

**City of Hannibal  
Medical Benefit Plan  
Amendment No. 2**

For the Plan Document and Summary Plan Description, which is effective January 1, 2021, City of Hannibal and Board of Public Works hereby amends such document as of January 1, 2021, as follows:

Under SECTION IV—SCHEDULE OF BENEFITS, J. Schedule of Medical Benefits, DELETE:

Advanced Imaging	<b>Specific Facilities*</b> \$500 co-payment  No charge after deductible	80% after deductible	50% after deductible	Includes Computed Tomographic (CT) studies, Coronary CT angiography, MRI/MRA, nuclear cardiology, nuclear medicine (including SPECT scans), and PET scans, excluding services rendered in an emergency room setting.  Specific Facilities*: Hannibal Regional and Blessing Hospital (does not apply to emergency, maternity, or physician office services).  <b>Pre-certification is required.</b> Failure to obtain <i>pre-certification</i> may result in a \$500 penalty.
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And REPLACE with:

Advanced Imaging	<b>Specific Facilities*</b> \$500 penalty  No charge after deductible	80% after deductible	50% after deductible	Includes Computed Tomographic (CT) studies, Coronary CT angiography, MRI/MRA, nuclear cardiology, nuclear medicine (including SPECT scans), and PET scans, excluding services rendered in an emergency room setting.  Specific Facilities*: Hannibal Regional and Blessing Hospital (does not apply to emergency, maternity, or physician office services).  <b>Pre-certification is required.</b> Failure to obtain <i>pre-certification</i> may result in a \$500 penalty.
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Under SECTION IV—SCHEDULE OF BENEFITS, J. Schedule of Medical Benefits, DELETE:

<b>Inpatient Hospital</b>				
Physician Visits	No charge after deductible	80% after deductible	50% after deductible	

Room and Board	<p><b>Specific Facilities*</b> \$500 co-payment</p> <p><b>All Other</b> No charge after deductible</p>	80% after deductible	50% after deductible	<p>Limited to the semi-private room rate when such semi-private room rate is available.</p> <p>Specific Facilities*: Hannibal Regional, Hannibal Clinic, Blessing Hospital, Midwest Orthopedic Hannibal and Quincy, Blessing Physician Services, Quincy Medical Group, and Northeast MO Ambulatory Surgery Center (does not apply to emergency, maternity, or physician office services).</p> <p><b>Pre-certification is required.</b> Failure to obtain <i>pre-certification</i> may result in a \$500 penalty.</p>
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And REPLACE with:

Inpatient Hospital				
Physician Visits	No charge after deductible	80% after deductible	50% after deductible	
Room and Board	<p><b>Specific Facilities*</b> \$500 penalty</p> <p><b>All Other</b> No charge after deductible</p>	80% after deductible	50% after deductible	<p>Limited to the semi-private room rate when such semi-private room rate is available.</p> <p>Specific Facilities*: Hannibal Regional, Hannibal Clinic, Blessing Hospital, Midwest Orthopedic Hannibal and Quincy, Blessing Physician Services, Quincy Medical Group, and Northeast MO Ambulatory Surgery Center (does not apply to emergency, maternity, or physician office services).</p> <p><b>Pre-certification is required.</b> Failure to obtain <i>pre-certification</i> may result in a \$500 penalty.</p>

Under SECTION IV—SCHEDULE OF BENEFITS, J. Schedule of Medical Benefits, DELETE:

Outpatient Surgery	<p><b>Specific Facilities</b> \$500 co-payment</p> <p><b>All Other</b> No charge after deductible</p>	80% after deductible	50% after deductible	<p>Specific Facilities*: Hannibal Regional, Hannibal Clinic, Blessing Hospital, Midwest Orthopedic Hannibal and Quincy, Blessing Physician Services, Quincy Medical Group, and Northeast MO Ambulatory Surgery Center (does not apply to emergency, maternity, or physician office services).</p> <p><b>Pre-certification is required for outpatient surgical procedures (excluding outpatient office surgical procedures).</b> Failure to obtain <i>pre-certification</i> may result in a \$500 penalty.</p>
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And REPLACE with:

<p><b>Outpatient Surgery</b></p>	<p><b>Specific Facilities</b> \$500 penalty</p> <p><b>All Other</b> No charge after deductible</p>	<p>80% after deductible</p>	<p>50% after deductible</p>	<p>Specific Facilities*: Hannibal Regional, Hannibal Clinic, Blessing Hospital, Midwest Orthopedic Hannibal and Quincy, Blessing Physician Services, Quincy Medical Group, and Northeast MO Ambulatory Surgery Center (does not apply to emergency, maternity, or physician office services).</p> <p><b>Pre-certification</b> is required for outpatient surgical procedures (excluding outpatient office surgical procedures). Failure to obtain pre-certification may result in a \$500 penalty.</p>
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All other terms and conditions of this City of Hannibal and Board of Public Works Medical Benefit Plan which are not affected by this amendment remain unchanged.

City of Hannibal and Board of Public Works hereby adopts the provisions of this amendment of the City of Hannibal and Board of Public Works Medical Benefit Plan, and its duly authorized officer has executed this amendment.

By: Megan L. Inman

Date: August 25, 2021

Title: City Clerk / Chairman  
Employee Benefit Trust Board