- (ii) Pap smears;
- (iii) Eye exams;
- (iv) Immunizations;
- (v) Periodic health promotion and disease prevention exams;
 - (vi) Blood pressure screening;
 - (vii) Hearing exams;
 - (viii) Sigmoidoscopy or colonoscopy;
 - (ix) Serologic screening; and
- (x) Appropriate education and counseling services. The exact services offered shall be established under uniform standards established by the Assistant Secretary of Defense (Health Affairs).
- (3) In addition to preventive care services provided pursuant to paragraph (b)(2) of this section, other benefit enhancements may be added and other benefit restrictions may be waived or relaxed in connection with health care services provided to include the Uniform HMO Benefit. Any such other enhancements or changes must be approved by the Assistant Secretary of Defense (Health Affairs) based on uniform standards.
- (c) Enrollment fee under the uniform HMO benefit. (1) The CHAMPUS annual deductible amount (see § 199.4(f)) is waived under the Uniform HMO Benefit during the period of enrollment. In lieu of a deductible amount, an annual enrollment fee is applicable. The specific enrollment fee requirements shall be published annually by the Assistant Secretary of Defense (Health Affairs), and shall be uniform within the following groups: Dependents of active duty members in pay grades E-4 and below; active duty dependents of sponsors in pay grades E-5 and above; and retirees and their dependents.
- (2) Amount of enrollment fees. Beginning in fiscal year 1995, the annual enrollment fees are:
- (i) for dependents of active duty members in pay grades of E-4 and below, \$0:
- (ii) for active duty dependents of sponsors in pay grades E-5 and above, \$0; and,
- (iii) for retirees and their dependents, \$230 individual, \$460 family.
- (d) Outpatient cost sharing requirements under the Uniform HMO Benefit—(1) In general. In lieu of usual CHAMPUS cost sharing requirements (see § 199.4(f)), special reduced cost sharing percentages or per service specific dollar amounts are required. The specific requirements shall be uniform and shall be published annually by the Assistant Secretary of Defense (Health Affairs).
- (2) Structure of outpatient cost sharing. The special cost sharing requirements for outpatient services include the following specific structural provisions:

- (i) For most physician office visits and other routine services, there is a per visit fee for each of the following groups: Dependents of active duty members in pay grades E-1 through E-4; dependents of active duty members in pay grades of E-5 and above; and retirees and their dependents. This fee applies to primary care and specialty care visits, except as provided elsewhere in this paragraph (d)(2) of this section. It also applies to ancillary services (unless provided as part of an office visit for which a copayment is collected), family health services, home health care visits, eye examinations, and immunizations.
- (ii) There is a copayment for outpatient mental health visits. It is a per visit fee for dependents of active duty members in pay grades E–1 through E–4; for dependents of active duty members in pay grades of E–5 and above; and for retirees and their dependents for individual visits. For group visits, there is a lower per visit fee for dependents of active duty members in pay grades E–1 through E–4; for dependents of active duty members in pay grades of E–5 and above; and for retirees and their dependents.
- (iii) There is a cost share for durable medical equipment, prosthetic devices, and other authorized supplies for dependents of active duty members in pay grades E–1 through E–4; for dependents of active duty members in pay grades of E–5 and above; and for retirees and their dependents.
- (iv) For emergency room services, there is a per visit fee for dependents of active duty members in pay grades E–1 through E–4; for dependents of active duty members in pay grades of E–5 and above; and for retirees and their dependents.
- (v) For primary surgeon services in ambulatory surgery, there is a per service fee for dependents of active duty members in pay grades E-1 through E-4; for dependents of active duty members in pay grades of E-5 and above; and for retirees and their dependents.
- (vi) There is a copayment for prescription drugs per prescription, including medical supplies necessary for administration, for dependents of active duty members in pay grades E–1 through E–4; for dependents of active duty members in pay grades of E–5 and above; and for retirees and their dependents.
- (vii) There is a copayment for ambulance services for dependents of active duty members in pay grades E– 1 through E–4; for dependents of active duty members in pay grades of E–5 and

- above; and for retirees and their dependents.
- (3) Amount of outpatient cost sharing requirements. Beginning in fiscal year 1995, the outpatient cost sharing requirements are as follows:
- (i) For most physician office visits and other routine services, as described in paragraph (d)(2)(i) of this section, the per visit fee is as follows:
- (A) For dependents of active duty members in pay grades E–1 through E–4, \$6:
- (B) For dependents of active duty members in pay grades of E-5 and above, \$12; and,
- (C) For retirees and their dependents, \$12.
- (ii) For outpatient mental health visits, the per visit fee is as follows:
- (A) For individual outpatient mental health visits:
- (1) For dependents of active duty members in pay grades E-1 through E-4, \$10;
- (2) For dependents of active duty members in pay grades E-5 and above, \$20; and,
- (3) For retirees and their dependents, \$25.
- (B) For group outpatient mental health visits, there is a lower per visit fee, as follows:
- (1) For dependents of active duty members in pay grades E-1 through E-4, \$6;
- (2) For dependents of active duty members in pay grades E-5 and above, \$12; and,
- (3) For retirees and their dependents, \$17
- (iii) The cost share for durable medical equipment, prosthetic devices, and other authorized supplies is as follows:
- (A) For dependents of active duty members in pay grades E-1 through E-4, 10 percent of the negotiated fee;
- (B) For dependents of active duty members in pay grades E-5 and above, 15 percent of the negotiated fee; and,
- (C) For retirees and their dependents, 20 percent of the negotiated fee.
- (iv) For emergency room services, the per visit fee is as follows:
- (A) For dependents of active duty members in pay grades E-1 through E-4 \$10.
- (B) For dependents of active duty members in pay grades of E–5 and above, \$30; and,
- (C) For retirees and their dependents, \$30.
- (v) For primary surgeon services in ambulatory surgery, the per service fee is as follows:
- (A) For dependents of active duty members in pay grades of E-1 through E-4, \$25;