
Section 2 How we change for 2006

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 High Option Only

- Your share of the non-Postal premium for High Option will increase by 21.8% for Self Only and increase by 20.0% for Self and Family.

Changes to Basic Option only

- Your share of the non-Postal premium for Basic Option will increase by 7.2% for Self Only and increase by 7.3% for Self and Family.
- We have decreased the Outpatient Hospital or Ambulatory Surgical Center copay to \$125 per visit. (See page 37)

Changes to both High and Basic Options

- We have increased the catastrophic out-of-pocket maximum to \$3,000 for Self Only and to \$6,000 for Self and Family. (See page 15)
- Self-injectable drugs, which were previously covered under either Medical or Pharmacy benefits, now will be covered only under Pharmacy benefits. (See page 46)
- When you utilize professional services of physicians in Urgent Care Centers, you will pay a \$100 copay. (See page 19)
- We now provide coverage for Optic Nerve Imaging Methods if you have glaucoma or other retinal diseases. (See page 27)
- We now provide coverage for Smoking Cessation Treatment for two 90-day courses of prescription nicotine replacement therapy per calendar year. However, smoking cessation drugs and medications that can be obtained over-the-counter without a prescription are excluded from coverage. (See Section 5(f))
- We now provide coverage for Psychological and Neuropsychological testing for diagnostic purposes in the treatment of Mental Health and/or Substance Abuse conditions. (See page 42)
- We now provide coverage for an annual screening test for Human papillomavirus. (See page 20)
- We now provide coverage for one Routine Mammogram every calendar year from age 40 and older; or when medically necessary. (See page 21)
- We now provide coverage for digital rectal examination (DRE) and prostate specific antigen (PSA) tests for men aged 40 to 75. (See page 20)
- We now provide coverage for an annual Chlamydia screening. (See page 20)
- We now provide coverage for hearing loss screening of newborns provided by a participating hospital before discharge. (See page 21)
- We now provide coverage for a Routine eye refraction for a member who does not wear eyeglasses or contact lenses from Age 1 through 45 – once every 36-month period, and age 46 and over – once every 24-month period. (See page 27)
- We now provide coverage for Abdominal Aortic Aneurysm Screening – Ultrasonography, one between the age of 65 and 75 for men with a smoking history. (See page 20)
- We now provide coverage for Meningococcal vaccine for children at risk as indicated by the American Academy of Pediatrics. (See page 21)
- We now provide coverage for Osteoporosis Screening – routine screening for osteoporosis for women 65 and older and routine screening beginning at age 60 for women at increased risk. (See page 21)
- Under the Basic Dental option, you will pay up to a maximum fee of \$589 for an Apicoectomy. (See page 51)