

**Amendment Two**  
**To The**  
**County of Henrico Health Plan**

BY THIS AMENDMENT, the County of Henrico Health Plan (herein called the "Plan") is hereby amended as follows, effective January 1, 2017.

**SECTION 7**  
**SCHEDULES OF BENEFITS**

**Health Savings Account Contribution Limit** (reference page 40)

The annual Health Savings Account Contribution Limit for individual coverage has been amended to \$3,400.

The annual Health Savings Account Contribution Limit for family coverage has been amended to \$6,750.

**Prescription Drug Schedule of Benefits** (reference page 45)

The prescription drug benefit has been amended to add a \$150 calendar year deductible per member or \$150 per family toward prescription drugs on all tiers. This deductible applies for the following plans: Premier POS, Standard POS and PPO Plan.