

This Rider may expand or restrict the benefits set forth in your UPMC Health Plan Policy. See the Policy for the details of the terms of coverage for your health benefit plan. In the event that the terms of the Policy conflict with this Rider, the terms of this Rider control.

The Eligibility for Coverage Section of your Policy is amended to include the following:

In the section titled “Eligibility for Coverage,” under the “What happens to your coverage if you lose eligibility?” subsection, the following subparagraph, which read:

Once enrolled, each covered person must continue to meet the applicable eligibility criteria identified in this Policy to continue to be covered under this plan. In the event that a dependent becomes ineligible for coverage under this plan due to divorce or legal separation or reaching the maximum age (for children), coverage under the plan shall terminate; however, the dependent may apply within sixty (60) days of loss of eligibility for conversion coverage or an individual policy as a separate policyholder, without evidence of insurability.

is amended by this Rider to read:

Once enrolled, each covered person must continue to meet the applicable eligibility criteria identified in this Policy to continue to be covered under this plan. In the event that a dependent becomes ineligible for coverage under this plan due to divorce or legal separation or reaching the maximum age (for children), coverage under the plan shall terminate; however, the dependent may apply within 60 days of loss of eligibility for conversion coverage or an individual policy as a separate policyholder, without evidence of insurability. Graduate Students with an Academic Appointment (Graduate Student Assistants, Graduate Student Researchers, Teaching Assistants, Teaching Fellows) may be eligible for COBRA. The Consolidated Omnibus Budget Reconciliation Act, known as COBRA, offers a temporary extension of health coverage in certain instances in which coverage would otherwise terminate. Please contact the University of Pittsburgh Dedicated Member Services at UPMC Health Plan (1-888-499-6885) for more information or to find out if you are eligible.

The remaining provisions in the Eligibility for Coverage Section of your Policy remain unchanged.

The following benefits shall be modified, as set forth below. If you are not sure if a service is covered, call the University of Pittsburgh Dedicated Member Services at

UPMC Health Plan (1-888-499-6885) to inquire if that service is covered under your benefit plan. In the event that the terms of your Policy conflict with this Rider, the terms of this Benefit Modification Rider shall control.

The following benefits listed as an Excluded Services in your Certificate of Coverage shall constitute a Covered Service(s) under your benefit plan:

- Private Duty Nursing
- Bariatric Surgery
- Elective Abortion

Please see your Schedule of Benefits to determine any cost sharing or Benefit Limits applicable to this Covered Service.