

Confirmation of Benefit Changes Effective 7/1/19 Anderson County Government

The Gold Plan Emergency Room – Hospital Services benefit will be updated to the following:

\$500 copay / then paid at 100%

This is for both bona-fide emergency and non-emergency.

This is for both the in and out of network levels.

The undersigned, a representative of the Plan Administrator, has requested that the above changes be made to the referenced Plan(s). Upon my signature below, I hereby authorize MedBen to make the requested amendments. I understand that the language used in amending the Plan and its respective SPD may not exactly match the language used above. I also understand that the information on this form will be used to determine eligibility, process claims and answer customer service inquiries. I hereby agree to indemnify and hold MedBen harmless for any claims or losses that may arise from its use of this information.

Kim Jeffers-Whitaker

12/26/2019

Signature

Date