|  |  |  |  |
| --- | --- | --- | --- |
| **PARTICIPANT:** | {stdMbrFullNameInProperCase} | **YEARS:** | {QYrsRH} |
| **MPID:** | {stdMbrParticipantMPID} | **HOURS:** | {CHrsRH} |
|  |

**THIS NOTICE CONCERNS YOUR**

**MOTION PICTURE INDUSTRY RETIREE HEALTH PLAN (“Retiree Health Plan”) BENEFITS**

{x if bstrHealthEligibleFlag = “Y”}

**MPI records reflect that you have met the requirements for Retiree Health Plan benefits.**

{x else}

**In order to qualify for Retiree Health Plan coverage, you must have at least (a) 20 Qualified Years and 20,000 Credited Hours; or (b) 15 Qualified Years and 20,000 Credited Hours (provided you have at least 3 Qualified Years after the year you turn age 40, and at least 1 Qualified Year in any of the Plan years 2000 through 2015.). According to our records you have not met the requirements for Retiree Health Benefits.**

{x endif}

**Medicare Enrollment Requirement**

When you, your spouse, or any dependent becomes eligible for Medicare benefits due to reaching age 65 or upon disability, you and your Medicare eligible dependent must enroll through the Social Security Administration (SSA) in **Medicare Part A and Part B** benefits and maintain them for your lifetime. Medicare Part A provides free inpatient hospital benefits. Medicare Part B requires payment of a premium and covers necessary doctor’s services, outpatient hospital services, and other medical services and supplies not covered by Part A.

In cases of disability, you generally become eligible for Medicare two years after your date of entitlement for SSA disability benefits (this is not the date that you receive your first SSA disability payment, this is generally 5 months after your disability onset date as determined by SSA). However, in certain cases, you might become Medicare eligible before the two-year period.

**Important! You and any Medicare eligible dependents must enroll in Medicare**

**Part A and Part B at the time you become eligible.**

If you participate in an HMO (Kaiser or HealthNet), you and your Medicare eligible dependent must notify your HMO three months prior to becoming Medicare eligible.

No benefits will be payable under the Retiree Health Plan for eligible Medicare benefits that are not paid because you or your Medicare eligible dependent did not enroll, qualify, or submit claims for Medicare Parts A and B coverage.

For more information about Medicare’s Coordination of Benefits policy, please refer to your *Summary Plan Description*, or email MPI’s Participant Services Center at service@mpiphp.org or call toll-free (855) ASK-4MPI between 8 a.m. and 5 p.m. Pacific Time, Monday through Friday.

**Social Security Administration Toll-Free Number is (800) 772 –1213.**

**ACKNOWLEDGEMENT**

I acknowledge that I understand the above Medicare enrollment requirement. I understand that when I become eligible for Medicare Part A and Part B, Medicare will become my primary payer for health care and the Retiree Health Plan will not pay for benefits until I enroll.

Participant’s Signature Date

Spouse’s Signature Date