

# WELLFLEET INSURANCE COMPANY

5814 Reed Road, Fort Wayne, IN. 46835

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## Policy/Certificate Amendment

**Policyholder: University of Dallas**  
**Effective Date: August 1, 2022**

**Policy Number: WI2223TXSHIP25**

This Amendment form is made a part of the Policy and any Certificate to which it is attached as of the Effective Date shown above. This form applies only to covered expenses that occur on or after the effective date shown above.

The Policy/Certificate are amended as follows.

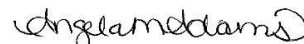
1. The Outpatient/office contraceptive services provision appearing in the **Preventive Services** section under "Covered Medical Expenses " is deleted.
2. The Preventive contraceptive provision appearing in the **Prescription Drugs** section under "Covered Medical Expenses " is deleted.
3. The following provision is added to the **Exclusions and Limitations** section:
  - Birth control, including elective surgical procedures or devices.  
NOTICE: Your institution of higher education has certified that Your student health insurance coverage qualifies for an accommodation with respect to the federal requirement to cover all Food and Drug Administration-approved contraceptive services for women, as prescribed by a health care provider, without cost sharing when provided in accordance with the comprehensive guidelines supported by HRSA or if the item or service has an "A" or "B" rating from the USPSTF and filled at a participating pharmacy. This means that Your institution of higher education will not contract, arrange, pay, or refer for contraceptive coverage. Instead, Wellfleet Insurance Company will provide separate payments for covered contraceptive services that You use, without cost sharing and at no other cost, for so long as You are enrolled in Your student health insurance coverage. Your institution of higher education will not administer or fund these payments. If You have any questions about this notice, contact the Administrator shown on page 2.

This Amendment is subject to all of the terms, limitations and conditions of the Policy and/or the Certificate to which it is attached except as they are changed by it.

### SIGNED FOR WELLFLEET INSURANCE COMPANY



Andrew M. DiGiorgio, President



Angela Adams, Secretary