

SUMMARY OF MATERIAL MODIFICATIONS

This modification is made as of the **1st** day of **June, 2007** by **Drake University** to the **Drake University Point of Service Health Plan**.

The **Drake University Point of Service Health Plan** is hereby modified and the attached text may be printed on a revision page for insertion into the **Drake University Point of Service Health Plan**.

Please check the following that apply:

- _____ **Drake University** will print the attached amendment for distribution.
- _____ First Administrators, Inc. will print _____ copies of the attached amendment for distribution.
- _____ Drake University will notify Participants of the changes in some other manner.
- _____ Other: _____

This modification is made as of the **1st** day of **April, 2007** by **Drake University** to **Drake University Point of Service Health Plan**.
All other terms and provisions of the Plan remain unaltered and in effect.

The following text is **added** to the **Benefit Summary** of the current Plan booklet.

MEDICAL BENEFITS	NETWORK PROVIDER	NON NET-WORK PROVIDER	GENERAL PLAN LIMITS
Durable Medical Equipment - cranial remodeling	80%	70%	Prior approval is recommended. Rental limited to purchase price. Lifetime limit of \$1,500 for bands and helmets for deformational plagiocephaly.

The following text is **added** to the **“Other Covered Medical Care”** section found in the current Plan booklet.

(22) cranial remodeling through the use of bands and helmets for deformational plagiocephaly. See benefit summary for limitations;