

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

AMENDMENT

Policyholder: Carrollton Farmers Branch Independent School District

Policy No.: HC110634

Amendment Effective Date: September 1, 2023

PLEASE READ

IMPORTANT: The attached amendment to your policy will be effective on the date shown within the amendment. Please review this amendment immediately and confirm that it is accurate. 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.

AMENDMENT

Policyholder: Carrollton Farmers Branch Independent School District

Policy No.: HC110634

Amendment Effective Date: September 1, 2023

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.

Policyholder and We hereby agree that the Policy and Certificate(s) are amended as follows:

1. If the **MENTAL ILLNESS AND NERVOUS DISORDER FACILITY CARE BENEFIT** is included in the **DESCRIPTION OF COVERAGES AND BENEFITS** section of the Policy and Certificate(s), the **Exclusion(s)** section is deleted in its entirety and is replaced by the following:

Exclusion(s) The exclusions that apply to this benefit are in the *Common Exclusions* section, *except:*
"Intentionally self-inflicted Injury, suicide or any attempt thereat while sane or insane."

2. If the **SUBSTANCE ABUSE FACILITY CARE BENEFIT** is included in the **DESCRIPTION OF COVERAGES AND BENEFITS** section of the Policy and Certificate(s), the **Exclusion(s)** section is deleted in its entirety and is replaced by the following:

Exclusion(s) The exclusions that apply to this benefit are in the *Common Exclusions* section, *except:*
"voluntary ingestion of any narcotic, drug, poison, gas or fumes, unless prescribed or taken under the direction of a Physician and taken in accordance with the prescribed dosage and operating any type of vehicle while under the influence of alcohol or any drug, narcotic or other intoxicant including any prescribed drug for which the Covered Person has been provided a written warning against operating a vehicle while taking it. 'Under the influence of alcohol', for purposes of this exclusion, means intoxicated, as defined by the law of the state in which the Covered Injury or Covered Illness occurred."

3. The following provisions is added to the **TERMINATION OF INSURANCE** section of the Policy and Certificate(s):

Extension of Benefits

If the Policy terminates while a Covered Person is Totally Disabled as the result of a Covered Injury or Illness, We will continue to pay benefits for that Covered Person until the earliest of:

1. 90 days after the Policy terminates; or
2. the date the Covered Person is no longer Totally Disabled.

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



Geneva Campbell Brown
Corporate Secretary

Signed for the
CIGNA HEALTH AND LIFE INSURANCE COMPANY



Bryan Holgerson
President, U.S. Employer

Date: November 13, 2024

Amendment No. 01

GHIP-00-4000.TX

REM PROJ AMD19