

Aetna Life Insurance Company

Extraterritorial booklet-certificate amendment

Policyholder: Walmart
Group policy number: GP-0895530
Group control number: CN-0486824

Amendment effective date: January 1, 2025

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 Florida. The benefits below will apply instead of those in your booklet-certificate.

THIS CERTIFICATE CONTAINS A DEDUCTIBLE PROVISION

The following has been added to or replaced in the *Coverage and exclusions* section of your booklet-certificate.

Cleft lip and palate

Covered services include treatment for a congenital cleft lip or cleft palate. This includes:

- Orthodontics
- Oral **surgery**
- Otologic services
- Nutrition services
- Audiological and speech/language treatment involved in the management of birth defects known as cleft lip, cleft palate or both

Jaw joint disorder treatment

Covered services include the diagnosis, surgical and non-surgical treatment of **jaw joint disorder** by a **provider**, including:

- The jaw joint itself, such as temporomandibular joint dysfunction (TMJ) syndrome
- The relationship between the jaw joint and related muscle and nerves, such as myofascial pain dysfunction (MPD)

The following are not **covered services**:

- Non-surgical dental services, and therapeutic services related to **jaw joint disorder**

In no event will the covered amount for Out-Of-Network charges be less than 50% of the covered amount for In-Network charges.

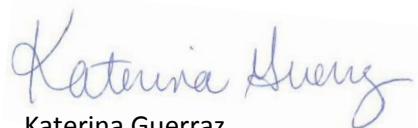
In no event will the covered amount for any covered service or treatment that is not available from an In-Network provider be less than 10% of the covered amount for In-Network charges.

In no event will any Out-Of-Network Deductible be more than four times any In-Network Deductible. If there is no Individual In-Network Deductible, any Out-Of-Network Individual Deductible cannot exceed \$500 per individual.

The following has been added to or replaced in the *Eligibility, starting and stopping coverage, Who can be a dependent on this plan* section of your booklet-certificate.

- Dependent children – yours or your spouse’s or partner’s
 - A dependent child who is under 26 years of age will be covered until the end of the calendar year after they have reached age 26 provided they meet all of the following:
 - Attending school regularly (full-time or part-time) or living in your household
 - Solely dependent upon you for support
 - A dependent child from the end of the calendar year in which the child turns age 26 until the end of the calendar year in which the child turns age 30, provided the child is:
 - Unmarried and does not have a dependent of their own
 - A resident of Florida or a full-time or part-time student
 - Not eligible for Medicare and not covered under another group, blanket, franchise or individual health benefit plan

This amendment makes no other changes to the group policy, booklet-certificate or schedule of benefits.



Katerina Guerraz
Executive Vice President, Chief Operating Officer
Aetna Life Insurance Company
(A Stock Company)

Amendment: Florida Medical ET
Issue Date: December 5, 2024

The benefits of the policy providing your coverage are governed primarily by the law of a state other than Florida.