VISION SERVICE PLAN

## PLEASE ATTACH TO YOUR GROUP VISION CARE PLAN

## AMENDMENT TO GROUP VISION CARE PLAN

To be attached to and made part of Group Vision Care Plan Number 00112374, issued to EL DORADO COUNTY.

EXCEPT as specifically amended herein, said Plan shall remain in full force and effect.
IT IS HEREBY AGREED that the Plan Term shall be thirty $(30)$ months from the effective date of July 1 , 2010.

IT IS FURTHER AGREED that the plan shall be amended as indicated below effective July 1, 2011.
Section 6.01(b) shall be revised as follows:
6.01 (b) Eligible Dependent: If dependent coverage is provided, the persons eligible for coverage as dependents shall include:
(1) the legal spouse of any Enrollee, and
(2) any child of an Enrollee, including any natural child from the moment of birth, legally adopted child from the moment of placement in the residence of the Enrollee, or other child for whom a court holds the Enrollee responsible; and who has not yet attained the age of 26 years, or

> (3) as further defined by Group.

COUNTY OF EL DORADO

BY:
TITLE: $\qquad$
DATE: $\qquad$

BY:


TITLE: PRESIDENT, VSP VISION CARE


TITLE: TREASURER
DATE:


