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

- Your share of the non-Postal premium will increase by 5.3% for Self Only or 5.3% for Self and Family
- Your office visit copay when seeking care from a specialist, including mental health and chemical dependency specialists, will increase from $15 to $25 per visit. Refer to "Section 5(a) Medical services and supplies provided by physicians and other health care professionals."
- Your prescription drug copay for non-preferred brand drugs will increase from $30 to $40. Refer to "Section 5(f) Prescription drug benefits."
- The number of days supply per prescription unit or refill will decrease from 34 days to 30 days. Refer to "Section 5(f) Prescription drug benefits."
- We will cover the surgical treatment of morbid obesity in an M-CARE approved Center of Excellence. Refer to "Section 5 (b) Surgical and anesthesia services provided by physicians and other health care professionals" for information on bariatric surgery.
- Cardiac rehabilitation following a heart transplant, bypass surgery, a myocardial infarction, stable angina, percutaneous coronary vessel angioplasty, or congestive heart failure, is provided for a total of 36 sessions delivered within 18 weeks consecutive weeks. This treatment may include up to 3 weeks with ambulatory monitoring of heart rate and rhythm. This is changed from 6 weeks maximum within 60 consecutive days.