

Summary of Material Modification No. 4 to the

IBEW Local 347 Electrical Workers Health and Welfare Fund Combination Plan Document and Summary Plan Description

The purpose of this Summary of Material Modification (“SMM”) is to provide you a summary of the changes and clarifications that were made to the IBEW Local 347 Electrical Workers Health and Welfare Combination Plan Document and Summary Plan Description (“SPD”) since February 1, 2014. We suggest you keep this SMM with your SPD. This SMM is also available at the website www.ibew347benefits.com.

If you would like a copy of the full text of the new SPD provisions or have any questions, please contact the Fund Office.

1. New Plan Administrator and Claims Administrator:

Effective June 1, 2014, CompuSys of Utah, Inc. (“CompuSys”) replaced Wilson-McShane Corporation and began providing day-to-day administration for the Plan as its third-party administrator. This day-to-day administration provided by CompuSys includes, but is not limited to, determining whether an individual is eligible for coverage, issuing Certificates of Creditable Group Health Plan Coverage and administering COBRA. CompuSys also processes claims for Comprehensive Medical Benefits, Short-Term Disability Benefits, Death Benefits, and HRA Benefits.

The phone number and address for the administrative office of the Fund (i.e. the Fund Office) is:

CompuSys of Utah, Inc.
IBEW Local 347 Electrical Workers Health and Welfare Fund Office
PO Box 26068
Salt Lake City, UT 84126-0068
Toll Free: (844) 347-IBEW (4239)

2. New Rule for Retirees who Return to Covered Employment Between January 1, 2015 and September 30, 2015:

Effective January 1, 2015, a special rule was added to the Plan for Retirees who return to Covered Employment between January 1, 2015 and September 30, 2015.

As explained in greater detail in Section 1.12 of the SPD, if a Retiree returns to Covered Employment for 120 or more hours during a consecutive three-month period, the individual will no longer be considered a Retiree on the first day of the third-month after he has worked such hours. Generally, when this occurs, the Retiree will not be permitted to receive coverage from the Plan as a Retiree for 12 consecutive months after the date that his Retiree eligibility and coverage were terminated. The individual may be permitted to receive coverage under the Plan as a Covered Employee during these 12 months if his eligibility and coverage as a Covered Employee are reinstated in accordance with Section 1.15(b) of the SPD.

The special rule effective January 1, 2015 provides that if a Retiree meets all of the following requirements, he will not be subject to the rule in the paragraph above which prohibits a Retiree from receiving coverage from the Plan as a Retiree for 12 consecutive months from the date that his Retiree eligibility and coverage were terminated:

- The Retiree must have returned to Covered Employment between January 1, 2015 and September 30, 2015;

- The Retiree's eligibility and coverage from the Plan must have been terminated in accordance with Section 1.13(b) between January 1, 2015 and September 30, 2015; and
- After the occurrence of the events in both of the bullet points above, the Retiree must have completely ceased working in Covered Employment between January 1, 2015 and November 30, 2015.

This means that pursuant to this special rule, a Retiree who meets all of the requirements above may receive coverage from the Plan as a Retiree on the first day of the month after he has fulfilled all of the requirements of Section 1.06 or Section 1.07 of the Plan, as applicable.

3. New Definition of Spouse:

Effective February 21, 2014, the definition of spouse found in Section 1.17(a) of the SPD was replaced with the following language:

“The spouse of a Covered Employee or Retiree is covered under this Plan only if the parties’ are legally married under the laws of a United States or foreign jurisdiction that has the legal authority to sanction marriages, regardless of where the parties live and regardless of whether the parties are of the same or opposite sex. A common-law spouse is not considered the spouse of a Covered Employee or Retiree and is not eligible for coverage from the Plan.”

4. Clarified Language Regarding the Plan's Coverage of Crowns:

The Plan's Dental Benefits were clarified to ensure that a crown is not excluded from coverage solely because the crown was due to erosion, abrasion, attrition or abfraction. Based on this clarification, Section 4.03(b)(1), bullet point six of the SPD was replaced with the following language:

“Crowns (single restorations only) – Crowns are covered only if the tooth cannot be restored by a filling and (for replacement) at least five years have elapsed since the last replacement. Crowns for the primary purpose of periodontal splinting, altering vertical dimension, and restoring occlusion are not covered.”

5. Extended Maximum Duration of a Period of Disability:

Effective December 19, 2014, the maximum duration of a Period of Disability was increased from 26 to 39 weeks. This means that if a Covered Person is completely unable to perform any work in his own occupation due to an Injury or Sickness, he may receive Short-Term Disability Benefits for 39 (rather than 26) weeks. All of the Plan's other rules regarding Short-Term Disability Benefits remain the same, including but not limited to the rules regarding notification of the occurrence of certain events that is found in Section 7.01(d) of the SPD.

6. New Agent for Service of Legal Process:

Effective June 1, 2014, CompuSys replaced Wilson-McShane as the Plan's Agent of Service of Legal Process. Service of Legal process may be made upon CompuSys at the following location:

CompuSys of Utah, Inc.
 IBEW Local 347 Electrical Workers Health and Welfare Fund Office
 PO Box 26068
 Salt Lake City, UT 84126-0068

Service of Legal process may also be made upon the Board of Trustees or any individual Trustee.

7. Updated List of Trustees:

Effective March 20, 2015, the names, titles, and addresses of the Plan’s Trustees are as follows:

Union Trustees	Employer Trustees
Mr. Patrick H. Wells IBEW Local 347 850 18 th Street Des Moines, IA 50314	Ms. Angela S. Bowersox Iowa Chapter, NECA 2900 Westown Parkway, Suite D West Des Moines, IA 50266
Mr. Allen DeHeer IBEW Local 347 850 18 th Street Des Moines, IA 50314	Mr. John Irving Baker Electric 111 SW Jackson Street Des Moines, IA 50315
Mr. Matt DeAngelo 7401 S.W. 16 th Street Des Moines, IA 50314	Mr. Jim Davis The Waldinger Corporation 2601 Bell Avenue Des Moines, IA 50321
Mr. Doug Wolf 4550 Highway 14 North Newton, IA 50208	Mr. Don Bridgeman Wolin Mechanical & Electrical 1720 Fuller Road West Des Moines, IA 50265
Mr. Matthew Warner (Alternate) 105 Cedar Avenue PO Box 252 Woodward, IA 50276	Mr. Lee Cochran (Alternate) ABC Electrical Services, LLC 5299 NE 15 th Street Des Moines, IA 50313

The Board of Trustees may be contacted at the following Fund Office address and phone number:

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 IBEW Local 347 Electrical Workers Health and Welfare Fund Office
 PO Box 26068
 Salt Lake City, UT 84126-0068
 Toll Free: (844) 347-IBEW (4239)

Grandfathered Status

This group health plan believes this plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventative health services without any cost sharing.

However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan and what might cause a plan to change from grandfathered health plan status can be directed to the Plan Administrator at (844) 347-IBEW (4239). You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at (866) 444-3272 or: www.dol.gov/ebsa/healthreform. This website has a table summarizing which protections do and do not apply to grandfathered health plans.