

VERMILION VALLEY BANK  
HEALTH REIMBURSEMENT ARRANGEMENT PLAN

FIRST AMENDMENT

This First Amendment to the Vermilion Valley Bank Health Reimbursement Plan ("Plan") is made in duplicate at Piper City, Illinois, on the date noted below, by Vermilion Valley Bank ("Employer").

WHEREAS, the Plan grants the Employer the right to amend the provisions of the Plan,

And

WHEREAS, the Employer desires to make such amendments;

NOW, THEREFORE, the Plan is hereby amended as follows, with such amendment to be effective as of January 1, 2018:

1. The Health Reimbursement Arrangement Plan Schedule of Benefits is hereby deleted and replaced with Exhibit A attached hereto and incorporated by reference.

Vermilion Valley Bank

By: Paula Borel

Its: Cashier

## **Exhibit A**

### **ARTICLE II – SCHEDULE OF BENEFITS**

#### **Vermilion Valley Bank Health Reimbursement Arrangement Plan Schedule of Benefits Effective January 1, 2018**

The Employer has established the Vermilion Valley Bank Health Reimbursement Arrangement Plan ("HRA" or "Plan") for the benefit of Participants to coordinate with the Employer's Health Plan.

Participants with Individual (Employee Only) coverage are responsible for 25% of the Health Plan's \$5,000 Individual In-Network Deductible. Participants with Family coverage are responsible for 25% of the Health Plan's \$10,000 Family In-Network Deductible. All individual deductible amounts will satisfy the family deductible, but no one participant will be required to pay more than the individual deductible amount. The Employer's HRA will reimburse 75% of the Health Plan In-Network Deductible up to the maximum benefit of:

#### **In-Network Deductible Benefit**

Individual - Employee Only Coverage	\$3,750	Maximum benefit
Family Coverage	\$7,500	Maximum benefit

Generally, amounts payable for prescription drug expenses will be paid to the Participant and all other amounts payable from the HRA Plan will be paid to the service provider.

Benefits will be administered using the plan language in the Employer's Health Plan. Copays, In-Network Coinsurance, Out-of-Network Deductible and Out-of-Network Coinsurance are not Eligible Medical Expense under the HRA Plan.