

This document is an Amendment to your Plan's policy.

An amendment adds, modifies, deletes or otherwise changes a benefit listed in your Policy. You can make the most of your coverage with Health Alliance by reading your Amendments and keeping them with your Policy for future reference.



**HEALTH ALLIANCE
GROUP POLICY
AMENDMENT**

Health Alliance Group IL LGRP HMO 2017 is amended as follows:

The “WHAT IS COVERED” section is revised by adding the following:

Abortion

Services, drugs or supplies related to abortions that are determined to be necessary by the treating or referring Physician are covered, if the abortion is performed when the fetus is not Viable outside the uterus.

If the fetus is Viable, services, drugs or supplies related to abortions that are determined to be necessary by the treating or referring Physician are covered if:

- A Physician determines the life of the mother would be endangered if the fetus was carried to term;
- A Physician determines the fetus has a condition incompatible with life outside the uterus; or
- The pregnancy is the result of an act of rape or incest.

The “WHAT IS NOT COVERED (Exclusions & Limitations)” section is revised by removing the following:

Abortion

Services, drugs or supplies related to abortions are not covered, except when the life of the mother would be endangered if the fetus was carried to term, when the fetus has a condition incompatible with life outside the uterus, or if the pregnancy is the result of an act of rape or incest.

The “Terms” section is revised by adding the following term:

Viable

The ability for the fetus to survive outside of the womb. Viability of the fetus will be determined by your Physician.

In the event of conflict or inconsistency between this Amendment and the Policy, together with any previous Riders and Amendments, the provisions of this Amendment will control in all respects.