
Section 2. How we change for 2008

Do not rely only on these change descriptions; this page 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.

Program-wide changes

- Texas and West Virginia were removed from the list for 2008 of medically underserved areas.
- United States Postal Service non-law enforcement career employees may now be covered either by Postal Category 1 or Postal Category 2 premium rates. See page 86.

Changes to this Plan

- Your share of the NALC Postal premium will decrease for Self Only and decrease for Self and Family. See page 86.
- Your share of the non-Postal premium will decrease for Self Only and decrease for Self and Family. See page 86.
- Your calendar year deductible and copayments count toward your catastrophic protection out-of-pocket maximum (the prescription drug calendar year deductible and copayments are not included). Previously, your deductible and copayments did not count. (See page 20)
- We now cover Herpes Zoster (shingles) vaccine for adults age 60 and older. (See page 26)
- We now cover Human Papillomavirus (HPV) vaccine for adult women age 26 and younger. (See page 26)
- We now cover Measles, Mumps, Rubella (MMR) vaccine, age 19 through 49. (See page 26)
- We now cover two routine diabetes screenings every three years for adults. (See page 27)
- We now cover routine Human Immunodeficiency Virus (HIV) screening for adults, one annually. (See page 27)
- We now cover one newborn screening hearing test. (See page 28)
- You now pay nothing for anesthesia for the delivery of a newborn when you use a PPO provider. Previously, you paid 15%. (See pages 28 and 43)
- We now cover one pair of custom functional foot orthotics, with a maximum Plan payment of \$400 every 5 years. (See page 33)
- We now cover the initial office visit under the chiropractic benefit. Previously, you paid all charges rendered outside of a medically underserved area. (See page 36)
- You now pay nothing for a smoking cessation program through United HealthCare's QuitPower®. Previously, you paid all charges after the Plan's maximum payment of \$100. (See page 36)
- We no longer apply the PPO calendar year deductible to surgical procedures rendered by a PPO provider. Previously, the PPO calendar year deductible applied. (See page 37)
- You now pay 15% for anesthesia rendered by a non-PPO provider in a PPO hospital. Previously, you paid 30%. (See page 43)
- You now pay nothing for inpatient room and board in a PPO hospital/facility. Previously, you paid 10%. (See pages 44 and 51)
- You now pay 15% for medical emergencies rendered in a non-PPO outpatient hospital. This benefit is limited to the initial treatment of an automobile accident, concussion, or acute myocardial infarction. Previously, you paid 30%. (See page 50)
- We now cover prescription prenatal vitamins. (See page 58)

Clarifications

- We updated our information on accreditations. (See front cover)
- We clarified our PPO network is CIGNA HealthCare Shared Administration PPO Network and we now participate in the CIGNA LIFESOURCE Transplant Network®. (See pages 7, 40)

- We clarified that your coinsurance expenses for inpatient services billed by PPO hospital facilities will not exceed \$2000 per calendar year. (See page 20)
- We clarified that we would cover one influenza vaccine per flu season. (See page 26)
- We clarified that certain routine lab, x-ray, and other tests are not covered. (See pages 26, 28)
- We updated that routine hearing tests are not covered except as listed in Preventive care, children and that auditory devices are not covered. (See page 28)
- We clarified that physical therapy which maintains a functional status or prevents decline in function is not covered. (See page 31)
- We updated the criteria for coverage of bariatric surgeries. (See page 38)
- We clarified that we cover autologous transplants in some clinical trials. (See page 42)
- We clarified that we do not cover anesthesia services billed by the anesthesiologist for dental procedures. (See page 45)
- We updated the address for filing Caremark paper claims. (See page 57)
- We added Personal Health Record to our Special features. (See page 61)
- We clarified our definition of non-PPO Plan allowance. (See page 76)