

**Nye County School District  
Health Benefits Plan  
Amendment #1**

Effective beginning on January 1, 2021

(The updates in this amendment also apply to all of the group's SPDs back to the original date of the following Office Visit benefits.)

The Nye County School District Health Benefits Plan (the "Plan") is hereby amended as follows:

In the **SCHEDULE OF MEDICAL BENEFITS PPO PLAN** section of the Plan, the Office Visit benefit for **Alcoholism & Substance Abuse** is hereby amended:

**SCHEDULE OF MEDICAL BENEFITS PPO PLAN**

<b>Benefit Description</b>	<b>Annual Deductible</b>	<b>PPO Plan Pays</b>	<b>Non-PPO Plan Pays</b>	<b>Limitations Or Explanations</b>
<b>Alcoholism &amp; Substance Abuse</b>	Yes	90%	70%	<u>Inpatient Care</u>  Admission to a Non-PPO hospital is subject to a \$2,500 co-pay per admission.  Pre-Certification required.
<b>Office Visit</b>	No	100% after a \$20 co-pay	70%	<u>Office Care</u>  Pre-Certification is not required for Office Care.

Note: In a case of a hospitalization consisting of "partial" days, 2 partial days will be considered as 1 full day of inpatient care. A partial day is defined as a minimum of 6 hours per day of hospitalization. Anything less than 6 hours per day will be paid under the outpatient benefits of the Plan.

In the **SCHEDULE OF MEDICAL BENEFITS PPO PLAN** section of the Plan, the Office Visit benefit for **Mental/Nervous Conditions** is hereby amended:

**SCHEDULE OF MEDICAL BENEFITS PPO PLAN**

<b>Benefit Description</b>	<b>Annual Deductible</b>	<b>PPO Plan Pays</b>	<b>Non-PPO Plan Pays</b>	<b>Limitations Or Explanations</b>
<b>Mental / Nervous Conditions</b>	Yes	90%	70%	<u>Inpatient Care</u>  <b>Admission to a Non-PPO hospital is subject to a \$2,500 co-pay per admission.</b>  <b>Pre-Certification required.</b>  <u>Office Care</u>  <b>Pre-Certification is not required for Office Care.</b>
<b>Office Visit</b>	No	100% after a \$20 co-pay	70%	

Note: In a case of a hospitalization consisting of "partial" days, 2 partial days will be considered as 1 full day of inpatient care. A partial day is defined as a minimum of 6 hours per day of hospitalization. Anything less than 6 hours per day will be paid under the outpatient benefits of the Plan.

In the **SCHEDULE OF MEDICAL BENEFITS PPO PLAN** section of the Plan, the Office Visit benefit for **Autism Spectrum Disorder** is hereby amended:

**SCHEDULE OF MEDICAL BENEFITS PPO PLAN**

<b>Benefit Description</b>	<b>Annual Deductible</b>	<b>PPO Plan Pays</b>	<b>Non-PPO Plan Pays</b>	<b>Limitations Or Explanations</b>
<b>Autism Spectrum Disorder</b>	Yes	90%	70%	<u>Inpatient Care</u>  <b>Admission to a Non-PPO hospital is subject to a \$2,500 co-pay per admission.</b>  <b>Pre-Certification required.</b>  <u>Office Care</u>  <b>Pre-Certification is not required for Office Care.</b>
<b>Office Visit</b>	No	100% after \$20 co-pay	70%	

Note: In a case of a hospitalization consisting of "partial" days, 2 partial days will be considered as 1 full day of inpatient care. A partial day is defined as a minimum of 6 hours per day of hospitalization. Anything less than 6 hours per day will be paid under the outpatient benefits of the Plan.

The Plan Document and Summary Plan Description is amended to reflect these change(s). All other terms and conditions of the Plan which are not affected by this Amendment are unchanged.

Accepted:  
Nye County School District  
Amendment #1  
Effective January 1, 2021  
(Deductible for Mental Health)

By: Raymond J. Rethke  
Title: Chief Operating Officer  
Date: 5/31/22