

# BENEFIT PLAN

## Extraterritorial Riders

Prepared Exclusively for  
Donnelley Financial, LLC

Long Term Disability

Aetna Life Insurance Company

These Extraterritorial Riders are part of the Group Insurance Policy  
between **Aetna** Life Insurance Company and the Policyholder

The Aetna logo is displayed in a light blue color. It features the word "aetna" in a lowercase, sans-serif font, with a small "SM" trademark symbol to the upper right of the "a".

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# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Arizona ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable ONLY for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Arizona. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Arizona, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.

**NOTICE: THIS CERTIFICATE OF INSURANCE MAY NOT PROVIDE ALL BENEFITS AND PROTECTIONS PROVIDED BY LAW IN ARIZONA. PLEASE READ THIS CERTIFICATE CAREFULLY.**

References to subrogation, if any, have been removed from the *General Provisions* section of your Booklet-Certificate and no longer apply to your plan of benefits.



Mark T. Bertolini  
Chairman, Chief Executive Officer and President

Aetna Life Insurance Company  
(A Stock Company)

# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Arkansas ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Arkansas. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Arkansas, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.

In no event will Aetna have sole discretion to decide what Disability Benefits are due.



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# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider *(GR-9N-CR1)*

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** California ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of California. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of California, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.



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# **Additional Information Provided by Aetna Life Insurance Company**

## **Inquiry Procedure**

The plan of benefits described in the Booklet-Certificate is underwritten by:

**Aetna Life Insurance Company (Aetna)  
151 Farmington Avenue  
Hartford, Connecticut 06156**

**Telephone: (860) 273-0123**

**If you have questions about benefits or coverage under this plan, call Aetna at the number shown above.**

**If you have a problem that you have been unable to resolve to your satisfaction after contacting Aetna, you should contact the Consumer Service Division of the Department of Insurance at:**

300 South Spring Street  
Los Angeles, CA 90013

Telephone: 1-800-927-4357 or 213-897-8921

You should contact the Bureau only after contacting Aetna at the numbers or address shown above.

# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Connecticut ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Connecticut. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Connecticut, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.

## What Happens When Other Income Benefits Increase (GR-9N 06-070 01)

An increase in other income benefits that you are eligible for may affect your benefit payable under this coverage.

If your other income benefits increase as the result of one of the following situations, the increased amount will be considered when calculating your benefits payable:

- The number of people in your family changes;
- Your benefit level is adjusted or corrected; or
- The severity of your disability changes.

This may result in a reduction in benefits payable.

A cost of living increase in other income benefits you receive from a governmental source (including, but not limited, to benefits under the Federal Social Security Act) will *not* reduce your benefits payable.

A cost of living increase in other income benefits you receive from a non-governmental source will *not* affect your benefits payable to the extent that the increase is based on the annual average increase in the **Consumer Price Index**.

A handwritten signature in black ink, appearing to read 'Mark T. Bertolini', with a stylized flourish at the end.

Mark T. Bertolini  
Chairman, Chief Executive Officer and President

Aetna Life Insurance Company  
(A Stock Company)



# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Georgia ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other, Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Georgia. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Georgia, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.

**The sub-section titled 'Subrogation', if included in the 'General Provisions' section of your Booklet-Certificate, has been removed and does not apply to your plan.**



Mark T. Bertolini  
Chairman, Chief Executive Officer and President

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(A Stock Company)

# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider *(GR-9N-CR1)*

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Indiana ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Indiana. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Indiana, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.

## Notice to Policyholders and Certificate Holders

Questions regarding your policy or coverage should be directed to:

**Aetna Life Insurance Company**  
**Contact Number: 1-866-825-6944.**

If you (a) need the assistance of the governmental agency that regulates insurance; or (b) have a complaint you have been unable to resolve with your insurer you may contact the Department of Insurance by mail, telephone, or email:

Indiana Department of Insurance  
Consumer Services Division  
311 West Washington Street, Suite 300  
Indianapolis, IN 46204

Consumer Hotline: (800) 622-4461; (317) 232-2395

Complaints can be filed electronically at [www.in.gov/idoi](http://www.in.gov/idoi).

A handwritten signature in black ink, appearing to read 'Mark T. Bertolini', with a stylized flourish at the end.

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# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Kentucky ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Kentucky. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Kentucky, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.



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Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Massachusetts ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Massachusetts. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Massachusetts, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.

## Thirty-One Day Continuation (GR-9N 31-015-01 MA)

Coverage under this plan which terminates in accordance with the prior terms of this section will be continued for 31 more days, subject to the following.

- Termination is not due to discontinuance of the Group Contract, or failure to make any required contributions.
- This plan's benefits will be reduced by any other benefits of like kind for which the person becomes eligible.

This applies unless the person elects any other available continuation.



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Hartford, Connecticut 06156

## Extraterritorial Certificate Rider *(GR-9N-CR1)*

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Missouri ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Missouri. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Missouri, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.



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Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** New Hampshire ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of New Hampshire. **These benefits supersede any provision in your booklet certificate to the contrary, however they do not duplicate the benefits described in your group policy.** You are only entitled to these benefits, if you are a resident of New Hampshire.



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Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** New Mexico ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of New Mexico. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of New Mexico, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.



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Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** North Carolina ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of North Carolina. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of North Carolina, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.



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# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider (GR-9N-CR1)

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Oregon ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Oregon. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Oregon, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.



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Chairman, Chief Executive Officer and President

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(A Stock Company)

# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Amendment

<b>Policyholder:</b>	Donnelley Financial, LLC
<b>Group Policy No.:</b>	GP-285509
<b>Rider:</b>	Texas ET LTD
<b>Issue Date:</b>	July 28, 2016
<b>Effective Date:</b>	July 1, 2016
<b>Texas:</b>	Long Term Disability Expense Coverage

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable ONLY for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents.

The benefits in this rider are specific to residents of Texas. If the benefits for covered expenses in this rider have no corresponding covered expense in the booklet certificate, then the covered expenses in this rider are in addition to the benefits provided under your booklet certificate. The benefits for covered expenses in this rider replace any benefits for covered expenses for the same benefit in the booklet certificate.

Except as otherwise shown in this rider, the benefits in this rider are subject to the annual limits and overall coverage year maximum (if any) specified in your booklet certificate.

## IMPORTANT NOTICE

To obtain information or make a complaint:

You may call Aetna's toll-free telephone number for information or to make a complaint at

**1-800-MY HEALTH (694-3258)**

You may also write to Aetna at:

**Aetna, Inc.**

2777 Stemmons Freeway, Dallas, TX 75207

You may contact the Texas Department of Insurance to obtain information on companies, coverages, rights, or complaints at:

**1-800-252-3439**

You may write the Texas Department of Insurance at:

Texas Department of Insurance

P.O. Box 149104

Austin, TX 78714-9104

FAX No. (512) 490-1007

Web: <http://www.tdi.texas.gov>

Email: [ConsumerProtection@tdi.texas.gov](mailto:ConsumerProtection@tdi.texas.gov)

### **PREMIUM OR CLAIM DISPUTES:**

Should you have a dispute concerning your premium or about a claim you should contact Aetna first. If the dispute is not resolved you may contact the Texas Department of Insurance.

### **ATTACH THIS NOTICE TO YOUR POLICY:**

This notice is for information only and does not become a part or condition of your Policy.

## AVISO IMPORTANTE

Para obtener información o para someter una queja:

Usted puede llamar al número de teléfono gratis de Aetna's para información o para someter una queja al

**1-800-MY HEALTH (694-3258)**

Usted también puede escribir a Aetna:

**Aetna, Inc.**

2777 Stemmons Freeway, Dallas, TX 75207

Puede comunicarse con el Departamento de Seguros de Texas para obtener información acerca de compañías, coberturas, derechos, o quejas llamando al:

**1-800-252-3439**

Puede escribir al Departamento de Seguros de Texas:

Texas Department of Insurance

P.O. Box 149104

Austin, TX 78714-9104

FAX No. (512) 490-1007

Web: <http://www.tdi.texas.gov>

Email: [ConsumerProtection@tdi.texas.gov](mailto:ConsumerProtection@tdi.texas.gov)

### **DISPUTAS SOBRE PRIMAS O**

### **RECLAMACIONES:**

Si surge una disputa concerniente a su prima o a una reclamación, debe comunicarse con Aetna primero. Si no se resuelve la disputa puede comunicarse con el Departamento de Seguros de Texas.

### **UNA ESTE AVISO A SU POLIZA:**

Este aviso es sólo para propósito de información y no se convierte en una parte o condición de su Póliza.

A handwritten signature in black ink, appearing to read 'Mark T. Bertolini', with a stylized flourish at the end.

Mark T. Bertolini  
Chairman, Chief Executive Officer and President

# Aetna Life Insurance Company

Hartford, Connecticut 06156

## Extraterritorial Certificate Rider *(GR-9N-CR1)*

**Policyholder:** Donnelley Financial, LLC  
**Group Policy No.:** GP-285509  
**Rider:** Wisconsin ET LTD  
**Issue Date:** July 28, 2016  
**Effective Date:** July 1, 2016

This certificate rider forms a part of the booklet certificate issued to you by Aetna describing the benefits provided under the policy specified above. This extraterritorial certificate-rider takes the place of any other Long Term Disability extraterritorial certificate-rider issued to you on a prior date.

Note: The provisions identified herein are specifically applicable **ONLY** for:

- Benefit plans which have been made available to you and/or your dependents by your Employer;
- Benefit plans for which you and/or your dependents are eligible;
- Benefit plans which you have elected for you and /or your dependents;
- The benefits in this rider are specific to residents of Wisconsin. **These benefits supersede any provision in your booklet certificate to the contrary unless the provisions in your certificate result in greater benefits.** You are only entitled to these benefits, if you are a resident of Wisconsin, and if the benefit value exceeds those benefits covered under the group policy and booklet certificate.



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Chairman, Chief Executive Officer and President

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