
Section 2 How we change for 2008

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 (High Option) will increase or decrease.
- Your share of the Category 1 Postal premium (High Option) will increase or decrease.
- Your share of the Category 2 Postal premium (High Option) will increase or decrease.
- Your share of the non-Postal premium (Standard Option) will increase or decrease.
- Your share of the Category 1 Postal premium (Standard Option) will increase or decrease.
- Your share of the Category 2 Postal premium (Standard Option) will increase or decrease.
- High Option: Under Prescription drugs, prescriptions are now covered with a \$5 copay for generic and a \$15 copay for brand. Previously they were covered with a \$5 copay for both generic and brand. (see page 43).
- High Option: Under Preventative Care, routine immunizations for the general public endorsed by the Centers of Disease Control and prevention (CDC), the member copay has been eliminated. Previously it was covered with a \$10 copay. (see page 18)
- Standard Option: Under Anesthesia coverage, the copayment has been eliminated for inpatient services. Previously there was a \$500 copayment per member per contract year, with a maximum of 3 copayments per member per contract year and a maximum of 3 copayments per family per contract year. Office anesthesia copayment is also eliminated. (see page 33)
- High & Standard Options: Under Surgical procedures, morbid obesity surgery is covered at 100% for the High Option and a \$500 copayment for the Standard Option. Previously it was covered with a \$1000 copayment. (see page 28).
- High & Standard Options: Under Chemotherapies and Radiation Therapies, the member copayment has been eliminated. Previously it was covered at \$10 copay for High Option and \$20 copay for Standard Option. (see page 21).
- High & Standard Options: Under Treatment Therapies, Hemodialysis and Peritoneal dialysis are now covered with a 20% member co-insurance. Previously it had a \$10 copay for the High Option and \$20 copay for the Standard Option. (see page 21).