
Section 2. How we change for 2008

Do not rely only 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

- 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 66.
- Your share of the non-Postal premium will remain the same for Self-Only and decrease for Self and Family. See page 66.
- With the exception of chiropractic office visits, you now pay a \$15 copayment for office visits. See Section 5(a).
- We have added benefits for hearing aids for children through age 17. See Section 5(a).
- We have eliminated your copayment for orthopedic and prosthetic devices. You are only responsible for related office visit copayments. See Section 5(a).
- You now pay a \$100 per day up to 3 days in the hospital for inpatient hospital services. See Section 5(c).
- You now pay a \$15 copay for emergency or urgent care in an office setting and \$100 copay as an outpatient at a hospital. See Section 5(d).
- You now pay a \$15 copay for mental health and substance abuse services and \$100 per day up to 3 days for inpatient hospital services. See Section 5(e).
- You now pay a \$10 copayment for generic drugs; \$35 for brand-name drugs and \$50 for non-formulary drugs at a retail pharmacy. You now pay a \$20 copayment for generic, \$70 for brand-name and \$100 for non-formulary mail order drugs. See Section 5(f).
- You now pay a \$15 copayment for vision services. See Section 5(a).
- Your catastrophic protection out-of-pocket maximum is now \$2,000 per person or \$4,000 per family enrollment per calendar year. See Section 4.
- We added a 24-hour nurse line. See Section 5(h).
- We have expanded coverage for the surgical treatment of morbid obesity to include the laparoscopic adjustable gastric band procedure. We are also clarifying that repeat surgery for morbid obesity due to behavioral failure is not covered.
- We have clarified that video assisted visual aids or video magnification equipment are not covered.
- We have clarified that human papillomavirus (HPV) screening tests are covered under the annual preventive care benefit for cervical cancer screening.
- We have clarified that you should call us at 800-880-8086 if you want to change your assigned IPA/medical group, even if you are not changing your primary care physician.