

[To be printed on Fund Letterhead]

Important: Health and Welfare Fund Changes

Dear Participant:

We are pleased to provide you with news of improvements and changes to your Plan of Benefits and to remind you of your privacy rights, as follows:

- The Plan has a new Claims Administrator, effective July 1, 2006;
- Corrective vision surgery is included under the Vision Care Benefit, effective April 20, 2006;
- The Plan has improved dental coverage concerning the initial installation of dentures or bridgework, effective April 20, 2006; and
- You may request a notice of your privacy rights from the Fund Office if you need another copy.

New Claims Administrator

Effective July 1, 2006, the Claims Administrator for the Plan will be:

Professional Benefit Administrators, Inc.
P.O. Box 4687
Oakbrook, Illinois 60522-4687
Telephone toll-free: 1-800-435-5694
Direct telephone number: 1-630-655-3755
Fax number: 1-630-655-3781

Vision Surgery Coverage

Effective April 20, 2006, the Plan covers corrective eye surgery, as part of the Plan's vision benefit, subject to the annual dollar limitation on vision benefits. Corrective eye surgery includes, but is not limited to laser surgery, Radial Keratotomy (RK), Automated Keratoplasty (ALK), or Laser In-Situ Keratomileusis (LASIK) surgery.

Improved Dental Coverage

Effective April 20, 2006, the Plan will cover the initial installation of full or partial removable dentures or bridgework, even if you were not covered by the Plan at the time your accidentally injured or diseased teeth that are being replaced were removed or extracted. You need only be covered by the Plan on the date of the initial installation of the dentures or bridgework.

Reminder of Your Privacy Protections

The Federal law known as the Health Insurance Portability and Accountability Act (HIPAA) requires that the Plan provide you with a Notice of Privacy Practices. When HIPAA first required it, the Plan provided you with this notice, which describes how the Plan uses and discloses your protected health information, and discusses important federal rights that you have with respect to your protected health information.

If you would like to see or obtain another copy of the Plan's HIPAA Notice of Privacy Practices, it is available at the Fund Office. Please contact the Plan's Administrative Manager at the above address to request a copy.

Questions

These changes and notices are designed to comply with the law and to provide the best benefits possible to fit your and your family's needs. If you have questions about these changes, you may contact the Fund Office.

Sincerely,

Board of Trustees
North Central Illinois Laborers' Health & Welfare Fund

This announcement notice contains only highlights of certain features of the Plan and serves as a Summary of Material Modifications. Full details are contained in the documents that establish the Plan provisions. If there is a discrepancy between the wording here and the documents that establish the Plan, the document language will govern. The Trustees reserve the right to amend, modify, or terminate the Plan at anytime.

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