

BENEFIT BOOKLET RIDER
(For Participating Provider Option Plans)

The benefit booklet, to which this Rider is attached and becomes a part, is amended as stated below.

A. BENEFIT HIGHLIGHTS

The Outpatient Treatment of Serious Mental Illness Benefit Period Maximum is amended as follows:

Outpatient Treatment of Serious Mental Illness Benefit period Maximum	35 visits
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B. DEFINITIONS SECTION

1. The following definition is added to the Definitions Section of your benefit booklet:

RETAIL HEALTH CLINIC.....means a health care clinic located in a retail setting, supermarket or Pharmacy which provides treatment of common illnesses and routine preventive health care services rendered by Certified Nurse Practitioners.

A “Participating Retail Health Clinic” means a Retail Health Clinic which has a written agreement with the Claim Administrator or another Blue Cross and/or Blue Shield Plan to provide services to you at the time services are rendered.

A “Non-Participating Retail Health Clinic” means a Retail Health Clinic which does not have a written agreement with the Claim Administrator or another Blue Cross and/or Blue Shield Plan to provide services to you at the time services are rendered.

C. PHYSICIAN BENEFIT SECTION

1. The following Covered Services are added to the Physician Benefit Section of your benefit booklet:

Amino Acid-Based Elemental Formulas—Benefits will be provided for amino acid-based elemental formulas for the diagnosis and treatment of eosinophilic disorders or short-bowel syndrome, when the prescribing Physician has issued a written order stating that the amino acid-based elemental formula is medically necessary. If you purchase the formula at a Pharmacy, benefits will be provided at the Benefit Payment for Other Covered Services described in the OTHER COVERED SERVICES section of this benefit booklet.

Clinical Breast Examinations—Benefits will be provided for clinical breast examinations when performed by a Physician, Advanced Practice Nurse or a Physician Assistant working under the direct supervision of a Physician. Benefits for clinical breast examinations

will be provided at the benefit payment level described in the Wellness Care provision of this benefit booklet.

2. The following Providers are added to the list of Participating Providers in the Physician Benefit Section of your benefit booklet:
 - Retail Health Clinics
3. The following Providers are added to the list of Non-Participating Providers in the Physician Benefit Section of your benefit booklet:
 - Retail Health Clinics

D. OTHER COVERED SERVICES

1. The following Providers are added to the list of Participating Providers in the Other Covered Services section of your benefit booklet:
 - Retail Health Clinics
2. The following Providers are added to the list of Non-Participating Providers in the Other Covered Services section of your benefit booklet:
 - Retail Health Clinics

E. SPECIAL CONDITIONS AND PAYMENTS

1. The Wellness Care Benefit Maximum provision is replaced with the following:

Wellness Care Benefit Maximum

Benefits for wellness care will be limited to a maximum of \$200 per benefit period.

The following Covered Services are not subject to the wellness care benefit maximum: ovarian cancer screening and clinical breast examination.

2. The Benefit Maximum for Outpatient treatment of Mental Illness and Substance Abuse Rehabilitation Treatment is replaced with with following:

Benefit Maximum for Outpatient treatment of Mental Illness and Substance Abuse Rehabilitation Treatment

Your benefits for Outpatient treatment of Serious Mental Illness are limited to a maximum of 35 visits per benefit period.

Your benefits for Outpatient treatment of Mental Illness for those illnesses not classified as Serious Mental Illness and Outpatient Substance Abuse Rehabilitation Treatment are limited to a combined maximum of 30 visits per benefit period.

Except as amended by this Rider, all terms, conditions, limitations and exclusions of the benefit booklet to which this Rider is attached will remain in full force and effect.