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## Section 2. How we change for 2005

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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.

### Program-wide changes

- In Section 3, under **Covered providers**, Alaska is designated as a medically underserved area in 2005. Maine, Utah and West Virginia are no longer designated as medically underserved areas in 2005.
- In Section 10, we revised the **Medicare Primary Payer Chart** and updated the language regarding Medicare Advantage plans (formerly called Medicare + Choice plans).
- In Section 13, we revised the language regarding the Flexible Spending Account Program - *FSAFEDS* and the Federal Long Term Care Insurance Program.

### Changes to this Plan

- Your share of the non-Postal premium under the High Option will increase by 17.1% for Self Only or 18.5% for Self and Family. Under the Standard Option, your share of the premium will increase by 10% for Self Only or 10% for Self and Family.
- For 2005, GEHA will offer a High-Deductible Health Plan combined with Health Savings Accounts and Health Reimbursement Arrangements. Please refer to Section 6 of this brochure for a complete description of this plan.
- We changed the PPO network for the state of Oklahoma to PPO USA.

### Changes to High Option only

- The copayments through Medco By Mail for non-Medicare members is now \$15 for generic drugs, \$50 for single-source brand name drugs, and \$65 for multi-source brand name drugs.
- The copayment for drugs for Medicare members is now \$5 for generic drugs, \$15 for single-source brand name drugs, and \$30 for multi-source drugs at network retail pharmacies and \$10 for generic drugs, \$25 for single-source brand name drugs and \$40 for multi-source brand name drugs at Medco By Mail.

### Changes to Standard Option only

- The dental benefit has been changed to 50% of Plan allowable for diagnostic and preventive services as follows:
  - Two examinations per person, per year
  - Two prophylaxis (cleanings) per person, per year
  - Two fluoride treatments per person, per year
  - \$150 in allowed X-ray charges per person, per year (payable at 50%)

## **We clarified the following:**

- We clarified that Christian Science practitioners are now covered providers.
- We clarified that Nuclear Cardiac Imaging Studies require precertification.
- We clarified that a physical therapy, occupational therapy, or speech therapy visit is two hours or less.
- We clarified that information about your prescription drug utilization may be disclosed to your treating physicians or dispensing pharmacies as part of our administration of prescription drug benefits.
- We clarified some drug quantities may be restricted.
- We clarified that some medications must be approved by GEHA and/or Medco.
- We clarified how to obtain reimbursement for prescription drugs when you have other coverage.
- The name for Medco Home Delivery Pharmacy Service has changed to Medco By Mail.
- The address for Medco has changed.
- We clarified that some drugs for anemia, arthritis, psoriasis, and hepatitis should be precertified.
- We clarified you must comply with your primary payers preauthorization, use of designated facilities and timely filing requirement or we will pay secondary benefits based on an estimate of what the primary carrier would have paid if you followed their requirements.
- We have clarified that Professional fees for automated lab tests are not covered.
- We have clarified that psychological testing requires preauthorization.