
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 our Consumer Driven Health Plan

- Your share of the non-Postal premium will decrease by 3.2% for Self Only and decrease by 3.2% for Self and Family.
- Any unused remaining balance in the Dental Fund at the end of the calendar year will be rolled over to subsequent years, provided you remain enrolled in this Plan. (See page 32)
- We now refer to the “calendar year deductible” as “member responsibility,” and any excess dollars in the Medical Fund from rollovers in previous years can be applied toward reducing your “member responsibility.” You must remain enrolled in this Plan for unused remaining balances in the Medical Fund to be rolled over to subsequent years, up to a maximum rollover of \$4,000 for Self Only, and \$8,000 for Self and Family. (See page 34)

Changes to our High Deductible Health Plan

- Your share of the non-Postal premium will decrease by 3.1% for Self Only and decrease by 3.2% for Self and Family.

Changes to both our Consumer Driven Health Plan and our High Deductible Health Plan

- We now exclude coverage for non-emergency use of the Emergency Room. (See pages 53 and 97)
- We cover Varicella (chicken pox) vaccine – for all persons age 19 to 49 years. (See pages 27 and 75)
- We cover Tetanus, Diphtheria and Pertussis (Tdap) vaccine – for persons 19 to 64 years of age, with booster every ten years. The Tdap vaccine replaces the tetanus-diphtheria vaccine for those under the age of 64. For 65 and above, we cover a tetanus-diphtheria booster every 10 years. (See pages 27 and 75)
- We cover Hepatitis A vaccine – for all infants 12 to 23 months of age. (See pages 28 and 76)
- We cover Tetanus, Diphtheria and Pertussis (Tdap) vaccine – for children 11 to 12 years of age or for 13 to 18 years of age for those who did not previously receive the vaccination. (See pages 28 and 76)
- We cover vaccine to prevent Rotavirus for infants between eight to thirty-two weeks of age. (See pages 28 and 76)
- We cover Screening examination of premature infants for Retinopathy of Prematurity – A retinal screening exam performed by an ophthalmologist for infants with low birth weight (<1500g) or gestational age of 32 weeks or less and infants weighing between 1500 and 2000g or gestational age of more than 32 weeks with an unstable clinical course. (See pages 28 and 76)
- We have expanded our Service Area to include the State of Wisconsin. It includes the city of Milwaukee, and the entire counties of Jefferson, Kenosha, Milwaukee, Ozaukee, Racine, Sheboygan, Walworth, Washington, and Waukesha. (See page 14)
- We also have expanded our existing Service Area in the following States: Alabama, Alaska, Arkansas, Colorado, Florida, Georgia, Louisiana, Massachusetts, Michigan, Mississippi, Missouri, New Hampshire, New York, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia and West Virginia. (See pages 11 – 14 for a detailed description of the Service Areas)
- We reduced a portion of our Service Area in the State of California. If you live or work in the county of Nevada, you should either select another FEHB plan during Open Season, or travel to the Service Area(s), to receive full Plan benefits. However, if you do not select another FEHB plan during Open Season, and receive care outside of one of the Plan’s Service Areas, you still can continue to access out-of-network care. (See page 11)