



BENEFITS UPDATE

July 2015

Changes to your Health Care Benefits, Effective as of July 1, 2015

The Trustees have made the following important changes to the Electrical Insurance Trustees Health and Welfare Plan for Communication Members ("Plan") as described in the Summary Plan Description for the Plan, dated as of January 1, 2008.

This Benefits Update supplements the information contained in that Summary Plan Description.

Please keep these documents together for your records and future reference.

If you have any questions about the benefit changes described in this Benefits Update, please contact the EIT Benefit Funds Office at 312-782-5442.

Prescription

In-Network, Out-of-Pocket Maximum

The Trustees have added an annual maximum out-of-pocket limit ("MOOP") for in-network prescription drugs. This means that once you reach the prescription drug MOOP in a calendar year, you will not have to pay any prescription drug copayments for the remainder of that calendar year.

The annual in-network prescription drug MOOP will be determined by the Fund Office at the beginning of each Plan year. This MOOP is calculated by subtracting the Plan's current annual in-network medical maximum out-of-pocket limit from the annual limitation for out-of-pocket maximums under the Affordable Care Act ("Act").

For individual and family coverage, your annual in-network prescription drug MOOP for the Plan year beginning July 1, 2015 was determined as follows:

$$\text{\$6,600 (Act MOOP)} - \text{\$3,000 (Plan Medical MOOP)} = \text{\$3,600.00}$$

Medical

Definition of Essential Health Benefits

The Trustees have chosen to adopt the Illinois benchmark plan's definition of Essential Health Benefits for the Plan.

Health Reimbursement Arrangement (HRA)

As you know, the Electrical Joint Arbitration Board and the Board of Trustees reallocated the \$2.50 hourly contribution from the HRA Plan to Pension Plan No. 5 beginning June 1, 2014.

As of July 1, 2014, your HRA account is no longer subject to the administrative expenses and fees associated with maintaining your HRA account and you are no longer eligible to receive credit for investment earnings attributable to your HRA account. Investment earnings attributable to your HRA account are now allocated to defray the administrative costs incurred by the Plan.

Additionally, if you had an HRA account balance as of December 31, 2014, you are now eligible to immediately access your HRA account balances for reimbursement of qualified medical expenses as determined by Section 213(d) of the Internal Revenue Code for you and your eligible dependents, regardless of your age by filing a claim for reimbursement. For a complete list of expenses that are eligible for reimbursement, please visit <http://www.irs.gov/publications/p502/>.

Please also be aware that if you lose coverage under the Plan at any time, you will forfeit your HRA account balance if no reimbursements are made from your account at least once every seven years.

Upon your death, your HRA account may be used for reimbursement of qualified medical expenses incurred by your surviving spouse and any surviving eligible dependents. If, however, your HRA account is inactive, (meaning that no reimbursements are made for seven years, beginning from the date your surviving spouse and/or dependents lose coverage under the Plan) the remaining HRA account balance will be forfeited. Furthermore, if no eligible surviving spouse or dependent(s) exist at the time of your death; your HRA account balance will be forfeited.

Finally, under the Act, the Plan is required to annually offer participants an opportunity to opt-out of coverage for the HRA benefit. Accordingly, effective January 1, 2015, you, your surviving spouse or surviving dependents may, at any time, **irrevocably** opt-out of the HRA benefit by filing written notice of intent to opt-out with the Fund Office. Upon receipt of written notice, your HRA account will be forfeited and any money in your HRA account will revert to the general assets of the Plan. This may be necessary if you elect healthcare coverage through the Marketplace and you are otherwise eligible for government-subsidized coverage.

For further information regarding your HRA account balance and how to request reimbursement for qualified medical expenses, **please contact WageWorks at 1-877-924-3967** or visit the website at www.wageworks.com.

IMPORTANT INFORMATION

This Benefits Update is intended to serve as a Summary of Material Modifications for the Electrical Insurance Trustees Health and Welfare Plan for Communication Members. If any conflicts exist between the terms of this Benefits Update and the official Plan document, the terms of the official Plan document will control. The Trustees reserve the right to amend, modify or terminate the Health and Welfare Plan at any time. Receipt of this Benefits Update does not confer any eligibility or entitlement to any benefits under the Health and Welfare Plan.

Electrical Insurance Trustees Health and Welfare Plan for Communication Members
Employer Identification Number: 36-1033970
Plan Number: 510