Plan Amendment and Summary of Material Modification ("SMM") of the Plan Document for the Tyler Independent School District Medical Benefit Plan (Plans A and B) Effective October 1, 2021

The Tyler Independent School District Medical Benefit Plan (Plans A and B) Plan Document is hereby amended as follows:

1. The following will be DELETED from the SUMMARY OF BENEFITS – MEDICAL FOR PLAN B REPLACED by the following:

| Plan B Covered Medical Expenses | Network | Out of Network Limited to Maximum Allowable Charge | Limits |
|--|---|--|--|
| Outpatient Emergency Services – Hospital Facility | \$120 Co-payment, (co-payment waived if admitted) | \$120 Co-payment, (co- payment waived if admitted) | Special Procedures and Tests, e.g., Ultrasound, MRI and CT, are subject to deductible and coinsurance, unless related to an accident. |
| Outpatient Non-Emergency Services – Hospital Facility | \$120 Co-payment, (co-payment waived if admitted) | Not Covered | |

And REPLACED by the following:

| Plan B Covered Medical Expenses | Network | Out of Network Limited to Maximum Allowable Charge | Limits |
|--|----------------------|--|---|
| Outpatient Emergency Services – Hospital Facility | 80% after deductible | 80% after deductible | Special Procedures and Tests, e.g., Ultrasound, MRI and CT, are subject to deductible and coinsurance, unless related to an accident. |
| Outpatient Non-Emergency Services – Hospital Facility | 80% after deductible | Not Covered | |