

# SUMMARY OF MATERIAL MODIFICATIONS FOR BENEFIT OPTIONS EPO PLAN

Distributed 10/10/14

This document is a summary of the material modifications of the terms of the Benefit Options EPO Plan, as a result of an amendment made to the plan by the Arizona Department of Administration, Human Resources Division- Benefit Services, effective as of date(s) set forth below. We urge you to review these materials carefully as they advise you of the recent changes made to your Plan.

A copy of the Plan, including any amendments, as well as the Summary Plan Description (SPD), is available on <http://benefitoptions.az.gov/>. If there is any discrepancy between the terms of the Plan or any amendment and this document and its attachments, the provisions of the Plan, as amended, will control. If you have any questions, please contact Human Resources Division- Benefit Services. Members affected by the changes noted below will receive notification if claim adjustments are applicable and the date of the claim adjustment.

Arizona Department of Administration,  
**Human Resources Division - Benefit Services**  
100 North 15th Avenue, Suite 103  
Phoenix, Arizona 85007  
**Phone:** 602.542.5008 or 1.800.304.3687  
**Fax:** 602.542.4744  
Email: [BenefitsIssues@azdoa.gov](mailto:BenefitsIssues@azdoa.gov)

This document should be kept with your SPD and other communications, as these documents collectively are designed to help you better understand your rights under the Plan.

<b>Effective Date</b>	<b>Benefit</b>	<b>Section and Detail of Change</b>
January 1, 2014	Hearing Aid Limitation	<b>Article 3</b>  <b>Section 3.4 Other Services and Supplies (Page 20)</b>  Item 26 - Add “and hearing aids” after Cochlear Implants
January 1, 2014	Hearing Aid Limitation	<b>Article 7</b>  <b>Section 7.1 Schedule of Medical Benefits Covered Services and Supplies Chart (page 32)</b>  Hearing Aids - Remove \$1,500 limit
January 1, 2014	Hearing Aid Limitation	<b>Article 7</b>  <b>Section 7.26 Hearing Aids (Page 47)</b>  Remove the first sentence in its entirety and replace with the following:  Hearing aid devices limited to one per ear, per Plan Year when determined to be medically necessary by the Medical Management Organization.