
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

High Option only

- Your share of the non-Postal premium will increase by 11.7% for Self Only or increase by 18.5% for Self and Family
- We have increased the copayment for preventive care colonoscopies to \$75 per visit (see page 21).
- We have increased the copayment for voluntary sterilizations to \$75 (see page 24).

Standard Option only

- Your share of the non-Postal premium will increase by 12.8% for Self Only or increase by 12.8% for Self and Family
- We have decreased the primary care provider office visit copayment to \$15 from \$20 and decreased the specialty care provider office visit copayment to \$25 from \$30.
- We have decreased the urgent care center copayment to \$30 from \$40 (see page 20).
- We have eliminated the calendar year pharmacy deductible of \$100 per person.

Both High and Standard Options

- We revised the amount you pay and services you receive when you visit another Kaiser Permanente Plan (see page 54).

Changes to our High Deductible Health Plan

- Your share of the non-Postal premium will increase by 15.0% for Self Only or increase by 15.6% for Self and Family