

SUMMARY OF MATERIAL MODIFICATIONS No. 6

This modification is made as of the 1st day of **May, 2008**, 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 **May, 2008**, 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 **replaces** the “**Vision Hardware Benefits**” benefit found in the Benefit Summary of the Plan Book.

Vision Hardware Benefits	80%	80%	The calendar year deductible is waived. Participant co-insurance amounts do not apply to the out-of-pocket maximum. Limited to \$150 per calendar year. Includes eyeglass frames, lenses, and contact lenses. NOTE: Charges will not be subject to the network fee schedule and the participant will be responsible for the difference between the billed amount and the paid amount for frames, lenses, and contact lenses.	-
--------------------------	-----	-----	--	---