

**IMPORTANT NOTICE CONCERNING CHANGES TO THE**  
**4<sup>TH</sup> DISTRICT IBEW HEALTH FUND**

**Flexible Choice Plan**

This Summary of Material Modification (SMM) is being provided to inform you of important changes to the 4<sup>th</sup> District IBEW Health Plan (the "Plan"). Please take the time to read this notice carefully and keep it with your records. If you have any questions regarding these changes, please contact the Fund Office.

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**Effective February 1, 2015**, the section entitled "Vision Benefit" on page 2.39 of the Summary Plan Description is amended to replace the current language contained in the first section with the following:

**VISION BENEFIT  
ACTIVES, RETIREES AND DEPENDENT ONLY CLASSES**

This program is administered by Vision Service Plan (VSP).

Under this plan you may use any vision provider to obtain coverage for you and your eligible dependents. However by using a participating VSP provider your benefits are greatly improved. VSP has negotiated discounts with vision providers throughout your area and the entire U.S. VSP providers have agreed to accept discounted fees for exam services and offer lenses and frames at significant discounts.

Each eligible participant and their covered dependents are entitled to one vision examination each calendar year.

The benefit entitles you to a paid in full exam.

For NON-PANEL providers, you will be required to pay the provider retail charges at the time of service and VSP will reimburse you up to \$30 for the cost of an exam

The balance of the language in the Vision Benefit provision remains unchanged.