
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.

Program-wide changes

- Texas and West Virginia were removed from the list for 2008 of medically underserved areas. (See page 11.)
- 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 130.)

Changes to this Plan

Changes to our Standard Option only

- Your share of the non-Postal premium will increase for Self Only or increase for Self and Family. (See page 130.)
- Medco is now the administrator of the Mail Service Prescription Drug Program. (See pages 16 and 105.)
- The calendar year deductible is now \$300 per person and \$600 per family. Previously, the deductible was \$250 per person and \$500 per family. (See page 17.)
- The catastrophic out-of-pocket maximum for deductibles, coinsurance, and copayments is now \$4,500 per year when you use Preferred providers and \$6,500 per year when you use a combination of Preferred and Non-preferred providers. Previously, the out-of-pocket maximum was \$4,000 for Preferred provider services and \$6,000 for both Preferred and Non-Preferred provider services. (See page 20.)
- We now provide benefits for facility care (other than accident and maternity care) provided in the outpatient department of a Preferred hospital at 85% of our Plan allowance. Previously, we provided benefits at 90% of our allowance. In addition, we now provide benefits for facility care (other than accident care) provided in the outpatient department of a Non-preferred hospital at 70% of our Plan allowance. Previously, we provided benefits at 75% of our allowance. (See pages 66 to 68, 76, 80, and 83.)

Changes to our Basic Option only

- Your share of the non-Postal premium will increase for Self Only or increase for Self and Family. (See page 130.)
- We now offer a High Deductible Health Plan (HDHP), as a sub-option called Basic Consumer Option, for members who live in certain geographic service areas. (See pages 7 to 8 for more information.)

Changes to both our Standard and Basic Options

- We clarified the benefits available for genetic testing. (See pages 30, 32, and 35.)
- We clarified that Preventive care benefits are available for meningococcal vaccines for adults. (See page 33.)
- We clarified the benefit limitations for refractions. (See page 40.)
- We now provide benefits for hearing aids (including bone anchored hearing aids) for children up to age 22, limited to \$1,000 per ear per calendar year. In addition, we now provide benefits for bone anchored hearing aids for adults when medically necessary due to traumatic injury or malformation of the external or middle ear, limited to \$1,000 per ear per calendar year. Previously, benefits were not provided for these types of devices. (See page 43.)
- We now provide benefits for inpatient and outpatient hospital care related to the treatment of children up to age 22 with severe dental caries. (See pages 64, 67, and 93.)
- We now provide benefits for pre-enrollment visits for home hospice care when provided by a physician employed by the hospice agency. Previously, home hospice benefits were not available for these types of services. In addition, we clarified our prior approval process for home hospice care and the types of services covered under the home hospice care benefit. (See page 70.)