



A UnitedHealthcare Company

### SUMMARY OF MODIFICATIONS

Effective July 1, 2016 the following changes were made to your Dental Plan document:

- Eligibility and Enrollment:
  - Under Eligibility Requirements, the current requirement that a dependent child must reside in the United States has been removed. The Employer Mandate rule of PPACA indicates that dependent children who are residents of countries contiguous with the United States must be offered coverage. (Children who are not U.S. citizens or nationals do not have to be covered.)
  - In the Extended Coverage for Dependent Children section, a note has been added to the bullet point stating that Proof of Disability must be submitted as required. The note indicates that Notice of Award of Social Security Income is acceptable.
- COBRA Continuation of Coverage:
  - The Employee Obligations to Provide Notice of the Qualifying Event section has been revised to clarify that loss of coverage is due to the original Qualifying Event (second bullet).
  - In The Right to Extend the Length of COBRA Continuation Coverage section, the paragraph pertaining to Social Security Disability Determination was revised in order to clarify the administration of COBRA coverage in this situation.
- Covered Expenses: Dental procedure codes have been added, deleted, or modified in order to be consistent with the most current version of the American Dental Association's procedural code manual.
- Right of Subrogation, Reimbursement, and Offset: Language was revised to reflect the Plan's ability to recover funds for subrogation claims as a result of the Supreme Court's ruling in the case of *Montanile v. Board of Trustees of the National Elevator Industry Health Benefit Plan*.
- Claims and Appeal Procedures: In the appeals levels section(s) under Appeals Procedure for Adverse Benefit Determinations, the reference to mailing times has been updated from five days to seven days to reflect current administrative practices.
- Plan Amendment and Termination Information: In the Covered Person's Rights if Plan Is Amended or Terminated section, the reference to mailing times has been updated from five days to seven days to reflect current administrative practices.

### ACCEPTANCE PAGE

Dental Plan  
7670-02-411216

KENYON COLLEGE acknowledges that we have reviewed the plan document for the plan period effective July 1, 2016, and agree that the provisions contained in the plan document will be the basis for the administration of our Dental Plan. The Plan Sponsor further represents that the plan document accurately reflects the intent of the Plan Sponsor and agrees that UMR may rely on such document in the administration of the Plan.

Accepted by the Plan Sponsor on 7-19-16  
Date

DIRECTOR OF HUMAN RESOURCES  
Authorized Signature and Title  
KENYON COLLEGE