ADMINISTRATION OFFICE

4th DISTRICT REW HEALTH FUND

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IMPORTANT NOTICE ABOUT CHANGES TO THE PLAN

June 1, 2011

This Notice explains important changes that are being made to the 4th District IBEW Health Plan. The changes to the Plan described in this Notice are effective for claims incurred, based on date of service, on and after June 1, 2011. You are urged to carefully review this Notice and address any questions to the Benefit Office or the Board of Trustees. This Notice should be kept with your records of Plan activities.

Changes Required under the Patient Protection and Affordable Care Act

Benefit changes adopted by the Trustees effective June 1, 2011 result in the loss of "grandfathered" status as detailed in the Patient Protection and Affordable Care Act. As a result, the following additional changes are required.

Self-Funded Schedule of Benefits – page 2.1

The Comprehensive Major Medical Benefit summary is amended to delete item 2. in its entirety and replaced with the following:

2. Plan Payment Factors

- a. For expenses due to mental infirmity
 or functional nervous disorders,
 other than as an inpatient or for
 convulsive therapy......50% of the reasonable
 and customary cost
- b. For all other covered charges:

In-Network Charges and All Emergency Medical Care......80%
Out-of-Network Charges......60%
(Charges for chiropractic manipulations and treatments are subject to a maximum benefit of \$500 per calendar year per individual.)

Dependent Definition - page 2.10

The first paragraph of this definition is deleted in its entirety and replaced with the following:

Dependent-The term "dependent" means your spouse provided you are not legally separated or divorced. Your "dependent" also means your children: 1) who are considered disabled under the terms of the Plan; or 2) who are less than 26 years of age.

(The exception for children who are eligible for other employer-sponsored health coverage no longer applies. Enrolled children less than age 26 are eligible, regardless of employment status.)