
Section 2 How we change for 2006

Do not rely 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 High Option only

- Inpatient mental health and substance abuse services no longer require a copayment. See page 46.
- You now have an annual out-of-pocket copayment maximum of \$1,000 for Self Only and \$2,000 for Self and Family. This copayment maximum applies to hospital, skilled nursing facility and rehabilitation admissions, and inpatient and outpatient surgery services. See page 18.

Changes to both High and Standard Options

- Routine physical exams with your primary care provider no longer require a copayment. See page 24.
- Well-child care visits no longer require a copayment. See page 25.
- Routine annual gynecological exams no longer require a copayment. See page 24.
- Routine immunizations administered during a routine physical examination with your PCP no longer require a copayment. See page 25.
- Short-term inpatient care in a hospice or skilled nursing facility is covered for as many days as are medically necessary. Previously this benefit was limited to 5 consecutive days. See pages 42 to 43.
- A one-time Abdominal Aortic Aneurysm screening (ultrasound) is covered for men between the ages of 65 and 75 with a history of smoking. See page 24.
- The administration of the Meningococcal Conjugate Vaccine is covered for children at risk as indicated by the American Academy of Pediatrics. See page 26.
- Pancreas transplants are now covered. See page 39.
- We removed the exclusion on travel related vaccines. See pages 25 and 26.
- We eliminated the option to choose a Physician Assistant or a Nurse Practitioner as a Primary Care Physician.