
Section 2 How we change for 2007

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 10.4% for Self Only or 10.5% for Self and Family.
- Specialty medications are covered at only participating network specialty pharmacies. The first time a new prescription for a specialty medication is purchased, the member may have it filled at a participating network pharmacy of his/her choice.
- Drugs used in the treatment of cancer including chemotherapeutic agents and adjunctive medications that can be self-administered and are dispensed by a pharmacy are covered under the prescription drug rider and subject to the cost sharing in the rider: Tier 1 \$10, Tier 2 \$25, Tier 3, \$40 per 30 day supply. Previously, they were covered in full under the base medical plan.
- Injectable Drugs in the physician's office and at outpatient facilities will be subject to two \$20 copays, one \$20 copay for the visit and one \$20 copay for the drug. Previously, a single \$20 copay covered both the visit and the drug.
- Under Durable Medical Equipment, the rental or purchase of durable medical equipment is covered at 50% of the plan's allowance up to a \$5,000 maximum per calendar year. Previously, there was no annual calendar maximum.