

**SUMMARY OF MATERIAL MODIFICATIONS
TO THE TRINITY HEALTH MEDICAL PLAN**

This Summary of Material Modifications (“SMM”) describes changes to the Trinity Health Medical Plans (“Plan”) for Saint Mary’s Health Care, Grand Rapids (“Plan”) effective November 1, 2009. This SMM modifies and revises the Plan’s Benefits-at-a-Glance section of the Summary Plan Description (“SPD”).

Prescription Drug Benefit

The **PRESCRIPTION DRUG** section of the **BENEFITS-AT-A GLANCE** is revised to read as follows:

Associate Co-Payment at Saint Mary’s Family Pharmacies				
	Generic	Preferred Brand Name	Non Preferred Brand Name	Fertility Drugs
Up to 34-day supply				
Plan Co-Pay	\$10	\$20	\$40	50%
Associate Cost	\$8 inclusive of 20% associate discount	\$16 inclusive of 20% associate discount	\$32 inclusive of 20% associate discount	50%
Up to 90-day supply				
Plan Co-Pay	\$30	\$60	\$120	50%
Associate Cost	\$24 inclusive of 20% associate discount	\$48 inclusive of 20% associate discount	\$96 inclusive of 20% associate discount	50%

Associate Co-Payment at non-Saint Mary’s Family Pharmacies				
	Generic	Preferred Brand Name	Non Preferred Brand Name	Fertility Drugs
Up to 34-day supply				
Plan Co-Pay	\$10	\$20	\$40	50%
Associate Cost	\$10	\$20	\$40	50%

Associate Co-Payment at Medco by Mail				
	Generic	Preferred Brand Name	Non Preferred Brand Name	Fertility Drugs
Up to 90-day supply				
Plan Co-Pay	\$25	\$50	\$100	50%
Associate Cost	\$25	\$50	\$100	50%

Except as set forth above, all other provisions of the Plan remain unchanged.