs .. No Out of Pocket costs. All costs are managed by the HMO
- You can only see the dentist assigned to you during the application process. If you need to switch your dentist, you will need to contact Delta.
- Orthodontics
 - \$1,100 for Children, \$1500 for adults.
 - \$250 start-up fee

HEALTH PLAN

PPO to HMO?

You are able to switch from the PPOs to the HMOs and vice-versa. Moving from the HMOs to the PPOs is available at the first of each month. Moving from the PPOs to the HMOs is available each year in July.

In order to switch, you must fill out the Benefit Selection form and fax it to MPI. Its always safe to call and confirm the receipt of your fax after a couple of days.

<http://mpiphp.org/forms/eligibility/eligibility.asp>

Form called: Medical/Dental Plan Selections



HEALTH PLAN

VSP: Vision Service Provider

- One standard exam per year. \$20 co-pay per visit.
- Lenses once per year. Frames once every other year.
 - \$145 allowance toward purchase
 - 20% discount on remaining cost
- Contact Lenses
 - Once a year in lieu of Frames and Lenses
 - \$105 allowance for lenses and fitting exam
 - If prescribed by doctor, all costs are covered



HEALTH PLAN

Medco: Prescription Drug coverage

- Largest Pharmacy Benefit Manager in United States. Contracts with familiar chain pharmacies you may already utilize (Walgreens, CVS, Rite-Aid, etc). Call ahead to confirm participation with Medco.
- Present card to pharmacists to receive Medco discounted costs
 - \$10 Generic
 - \$40 Brand Name
- On-going prescriptions will only be filled for up to 90 days at a pharmacy. After 90 days, participants must use Medco-By-Mail



HEALTH PLAN

Medco: Prescription Drug coverage Medco-By-Mail

- To be used for regular, ongoing prescription drug needs
- After registering with Medco's website and creating a user account, submit prescriptions for your ongoing drug need online (made out for a 90 days supply)
- Medco mails the medication and charges your credit card
- Costs
 - \$25 Generic
 - \$100 Brand Name



Pension Plans

PENSION PLANS

As a member of the IATSE, you automatically participate in two Pension Plans funded by your employer per the contract that defines the basic standards and conditions of your employment. Your employer funds two plans made available to you once you retire. The longer you work under a union contract, the more contributions your pension will receive and the more benefits you will have.

The two plans you are participating in are the Defined Benefit Plan (DB) and the Individual Account Plan (IAP).

As a member of The Animation Guild, you are eligible to participate in the Guild's 401(k) Plan. Participation is optional and available at most contracted studios. The Guild's 401(k) plan offers you the opportunity to put extra money away for retirement while giving you the option of directing how and where that money is invested.



PENSION PLANS

Defined Benefit Plan

The Defined Benefit (DB) takes five pension years to vest. A pension year is one calendar year where you work at least 400 hours under a union contract.

Upon your retirement, the DB acts as an annuity plan and will pay you a fixed sum each month. That sum is determined by the amount of hours and years you've worked under union jurisdiction.

Currently, it is estimated that someone who has worked 21 years consistently at union shops and retires will receive monthly checks that total approximately \$1700.



PENSION PLANS

Individual Account Plan

The Individual Account Plan (IAP) takes one pension year to vest. Upon your retirement, the IAP acts like a 401(k) plan in that a sum of pre-tax money will be made available to you. That sum will equal all contributions made plus any income earned through the investments.

IAP accounts are funded at 30.4 cents per hour worked as well as 6% of the contracted scale wage per job classification. Typically, this equals \$100 week where the member works a full 40-hour week.



PENSION PLANS

Pension Plan Management

The DB and IAP are managed by the Motion Picture Industry Pension Plan. The Plan has approximately \$5 Billion under investment. 60% invested in bonds and fixed instruments. 40% invested in stocks, real estate and alternate instruments. The MPIPHP Board of Directors and contracted investment managers oversee the allocation of plan assets.

You will receive annual statements from the Pension Plan that will breakdown contributions and dividend earnings of your Pension Fund over the last year.



PENSION PLANS

The Animation Guild 401(k)

IATSE Local 839, The Animation Guild, makes their 401(k) plan available to members who are working under a union contract for at least 90 days. This is a no-match plan where you can invest between 2% and 40% of your gross earnings per paycheck up to the federal limit of \$16,500 per year.

The Guild's 401(k) is managed by Mass Mutual with \$140 million in assets. Once your account is established and funding has begun, you will be able to create an account on their website and review and manage your investments directly.



PENSION PLANS

The Animation Guild 401(k)

The plan has a variety of funds to choose from. There are equity and index funds that range from small to large capitalization. There is also a small selection of international funds as well as the PIMCO Total Return Bond fund.

There are also a selection of the Vanguard Target Retirement funds. These funds include a variety of equity/bond mixes that start out aggressive and move to a more conservative position over time as you get closer to retirement.



PENSION PLANS

The Animation Guild 401(k)

All of the pertinent documents needed to learn about the 401(k) plan can be found on the Guild's website at this link:

<http://animationguild.org/401k-forms/>

- Fill out the Enrollment form
 - All information at the top (Name, Address, City, State, Zip)
 - Indicate the amount you want deposited in your 401(k) as a percentage of your gross earnings
 - Choose which funds you want to participate in by indicating how much of your deposits you want added to each fund as a percentage
 - If you are interested in only investing in one Vanguard Target Fund, check the appropriate box on the second page of the enrollment form
 - Sign and date the form and fax it to us at (818) 843-0300
- Be sure to fill out and include the Beneficiary Form

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Any Questions, Any Concerns, Anytime ...

Steve Hulett
shulett@animationguild.org

Lyn Manta
lyn@animationguild.org

Steve Kaplan
skaplan@animationguild.org

1105 N. Hollywood Way
Burbank, CA 91505
818-845-7500
www.animationguild.org