AMENDMENT TO THE SUMMARY PLAN DESCRIPTION FOR THE

BENEFIT OPTIONS UNDER KENMORE TOWN OF TONAWANDA UNION FREE SCHOOL DISTRICT

Dear Participant:

This Amendment/Notice is being provided to you to amend the benefits in the Summary Plan Description for KENMORE TOWN OF TONAWANDA UNION FREE SCHOOL DISTRICT ("the Plan"). This Amendment is effective July 1, 2015.

All other provisions notwithstanding, it is understood and agreed that the terms contained in the Plan Document and Summary Plan Description of the Plan shall be amended as set forth below. This Amendment is not intended to affect, change or eliminate any terms, provisions or language contained in the Plan other than that which are stated below.

1. The <u>Medical Plan Schedule of Benefits Section on Page Number 58 & Page Number 71 of the SPD is hereby amended to remove the "Ambulance" benefit and replace with the following:</u>

PLAN	BENEFIT DESCRIPTION	In-Network (Participating)	Preauthorization Required	Out-of-Network (Non- Participating)	Precertification Required
FlexFit E (Family) HRA Health Plan	Ambulance	Plan pays 100% after \$250 Copayment.	N/A	Plan pays 100%: after \$250 Copayment.	N/A
FlexFit F (Independent) HRA Health Plan	Ambulance	Plan pays 100% after \$250 Copayment.	N/A	Plan pays 100% after \$250 Copayment.	N/A

Please keep a copy of this Amendment with your Summary Plan Description for the Plan. If you have any questions, please contact the Plan Administrator.

