

Amendment to Plan of Benefits

For Employees of: Newark Board of Education
Master Services Agreement No.: MSA-0285515
Control number: 0176696

Effective July 1, 2024, the following changes have been made to your Schedule of Benefits.

The following information regarding "**Hearing Aid Maximum**" replaces the information by the same name currently appearing in your Schedule of Benefits

In regard to Open Access Aetna Select \$10 & Open Access Aetna Select \$15/\$25 & Open Access Aetna Select \$20/\$20 Plans:

Hearing aids

Description	In-network
Hearing aids Covered persons through age 21	100% per item, no deductible applies

Limit	\$2,500 every 60 months
-------	-------------------------

In regard to Open Access Aetna Select \$20/\$35 Plans:

Hearing aids

Description	In-network
Hearing aids Covered persons through age 21	\$20 then the plan pays 100% per item, no deductible applies

Limit	\$2,500 every 60 months
-------	-------------------------