

**IWAKI AMERICA, INC.
EMPLOYEE GROUP MEDICAL PLAN
AMENDMENT #3 TO THE
RESTATED OCTOBER 1, 2014 PLAN DOCUMENT AND SUMMARY PLAN DESCRIPTION
EFFECTIVE: OCTOBER 1, 2017**

In accordance with the requirements of the Patient Protection and Affordable Care Act of 2010 (The Affordable Care Act), this Plan is amended to add coverage for Fluoride Varnish under Preventive Care Services. This Plan is also amended to clarify that Gender Dysphoria Treatment and Sex Therapy are not covered. All references to the provisions below that appear in any part of the Plan Document or in any prior amendments are also hereby amended to be consistent with the changes described below.

The Plan Document and Summary Plan Description are hereby amended as follows:

SECTION IV. SCHEDULE OF MEDICAL BENEFITS

- **PREVENTIVE CARE, Fluoride Varnish is hereby added in its entirety in order to provide coverage at the levels shown:**

PREVENTIVE CARE	IN-NETWORK PROVIDERS	OUT-OF-NETWORK PROVIDERS
The preventive care services marked below with ** are provided according to the terms prescribed by the regulations issued under the Patient Protection and Affordable Care Act of 2010, as may be amended from time to time. Please see the Medical Benefits section for additional details about the preventive coverage provided		
**Fluoride Varnish (For Covered Persons up to age 6) Up to four (4) varnish treatments per person, per Plan Year	100% (Deductible waived)	NOT COVERED

SECTION V. MEDICAL BENEFITS, C. Covered Services, (2) Preventive Care,

- **Routine Well Child Care is hereby deleted and replaced in its entirety with the following:**

(b) ****Routine Well Child Care**

Routine Well Child Care including all charges billed at the time of visit, including, but not limited to fluoride and fluoride varnish to age 6, physical examinations, history, sensory screening and neuropsychiatric evaluation and appropriate immunizations. Covered Services include, but are not limited to those listed at <http://www.healthcare.gov/what-are-my-preventive-care-benefits/>

SECTION VI. MEDICAL LIMITATIONS AND EXCLUSIONS

- **Item (24) Fluoride for Covered Persons age 5 and older is hereby deleted and replaced in its entirety with the following:**

(24) Fluoride and fluoride varnish for Covered Persons age 6 and older
- **Item (39) Transsexual surgery is hereby deleted and replaced in its entirety with the following:**

(39) Gender Dysphoria Treatment, including but not limited to, counseling, gender reassignment surgery or hormone therapy and related preoperative and postoperative procedures which, as their objective, change the person's sex, and any related complications

- Sex Therapy is hereby added in its entirety. All affected and subsequent items are hereby re-ordered accordingly
 - Sex Therapy

Accepted by:
Iwaki America, Inc.

Amy Francer
Authorized Signature

Amy Francer
Print Name

the Director
Title

9/28/17
Date