



Dear MUST Plan Participant:

We are pleased to provide you with this updated MUST Summary Plan Description, which summarizes benefits of the Plan as of July 1, 2009. This document can also be found on the MUST Web site (www.mustbenefits.org) under "Benefit Plans".

We recommend you become familiar with these benefits before incurring any medical expenses. To aid in the process, we have included a summary of significant Plan amendments effective this Benefit Period on the following page.

The information contained in this Summary Plan Description contains references and general statements regarding the Family Medical Leave Act (FMLA), Consolidated Omnibus Budget Reconciliation (COBRA), Uniformed Services Employment and Reemployment Rights Act (USERRA), and Qualified Medical Support Orders (QMCSOs). This document is not intended to be, and should not be relied upon as, complete legal information about those subjects. Members and Member Groups should consult their own legal counsel regarding these matters.

If you have specific questions regarding coverage or benefits, please call MUST Customer Service at 1-800-437-8500.

Sincerely,

Robert J. Robinson
Chief Executive Officer

Significant Changes for 2009-2010 Benefit Period

Acupuncture	Acupuncture services added to Chiropractic Benefit with maximum number of combined visits lowered from 35 to 25 per Benefit Period. Language changes under <i>Accidental Injury Benefit</i> and <i>Medical Benefit Exclusions</i> sections reflect the change.
Virtual Colonoscopy	Computed Tomographic Colonography (Virtual Colonoscopy) added to Preventive Benefit for members age 50 and older. Change found in <i>Medical Benefits</i> section.
Dental Care	Change to the <i>Medical Benefits</i> section details allowances for dental care for damages that are the result of an accident. The <i>General Plan Exclusions and Limitations</i> section outlines clarified limitations for treatments of conditions such as temporomandibular joint dysfunction.
Change from UCR to MEE	Payment of claims now subject to Maximum Eligible Expense (MEE) rather than Usual Customary, and Reasonable (UCR) charge provisions. Changes made throughout document with detailed definition added under <i>General Definitions</i> .
Travel Benefit	Travel Benefit provisions are restricted for companion travel and other charges. Changes found in <i>Medical Benefits</i> and <i>General Plan Exclusions and Limitations</i> sections.
Dependent Eligibility	In response to the Children's Health Insurance Program Reauthorization Act of 2009, both the <i>Eligibility Provisions</i> and <i>Effective Date of Coverage</i> sections reflect changes regarding dependent eligibility. The former removes stipulations about student status while the latter adds language about special enrollment rights when CHIP-related coverage is terminated.
Newborn Coverage	<i>Effective Date of Coverage</i> section details new provisions for automatic newborn infant coverage.
ARRA	The <i>Continuation Coverage After Termination</i> section contains the terms of a new governmental COBRA subsidy.
Specialty Drugs	Explanation and terms of coverage for specialty drugs can be found in the <i>Pharmacy Benefits</i> section.
Quantity Limits on Drugs	The <i>Pharmacy Benefits</i> section provides a chart for viewing quantity limits on specific drugs that do not follow standard Pharmacy Benefit provisions.
Self-administrable Oral or Injectable Drugs	Restrictions placed on payment of targeted oral and injectable specialty drugs that can be self-administered as opposed to being administered in the provider's office. Change found in the <i>Medical Benefit Exclusions</i> section with language in <i>Medical Benefits</i> section reflecting the change.