
Section 2 How we change for 2006

Do not rely 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.

Changes to this Plan

- Your share of the non-Postal premium will increase by 38.1% for Self Only or 48% for Self and Family.
- You will now pay a \$50 copayment for surgery at an outpatient hospital or ambulatory surgical facility.
- You will now pay a \$75 per visit copayment for use of the emergency room. The copayment is waived if you are admitted to the hospital.