

UNITED STATES DISTRICT COURT FOR THE CENTRAL DISTRICT OF CALIFORNIA

NOTICE OF PROPOSED CLASS ACTION SETTLEMENT

If you had a precertification request or post-service claim for single-level lumbar artificial disc replacement denied by Aetna Life Insurance Company as experimental or investigational, you could receive relief from a class action Settlement.

A court authorized this Notice. You are not being sued. This is not a solicitation from a lawyer.

This Settlement Notice relates to a class action for members of ERISA-governed health plans insured or administered by Aetna Life Insurance Company (Aetna), who were denied coverage for single-level lumbar artificial disc replacement surgeries (L-ADR) between August 7, 2016 and February 8, 2023,

There are three different forms of relief available under a Settlement Agreement with Aetna who were denied coverage for single-level L-ADR:

- Persons who paid out-of-pocket for single-level L-ADR are eligible for reimbursement up to \$55,000.
- Persons who have not yet undergone the surgery, and are currently covered by ERISA-governed health plans administered or insured by Aetna, can submit new coverage requests for single-level L-ADR, which will be determined under the terms of this Settlement.
- Persons who have not yet undergone the surgery, but are no longer covered under an ERISA-governed health plan administered or insured by Aetna, are eligible for reimbursement up to \$55,000 for a future surgery if the person does not have coverage for single-level L-ADR through another health plan that covers single-level L-ADR or any reasonable ability to enroll in individual health coverage that provides coverage for single-level L-ADR.

Court-appointed lawyers for the class will ask the Court for up to \$2,556,000 in attorneys' fees and expenses, to be paid separately by Aetna, for investigating the facts, litigating the case, and negotiating the Settlement.

Your legal rights are affected whether you act or don't act. Read this Notice carefully.

YOUR LEGAL RIGHTS AND OPTIONS IN THIS SETTLEMENT:	
SUBMIT A CLAIM FORM	The only way to get relief under the Settlement.
EXCLUDE YOURSELF	If you choose to exclude yourself, you will lose the ability to seek reimbursement for a prior single-level ADR or coverage for future single-level L-ADR under the terms of the Settlement, but you can bring your own lawsuit.
OBJECT TO THE SETTLEMENT	Advise the Court of your disagreement with the Settlement.
GO TO A HEARING	Ask to speak in Court about the fairness of the Settlement, at a hearing the Court has scheduled for March 27, 2026 at 10:00 a.m.
APPEAR THROUGH AN ATTORNEY	If you desire, you may enter an appearance in this case through an attorney at your own expense.

These rights and options—**and the deadlines to exercise them**—are explained in this Notice.

The Court in charge of this case still has to decide whether to approve the Settlement. Relief under the Settlement will be provided if the Court approves the Settlement, if any appeals relating to the Settlement are resolved, and after Claim Forms and supporting documentation are provided. Please be patient.

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BASIC INFORMATION

1. Why did I get this Notice package?

Records indicate you are or were a member, participant, or beneficiary of an employee welfare benefit plan governed by ERISA and administered or insured by Aetna. Records also indicate you had either a pre-service authorization request or a post-service claim for L-ADR denied as experimental or investigational between August 7, 2016 and February 8, 2023.

The Court sent you this Notice because you have a right to know about a proposed Settlement of a class action lawsuit, and about all your options, before the Court decides whether to approve the Settlement. This package explains the lawsuit, the Settlement, your legal rights, what relief may be available to you under the Settlement, who is eligible for relief, and how to get relief.

The Court in charge of this lawsuit is the United States District Court for the Central District of California, and the case is a consolidated action known as *Brian Hendricks and Andrew Sagalongos v. Aetna Life Insurance Company*, Case No. 2:19-cv-6840-AB (“Hendricks Action”) and *Andrew Howard v. Aetna Life Insurance Company*, Case No.2:22-cv-01505-AB (“Howard Action”)

2. What is this lawsuit about?

This lawsuit concerns Aetna’s alleged practice until February 8, 2023 to deny coverage for single-level L-ADR on the basis that it was experimental or investigational under the terms of ERISA-governed health plans administered or insured by Aetna.

Aetna denies that it did anything wrong, and maintains that it complied with its obligations under the respective ERISA-governed employee welfare benefit plans and with all applicable laws. However, the parties have agreed to settle the Action to avoid the cost, delay and uncertainty of continued litigation.

3. Why is this a class action?

In a class action lawsuit, one or more people, called the “Class Representatives” (in this case, Brian Hendricks, Andrew Sagalongos and Andrew Howard), sue on behalf of other people who allegedly have a similar claim. These people together are a “Class” or “Class Members.” The company the Class Representatives sued (in this case, Aetna) is called the Defendant. One court resolves the issues for all Class Members, except for those who exclude themselves from the Class. The Honorable Andre Birotte, Jr. of the United States District Court for the Central District of California is in charge of this class action.

4. Why is there a Settlement?

The Court did not decide in favor of Plaintiff or Defendant. Instead, after this Action was filed, but before it reached trial, both sides agreed to a Settlement. If the Court approves the Settlement, the

Action will end. That way, they avoid the cost, delay, and uncertainty of moving forward in litigation to trial and possible appeals, and Class Members may be entitled to relief. The Class Representatives and Class Counsel think the Settlement is best for everyone in the Class and that the Settlement is fair, adequate, and reasonable.

WHO IS IN THE SETTLEMENT?

To see if you will get relief from the Settlement, including potential monetary benefits, you first have to decide if you are a Class Member. Based on a review of Aetna's records, you are receiving this Notice because the parties believe that you potentially are a member of the Class, and therefore are part of the Settlement.

5. How do I know if I am part of the Settlement?

The Court decided that everyone who fits the description below is a Class Member under the Settlement:

All persons: (1) covered under Aetna Plans, governed by ERISA, self-funded or fully insured, (2) whose requests for single-level L-ADR were denied from August 7, 2016 through February 8, 2023 on the ground that L-ADR is experimental or investigational, and (3) whose denials will be subject to an abuse of discretion standard of review by the district court, and (4) who are mailed this Notice.

6. I'm still not sure if I'm included.

If you are still not sure whether you are included, you can ask for free help. You can call 1-800-243-4551 and ask the Settlement Administrator for further information to help you determine whether you are a Class Member.

THE SETTLEMENT BENEFITS—WHAT YOU GET

7. What does the Settlement provide?

There are three different forms of relief available under a Settlement agreement with Aetna:

- Persons who paid out-of-pocket for single-level L-ADR surgeries and later had coverage denied by Aetna as experimental or investigational between August 7, 2016 and February 8, 2023, are eligible for certain reimbursement. Eligible reimbursement (for documented payments for single-level L-ADR surgeries) will be capped at \$55,000 per person.
- Persons who were denied coverage for single-level L-ADR by Aetna during the same time period, but have not undergone the surgery, and are currently covered by ERISA-governed health coverage administered or insured by Aetna, can submit new coverage requests for single-level L-ADR to be re-reviewed under the terms of the Settlement.

- Persons who were denied coverage for single-level L-ADR by Aetna during the same time period, but have not undergone the surgery, and are no longer a member of any ERISA-governed health coverage administered or insured by Aetna, are eligible for certain reimbursement relief for a future surgery if they meet all conditions for this relief. To be eligible for this reimbursement (for documented payments for a single-level L-ADR surgery), these Class Members must not have coverage for single-level L-ADR through another health plan, insurer, Medicare, or other reimbursement source for which they owe no reimbursement obligation (other than applicable deductible, copays, or coinsurance) or any reasonable ability to enroll in individual health coverage that provides coverage for single-level L-ADR. Eligible reimbursement will be capped at \$55,000 per person.

HOW CLASS MEMBERS CAN GET RELIEF UNDER THE SETTLEMENT

8. How do I seek reimbursement for L-ADR that I paid for?

If the Court approves this Settlement, you will be mailed a Claim Form that informs you about the Final Approval and the deadline to seek reimbursement.

If you paid out of pocket for single-level L-ADR, you can then make a claim for reimbursement through the following process: (1) submit within 90 days of Final Approval the Claim Form that will be mailed to you after the Court grants Final Approval of the Settlement; (2) submit documentation sufficient to show that you had L-ADR at a single level in your spine (such as an operative report, other clinical records, or sufficiently detailed payment records); (3) submit proof of payment (checks, wire transfer receipts, invoices reflecting actual payment, or other reasonable proof substantiating payment) showing net out-of-pocket payments to medical providers for the surgery, and (4) submit a statement of the specific amount of unreimbursed out-of-pocket costs for which the you seek reimbursement under the Settlement.

Within ninety (90) days of receiving such a claim, the Settlement Administrator will review the materials you submit and communicate a decision about whether you will be reimbursed.

If the Settlement Administrator denies a reimbursement request for lack of sufficient documentation, the Settlement Administrator will advise you of that problem and give you sixty (60) days to submit sufficient documentation.

9. How can I get approval for a future L-ADR if I am a Current Aetna Member?

If the Court approves this Settlement, you will be mailed a Claim Form that informs you about the Final Approval and the deadline to seek approval for a future surgery.

If you are currently covered by ERISA-governed health coverage administered or insured by Aetna, you can submit a request for the future surgery by submitting the Claim Form, following the instructions in the form, and providing the information requested in the form within 180 days of notice of Final Approval.

A Class Member, who is a current Aetna member, will be eligible to receive coverage for future single-level L-ADR if her surgeon signs an attestation in the Claim Form that in the surgeon's judgment, the planned single-level L-ADR is medically necessary for you. Alternatively, you can complete the class member portion of the Claim Form and submit that portion together with a letter from the treating surgeon attesting that in the surgeon's judgment, the planned single-level L-ADR is medically necessary for the Class Member. Aetna may ask the surgeon for additional information to support the surgeon's verification. All other provisions of the Class Member's current Aetna Plan, including those relating to coinsurance or copayments, will apply.

10. How can I get Settlement benefits for a future L-ADR if I am not a Current Aetna Member?

If the Court approves this Settlement, you will be mailed a Claim Form that informs you about the Final Approval and the deadline to seek benefits for a future surgery if you are no longer a current Aetna member.

To obtain coverage of single-level L-ADR through the Settlement you must obtain approval through the process described below. If you get the L-ADR before you've been approved through this process, you will not be eligible for reimbursement. You can make a claim for reimbursement for costs you may incur for a planned future single-level L-ADR through the following process: (1) submit to the Settlement Administrator within 60 days of notice of Final Approval the Claim Form attesting that you do not, as of the Effective Date of the Settlement, have coverage through another health plan, insurer, Medicare or other reimbursement source for which you owe no reimbursement obligation (other than applicable deductible, copays, or coinsurance) which provides coverage for single-level L-ADR, and you do not have any reasonable ability to enroll in individual health coverage that provides coverage for single-level L-ADR); (2) submit the portion of the Claim Form signed by your treating surgeon attesting that in the surgeon's judgment, the planned single-level L-ADR is medically necessary for you.

Alternatively, you can (1) submit the class member portion of the Claim Form and (2) instead of having your surgeon complete the surgeon attestation part of the Claim Form, submit a letter from the treating surgeon attesting that in the surgeon's judgment, the planned single-level L-ADR is medically necessary for you.

Aetna may ask your treating surgeon for additional information to support the surgeon's attestation or letter.

Within 30 days of receipt of the Claim Form and sufficient information from your treating surgeon, the Settlement Administrator will send you a notification telling you whether you meet all conditions for reimbursement relief for former Aetna members under the Settlement. After receiving this notification from the Settlement Administrator, you will have 180 days to have the single-level L-ADR and remain eligible for reimbursement under the Settlement.

If you complete all the steps above, you can pay your medical provider directly and be reimbursed by Aetna after providing all of the documentation described above in Question and Answer 8.

Alternatively, you may request that Aetna pay your treating surgeon directly within 90 days of receiving sufficient information showing that the surgeon performed a single-level L-ADR on you and the surgeon's medical bills.

In no event will Aetna's payments to you or, if you direct, to the surgeon, exceed \$55,000 under the Settlement.

11. Does the Settlement allow for reconsideration if my request for reimbursement is denied?

If the Settlement Administrator determines that a Class Member is not entitled to relief under the Settlement, the Settlement provides for a streamlined reconsideration process.

You will have sixty (60) days to request reconsideration of any unfavorable decision, including a decision that you are not entitled to relief or that you are not entitled to reimbursement in the amount claimed. You may seek reconsideration of the decision by notifying the Settlement Administrator by email, telephone, or mail. Class Counsel and Aetna's Counsel will meet and confer within thirty (30) days of receiving the request and attempt to resolve it. If the issue remains unresolved, Class Counsel and Aetna's Counsel will, within thirty (30) days of their conference, jointly present the matter to the Court for a final resolution. The Court's decision on the Class Member's request will be final. Neither the Class Member nor Aetna may appeal or contest the Court's resolution.

12. What am I giving up to stay in the Class?

Unless you exclude yourself, you will be releasing Aetna from the following claims:

Any and all actual or potential claims, actions, demands, rights, obligations, liabilities, damages, attorneys' fees, expenses, costs, and causes of action, whether arising under local, state, or federal law, whether by statute, contract, common law, equity, or otherwise, whether brought in an individual or representative capacity whether known or unknown, suspected or unsuspected, asserted or unasserted, foreseen or unforeseen that occurred before February 8, 2023 only, that:

(i) are based on the facts alleged in the Hendricks Action and the Howard Action specifically, by reason of or arising out of Aetna's denial of any request (whether pre-service or post-service) for L-ADR on the grounds that the procedure is experimental or investigational under ERISA-governed plans, either fully insured or self-insured;

(ii) would be barred by the principles of res judicata or collateral estoppel had the claims asserted in the Hendricks Action or the Howard Action, been fully litigated and resulted in a final judgment; or

(iii) seek attorneys' fees or costs related to the Hendricks Action or Howard Action in addition to the Attorneys' Fees and Costs specified in the Class Notice.

Released Claims do not include: (i) Any reimbursement claims or requests for coverage, as described below, that were or are denied by Aetna after February 8, 2023 or (ii) Any claim for

reimbursement or request for coverage by a Class Member that is denied by the Settlement Administrator on the basis that the Class Member had or is requesting a surgery other than a single-level L-ADR, and who does not obtain a court order to the contrary under the reconsideration described in Question and Answer 11.

If you want to know more about this release of claims, you should review the Settlement Agreement, which can be viewed on the website www.LADRSurgerySettlement.com or requested from the Administrator as set forth in Question and Answer 23.

EXCLUDING YOURSELF FROM THE SETTLEMENT

If you don't want to be included in this Settlement but you want to keep the right to sue or continue to sue Aetna on your own about the legal issues in this case, then you must take steps to get out of this case. This is called excluding yourself ("opting out") from the Class.

13. How do I get out of the Settlement?

To exclude yourself from the Settlement, you must send a letter by first-class mail clearly stating that you want to be excluded from *Brian Hendricks and Andrew Sagalongos v. Aetna Life Insurance Company, Case No. 2:19-cv-6840-AB* and *Andrew Howard v. Aetna Life Insurance Company, Case No.2:22-cv-01505-AB*. Be sure to include your name, address, telephone number, and your signature. You must mail your exclusion request, postmarked no later than February 17, 2026, to:

Hendricks & Howard v Aetna Life Insurance Co.
Settlement Administrator
PO Box 64053
Saint Paul, MN 55164

If you ask to be excluded, you cannot get any benefits under the Settlement, and you cannot object to the Settlement. If you exclude yourself under these procedures, you will not be legally bound by anything that happens in this lawsuit.

14. If I do not exclude myself, can I sue Aetna for the same thing later?

No. Unless you exclude yourself, you give up any right to sue Aetna for a previous denial of a request for L-ADR. If you have a pending lawsuit, speak to your lawyer in that case immediately. You must exclude yourself from *this* Class to continue your own lawsuit. Remember, the exclusion deadline is February 17, 2026.

15. If I exclude myself, can I get any relief from this Settlement?

No. If you exclude yourself, you will not be able to seek coverage for L-ADR, or reimbursement for expenses incurred in a past or future L-ADR, through the Settlement.

THE LAWYERS REPRESENTING YOU

16. Do I have a lawyer in this case?

Yes. The Court appointed the following attorneys as Class Counsel: Gianelli & Morris, A Law Corporation. You will not be charged for these lawyers. If you want to be represented by your own lawyer, you may hire one at your own expense.

17. How will the lawyers get paid?

Class Counsel will ask the Court for up to \$2,556,000 in attorneys' fees and expenses. Class Counsel will also ask the Court for an incentive payment of \$17,000 each for Class Representatives Brian Hendricks and Andrew Sagalongos, and \$10,000 for Class Representative Andrew Howard. The fees would pay Class Counsel for their fees and expenses in investigating the facts, litigating the case, and negotiating the Settlement. The Court may award less than these amounts. These amounts will not reduce the relief available to Class Members.

Aetna has agreed not to oppose these requests up to the stated amounts. Aetna will pay the fees, expenses, and incentive awards as determined by the Court. Aetna will also separately pay the costs to administer the Settlement.

OBJECTING TO THE SETTLEMENT

You can tell the Court that you don't agree with the Settlement or some part of it.

18. How do I tell the Court I don't like the Settlement?

If you are a Class Member, you can object to the Settlement if you don't like any part of it. The Court will consider your views. To object, you must send a letter saying that you object to the Settlement in *Brian Hendricks and Andrew Sagalongos v. Aetna Life Insurance Company, Case No. 2:19-cv-6840-AB* and *Andrew Howard v. Aetna Life Insurance Company, Case No. 2:22-cv-01505-AB*. The letter must include your name, address, telephone number, your signature, and the specific reasons (if any) for each objection, including any legal support you wish to bring to the Court's attention, and any evidence or other information you wish to submit. If you intend to appear at the fairness hearing, either in person or through counsel hired at your expense, your objection must state that as well.

You must mail the objection, postmarked no later than February 17, 2026, to the Settlement Administrator, as follows:

Hendricks & Howard v Aetna Life Insurance Co.
Settlement Administrator
PO Box 64053
Saint Paul, MN 55164

If your objection does not comply with the above requirements, your objection may be deemed waived and you may be barred from raising your objection in this lawsuit or any other proceeding.

19. What is the difference between objecting and excluding?

Objecting is simply telling the Court that you do not like something about the Settlement. You can object only if you stay in the Class. Excluding yourself is telling the Court that you don't want to be part of the Class. If you exclude yourself, you have no basis to object because the case no longer affects you.

THE COURT'S FAIRNESS HEARING

The Court will hold a hearing to decide whether to approve the Settlement. You may attend and you may ask to speak, but you don't have to.

20. When and where will the Court decide whether to approve the Settlement?

The Court will hold a fairness hearing at 10:00 a.m. on March 27, 2026 in Courtroom 7B of the United States District Court, located at 350 West First Street, Los Angeles, CA 90012. At this hearing, the Court will consider whether the Settlement is fair, reasonable, and adequate. If there are objections, the Court will consider them. The Court will listen to people who have asked to speak at the hearing. After the hearing, the Court will decide whether to approve the Settlement. The Court will also decide how much to award to Class Counsel and the Class Representatives. We do not know how long these decisions will take.

21. Do I have to come to the hearing?

No. Class Counsel will answer questions the Court may have. But you are welcome to come, at your own expense. If you send an objection, you don't have to come to Court to talk about it. As long as you mailed your written objection on time, the Court will consider it. You may also pay your own lawyer to attend, but it is not necessary.

22. May I speak at the hearing?

You may ask the Court for permission to speak at the fairness hearing. To do so, you must send a letter stating that it is your "Notice of Intention to Appear in *Brian Hendricks and Andrew*

Sagalongos v. Aetna Life Insurance Company, Case No. 2:19-cv-6840-AB and *Andrew Howard v. Aetna Life Insurance Company, Case No. 2:22-cv-01505-AB*. Be sure to include your name, address, telephone number, and signature. Your Notice of Intention to Appear must be postmarked no later than February 17, 2026 and be sent to the Settlement Administrator at the address stated above in response to question 18. You cannot speak at the hearing if you have excluded yourself from the Class.

GETTING MORE INFORMATION

23. Are there more details about the Settlement?

This Notice summarizes the proposed Settlement. More details are in the Settlement Agreement. You can get a copy of the Settlement Agreement through the website at www.LADRSurgerySettlement.com, or by requesting a copy from the Settlement Administrator at the address stated above in response to question 18.

IMPORTANT DATES

24. What are the important dates and deadlines relating to this Settlement?

December 17, 2025	Class Counsel will file a motion for approval of attorneys' fees and costs and request for a service award for the Class Representative.
February 17, 2026	Last day to submit a request for exclusion from the proposed Settlement.
February 17, 2026	Last day to serve Class Counsel and Aetna's Counsel with objections to the proposed Settlement.
February 17, 2026	Last day to file Notice of Intent to Appear.
March 27, 2026	Final Approval Hearing

Dated: December 17, 2025

Honorable Andre Birotte, Jr.
United States District Court Judge