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## Section 2 How we change for 2006

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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 this Plan

- Your share of the non-postal premium will increase by 3.6% for Self Only and 3.6% for Self and Family. (See page 57.)
- A primary care physician visit is now subject to a \$15 copay. (See page 14.)
- A specialist visit is now subject to a \$25 copay. (See page 14.)
- The inpatient hospital admission copay is \$200 per day up to a maximum copay of \$600 per admission. (See page 25.)
- The outpatient surgery facility charge is a \$200 copay per visit. (See page 26.)
- Outpatient hospital non surgical services such as MRIs are subject to a \$100 copay per visit. (See page 26.)
- For outpatient hospital non surgical services such as routine lab and x-rays you pay nothing. (See page 26.)
- Emergency care as an outpatient at a hospital including doctors' services - \$100 copay per visit. (See page 29.)
- The copays for prescription drugs increased to \$10 for Level One, \$30 for Level Two, and \$50 for Level Three. Level Four changed from \$100 to 25%. (See page 33.)