IMPORTANT NOTICE OF PLAN CHANGES

Dear Participant,

As you're aware, the Trustees of the Bricklayers and Allied Craftworkers Health and Welfare Fund of Indiana regularly monitor health costs for this Plan, and periodically have to make adjustments to the benefits and/or the cost of coverage.

No doubt you continue to hear on the news how healthcare costs are rising, and especially the cost of prescription medications. Since the implementation of the Affordable Care Act, the Plan has been required to make changes such as removing most of the annual or lifetime maximums for services, removing the pre-existing conditions limits, covering dependent children to age 26, and adding additional coverage for wellness services. Also, in 2014 a new group of biologic medications became available which are vastly more expensive than medications previously produced. Some of these medications cost as much as $40,000 a month, for a 3 to 6 month treatment program. As a result, the Plan has averaged double digit increases in medical expenses for the last 2 years, and is expected to continue to see higher than normal increases in the future.

Therefore, effective July 1, 2015, the following changes are being adopted for the Plan:

Monthly Cost for Coverage – The monthly cost for coverage for all benefit classes, except Medicare Retirees, will increase from $650 to $700, or $2,100 per quarter.

Out of Network Coverage - Effective for charges incurred on or after July 1, 2015, the Plan will no longer cover any non-emergency expenses for Out of Network providers, except those specified on page 35 of the Summary Plan Description dated January 1, 2014, under the section entitled "Exceptions to Out-of-Network Level of Benefits". Therefore, it is very important that before receiving any medical services you verify with your providers that they are in the Anthem/BCBS network, and that your pharmacy is a part of the Sav-RX network.

Bank Credits - Effective with July, 2015 work hours, 10% of any contributions received on your behalf from a contributing employer will be credited to the unallocated reserves of the Plan, with the remainder credited to your individual Bank Credits to be used for the future cost of coverage as specified in the Summary Plan Description dated January 1, 2014. As an example, if in July an employer were to contribute $1,000 on your behalf to the health plan, 10 percent, or $100 of that amount, would be credited to the unallocated reserves of the Plan and the remaining $900 would be credited to your individual Bank Credits to be used for the future cost of coverage. The "unallocated reserves" simply means the monies are not credited to an individual account, but rather part of the general assets of the Plan.