

Amendment to Plan of Benefits

For Employees of: NATIONAL HEALTH CARE, INC. AND AFFILIATE
Master Services Agreement No.: 0869726

Effective as of the first day of the plan year that begins in 2019, the following changes have been made to your Booklet. The definition of **recognized charge** and the reimbursement policies now appearing in the Glossary section have been revised.

If your claim for professional services was not received from a National Advantage Program (NAP) **provider**, or if a claim specific rate or discount wasn't negotiated by Aetna or a third-party vendor, the **recognized charge** for specific services or supplies will be the **out-of-network plan rate**, calculated in accordance with the following:

Service or Supply	Out-of-Network Plan Rate
Professional services	An amount determined by Aetna, or its third-party vendors, based on data resources selected by Aetna, reflecting typical competitive charges and/or payments for a service, adjusted for the geographic area in which the service was provided.

In the event you receive a balance bill from a **provider** for your out-of-network service, Patient Advocacy Services may be available to assist you in certain circumstances.

We reserve the right to apply our reimbursement policies to all out-of-network services including **involuntary services**. Our reimbursement policies may affect the **recognized charge**. Our reimbursement policies may consider:

- The Centers for Medicare and Medicaid Services' (CMS) National Correct Coding Initiative (NCCI) and other external materials that say what billing and coding practices are and are not appropriate
- Generally accepted standards of medical and dental practice
- The views of **physicians** and dentists practicing in the relevant clinical areas
- Aetna's own data and/or databases and methodologies maintained by third parties.

Amend: Recognized Charge
Issue Date: December 7, 2018