
Section 2 How we change for 2007

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.

Changes to this Plan

Changes to High Option only

- Your share of the non-Postal premium will increase by 44.5% for Self Only or will increase by 47.7% for Self and Family (see page 76).
- Copayments for well-baby office visits will decrease from \$15 to no charge.
- We've added limited coverage for acupuncture services when a Plan Physician makes a referral. The office visit copayment is \$15.
- The mental health intensive outpatient psychiatric treatment copayment will decrease from \$50 per day to \$15 per day with no copayment maximum. The previous copayment maximum was \$250 per episode.

Changes to Standard Option only

- Your share of the non-Postal premium will increase by 11.6% for Self Only or will increase by 12.4% for Self and Family (see page 76).
- Specialty care office visits will increase from \$20 to \$30 per visit.
- Copayments for well-baby office visits will decrease from \$20 to no charge.
- We've added limited coverage for acupuncture services when a Plan Physician makes a referral. The office visit copayment is \$30.
- The mental health intensive outpatient psychiatric treatment copayment will decrease from \$50 per day to \$20 per day with no copayment maximum. The previous copayment maximum was \$250 per episode.

Changes to both High and Standard Options

- We revised the amount you pay and services that are covered when you temporarily visit another Kaiser Permanente Plan.