City of Crete Health Reimbursement Arrangement Plan Document and Summary Plan Description Amendment #1 Effective: January 1, 2024

The following changes, clarifications, revisions and/or updates will become part of the City of Crete Employee Health Reimbursement Arrangement Plan Document and Summary Plan Description.

INTEGRATED GROUP HEALTH PLAN: Embedded Out-of-Pocket

In-Network Out-of-Pocket: \$5,500.00 (Single) - \$11,000.00 (Family)

HEALTH REIMBURSEMENT ARRANGEMENT (HRA) ADMINISTERED AS: Embedded Benefit

Single Coverage: Employee Liability \$3,000.00 / Employer Liability \$2,500.00 Individual Coverage Within A Family: Employee Liability \$3,200.00 / Employer Liability \$2,300.00 Embedded Benefit Family Coverage: Employee Liability \$6,000.00 / Employer Liability \$5,000.00 Embedded Benefit HRA benefits do not apply to out-of-network services.

mustration for single deverage				
\$5,500.00 Out-of-Pocket				
\$3,500.00 Deductible		\$2,000.00 Coinsurance		
Employee	Employer	Employer		
\$3,000.00	\$500.00	\$2,000.00		

Illustration for Single Coverage

• For single coverage, once the employee satisfies the first \$3,000.00 in deductible, the next \$500.00 of claims is processed at 100% being paid by the employer. At that point, the deductible that must be met before the Integrated Group Health Plan will pay claims has been fulfilled by a combination of the employee and the employer. For the coinsurance, the employer pays 20%, up to a maximum of \$2,000.00. After the out-of-pocket limit has been met, the Integrated Group Health Plan pays 100%.

Illustration for Individual Coverage within a Family

\$5,500.00 Out-of-Pocket				
\$3,500.00 I	Deductible	\$2,000.00 Coinsurance		
Individual	Employer	Employer		
\$3,200.00	\$300.00	\$2,000.00		

• For individual coverage within a family, once the individual satisfies the first \$3,200.00 in deductible, the next \$300.00 of claims is processed at 100% being paid by the employer. At that point, the deductible that must be met before the Integrated Group Health Plan will pay claims has been fulfilled by a combination of the employee and the employer. For the coinsurance, the employer pays 20%, up to a maximum of \$2,000.00. After the out-of-pocket limit has been met, the Integrated Group Health Plan pays 100%.

mustration for Failing Coverage				
\$11,000.00 Out-of-Pocket				
\$7,000.00 Deductible		\$4,000.00 Coinsurance		
Family	Employer	Employer		
\$6,000.00	\$1,000.00	\$4,000.00		

Illustration for Family Coverage

• For family coverage, once the family satisfies the first \$6,000.00 in deductible, the next \$1,000.00 of claims is processed at 100% being paid by the employer. At that point, the deductible that must be met before the Integrated Group Health Plan will pay claims has been fulfilled by a combination of the family and the employer. For the coinsurance, the employer pays 20%, up to a maximum of \$4,000.00. After the out-of-pocket limit has been met, the Integrated Group Health Plan pays 100%.

The Health Reimbursement Arrangement Document will be amended to reflect this change. All other terms and conditions of the Plan which are not affected by this Amendment are unchanged.

Accepted: City of Crete	
Signature:	
Printed Name:	
Title:	
Date:	