

# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Amendment

**Policyholder:** Caraday Healthcare, LLC  
**Group Policy No.:** GP-175291  
**Rider:** New Mexico ET Medical  
**Issue Date:** July 23, 2021  
**Effective Date:** August 1, 2021

The group policy specified above has been amended. The following summarizes the changes in the group policy, and the Certificate of Insurance describing the policy terms is amended accordingly. This amendment is effective on the date shown above.

## Immunization Expenses

- Immunizations for infectious diseases and the materials for administration of immunizations as recommended by the Advisory Committee on Immunization Practices of the Department of Health and Human Services, Center for Disease Control; and
- Immunizations for human papillomavirus (HPV) and the materials for administration of immunizations for covered females age 9 up to age 27; and
- Testing for Tuberculosis.

## Anesthesia and Hospital Charges for Dental Surgery

**Covered expenses** include charges for **hospital** services and general anesthesia may by a **hospital** or **surgical center** for dental surgery for the following:

- Covered persons exhibiting physical, intellectual or medically compromising conditions for which dental treatment under local anesthesia, with or without additional adjunctive techniques and modalities, cannot be expected to provide a successful result and for which dental treatment under general anesthesia can be expected to product superior results;
- Covered persons for whom local anesthesia is ineffective because of acute infection, anatomic variation or allergy;
- Dependent children who are extremely uncooperative, fearful, anxious or uncommunicative with dental needs of such magnitude that treatment should not be postponed or deferred and for whom lack of treatment can be expected to result in dental or oral pain or infection, loss of teeth or other increased oral or dental morbidity;
- Covered persons with extensive oral-facial or dental trauma for which treatment under local anesthesia would be ineffective or compromised; or
- Other procedures for which **hospital** confinement or general anesthesia in a **hospital** or **surgical center** is **medically necessary**.

## Routine Cancer Screenings

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

- 1 baseline mammogram for covered females age 35 through 39;
- 1 mammogram every 2 years for covered females age 40 through 49;
- 1 mammogram every 12 months for covered females age 50 and over;
- cytologic screening, as recommended by your physician in accordance with national medical standards for covered females age 18 and over. Cytologic screening means a pap test and a pelvic exam for asymptomatic as well as systematic females;
- 1 gynecological exam every 12 months this includes a rectovaginal pelvic exam for women age 25 and over who are at risk of ovarian cancer
- 1 human papillomavirus (HPV) screening exam every 3 years for covered females age 30 and over;

The following tests are **covered expenses** if you are age 50 and older when recommended by your **physician**:

- 1 sigmoidoscopy every 5 years for persons at average risk; or
- 1 double contrast barium enema (DCBE) every 5 years for persons at average risk; or
- 1 colonoscopy every 10 years for persons at average risk for colorectal cancer

## Contraception Services

**Covered expenses** include charges for contraceptive services and supplies provided on an outpatient basis, including:

- Contraceptive drugs and contraceptive devices prescribed by a **physician** provided they have been approved by the Federal Drug Administration (FDA);
- Related outpatient services such as:
  - Consultations;
  - Exams;
  - Procedures; and
  - Other medical services and supplies.

Not covered are:

- Charges for services which are covered to any extent under any other part of this Plan or any other group plans sponsored by your employer; and
- Charges incurred for contraceptive services while confined as an inpatient.

## Children's Hearing Aid

**Covered expenses** for your covered dependent children include charges for one hearing aid for each hearing-impaired ear during any 36 consecutive month period. **Covered expenses** also include charges for fitting and dispensing services and molds necessary to maintain optimal fit.

## Diabetic Equipment, Supplies and Education

**Covered expenses** include charges for the following services, supplies, equipment, and training for the treatment of insulin- and non-insulin-dependent diabetes and elevated blood glucose levels during pregnancy:

- Insulin preparations;
- External insulin pumps;
- Syringes;
- Injection aids for the blind;
- Test strips and tablets;
- Visual reading urine and ketone strips;
- Blood glucose monitors without special features unless required due to blindness;
- Lancets;
- Prescribed oral medications whose primary purpose is to influence blood sugar;
- Alcohol swabs;
- Injectable glucagons;
- Glucagon emergency kits;
- Foot care to minimize the risk of infection; and
- Self-management training provided by a licensed health care provider certified in diabetes self-management training; which shall be limited to:
  - **medically necessary** visits upon the diagnosis of diabetes;
  - visits following a **physician** diagnosis that represents a significant change in the patient's symptoms or condition that warrants changes in the patient's self-management; and
  - visits when re-education or refresher training is prescribed by a health care provider with prescribing authority; and
  - Medical nutrition therapy related to diabetes management.

**Covered expenses** include new or improved equipment, appliances, **prescription drugs** for the treatment of diabetes, insulin or supplies for the treatment of diabetes when approved by the food and drug administration.

## Treatment of Jaw Joint Disorder

This Plan covers charges made by a **physician, hospital or surgery center** for the diagnosis; and surgical and non-surgical treatment of **jaw joint disorder**. A **jaw joint disorder** is defined as a painful condition:

- Of the jaw joint itself, such as temporomandibular joint dysfunction (TMJ) syndrome; or
- Involving the relationship between the jaw joint and related muscles and nerves such as myofascial pain dysfunction (MPD).



Dan Finke

President

Aetna Life Insurance Company  
(A Stock Company)

Amendment: New Mexico Medical ET – Open Access Elect Choice - \$5,000 Deductible Plan  
Issue Date: July 23, 2021

