

## SUMMARY OF MATERIAL MODIFICATIONS

January 7, 2010

To All Employees and Dependents:

This Summary of Material Modifications is an amendment to your Plan Document and Summary Plan Description (SPD) for the First Community Bank Direct Reimbursement Dental Plan effective January 1, 2010.

### VERIFICATION OF ELIGIBILITY

The following new language replaces the "Verification of Eligibility" section on page 10 of your SPD effective January 1, 2010:

Please call 800-951-1012 to verify eligibility for Plan benefits before the charge is incurred.

### HOW TO SUBMIT A CLAIM

The following new language replaces the "How to Submit a Claim" section on page 15 of your SPD effective January 1, 2010:

- (5) Send the above to the Claims Administrator at this address:

Benefit Coordinators, Inc.  
PO Box 210546  
Columbia, SC 29221  
803.772.0140 (fax)

### NOTICE PROCEDURES

The following new language replaces the "Notice Procedures" section on page 27 of your SPD effective January 1, 2010.

Any notice you provide must be *in writing*. Oral notice, including notice by telephone, is not acceptable. You must mail or fax your notice to the Plan Administrator listed below, at the following address:

Benefit Coordinators, Inc.  
PO Box 210546  
Columbia, SC 29221  
803.772.0140 (fax)

### GENERAL PLAN INFORMATION

The following new language replaces the "Notice Procedures" section on page 35 of your SPD effective January 1, 2010.

### CLAIMS ADMINISTRATOR

Benefit Coordinators, Inc.  
PO Box 210546  
Columbia, SC 29221  
803.772.0110 or 800.951.1012 (phone)  
803.772.0140 (fax)

Please keep this Summary of Material Modification with your Summary Plan Description (SPD) booklet for future reference. If you have any questions please feel free to contact us at 803.772.0110 or 800.951.1012.