

**AMENDMENT NO. 15 TO THE PLAN DOCUMENT
OF THE
SAN DIEGO ELECTRICAL HEALTH AND WELFARE TRUST**

The language under "Trust Medical Benefits" pertaining to the "Co-insurance Percentage" is hereby modified as follows:

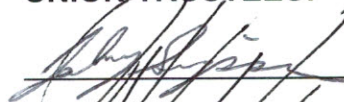
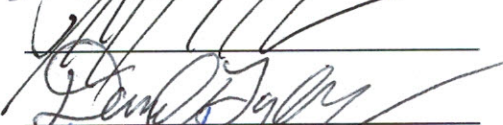
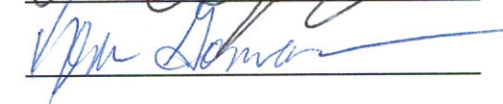
	<u>Services Obtained From PPO Providers</u>	<u>Services Obtained From Non-PPO Providers**</u>
Co-insurance Percentage	Covered at 80%^ of the first \$7,500 of the Percentage of Eligible Expense incurred each calendar year with 100%* of the balance of such Eligible Expense .	Covered at 60% of the maximum Allowable Charge as if the Service(s) had been by a PPO Provider.

^ For services performed by, and at, a PPO Provider, all **Eligible Expenses** will be paid at 100%* if a Best Doctors "Inter-Consultation" is completed before one of the following elective surgical procedures is performed: back, hysterectomy, knee and hip replacement, obesity or bariatric, coronary artery by-pass graft, heart valve replacements, prostatectomy and lumpectomy/mastectomy. To qualify for payment at 100%* a Certification of Completion of a Best Doctors "Inter-Consultation" must be received by the **Plan**. However, there shall be no requirement that the Best Doctors "Inter-Consultation" findings must be followed by the **Participant** or their **Physician** in order for **Eligible Expenses** to be covered by the **Plan** subject to application of any other limitations. In the event Best Doctors determines that an "Inter-Consultation" is not necessary this provision shall not apply.

EXCEPT AS HEREIN AMENDED, THE PLAN DOCUMENT OF THE SAN DIEGO ELECTRICAL HEALTH AND WELFARE TRUST SHALL REMAIN IN FULL FORCE AND EFFECT.

IN WITNESS THEREOF, the Board of Trustees has caused this Amendment to the Plan Document to be signed this 30th day of January, 2014 to be effective March 1, 2014.

UNION TRUSTEES:

EMPLOYER TRUSTEES:

