
Section 2. How we change for 2005

Do not rely on these change descriptions; this page is not an official statement of benefits. For that, go to Section 5 Benefits. Also, we edited and clarified language throughout the brochure; any language change not shown here is a clarification that does not change benefits.

Program-wide changes

- In Section 9, we revised the **Medicare Primary Payer Chart** and updated the language regarding Medicare Advantage plans (formerly called Medicare + Choice plans).
- In Section 12, we revised the language regarding the Flexible Spending Account Program - *FSAFEDS* and the Federal Long Term Care Insurance Program.

Changes to this Plan

High Option

- Your share of the non-Postal premium will increase by 71.8% for Self only or 59.1% for Self and Family.
- **Office visit copay** - You now pay a \$25 copayment for office visits to a specialist.
- **Prescription drugs** - You now pay a \$10 copayment for brand formulary drugs per 30-day supply.
- **Inpatient hospitalization** - You now pay a \$100 copayment per admission.

Standard Option

- Your share of the non-Postal premium will increase by 20.1% for Self only or 20.1% for Self and Family.
- **Office visit copay** - You now pay a \$25 copayment for office visits to a specialist.
- **Prescription drugs** - You now pay a \$10 copayment for generic formulary drugs per 30-day supply, a \$20 copayment for brand formulary drugs per 30-day supply, and a \$30 copayment for non-formulary drugs per 30-day supply.
- **Inpatient hospitalization** - You now pay a \$250 copayment per admission.