

Aetna Life Insurance Company

Hartford, Connecticut 06156

Amendment

Policyholder: Amalgamated Transit Union Local 726 Benefit Fund
Group Policy No.: GP-737336
Effective Date: April 1, 2015

The group policy specified above has been amended. The following sets forth 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.

Appeals Procedure

Definitions

Adverse Benefit Determination: A denial; reduction; termination of; or failure to provide or make payment (in whole or in part) for a benefit.

Such **adverse benefit determination** may be based on the covered person's eligibility for coverage.

Appeal: An oral or written request to Aetna to reconsider an **adverse benefit determination**.

Complaint: Any oral or written expression of dissatisfaction about the quality or the operation of the Plan.

Claim Determinations

Aetna will make notification of a claim determination as soon as possible but not later than 90 calendar days after the claim is made. Aetna may determine that due to matters beyond its control an extension of this 90 calendar day claim determination period is required. Such an extension, of not longer than 90 additional calendar days, will be allowed if Aetna notifies the covered person within the first 90 calendar day period. The extension notice shall indicate the special circumstances requiring an extension of time and the date by which a decision can be expected.

Complaints

If you are dissatisfied with the service you receive from the Plan you must call or write Aetna Customer Service within 30 calendar days of the incident. You must include a detailed description of the matter and include copies of any records or documents that you think are relevant to the matter. Aetna will review the information and provide you with a written response within 30 calendar days of the receipt of the **complaint**, unless additional information is needed and it cannot be obtained within this period. The notice of the decision will tell you what you need to do to seek an additional review.

Appeals of Adverse Benefit Determinations

You may submit an **appeal** if Aetna gives notice of an **adverse benefit determination**. This Plan provides for one level of **appeal**.

You have 60 calendar days following the receipt of notice of an **adverse benefit determination** to request your level one **appeal**. Your **appeal** may be submitted orally or in writing and should include:

- Your name;
- Your employer's name;
- A copy of Aetna's notice of an **adverse benefit determination**;
- Your reasons for making the **appeal**; and
- Any other information you would like to have considered.

Send your **appeal** to the address shown on the notice of adverse benefit determination or you may call in your **appeal** using the Toll-Free telephone number listed on such notice.

You may also choose to have another person (an authorized representative) make the **appeal** on your behalf by providing written consent to Aetna.

Level One Appeal

Aetna shall issue a decision within 60 calendar days of receipt of the request for an **appeal**. If Aetna determines that due to special circumstances an extension of time for claim processing is required, such an extension, of not longer than 60 additional calendar days, will be allowed if Aetna notifies the covered person within the first 60 calendar day period. The extension notice shall indicate the special circumstances requiring an extension of time and the date by which a decision can be expected.

Exhaustion of Process

You must exhaust the applicable Level One process of the Appeal Procedure before you establish any:

- litigation;
- arbitration; or
- administrative proceeding;

regarding an alleged breach of the policy terms by Aetna Life Insurance Company; or any matter within the scope of the Appeals Procedure.

You DO NOT have to exhaust the applicable Level One process of the Appeal Procedure before you may contact the State of New York Department of Insurance to request an investigation of a **complaint** or **appeal**; or file a complaint or **appeal** with the State of New York Department of Insurance.

Rider:

New York Complaint and Appeals Life Insurance Rider

Issue Date:

August 13, 2015



Mark T. Bertolini
Chairman, Chief Executive Officer and President

Aetna Life Insurance Company
(A Stock Company)