

**SUMMARY OF MATERIAL MODIFICATION
AND
AMENDMENT #2
TO THE
EGYPTIAN AREA SCHOOLS
EMPLOYEE HDHP MEDICAL BENEFIT PLAN**

This Summary of Material Modification and Amendment describes changes to the Egyptian Area Schools Employee HDHP Medical Benefit Plan effective September 1, 2013. These changes are **effective as of the dates indicated below** and will remain in effect until amended in writing by the Plan Administrator.

This document should be read carefully and attached to the Plan Document and Summary Plan Description. Please contact the Plan Administrator identified in the Summary Plan Description if you have any questions regarding the changes described in this Summary of Material Modification.

Board of Managers of the Egyptian Area Schools Employee Benefit Trust (the "Plan Sponsor") is amending the Egyptian Area Schools Employee HDHP Medical Benefit Plan (the "Plan") as follows:

EFFECTIVE AS OF SEPTEMBER 1, 2013:

1: Copay

The Plan is clarifying that Copays apply towards the Deductible, Coinsurance or Out-of-Pocket Maximum. As such, the Copay section under General Overview of the Plan and the Copay provision in Amendment #1 are hereby deleted and replaced with the following:

GENERAL OVERVIEW OF THE PLAN

Copay

A Copay is the portion of the medical expense that is your responsibility, as shown in the Medical Schedule of Benefits. A Copay is applied for each occurrence of such covered medical service and will apply toward satisfaction of the Deductible, Coinsurance or Out-of-Pocket Maximum.

EFFECTIVE AS OF JANUARY 1, 2015:

Patient Protection and Affordable Care Act (the "Affordable Care Act")

This Summary of Material Modification and Amendment to the Egyptian Area Schools Employee Medical Benefit Plan (the "Plan") is adopted to comply with certain provisions of the Patient Protection and Affordable Care Act (the "Affordable Care Act").

1: Dispense as Written and Preventive Drug

The Dispense as Written provision and the definition of Preventive Drug under the Prescription Drug Card Program are hereby deleted and replaced with the following:

PRESCRIPTION DRUG CARD PROGRAM

Dispense As Written

If the Covered Person chooses a Preferred or Non-Preferred Drug rather than the Generic equivalent when there is a Generic equivalent available and the Physician has allowed a Generic Drug to be dispensed, the Covered Person

will be responsible for the cost difference between the Generic Drug and the Preferred or Non-Preferred Drug. The cost difference is not covered by the Plan and will not accumulate toward your Out-of-Pocket Maximum.

Preventive Drug means items which have been identified by the U.S. Department of Health and Human Services (HHS) as a preventive service. You may view the guidelines established by HHS by visiting the following website:

<https://www.healthcare.gov/what-are-my-preventive-care-benefits>

For a paper copy, please contact the Plan Administrator.

2: Minimum Essential Coverage

The following section is hereby added to the **Miscellaneous Information** section of the Plan:

MISCELLANEOUS INFORMATION

Minimum Essential Coverage

Refer to the Employer's Summary of Benefits and Coverage (SBC) for determination as to whether the Plan provides "minimum essential coverage" within the meaning of Code Section 5000A(f) and any accompanying regulations or guidance and whether it provides "minimum value" within the meaning of Code Section 36B(c)(2)(C)(ii) and any accompanying regulations or guidance (e.g. the Plan provides at least 60% actuarial value).

All other provisions of this Plan shall remain unchanged.

In Witness Whereof, Board of Managers of the Egyptian Area Schools Employee Benefit Trust has caused this Amendment to take effect, be attached to, and form a part of their Plan.

[Signature] 4-16-15
Authorized Signature Date

Chairman
Title

[Signature] 4-16-15
Witness Date

Secretary
Title