
Section 2 How we changed 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 for enrollment code CH for the High Option will increase by 23.9% for Self Only coverage or 39.5% for Self and Family coverage.
- The service area has changed. For the complete list of counties in the 2007 service area, see page 7.
- Copayments for specialist office visit will increase to \$30 per visit. See page 16.
- Copayments for inpatient hospital will increase to \$150 per day up to 3 days per admission. See page 32.
- Copayments for outpatient surgical facility will increase to \$50 per visit. See page 33.
- Copayments for specialty prescription drugs will be : Tier 1 \$10, Tier 2 \$30, Tier 3 \$50 See page 41.
- We now require that you use the Specialty Pharmacy Program for prescription drugs to treat specific conditions. See page 41.
- We now cover genetic counseling. See page 19.