

Aetna Life Insurance Company

Extraterritorial booklet-certificate amendment

Policyholder: Walmart

Group policy number: GP-895530-AR

Group control number: CN-486824
CN-868601

Amendment effective date: January 1, 2021

This amendment is part of your booklet-certificate. It is effective on the date shown above and it replaces any other medical extraterritorial booklet-certificate amendment you may have received before.

Important note: The following apply only if you live in California. The benefits below will apply instead of those in your booklet-certificate.

(GR-9N 08-020 01 CA)

YOUR BOOKLET-CERTIFICATE CONTAINS IMPORTANT INFORMATION REGARDING NETWORK AND OUT-OF-NETWORK HEALTH CARE. PLEASE READ THIS INFORMATION SO YOU WILL KNOW FROM WHOM OR WHAT GROUP OF PROVIDERS HEALTH CARE MAY BE OBTAINED.

Obtaining Coverage for Dependents *(GR-9N 29-010 01)*

Your dependents can be covered under your plan. You may enroll the following dependents:

- Your legal spouse; or
- Your domestic partner who meets the rules set by your employer as outlined in the *Coverage for Domestic Partners* section following; and
- Your dependent children; and
- Dependent children of your domestic partner.

Aetna will rely upon your employer to determine whether or not a person meets the definition of a dependent for coverage under the plan. This determination will be conclusive and binding upon all persons for the purposes of this plan.

Coverage for Domestic Partner *(GR-9N 29-010 01)*

To be eligible for coverage, you and your domestic partner will need to:

- meet the requirements under California law for entering into a domestic partnership; and
- are "domestic partners" as determined in accordance with rules set by your Employer.

Routine Cancer Screenings *(GR-9N 11-005 01 CA)*

Covered expenses include charges incurred for routine cancer screening as follows:

- 1 annual cervical cancer screening test, including the conventional Pap test, and any cervical cancer screening test approved by the federal Food and Drug Administration upon referral of the insured's health care provider.

Osteoporosis Services *(GR-9N 11-005 01 CA)*

Covered expenses include charges for services related to the diagnosis, treatment, and appropriate management of osteoporosis. The services include all Food and Drug Administration approved technologies, including bone mass measurement technologies as deemed medically appropriate.

Important Reminder

Refer to the Summary of Benefits for details about deductibles, coinsurance, benefit maximums and frequency limits if applicable.

Anesthesia and Associated Hospitalization For Certain Dental Care *(GR-9N 11-181 01 CA)*

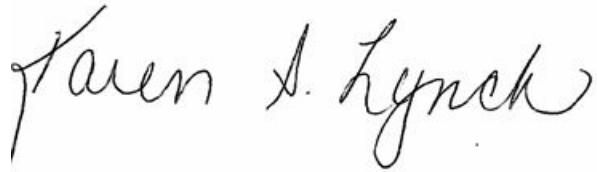
Covered expenses include charges made for general anesthesia and associated **hospital**, surgery center or other licensed facility charges in connection with dental care if any of the following applies:

- the person is a child age 6 or under;
- the person has a medical condition that requires hospitalization or general anesthesia for dental care; or
- the person is disabled.

As used in this section, "disabled" means a person, regardless of age, with a chronic disability if the chronic disability meets all of the following conditions:

- It is attributable to a mental or physical impairment or combination of mental and physical impairments.
- It is likely to continue.
- It results in substantial functional limitations in one or more of the following activities:
 - self-care;
 - receptive and expressive language;
 - learning;
 - mobility;
 - capacity for independent living; or
 - economic self-sufficiency.

Aetna may require prior authorization for covered services and associated charges in the same manner that prior authorization is required for these benefits in connection with other covered medical care. Charges in connection with the dental procedure itself, including, but not limited to, those for the professional fees of the dentist are not covered.

A handwritten signature in black ink that reads "Karen S. Lynch". The signature is written in a cursive, flowing style.

Karen S. Lynch
President
Aetna Life Insurance Company
(A Stock Company)

Amendment: California Medical ET
Issue Date: October 1, 2020

Additional Information Provided by Aetna Life Insurance Company

Inquiry Procedure

The plan of benefits described in the Booklet-Certificate is underwritten by:

Aetna Life Insurance Company (Aetna)
151 Farmington Avenue
Hartford, Connecticut 06156

Telephone: (860) 273-0123

If you have questions about benefits or coverage under this plan, call Member Services at the number shown on your Identification Card. You may also call Aetna at the number shown above.

If you have a problem that you have been unable to resolve to your satisfaction after contacting Aetna, you should contact the Consumer Service Division of the Department of Insurance at:

300 South Spring Street
Los Angeles, CA 90013

<https://www.insurance.ca.gov/01-consumers/101-help/index.cfm>

Telephone: 1-800-927-4357 or 213-897-8921

You should contact the Bureau only after contacting Aetna at the numbers or address shown above.

Participating Providers

We want you to know more about the relationship between Aetna Life Insurance Company and its affiliates (Aetna) and the participating, independent providers in our network. Participating physicians are independent doctors who practice at their own offices and are neither employees nor agents of Aetna. Similarly, participating hospitals are neither owned nor controlled by Aetna. Likewise, other participating health care providers are neither employees nor agents of Aetna.

Participating Providers are paid on a 'Discounted Fee For Service' arrangement. Discounted fee for service means that participating providers are paid a predetermined amount for each service they provide. Both the participating provider and Aetna agree on this amount each year. This amount may be different than the amount the participating provider usually receives from other payers.