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## Section 2 How we change for 2007

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Do not rely on these change descriptions; this Section 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 3, under **Covered providers**, Texas is designated as a medically underserved area in 2007. Alaska is no longer designated as a medically underserved area in 2007. (see page 11)

### Changes to this Plan

- The Plan allowable for services of Emergency Room Physicians who are not preferred providers will be paid at the preferred rate if services are rendered at a PPO hospital. (see page 7)
- Inpatient confinements at Skilled Nursing Facilities following hip or knee replacement surgery in lieu of continued acute inpatient care will be covered. Benefits are limited to five days up to \$300 a day. (see pages 52 and 111)
- The inpatient hospice benefit has been increased to \$250 a day with maximum of \$5,000. Outpatient hospice benefit has been increased to \$4,000. (see pages 52 and 111)
- Expenses for surgical treatment of hyperhidrosis will not be covered unless alternative treatment has been received but was not successful. Surgery must be precertified. (see pages 15, 42, 103 and 129)
- Benefits are payable only for bariatric surgery which is performed at Centers certified as well qualified by the American College of Surgeons or the American Society of Bariatric Surgery. Bariatric surgery must be precertified. (see pages 41 and 102)
- GEHA NurseLine advice line services are now available 24 hours a day, 7 days a week, 365 days a year to answer member's questions and calm concerns. The registered nurses provide information on illnesses, prescriptions, drug interactions, wellness tips, nutrition, and urgent health issues, including immediate guidance. Call 1-800-892-8260. (see pages 73 and 123)
- Also available is the Health Information Library and a Health Assessment to help determine your potential health risks and how to manage or avoid those risks and a Personal Health Record (PHR) that will help you track your health management and, if you'd like, to provide a history for your physician(s). These programs are strictly voluntary and confidential. For a demo of the Health Assessment or Personal Health Records, please visit [www.geha.com](http://www.geha.com). (see pages 73 and 123)

### Changes to High Option only

- Your share of the non-Postal premium will increase by 0.2% for Self Only or 0.3% for Self and Family.
- A Lab Card Program is now available. Services billed by Quest Diagnostics will be paid at 100%. No deductible or coinsurance will apply. (see pages 27, 59 and 72)
- At Medco Specialty Pharmacies if you choose a brand name specialty drug for which a generic exists, you will pay the 25% (non-Medicare) or 15% (Medicare) coinsurance and the difference between the cost of the brand name drug and the cost of the generic drug. (see page 32)
- At Non-Specialty Pharmacies if you choose a brand name specialty drug for which a generic exists, you will pay the 25% (non-Medicare) or 20% (Medicare) coinsurance and the difference between the cost of the brand name drug and the cost of the generic drug. (see page 33)

### **Changes to Standard Option only**

- Your share of the non-Postal premium will not increase for Self Only or for Self and Family.
- The calendar year deductible has been reduced to \$400 for Self Only and \$800 for Self and Family. (see page 16)
- A Lab Card Program is now available. Services billed by Quest Diagnostics will be paid at 100%. No deductible or coinsurance will apply. (see pages 27, 59 and 72)
- The coinsurance for Specialty Pharmacy Medications purchased at retail pharmacies and submitted to Medco for payment is 50% after a \$500 copayment. (see page 33)

### **Changes to High Deductible Health Plan**

- Your share of the non-Postal premium will not increase for Self Only or for Self and Family.
- The Preventive Benefit for services by PPO providers has been increased. Preventive services rendered by PPO providers will be paid at 100% with no calendar year limit. (see page 87)
- Preventive services from Non-PPO providers are now subject to the deductible and coinsurance. (see pages 87-88)
- The calendar year deductible has been increased to \$1500 for Self Only coverage; \$3000 for Family coverage. (see page 19)
- The contribution to the HSA or HRA has been increased to \$90 per month for Self Only coverage and \$180 per month for Family coverage. (see pages 78 and 81-82)
- GEHA will now pay the monthly administrative fee charged by HSA Bank for HSA participants. (see pages 78 and 81)

### **We have clarified the following:**

- Christian Science Facilities are covered providers if they are approved by the Commission of Accreditation of Christian Science Nursing. (see page 11)
- Under the High Option retail fills of single-source brand name drugs for greater than a 30-day supply will be subject to the 25% coinsurance up to the maximum of \$350. (see pages 66 and 67)
- Under the High Option when Medicare A & B is primary, retail fills of single-source brand name drugs for greater than a 30-day supply will be subject to the 20% coinsurance up to the maximum of \$350. (see pages 69 and 70)
- Under the High Option when brand name drugs are approved over generic, your cost will be based on the brand name drug. (see page 66)
- Expenses for sperm collection and storage are not covered. (see pages 30, 47, 94 and 107)
- Bone stimulators are only covered for established non-union fractures. (see pages 37 and 99)
- Covered expenses for chiropractic X-rays are limited to \$25 per calendar year. (see pages 38 and 100)
- Orthognathic surgery is covered for repair of severe facial abnormalities such as cleft palate and Pierre Robin Syndrome. (see pages 43-44 and 104)
- Separate charges of anesthesiologists for colonoscopies or upper endoscopy procedures are not covered. (see pages 48 and 107)
- Procedures for establishing HSA or HRA accounts have been modified. (see pages 78-79)
- You may enroll in a limited Flexible Spending Account (LEX-HCFSA) if you also have our HDHP with an HSA. (see page 79)
- Only qualified medical expenses incurred during HRA enrollment period may be reimbursed by HRA credit. (see page 79)