

RFP210494CJV
Medical Stop-Loss Insurance Policy
Aetna Life Insurance Company - Amendment No. 2

SECOND AMENDMENT OF THE AGREEMENT FOR
MEDICAL STOP-LOSS INSURANCE POLICY

THIS SECOND AMENDMENT OF THE AGREEMENT FOR MEDICAL STOP-LOSS INSURANCE POLICY, made and entered into by and between the Lee County Board of County Commissioners, a political subdivision of the State of Florida ("Insured") and Aetna Life Insurance Company ("Insurer"), collectively, the "Parties."

WHEREAS, the Insured entered into an Agreement for the purchase of stop loss coverage through Solicitation No. RFP210494CJV with Insurer on the 7th day of December 2021 ("Agreement"); and,

WHEREAS, the Parties mutually agree to increase the Individual Stop Loss Amount in the Section 2. Schedule of Insurance of the Agreement; and,

WHEREAS, the Parties mutually agree that the increase to the Individual Stop Loss Amount shall begin on the 1st day of January, 2024; and,

WHEREAS, the Parties desire to modify the Agreement pursuant to the "Right to Recalculate" subsection of Section 6. Conditions of the Agreement.

NOW, THEREFORE, IN CONSIDERATION OF THE FOREGOING AND THE MUTUAL COVENANTS CONTAINED HEREIN, IT IS AGREED AS FOLLOWS:

1. Beginning January 1, 2024, Section 2. Schedule of Insurance of the Agreement shall be superseded by the following:

[Remainder of the page left intentionally blank.]

RFP210494CJV
Medical Stop-Loss Insurance Policy
Aetna Life Insurance Company - Amendment No. 2

Section 2. Schedule of Insurance

Individual Stop Loss Specifications:

| | |
|--|--|
| THIRD POLICY YEAR: | January 1, 2024 through December 31, 2024 |
| PREMIUM RATE: | \$48.72 per employee per month |
| INDIVIDUAL STOP LOSS AMOUNT: | \$450,000 |
| INDIVIDUAL LIFETIME STOP LOSS PAYMENT AMOUNT: | Unlimited |
| CONTRACT BASIS: | Eligible Claim Expenses include claims paid between January 1, 2024 through December 31, 2024 (regardless of incurred date). |
| COVERED BENEFITS: | Medical Benefits administered by Aetna Prescription Drug Benefits administered by Aetna |

The information provided in this Schedule of Insurance for each Policy Year after the first shall be indicated in a written notice sent to the Insured and shall be effective on the date stated in such notice.

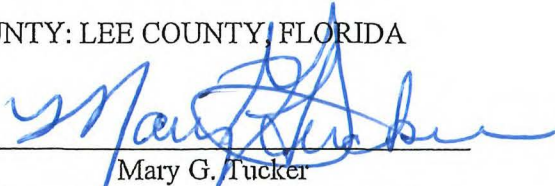
[Remainder of the page left intentionally blank.]

RFP210494CJV
Medical Stop-Loss Insurance Policy
Aetna Life Insurance Company - Amendment No. 2

IN WITNESS WHEREOF this Second Amendment of the Agreement has been signed and sealed, in duplicate, by the respective Parties hereto.

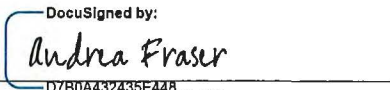
DATED this December 19, 2023 by the Lee County Board of County Commissioners.

COUNTY: LEE COUNTY, FLORIDA

BY: 
Mary G. Tucker

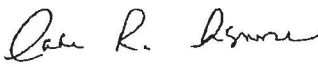
Director of Procurement Management, on behalf of the Board of County Commissioners

APPROVED as to Form for the Reliance of Lee County Only

BY: 
County Attorney's Office

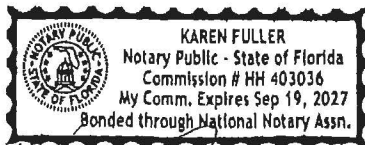
DATED this 28th day of November, 2023 by Aetna Life Insurance Company

ATTEST:

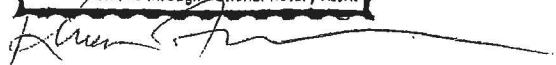
BY: 
Authorized Signature

Karen Fuller
(Witness)

Catherine R. Aguirre
Authorized Signature Printed Name



VP, Executive Dir. Sales & AM, SE Region
Authorized Signature Title


CORPORATE SEAL: