

NOTICE ABOUT YOUR BENEFIT PLAN

To All Participants in the NECA/IBEW Family Medical Care Plan ("National Plan"):

The following Plan changes are effective January 1, 2007:

1. Genetic testing is not covered by the Plan unless the result of the test will directly impact the treatment being delivered to a patient who has a diagnosed medical condition.
2. No benefits will be paid for surrogacy or surrogate fees. This exclusion applies to, but is not limited to, charges in connection with: a) the medical or other expenses of a surrogate who carries and delivers a child on behalf of a person covered under this Plan; or b) a female employee's or dependent's carrying and delivering a child for someone else. Any child born of a covered person acting as a surrogate mother will not be considered a dependent of the surrogate mother or her spouse.

The following is effective March 1, 2007:

For purposes of determining your co-pay amount, "generic drugs" are those with multiple manufacturers. You will have to pay the brand name co-pay for a generic drug sold by only one or two companies. For example, at this time the following generic drugs are considered brands, not generics:

Clopidogrel (Plavix)
Fentanyl Citrate Oral (Actiq)
Fluticasone (Flonase)
Itraconazole (Sporanox)
Metoprolol ER Tablet (Toprol XL)
Ondansetron (Zofran)
Oxybutynin ER Tablet (Ditropan XL)
Sertraline (Zoloft)
Venlafaxine (Effexor)

This list is subject to change as additional companies begin manufacturing the product.

Summary of Material Modifications
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