

**Second Amendment of the Restated  
Dixon Public Schools District #170  
ALL Health Care Benefits Plan**

WHEREAS, the Dixon Public Schools District #170 (the "District") maintains the Dixon Public Schools District #170 Health Care Benefits Plan effective January 1, 2006 (the "Plan"); and,

WHEREAS, amendment of the Plan is now considered desirable;

NOW, THEREFORE IT IS RESOLVED that, by virtue and in exercise of the power reserved to the Company, the Plan is amended in the following Particulars:

**Effective 9/1/2016 dependent children termination is hereby being deleted and replaced with the following:**

**Effective Date of Termination for Dependents**

Coverage for your dependents will automatically terminate when your coverage ends or, if sooner, at 11:59 P.M. on the first day on which any of the following occurs *except for a child who reaches the age of 26, coverage will terminate at 11:59 P.M. on the last date of the birth month:*

1. for a spouse –
  - a. you become legally divorced; or,
  - b. if you are an active employee, the day on which he or she makes a written election to be covered by Medicare for Health coverage instead of the Plan.
2. for a child who ceases to meet the applicable eligibility requirements.
3. you request that your contributions for Family coverage be stopped.

I hereby certify that the foregoing is a correct copy of the 2<sup>nd</sup> amendment to the Dixon Public Schools District #170 Health Care Benefits, duly adopted by the Plan Sponsor and that the amendment has not been changed or repealed.

Dated this 14<sup>th</sup> day of December 2016

  
Signature

Business Manager  
Title