

**AMENDMENT**  
**TO THE**  
**ALASKA COMPREHENSIVE HEALTH INSURANCE ASSOCIATION**  
**ASSOCIATION PLAN**  
**EFFECTIVE DECEMBER 31, 2014**

This Amendment defines Policy Date and defines your renewal date under the Association Plan Policy. Effective December 31, 2014 your policy date begins on December 31 and ends on December 31 of the following year. Keep this Amendment with your Policy so that when you go to look up information you will be reminded that certain information has changed.

*Part C Renewal Agreement* is amended to read as follows:

**PART C** **RENEWAL AGREEMENT**

Your policy will be renewed on each renewal date until the earliest of:

- (a) The date you become age 65;
- (b) The date the Maximum Benefit has been paid under this policy and any other policy providing like benefits to you by us;
- (c) The date you are no longer a **Resident** of Alaska;
- (d) 30 days after the date of our inquiry, and you fail to respond, regarding your place of **Residency**;
- (e) The date Alaska statutes require cancellation of this policy;
- (f) The date you become eligible for medical coverage under another state or federal law, excluding Medicare, but including veteran's benefits, Native health care or Medicaid;
- (g) The date at the end of the waiting period for another health insurance policy, subscriber contract or benefit program including a self-insurance plan, health care trust or welfare trust. During this waiting period, this contract will only pay for coverage which is normally provided under this contract and which is not being covered by the new contract due to a pre-existing waiting period. This contract will pay secondary to any other benefits that might be provided by both the new contract and this contract;
- (h) The date you failed to pay your premium as required.

*Part E Policy Change* is amended to read as follows:

**PART E** **POLICY CHANGE**

Any provision of this policy is subject to change (including changes in benefits), except when prohibited by Alaska law. You will receive written notice of any benefit changes at least 45 days before your policy date. You will be notified of any accompanying premium change in accordance with the above premium change provision.

*Part F Definitions* is amended to read as follows:

**PART F** **DEFINITIONS**

**Calendar Year** means the period beginning on January 1 and ending on December 31 of the same year. The first calendar year begins on the Policy Date and ends on December 31 of the following year.

**Policy date** means the 12-month period beginning on December 31. The first policy date begins on the effective date of the policy and ends on December 31 of that year.

*Part G Pre-existing Condition Limitations is amended to read as follows:*

## **PART G                      PRE-EXISTING CONDITION LIMITATIONS**

If you have obtained this Plan as a result of being a Federally Defined Eligible Individual, there are no pre-existing conditions limitations.

Otherwise, your policy will not cover expenses incurred during the first 6 months after its effective date for a preexisting condition. We will pay only for expenses incurred after such 6-month period. Payment will be in accord with the provisions of this policy. However, if you had coverage under another medical plan or policy (“prior plan”) which was involuntarily terminated and you apply for coverage under this policy within 31 days after such involuntary termination from coverage under the “prior plan”, the above limitation as to a preexisting condition will apply only for a period of time equal to 6 months less the time you were covered under the “prior plan.”

*Part O Term of Coverage is amended to read as follows:*

## **PART O                                      TERM OF COVERAGE**

Your coverage starts on the Policy Date at 12:01 a.m., Alaska Time and will be renewed on each renewal date until terminated in accord with Part C. Upon ceasing to be a resident, previously purchased coverage remains in effect for the period covered by payments made while a resident.