

AMENDMENT

POLICYHOLDER: Banner Health Systems

POLICY NUMBER: 3337258-DHMO

EFFECTIVE DATE OF THIS AMENDMENT: January 1, 2025

ISSUE DATE: September 25, 2024

As of the Effective Date of this Amendment, the Policy specified above is amended by the provisions shown below:

As of the effective date of this Amendment, CN006 is NULL and VOID and is replaced with CN007.

The following page attached to this Amendment is added to the policy:

POL136(9)

The page in List A is replaced in the policy by the page in List B that is attached to this Amendment.

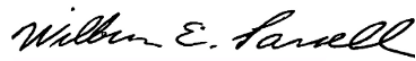
List A
POL287

List B
HP- POL287V1

CIGNA HEALTH AND LIFE INSURANCE COMPANY



Geneva Cambell Brown, Corporate Secretary



Wilbur E. Parsell, Registrar

ACCEPTED BY:

Policyholder Representative

Title

Date

*Mailing Address: Hartford, Connecticut 06152
Home Office: Bloomfield, Connecticut*

CIGNA HEALTH AND LIFE INSURANCE COMPANY

POLICYHOLDER: Banner Health Systems

ADDRESS: Phoenix, Arizona

ACCOUNT/GROUP NUMBER: 3337258

<u>Group Insurance Policy and Policy Number</u>	<u>Effective Date</u>	<u>Anniversary Date</u>
CIGNA DENTAL CARE INSURANCE 3337258-DHMO	01/01/2018	01/01

This policy is issued in Nevada and shall be governed by its laws.

This Policy contains the terms under which the Insurance Company agrees to insure certain Employees and pay benefits.

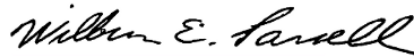
The Insurance Company and the Policyholder have agreed to all of the terms of this policy.



Geneva Cambell Brown, Corporate Secretary



Bryan Holgerson, President



Wilbur E. Parsell, Registrar

**NOTICE OF PROTECTION PROVIDED BY
NEVADA LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION**

Effective on or Before July 1, 2022

This notice provides a **brief summary** regarding the protections provided to the policyholders by the Nevada Life and Health Insurance Guaranty Association (“the Association”). The purpose of the Association is to assure that policyholders will be protected, within certain limits, in the unlikely event that a member insurer of the Association becomes financially unable to meet its obligations. Insurance companies and health maintenance organizations licensed in Nevada to sell life insurance, health insurance, annuities and structured settlement annuities are members of the Association. The protection provided by the Association is limited and is *not* a substitute for consumers’ care in selecting insurers. **Your policy or contract may not be covered, and if covered, there are substantial coverage limitations and exclusions. Further, coverage is dependent on continued residence in Nevada.** Below is a brief summary of the coverages, exclusions, and limits provided by the Association. This summary does not cover all provisions of the law, and the law may change.

COVERAGE

Persons Covered

Generally, an individual is covered by the Association if the insurer was a member of the Association and the individual lives in Nevada at the time the insurer is determined by a court to be insolvent. Coverage is also provided to policy beneficiaries, payees or assignees, whether or not they live in Nevada.

Amounts of Coverage

For any one life, per company, the coverage protections provided by the Association shall not exceed:

- **Life Insurance**
 - Death benefits: \$300,000
 - Cash surrender or withdrawal values: \$100,000
 - Annuities and Structured Settlement Annuities
 - Present value of annuity benefits and structured settlement annuities, including cash surrenders or withdrawal values: \$250,000
 - Participants in a government retirement plan covered by an unallocated annuity as described by NRS 686.C.035: \$250,000
- **Health Insurance**
 - Disability Income and long-term care insurance, including net cash surrender values: \$300,000
 - Health Benefit Plan: \$500,000
 - Health insurance, other than disability income, long-term care insurance or Health Benefit Plan: \$100,000

Please note that the maximum protection provided by the Association to an individual for all life insurance, annuities, and structured settlement annuities with one insurer is \$300,000; or for all life insurance, annuities, structured settlement annuities, and benefits for health benefit plans with one insurer, \$500,000, regardless of the number of policies or contracts covering the individual.

COVERAGE LIMITATIONS AND EXCLUSIONS FROM COVERAGE

The following policies and persons are examples of those excluded from Association coverage:

- A policy or contract issued by an insurer that was not authorized to do business in Nevada when it issued the policy or contract.

- A policy or contract issued by a fraternal benefit society, a mandatory state pooling plan, a mutual assessment company, an insurance exchange, or an organization that is only licensed to issue charitable gift annuities.
- Persons provided coverage by the Guaranty Association of another state.
- Unallocated annuity contracts; that is, contracts which are not issued to and owned by an individual and which do not guaranty annuity benefits to an individual except for annuities owned by a governmental retirement plan established under section 401, 403(b), or 457 of the Internal Revenue Code.
- Employer and association plans, to the extent they are self-funded or uninsured.
- A policy or contract providing any health care benefits under Medicare Part C or Part D.
- Any policy or portion of a policy which is not guaranteed by the insurer or for which the individual has assumed the risk, such as certain investment elements of a variable life insurance policy or a variable annuity contract.
- Any policy of reinsurance unless an assumption certificate was issued.
- Interest rate yields exceed an average rate.

NOTICES

Member insurers or their agents are required by law to give or send you this notice. Policyholders with additional questions should first contact their insurer or agent. The member insurer and its agents are prohibited by law from using the existence of the Association for the purpose of sales, solicitation or inducement to purchase a form of insurance or coverage offered by a health maintenance organization. You may file a complaint with the Nevada Insurance Commissioner if you believe any provision of the Nevada Life and Health Insurance Guarantee Association law has been violated. To learn more about coverage provided by the Association, please visit the Association's website www.nvlifega.org or contact either of the following:

Nevada Life and Health Insurance
Guaranty Association
2377 Gold Meadow Way, Suite 100
Gold River, CA 95670

Nevada Division Insurance
Department of Business and Industry
1818 E. College Pkwy., Suite 103
Carson City, NV 89706

When selecting an insurer, you should not rely on Association coverage. If there is any inconsistency between this notice and Nevada law, Nevada law will control.

THE INSURANCE SCHEDULE (Continued)

<u>GROUP POLICY(IES)</u>		<u>EMPLOYEE CLASS</u>	
<u>Certificate Number</u>	<u>Policy(ies)</u>	<u>Eligible Employees</u>	<u>Effective Date</u>
CN007	CIGNA DENTAL CARE INSURANCE 3337258-DHMO	Each Employee as reported to the insurance company by your Employer	01/01/2025