## MARATHON COUNTY HEALTH REIMBURSEMENT ARRANGEMENT

## **SUMMARY OF MATERIAL MODIFICATIONS**

The purpose of this Summary of Material Modifications is to inform you of a change that has been made to the Marathon County Health Reimbursement Arrangement. This change has affected the information previously provided to you in the Plan's Summary Plan Description. The Summary Plan Description is modified as described below effective 1/01/2019.

## Eligible Expenses Appendix:

In and Out of Network Deductibles, In and Out of Network Coinsurance, Prescription Drug Copays, Office Visit Copays, Emergency Room Copays, Gastric By-Pass Copay and Smoking Cessation Expenses.

