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## Section 2. How we change for 2008

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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.

### **Changes to HMO and POS coverage**

- Your share of the non-Postal premium for HMO with POS coverage will increase for Self Only or for Self and Family.
- We do not cover breast ductal lavage. Please see the Non-FEHB Program Benefits on page 90.
- Your copay for participating after hours care centers has increased from \$15 to \$35. Please see Section 5(c) for after hours care center benefit information on page 34 for information.

### **Changes to our High Deductible Health Plan**

- Your share of the non-Postal premium will decrease for Self Only or for Self and Family.
- We do not cover breast ductal lavage. Please see the Non-FEHB Program Benefits on page 90.