

A Mutual Company Incorporated in 1909 PO Box 1191 • Madison, WI 53701-1191

Administrative Office: Superior Vision Services, Inc. 11101 White Rock Road, Suite 150 Rancho Cordova, CA 95670

Policy Modifications

Policy Modifications: Policy/Certificate Number 28893, Form # NVIGRP 5/07 SC / NVIGRPCTV2 5/07 SC is amended as follows:

Beginning in 2014, health insurers are required to pay an annual Health Insurer Assessment Fee in accordance with Section 9010 of the Affordable Care Act (ACA). The amount due from each insurer is based on the insurer's market share of health premiums, including vision premiums, collected in the prior year. The rates in this renewal notification include this fee.

The Renewal Premium Rate guarantee period shown on the Premium Schedule is changed to read as follows: Renewal Premium Rates are guaranteed from August 1, 2017 to July 31, 2021.

New Renewal Premium Rates as a result of this change are:

Employee Only	\$ 4.43
Employee + One Dependent	\$ 8.63
Employee + Family	\$12.66

In all other respects, the Policy/Certificate remains the same.

<u>RIDER</u>: This rider issued July 5, 2017, forms a part of Policy/Certificate No. 28893 issued to Metromont Corporation. It is effective August 1, 2017. It does not vary, waive, alter or extend any of the terms, conditions, or provisions of the Policy, except as stated herein.

Signed for National Guardian Life Insurance Company

Liber A Shart

Kimberly A. Shaul, Secretary

March 7 John

Mark L. Solverud, President