

**2009 BENEFIT PLAN ENDORSEMENT
For The
Oregon Medical Insurance Pool**

Effective September 1, 2009 this Endorsement makes the following changes to your OMIP plan 500, 750, 1000 & 1500 contracts:

1. Prescription Medication section - Immunization coverage and outpatient prescription exclusions have been added.

1. PRESCRIPTION MEDICATION BENEFIT

The following has been added to your contract effective September 1, 2009:

Immunization Coverage

Under the OMIP prescription medication benefit, varicella zoster (shingles) vaccine, including the injection itself, is covered at 20% coinsurance for Plan 500, 750, 1000 or 30% coinsurance for Plan 1500 for OMIP members when dispensed and administered at "specific preferred pharmacies designated by us." Please contact the OMIP Customer Service Department at 1-800-848-7280 for a list of preferred pharmacies. You can receive the vaccination and injection only from these pharmacies to be covered under the OMIP prescription benefit.

Outpatient Prescription Exclusions

Immunization Agents (with the exception of varicella zoster - shingles vaccine administered at designated pharmacies); Biological Sera and Blood Or Blood Plasma.