

**Cigna Health and Life Insurance Company**  
**900 Cottage Grove Road**  
**Bloomfield, Connecticut 06002**

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**AMENDMENT**

Subscriber: LCS Community Employment LLC

Policy No.: HC111925

Amendment Effective Date: January 1, 2025

**PLEASE READ**

**IMPORTANT:** The attached amendment to your policy has been made at your request, and will be effective on the date shown within the amendment. Please review this amendment immediately and confirm that it accurately reflects your request and is consistent with your intentions. If amended certificates have been provided, please review these as well. If there are any errors or discrepancies, please notify your account manager or account service representative immediately. If you have not notified your account manager or account service representative of any errors or concerns, continued payment of premium more than 31 days after delivery of this amendment will be deemed acceptance of this amendment.

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**AMENDMENT**

Subscriber: LCS Community Employment LLC

Policy No. HC111925

Amendment Effective Date: January 1, 2025

This amendment will be in effect only for Covered Employees in Active Service on the Effective Date(s) shown below. If an Employee is not in Active Service on the date he would otherwise become eligible, he will become eligible on the date he returns to Active Service.

This Amendment is attached to and made part of the Policy specified above. It is subject to all of the policy provisions that do not conflict with its provisions.

Subscriber and We hereby agree that the Policy is amended as follows:

1. Effective January 1, 2025, the **HEALTH SCREENING TEST RIDER** found under OPTIONAL BENEFITS in the **SCHEDULE OF BENEFITS** for class 1 and 2 is deleted in its entirety from the Policy.
2. Effective January 1, 2025, the **HEALTH SCREENING TEST BENEFIT RIDER** is deleted in its entirety from the Policy.
3. Effective January 1, 2025, the following provision is added to the Policy:

**WELLNESS TREATMENT, HEALTH SCREENING TEST AND PREVENTIVE CARE  
BENEFIT RIDER**

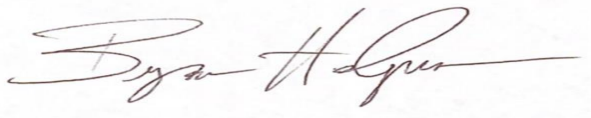
4. Effective January 1, 2025, the attached **WELLNESS TREATMENT, HEALTH SCREENING TEST AND PREVENTIVE CARE BENEFIT RIDER** is added to the Policy.

Except for the above, this Amendment does not change the Policy in any way.

Signed for the  
**CIGNA HEALTH AND LIFE INSURANCE COMPANY**



Geneva Campbell Brown  
Corporate Secretary



Bryan Holgerson  
President, U.S. Employer

Date: February 2, 2025

Amendment No. 04

GHIP-00-4000.00

**Cigna Health and Life Insurance Company**  
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**ADDITIONAL BENEFIT RIDER**

Subscriber: LCS Community Employment LLC

Policy No. : HC111925

Rider Effective Date: January 1, 2025

This Rider is attached to and made part of this Policy. The Benefits described below are added on the Rider Effective Date shown above and apply to all Covered Persons who are in Active Service on that date. The provisions of this Rider apply to Covered Persons who become insured under this Policy after the Rider Effective Date, as of their Effective Dates of insurance.

The following section is added to the *Schedule of Benefits*.

**WELLNESS TREATMENT, HEALTH SCREENING TEST AND PREVENTIVE CARE BENEFIT RIDER**

All Employee benefits under this Rider are payable at 100% of the Benefit Amount shown for the Eligible Employee.

All Spouse benefits are payable at 100% of the Benefit Amount shown for the Employee.

All Dependent Child(ren) benefits are payable at 100% of the Benefit Amount shown for the Employee.

Benefit Waiting Period

0 days

Pre-Existing Limitation Period

None

**EMPLOYEE BENEFITS**

Benefit Type

Benefit Amount

**Wellness Treatment Benefit**

**Health Screening Test Benefit**

**Preventive Care Benefit**

Benefit Amount

\$50 per day

Maximum Benefit Period

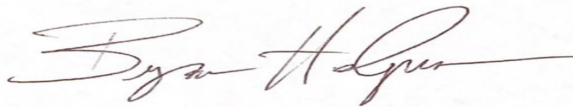
1 per year



Geneva Campbell Brown  
Corporate Secretary

Signed for the

**CIGNA HEALTH AND LIFE INSURANCE COMPANY**



Bryan Holgerson  
President, U.S. Employer

GHIP-00-5000.00

**Cigna Health and Life Insurance Company**  
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**WELLNESS TREATMENT, HEALTH SCREENING TEST AND PREVENTIVE CARE**  
**BENEFIT RIDER**

This Rider is attached to and made a part of your group insurance Policy. It is subject to the terms, conditions, limitations and exclusions contained in the Policy as well as those set forth in this Rider. These benefits are not subject to a Pre-Existing Condition Limitation.

Rider Effective Date: January 01, 2025

**THIS RIDER DOES NOT CONTAIN COMPREHENSIVE ADULT  
WELLNESS BENEFITS AS DEFINED BY WYOMING LAW.**

**BENEFITS**

The following provisions explain the benefits available under this Rider. Please see the *Schedule of Benefits* for the applicability of these benefits on a class level.

We will pay the per day benefit shown in the *Schedule of Benefits*, if a Covered Person undergoes or receives Wellness Treatment, Health Screening Test and Preventive Care examination, immunization, or testing as set forth below, under direction of a Physician while coverage under this Rider is in force. Benefits are subject to any applicable Benefit Waiting Period, Maximum Benefit Period, and Elimination Period.

**BENEFIT WAITING PERIOD**

The Benefit Waiting Period as shown in the *Schedule of Benefits* for this Rider applies.

**MAXIMUM BENEFIT PERIOD**

The Maximum Benefit Period is the period commencing on the first date that benefits are payable and continuing for the maximum period shown in the *Schedule of Benefits*.

**WELLNESS TREATMENT**

- Well Child Care – Office Treatment, Labs and Immunizations;
- Osteoporosis screenings;
- Routine gynecological exams;
- Routine prostate exams;
- General health exams;
- Colorectal cancer screening;
- Lead poisoning screening;
- Cancer screenings;
- Adult immunizations;
- Annual routine preventative dental exam;
- Annual routine ophthalmological exam including refraction

**HEALTH SCREENING TEST**

- Mammography
- Pap Smear for women over Age 18
- Flexible Sigmoidoscopy
- Hemocult Stool Specimen
- Colonoscopy
- Prostate Specific Antigen (for prostate cancer)
- Stress test on a bicycle or treadmill

- Fasting blood glucose test
- Blood test for triglycerides
- Serum cholesterol test to determine levels of HDL and LDL
- Bone marrow testing
- Breast ultrasound
- CA 15-3 (blood test for breast cancer)
- CA125 (blood test for ovarian cancer)
- CEA (blood test for colon cancer)
- Chest X-ray
- Serum Protein Electrophoresis (blood test for myeloma)
- Thermography and
- Infectious Disease Immunization (any FDA approved Vaccine to protect against a pandemic level infectious disease, as declared or defined by the Centers for Disease Control)
- Pandemic Infectious Disease Screening Test (any FDA approved screening tests to ensure an individual has antibodies for or is disease free from a pandemic level infectious disease, as declared or defined by the Centers for Disease Control)

### **PREVENTIVE CARE EVENTS**

Patient Protection and Affordable Care Act (PPACA) required preventive health services as recommended by the following expert medical and scientific bodies:

- the U.S Preventive Services Task Force (USPSTF);
- the Advisory Committee on Immunization Practices (ACIP);
- the Health Resources and Services Administration's (HRSA's) Bright Futures Project; and
- HRSA and the Institute of Medicine (IOM) committee on women's clinical preventive services.

Detailed information is available at:

<https://www.healthcare.gov/coverage/preventive-care-benefits/>

**Exclusion(s)** The exclusions that apply to these benefits are in the *Common Exclusions* section of the Policy.

### **RENEWABILITY/TERMINATION OF COVERAGE**

This Rider is renewable. However, this Rider shall automatically terminate on the earliest of the following dates:

1. the date the Covered Person's coverage ends for any reason under the Policy to which this Rider is attached;
2. the last day of the period for which premium is paid for this Rider, subject to the Policy's Grace Period provision;
3. the end of the period for which premium is paid for coverage under the Policy, to which this Rider is attached, subject to the Policy's Grace Period provision.

### **EXTENSION OF BENEFITS AND WAIVER OF PREMIUM PROVISION**

Coverage under this Rider is subject to the Extension of Benefits and Waiver of Premium provisions of the Policy.

### **PORTABILITY PROVISION**

Coverage under this Rider is portable. Coverage may only be ported if the Covered Person elects to port coverage under the Policy.

**REINSTATEMENT**

If the Employee applies for reinstatement of insurance under the Policy, the Employee may apply to reinstate this Rider at that time.

**CIGNA HEALTH AND LIFE INSURANCE COMPANY**

Geneva Campbell Brown  
Corporate Secretary

WPB-HIP1.2-2214.WY



Bryan Holgerson  
President, U.S. Employer