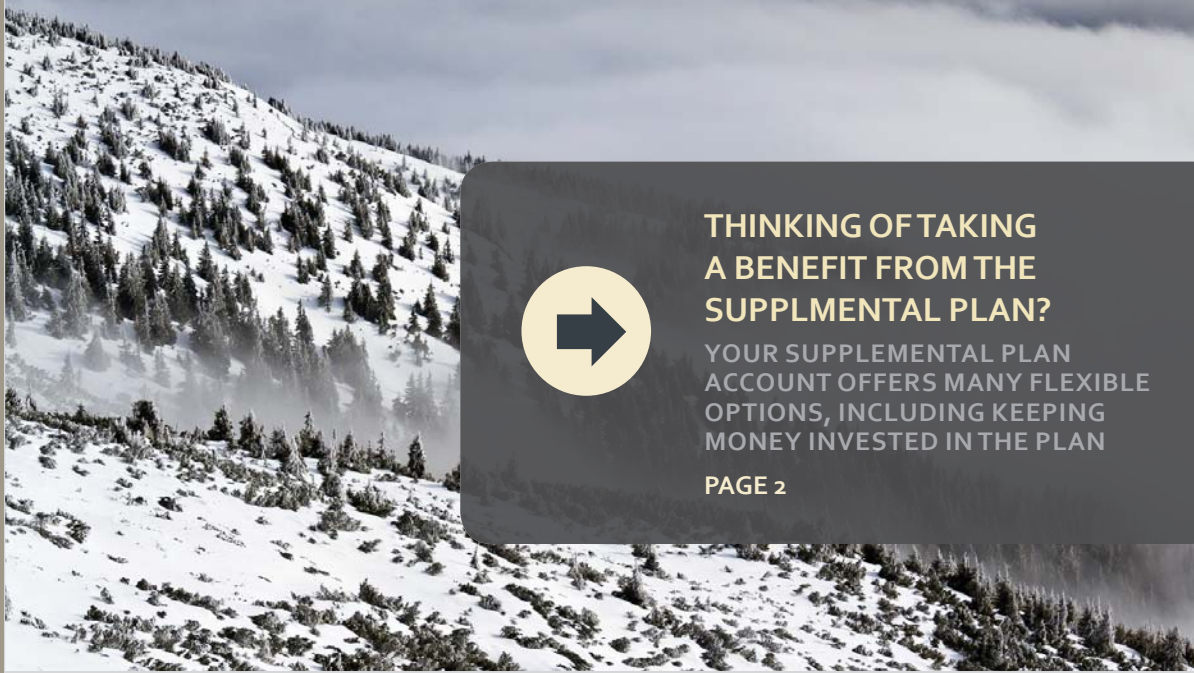


WINTER 2015

Spotlight on Benefits is published up to four times a year for participants in the DGA-Producer Pension and Health Plans.



THINKING OF TAKING A BENEFIT FROM THE SUPPLEMENTAL PLAN?

YOUR SUPPLEMENTAL PLAN ACCOUNT OFFERS MANY FLEXIBLE OPTIONS, INCLUDING KEEPING MONEY INVESTED IN THE PLAN

PAGE 2

DGA-PRODUCER
PENSION & HEALTH

Spotlight ON BENEFITS

EXPRESS SCRIPTS UPDATES ITS LIST OF COVERED MEDICATIONS

Effective January 1, 2016, certain medications may be excluded from Express Scripts' list of covered medications.

PAGE 2

WOMEN'S HEALTH AND CANCER RIGHTS NOTICE

Women who have had a mastectomy or expect to have one are entitled to special benefits under the law.

BACK COVER

New Forms Required by the Affordable Care Act to be Mailed in January 2016

Early next year, you will receive new forms that are required by the Internal Revenue Service under the Affordable Care Act. These forms provide information regarding your health coverage for 2015 and are used to determine compliance with the Affordable Care Act's requirements.

The table on page 3 provides an overview of these forms. Keep in mind that more than one form may apply to you, and in some cases, none of them will.

If you have any questions about these forms, you can consult your tax professional. You can also call our Participant Services at (877) 866-2200 ext. 401 or email questions to ACAQuestions@dgaplans.org.

CONTINUED ON PAGE 3

Express Scripts Updates Its List of Covered Medications

Express Scripts, the Health Plan's prescription drug benefit manager, has revised its list of covered medications in 16 drug categories, effective January 1, 2016. Changes to the list, called the National Preferred Formulary, affect which medications will be covered under the Health Plan and how much you pay out of pocket for certain prescriptions.

The list is available at www.express-scripts.com/2016drugs.

Express Scripts routinely reviews its list of covered medications to ensure access to safe, effective treatments in all drug classes. As new medications enter the market, they are reviewed in consultation with an independent group of physicians to determine which provide significant health benefits beyond other available options.

Certain medications may be excluded from the formulary when clinically equivalent alternatives are available and offer significant cost savings. In some cases, medications that were not covered last year will be covered this year.

If you are currently taking a medication that is excluded from the updated list, Express Scripts should have already notified you by mail, so that you can work with your doctor to find a covered alternative that is proven to be as effective as the excluded medication.

For information detailing whether any of your current prescriptions will be affected by this change, please log on to your Express Scripts account at express-scripts.com/covered. If you have any questions, please call Express Scripts at (800) 987-7828. **PH**

Supplemental Plan's Flexible Benefit Options Allow Access to Your Funds Plus the Ability to Keep the Balance Invested

Your Supplemental Pension Plan account offers a variety of flexible payment options when you take a benefit—including the option to leave invested in the Plan any funds you don't need. Keeping money in the Supplemental Plan allows you to take greater advantage of the Plan's many benefits, including these:

Performance: The most important measure of any retirement account is its ability to grow your investment savings. Over the past 20 years, the Supplemental Plan had an average annual return of 7.2 percent.

Diverse Portfolio: The Supplemental Plan features a variety of investments, including domestic and international stocks, bonds and real estate. The Plan's portfolio also includes alternative vehicles not typically available to individuals.

No Additional Fees: The Supplemental Plan charges no commissions or loads. You are not charged any fees beyond the costs of administering the fund, which includes fees paid to our investment managers.

Experienced Oversight: The Supplemental Plan benefits from the experienced oversight of the Finance Committee of the Pension Plans' Board of Trustees, in consultation with our independent pension consultant and a team of investment professionals. The Finance Committee, which works solely for the benefit of Plan participants, seeks to maximize returns and reduce risk through a well-diversified portfolio.

Less for you to manage: In addition to your existing account funds, the Supplemental Plan accepts funds from your other qualified retirement accounts like the Basic Plan's lump sum benefit, IRAs, 401(k)s, and other pension plans. This allows you to consolidate your retirement funds into one convenient location and provides all the same benefits as keeping your Supplemental Plan balance invested.

To discuss your options by phone with a Pension Administrator or to schedule a Skype meeting, call us (877) 866-2200.

PH

New Forms Required by the Affordable Care Act to be Mailed in January 2016

	FORM 1095-A	FORM 1095-B	FORM 1095-C
Who receives it	If you got health coverage through the Health Insurance Marketplace	If you had non-Marketplace health coverage at any time during the year	If you worked full-time for one or more months out of the past year for an employer with at least 50 full-time employees
Who sends it	Insurance providers with whom you had Marketplace health coverage	Insurance providers with whom you had non-Marketplace health coverage If you had DGA–Producer Health Plan coverage in 2015, you will receive a Form 1095-B from the Health Plan.	Employers required by law to offer health coverage to their full-time employees. Generally, employers with at least 50 full-time employees.
What purpose does it serve	Identifies which months during the past year you and your dependents had Marketplace health coverage. The IRS will use this to determine the amount of government health coverage subsidy you should have received.	Identifies which months during the past year you and your dependents had non-Marketplace, minimum essential health coverage (as defined by the Affordable Care Act). The IRS will use this to determine if you must pay a penalty for not having health coverage.	Identifies which months during the past year that your employer offered you coverage as a full-time employee and whether you chose to participate. The IRS will use this to determine which employers are offering minimum essential health coverage (as defined by the Affordable Care Act) so that fines can be assessed against those that do not.
How many to expect	One from each insurance provider with whom you had Marketplace coverage during the past year	One from each insurance provider with whom you had non-Marketplace coverage during the past year	One from each qualifying employer for whom you worked full time for one or more months during the past year
When to expect them	In most states, Forms 1095-A, -B and -C must be sent by the end of January.		
What to do if you do not receive the form	If you do not receive a Form 1095-A from a Marketplace insurance provider, you will need to contact that insurer directly.	If you had DGA–Producer Health Plan coverage during 2015 and do not receive a Form 1095-B or have questions about the form, call Participant Services at (877) 866-2200 ext. 401 or email us at ACAQuestions@dgaplans.org . To request a Form 1095-B for another insurance provider, you should contact the insurer directly.	If you do not receive a Form 1095-C from an employer and believe you should, you will need to contact that employer directly. PH

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PENSION & HEALTH**

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Women's Health and Cancer Rights

Women who have had a mastectomy or expect to have one may be entitled to special benefits under the Women's Health and Cancer Rights Act of 1998. The Health Plan provides several important benefits to help women fighting breast cancer.

The following notice is made on an annual basis:

The Health Plan provides medical and surgical benefits for certain types of reconstructive surgery in connection with a mastectomy. This covers reconstruction of the breast on which the mastectomy was performed, surgery on the other breast to produce a symmetrical appearance, and prostheses and physical complications of all stages of mastectomy, including lymphedemas.

If you have any questions, please contact the Participant Services Department at (323) 866-2200, Extension 401 or toll-free at (877) 866-2200, Extension 401. **PH**

Required Notices Included With This Issue

The DGA-Producer Pension and Health Plans are required to distribute the following notices (included in this newsletter) to all Pension and Health Plan participants:

- ▶ The Summary Annual Reports for the DGA-Producer Supplemental Pension Plan and the DGA-Producer Health Plan are distributed to all Pension and Health Plan participants at the end of the each year.
- ▶ The second notice is a 204(h) notice for the Basic Plan.

Refer to the enclosed notices for further details. **PH**



5055 Wilshire Blvd, Suite 600
Los Angeles, California 90036

Toll-Free (877) 866-2200
www.dgaplans.org

Summary Annual Reports for the Directors Guild of America—Producer Pension and Health Plans

Summary Annual Report for Directors Guild of America—Producer Pension Plan Supplemental Benefit Plan

This is a summary of the annual report for the Directors Guild of America - Producer Pension Plan Supplemental Benefit Plan, E.I.N. 95-6027308, Plan No. 002, for the year ended December 31, 2014. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Basic Financial Statement

Benefits under the plan are provided through a trust fund or arrangements providing benefits partially through annuity contracts. Plan expenses were \$70,582,803. These expenses included \$11,006,213 in administrative expenses and \$59,576,590 in benefits paid to or for participants and beneficiaries. A total of 21,405 persons were participants in or beneficiaries of the plan at the end of the plan year, although not all of these persons had yet earned the right to receive benefits.

The value of plan assets, after subtracting liabilities of the plan, was \$1,530,060,255 as of December 31, 2014, compared to \$1,441,902,037 as of January 1, 2014. During the plan year, the plan experienced an increase in its net assets of \$88,158,218. This increase includes unrealized appreciation or depreciation in the value of plan assets; that is, the difference between the value of the plan's assets at the end of the year and the value of the assets at the beginning of the year, or the cost of assets acquired during the year. The plan had total income of \$158,741,021 including employer contributions of \$31,448,994, participant contributions of \$22,644,161, rollovers of \$17,083,684, gains of \$26,045,000 from the sale of assets, earnings from investments of \$54,261,156 and other income of \$7,258,026.

Your Rights to Additional Information

You have the right to receive copies of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- 1) An independent auditor's report;
- 2) financial information and information on payments to service providers;
- 3) assets held for investment;
- 4) transactions in excess of 5% of the plan assets; and
- 5) information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain copies of the full annual report, or any part thereof, write or call the office of the Directors Guild of America - Producer Pension and Health Plans, 5055 Wilshire Boulevard, Suite 600, Los Angeles, California 90036, or call (323) 866-2200. The charge to cover copying costs will be \$15.00 for the full annual report, or \$.25 per page for any parts thereof.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these statements and accompanying notes will be included as part of that report. The charges to cover copying costs given above do not include charges for the copying of these portions of the reports because these portions are furnished without charge.

You also have the legally protected right to examine the annual reports at the main office of the plan (5055 Wilshire Boulevard, Suite 600, Los Angeles, California 90036) and at the U.S. Department of Labor in Washington, D.C., or to obtain copies from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.



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Los Angeles, California 90036

Toll-Free (877) 866-2200
www.dgaplans.org

Summary Annual Reports for the Directors Guild of America–Producer Pension and Health Plans

Summary Annual Report for Directors Guild of America–Producer Health Plan

This is a summary of the annual report of the Directors Guild of America - Producer Health Plan, E.I.N. 23-7067289, Plan No. 501, for the year ended December 31, 2014. The annual report has been filed with the Employee Benefits Security Administration, U.S. Department of Labor, as required under the Employee Retirement Income Security Act of 1974 (ERISA).

Insurance Information

The Plan has contracts with Health Net, Reliastar Life Insurance Company and Vision Service Plan to pay certain benefits incurred under the terms of the plan. The total premiums paid for the plan year ended December 31, 2014 were \$1,686,109.

Because they are so called “experience-rated” contracts, the premium costs are affected by, among other things, the number and size of claims. Of the total insurance premiums paid for the plan year ended December 31, 2014, the premiums paid under such “experience rated” contracts were \$700,578 and the total benefit claims paid under these experience-rated contracts during the plan year was \$634,008.

Basic Financial Statement

The value of Plan assets, after subtracting liabilities of the Plan, was a deficit of \$397,453 as of December 31, 2014, compared to a deficit of \$2,901,685 as of January 1, 2014. During the Plan year, the Plan experienced an increase in its net assets of \$2,504,232. This increase includes unrealized appreciation and depreciation in the value of Plan assets; that is, the difference between the value of the Plan’s assets at the end of the year and the value of the assets at the beginning of the year or the cost of assets acquired during the year. During the Plan year, the Plan had total income of \$132,386,802 including employer contributions of \$109,271,568, participant contributions of \$10,928,742, gains of \$2,524,001 from the sale of assets, earnings from investments of \$9,649,657 and other income of \$12,834.

Plan expenses were \$129,882,570. These expenses included \$5,290,705 in administrative expenses and \$124,591,865 in benefits paid to or for participants and beneficiaries.

Your Rights to Additional Information

You have the right to receive copies of the full annual report, or any part thereof, on request. The items listed below are included in that report:

- 1) An independent auditor's report;
- 2) financial information and information on payments to service providers;
- 3) assets held for investment;
- 4) transactions in excess of 5% of the plan assets;
- 5) insurance information, including sales commissions paid by insurance carriers; and
- 6) information regarding any common or collective trusts, pooled separate accounts, master trusts or 103-12 investment entities in which the plan participates.

To obtain copies of the full annual report, or any part thereof, write or call the office of the Directors Guild of America - Producer Pension and Health Plans, 5055 Wilshire Boulevard, Suite 600, Los Angeles, California 90036, or call (323) 866-2200. The charge to cover copying costs will be \$15.00 for the full annual report, or \$.25 per page for any parts thereof.

You also have the right to receive from the plan administrator, on request and at no charge, a statement of the assets and liabilities of the plan and accompanying notes, or a statement of income and expenses of the plan and accompanying notes, or both. If you request a copy of the full annual report from the plan administrator, these statements and accompanying notes will be included as part of that report. The charges to cover copying costs given above do not include charges for the copying of these portions of the reports because these portions are furnished without charge.

You also have the legally protected right to examine the annual reports at the main office of the plan (5055 Wilshire Boulevard, Suite 600, Los Angeles, California 90036) and at the U.S. Department of Labor in Washington, D.C., or to obtain copies from the U.S. Department of Labor upon payment of copying costs. Requests to the Department should be addressed to: Public Disclosure Room, Room N1513, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.



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**DIRECTORS GUILD OF AMERICA-PRODUCER PENSION PLANS
BASIC BENEFIT PLAN (THE "PLAN")**

**NOTICE TO PLAN PARTICIPANTS, THEIR ALTERNATE PAYEES, EACH EMPLOYEE ORGANIZATION, AND
CONTRIBUTING EMPLOYERS**

The purpose of this notice is to advise you of important changes to certain benefits you receive as a Participant in the Directors Guild of America - Producer Pension Plans Basic Benefit Plan (the "Plan"). Capitalized terms in this Notice have the same meaning as in the Pension Plans Booklet and its updates.

Effective January 1, 2016, the following change will be made to the Plan.

CREDITED SERVICE MONTH (CSM) EARNINGS REQUIREMENT.

Under the old rule of the Plan, the earnings requirement for CSMs in the Basic Pension Plan was one CSM accrued per \$3,000.00 in earnings up to a maximum of 12 CSMs for earnings of \$36,000.00 or more in one calendar year. Effective January 1, 2016 the new earnings requirement to earn one CSM in the Basic Pension Plan is \$3,200.00. As a result, \$38,400.00 or more in covered earnings during a calendar year will result in earning the maximum 12 CSMs during that year.

This change is effective only for CSMs earned after December 31, 2015. There is no change to your CSMs earned as of December 31, 2015.

The following are examples of how the change in the earnings requirement may affect you. Each example assumes that the Participant is working under a DGA collective bargaining agreement.

EXAMPLE 1

Participant A is paid a total of \$33,000.00 in covered earnings during the calendar year 2016. Participant A receives 10 CSMs for 2016. Under the provisions of the prior Plan, Participant A would have earned 11 CSMs for 2016.

EXAMPLE 2

Participant B is paid a total of \$50,000.00 in covered earnings during the calendar year 2016. Participant B receives 12 CSMs for 2016. Under the provisions of the prior Plan, Participant B would also have earned 12 CSMs for 2016.

It is important to note that your Pension benefits accrued to date are protected by law and cannot be decreased.

If you should have any questions regarding this change to the Plan, please contact the Pension Department at (323)866-2200 extension 404.

Dated: December 1, 2015

This notice is being provided to you in accordance with section 204(h) of the Employee Retirement Income Security Act of 1974, as amended ("ERISA") and section 4980F of the Internal Revenue Code of 1986, as amended, and is provided to all affected plan participants and alternate payees, employee organizations and contributing employers. This notice also constitutes your summary of material modifications as required by section 104(b) of ERISA and should be kept with your copy of the Plan's summary plan description and other important plan documents.