

This summary is designed to give you an outline of the health benefit programs offered through Sauk Village CCSD 168. Contained in the summary are tips for you on using the plans.

Your 2019 Benefit Summary provides information on your district's benefit plans, including:

- BCBS Member Resources
- Medical Options—PPO and HMO
- Dental

- Visior
- Medical Plans Comparison
- Blue365 Discount Programs

### **BCBS Member Resources**

#### **Blue Access for Members**

To access the many resources available to Blue Cross and Blue Shield members, register to participate in Blue Access for Members at **www.bcbsil.com**. To register, click on "Log In" tab located on the right side of the homepage and click on "Register Now" for new users. Be sure to have your BCBS ID card handy.

Blue Access is available 24 hours a day, 7 days a week, 365 days a year.

#### **Blue Access Features**

- Cost Estimator
- Claim status
- View your personal information
- Locate a provider
- Access to health and wellness tempo information card or
- Compare hospitals and physicians
- Receive email alerts
- Print a temporary ID card or order a replacement

card

 View and print Explanation of Benefits (EOB)

#### **BCBS Global Core**

BCBS Global Core provides members with access to doctors and hospitals in nearly 200 countries and territories around the world.

To take advantage of the BCBS Global Core program, contact BCBSIL for coverage details. The BCBS Global Core Service Center is available **24 hours a day, 7 days a week,** toll-free at **800.810.BLUE (2583)** or by calling collect at **804.673.1177**.

#### **Wellbeing Management**

The Wellbeing Management program is designed to help you take charge of your health and provide you with the tools to better manage your benefits. Members have access to a variety of resources through Blue Cross and Blue Shield's secure website and Blue Access for Members.

# 24/7 Nurseline — Around-the-Clock, Toll-Free Support (PPO Members Only)

The 24/7 Nurseline can help you figure out if you should call your doctor, go to the ER or treat the problem yourself.

Health concerns don't always follow a 9-to-5 schedule. Fortunately, registered nurses are on call at **800.299.0274** to answer your health questions, wherever you may be, 24 hours a day, 7 days a week.

**Note:** For medical emergencies, call 911 or your local emergency service first.

#### **Diabetes Program**

**Complimentary Glucose Meters:** BCBSIL offers glucose meters to members with diabetes at no additional charge to help you manage your condition.

### CONTOUR®NEXT Blood Glucose Monitoring Systems

To order a CONTOUR NEXT meter to be shipped directly to you, call **800.401.8440**. Be sure to identify yourself as a BCBSIL member and mention ID code "BDC-BIL." Or you can visit **https://ContourNextFreeMeter.com**.

#### **Benefits Value Advisor (PPO only)**

Call a Benefits Value Advisor to help you compare cost on your next procedure!

The BVA is a personal concierge service that will help you choose doctors, providers, and facilities while helping you to maximize your benefits.

A Benefits Value Advisor can:

- Help you compare costs at different providers near you
- Help you schedule your appointment
- Tell you about online educational tools

Call 800.458.6024 before your next procedure!

#### **BCBS Member Rewards (PPO only)**

Earn **CASH REWARDS** when you choose a low-cost provider for certain services and procedures. The program uses the Provider Finder® —a database of independently contracted providers, which can help members:

- Compare costs and quality for numerous procedures
- Estimate out-of-pocket costs
- Assist in making treatment decisions with their doctors.

Using this resource to shop for services based on price and location, as well as quality metrics, allows you to earn cash for selecting lower-cost care. The result puts extra cash in your pocket. **Please note, all rewards are taxable to the member.** 

#### Teladoc

Your district offers telemedicine, through Teladoc, to you and your dependents enrolled in medical coverage through the district. With Teladoc, members can connect with a doctor in minutes, not hours or days like the ER, urgent care or doctor's office. Plus, you can get care from anywhere: home, office, or on the road!

Teladoc does not replace your primary care physician. It is a convenient and affordable option for quality care:

- When you need care now
- If you're considering the ER or urgent care center for a non-emergency issue
- On a vacation, on a business trip, or away from home
- For short-term prescription refills

Set up your account at **www.teladoc.com**. Once you have completed your registration, you can go online to speak to a doctor, or call **800.835.2362**.



# **Your Medical Options**

#### **Blue Cross and Blue Shield of Illinois**

**Blue Cross and Blue Shield of Illinois (BCBSIL)** is the claims administrator for your district's medical plan(s).

Contact Blue Cross for questions regarding:

- Eligibility
- Plan benefits
- Status of claim payments

Please remember to present your insurance ID card to your healthcare provider at your appointment. This informs providers where they need to send your claims and identifies you as a Blue Cross member.

#### **PPO Medical Plan**

To find a contracting doctor or hospital, just go to **www. bcbsil.com** and use the Provider Finder.

PPO Customer Service: **800.458.6024** (8:00 a.m. to 6:00 p.m., Monday through Friday).

IL Network Provider Search: **800.458.6024** (8:00 a.m. to 6:00 p.m., Monday through Friday) or **www.bcbsil.com**.

#### **HMO Medical Plan**

When you join one of the HMOs of Blue Cross and Blue Shield of Illinois, you choose a contracting medical group within your network and then a family practitioner, internist or pediatrician from your chosen medical group to serve as your primary care physician (PCP).

To find a medical group and PCP in either network, go to **www.bcbsil.com** and use the Provider Finder.

HMO Customer Service: **800.892.2803** (8:00 a.m. to 6:00 p.m., Monday through Friday).

Your HMO Illinois ID number is located on your ID Card (Blue Cross and Blue Shield of IL).

#### **Prescription Drug Information**

Prime Therapeutics is the retail and mail-order vendor (90-day supply) for enrolled members. Your medical ID card also serves as your prescription ID card. To find a participating retail pharmacy or for more information, log in to BlueAccess for Members and click on the Prescription Drugs link or visit myprime.com.

### Prescription Drug Inquiry Unit

Phone: **800.423.1973** (Available 24 Hours Per Day, 7 Days

Per Week) | Website: myprime.com

#### Home Delivery Customer Service

through AllianceRx Walgreens Prime

Phone: 877.357.7463 | Website: AllianceRxWP.com/

Home-Delivery

#### **Specialty Customer Service**

through AllianceRx Walgreens Prime

Phone: 877.627.6337 | Website: AllianceRxWP.com/

**Specialty-Pharmacy** 



# **Dental Plan**

#### **MetLife Dental Coverage**

**MetLife** is the administrator of the dental benefits for you and your family. As a member of this plan, you are free to use any dentist; however, additional discounts will be realized if you use one that participates in the MetLife network.

Contact MetLife at 800.942.0854 for questions regarding:

- Network providers
- Plan benefits
- Eligibility status
- Claim status and claim forms

Additionally, you can access MyBenefits at www.metlife.com/mybenefits. This website offers you the ability to manage your personal information on your own personalized homepage, where you can view claims status and eligibility information, as well as view a summary of your dental benefits.

| MetLife Dental PPO Plan   |                                   |  |  |  |  |  |  |  |  |
|---|-----------------------------------|--|--|--|--|--|--|--|--|
| Benefit   | In-Network &<br>Out-of-Network*   |  |  |  |  |  |  |  |  |
| <b>Preventive Services</b> Exams, cleanings, fluoride treatment, x-rays, sealants                                   | 100%                              |  |  |  |  |  |  |  |  |
| <b>Deductible</b> Waived for Preventive Services  | \$50 individual /<br>\$150 family |  |  |  |  |  |  |  |  |
| Basic Services Fillings, space maintainers, oral surgery, endodontics, periodontics, emergency/palliative treatment | 80%                               |  |  |  |  |  |  |  |  |
| Major Services Crown, bridges, dentures, repairs/ adjustments   | 50%                               |  |  |  |  |  |  |  |  |
| Orthodontic Services  | 50%                               |  |  |  |  |  |  |  |  |
| Annual Maximum  | \$2,000                           |  |  |  |  |  |  |  |  |
| Orthodontic Lifetime Maximum  | \$1,000                           |  |  |  |  |  |  |  |  |

<sup>\*</sup>Out-of-Network services are covered at the 90th Usual & Customary Percentile.

MetLife offers a vision discount program through Vision Service Plan (VSP). For more information or to find a participating provider visit **www.metlife.com/mybenefits**.

# **Voluntary Vision**

Focus eye care from Ameritas Group features the money-saving eye care network of VSP. Customer service is available to plan members through VSP's well-trained and helpful service representatives. Call or go online to locate the nearest VSP network provider, view plan benefit information and more. **VSP Call Center: 800.877.7195** 

- Service representative hours: 5 a.m. to 7 p.m. PST, Monday through Friday; 6 a.m. to 2:30 p.m. PST Saturday
- Interactive Voice Response available 24/7

Locate a VSP provider at: ameritasgroup.com/member

View plan benefit information at: www.vsp.com

| Coverage from Ameritas           |                     |                    |  |  |  |  |  |  |  |
|----------------------------------|---------------------|--------------------|--|--|--|--|--|--|--|
| Benefit                          | In-Network          | Out-of-<br>Network |  |  |  |  |  |  |  |
| Eye Exam (every 12 months)       | \$10 copay          | Up to \$47         |  |  |  |  |  |  |  |
| Frames (every 24 months)         | 100%<br>up to \$105 | Up to 45           |  |  |  |  |  |  |  |
| Single Vision Lenses             | 100%                | Up to \$48         |  |  |  |  |  |  |  |
| Bifocal Vision Lenses            | 100%                | Up to \$69         |  |  |  |  |  |  |  |
| Trifocal Vision Lenses           | 100%                | Up to \$85         |  |  |  |  |  |  |  |
| Contact Lenses (every 12 months) |                     |                    |  |  |  |  |  |  |  |
| Medically Necessary              | 100%                | Up to \$210        |  |  |  |  |  |  |  |
| Elective                         | 100%                | Up to \$105        |  |  |  |  |  |  |  |

# Sauk Village CCSD 168 Medical Plans Comparison

|  | BCBS<br>PPO Plan 1<br>Large PPO<br>Network |   | PPO Plan 1 PPO Plan 2  Large PPO Network                             |  |                        | BCBS<br>PPO Plan 3                      |                         | BCBS<br>PPO Plan 4*     |                           | Blue Advantage<br>HMO Plan 1                                      |                           | Blue Advantage<br>HMO Plan 2 |     |  |
|--|--|---|--|--|------------------------|---|-------------------------|-------------------------|---------------------------|---|---------------------------|------------------------------|-----|--|
|  |  |   |  |  | Blue Choice<br>Network |   | Blue Choice<br>Network  |                         | Blue Advantage<br>Network |   | Blue Advantage<br>Network |                              |     |  |
|  | In-<br>Network                             | Out-of-<br>Network                      | In-<br>Network   | Out-of-<br>Network                                   | In-<br>Network         | Out-of-<br>Network                      | In-<br>Network          | Out-of-<br>Network      | In-<br>Network            | Out-of-<br>Network  | In-<br>Network            | Out-of-<br>Network           |     |  |
| Deductible   |  |   |  |  |                        |   |                         |                         |                           |   |                           |                              |     |  |
| Individual   | \$500                                      | \$1,000                                 | \$2,500  | \$5,000  | \$500                  | \$1,000                                 | \$2,500                 | \$5,000                 | \$                        | 0   | \$                        | 0                            |     |  |
| Family   | \$1,500                                    | \$3,000                                 | \$7,500  | \$15,000   | \$1,500                | \$3,000                                 | \$5,000                 | \$10,000                | \$0                       |   | \$0                       |                              | \$0 |  |
| Per<br>Admission   | \$0  | \$300                                   | \$0  | \$300  | \$0                    | \$300                                   | \$0                     | \$300                   | N/A                       |   | N/A                       |                              |     |  |
| Coinsurance<br>% Hospital<br>Inpatient; %<br>Outpatient;<br>Medical/<br>Surgical<br>Services | 90%  | 70%                                     | 80%  | 60%  | 90%                    | 60%                                     | 80%                     | 50%                     | 10                        | 0%  | \$500, then 100%          |                              |     |  |
| Therapy<br>Services  | 90%  | 70%                                     | 80%  | 60%  | 90%                    | 60%                                     | 80%                     | 50%                     | 60 con                    | 100%, 100%<br>combined 60 combined<br>tments/year treatments/year |                           | nbined                       |     |  |
| Out-of-Pock  | Out-of-Pocket Limit                        |   |  |  |                        |   |                         |                         |                           |   |                           |                              |     |  |
| (Deductible  |  |   |  |  |                        |   |                         |                         |                           |   |                           |                              |     |  |
| Individual   | \$1,500                                    | \$3,000                                 | \$5,500  | \$11,000   | \$1,500                | \$3,000                                 | \$5,000                 | \$10,000                | \$1,.                     |   | \$3,0                     |                              |     |  |
| Family   | \$4,500                                    | \$9,000                                 | \$10,200   | \$20,400   | \$4,500                | \$9,000                                 | \$10,000                | \$20,000                | \$3,                      | 000   | \$6,0                     | \$6,000                      |     |  |
| Copayment  |  |   |  |  |                        |   |                         |                         |                           |   |                           |                              |     |  |
| Physician Office visits  | \$20                                       | 70%                                     | \$30   | 60%  | \$20                   | 60%                                     | 80%                     | 50%                     | \$3                       | 30  | \$40                      |                              |     |  |
| Specialists  | \$40                                       | 70%                                     | \$50   | 60%  | \$20                   | 60%                                     | 80%                     | 50%                     | \$5                       | 50  | \$60                      |                              |     |  |
| Emergency<br>Room  | \$150, then 100%                           |   | \$150, then 100%   |  | \$150                  | \$150                                   | 80%                     | after \$150, then       |                           |   |                           |                              |     |  |
| Routine/Prev   | rentive                                    |   |  |  |                        |   | 4040                    | 0111010                 |                           |   |                           |                              |     |  |
|  | 100% (no                                   | 7007 ofter                              | 100% (no   | 1007 after   |                        | /007 offer                              |                         | EOO7 ofter              |                           |   |                           |                              |     |  |
| Wellcare   | deductible or copay)                       | 70% after deductible                    | deductible or copay)   | 60% after deductible                                 | 100%                   | 60% after deductible                    | 100%                    | 50% after deductible    | 100% (no conay) 100       |   | 0%                        |                              |     |  |
| Prescription   | Pri  | me                                      |  | me   | Pri                    | me                                      | Pri                     | me                      | Prime                     |   | Prime                     |                              |     |  |
| Drugs  | Therapeutics                               |   | Thera  | peutics  |                        | peutics                                 | Therapeutics            |                         | Therapeutics              |   | Therapeutics              |                              |     |  |
| Generic<br>Formulary<br>Nonformulary   | \$10<br>\$40<br>\$60                       | 75%<br>after<br>reduced<br>by<br>copays | \$15<br>35%<br>50%<br>Out-of-<br>Pocket<br>Min \$15;<br>Max<br>\$150 | 75% after<br>reduced by<br>applicable<br>coinsurance | \$10<br>\$40<br>\$60   | 75%<br>after<br>reduced<br>by<br>copays | 80% after<br>deductible | 80% after<br>deductible | \$10<br>\$40<br>\$60      |   | \$8<br>\$35<br>\$75       |                              |     |  |
| Mail Order –   |  |   |  |  |                        |   |                         |                         |                           |   |                           |                              |     |  |
| Generic<br>Formulary<br>Nonformulary   | \$20<br>\$80<br>\$120                      | N/A                                     | \$15<br>35%<br>50%<br>Out-of-<br>Pocket<br>Min \$15;<br>Max<br>\$150 | N/A  | \$20<br>\$80<br>\$120  | N/A                                     | 80% after<br>deductible | N/A                     | \$20<br>\$80<br>\$120     | N/A   | \$16<br>\$70<br>\$150     | N/A                          |     |  |

Dependent Age: to 26 for all married or unmarried dependents and to age 30 for all unmarried military dependents who are Illinois residents.

Note: This is an outline of the benefit schedules. This exhibit in no way replaces the plan document of coverage, which outlines all the plan provisions and legally governs the operation of the plans.

Sauk Village CCSD 168 complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN (Spanish): si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **708.758.1610 ext. 114**. UWAGA (Polish): Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **708.758.1610 ext. 114**.

 $<sup>^{1}</sup>$  Please note effective 07/01/2014, all medical copays are included in the out-of-pocket maximum.

<sup>\*</sup> BCBS PPO Plan 4 has an aggregate deductible and embedded out-of-pocket. Under this model, those enrolled in family coverage are responsible for the family deductible before coinsurance applies and an individual is only responsible for the single out-of-pocket amount before services are paid at 100%.

# **Blue365 Discount Programs**

### **Fitness Program**

The Fitness Program is a flexible membership program that gives you unlimited access to a nationwide network of fitness centers. With more than 8,000 participating gyms on hand, you can work out at any place or at any time. Choose a gym close to home and one near your office. To search for a gym, please log in to Blue Access for Members or call **888.762.2583**.

Other program perks are:

- No long-term contract required. Membership is month to month. Monthly fees are \$25 per month per member, with a onetime enrollment fee of \$25.
- Automatic withdrawal of monthly fee.
- Online tools for locating gyms and tracking visits.
- Earn bonus Blue Points for joining the Fitness Program. Rack up more points with weekly visits.

#### **Vision Program**

PPO and HMO members can receive discounts on glasses, contact lenses, laser vision correction services, examinations and accessories through Davis Vision and EyeMed providers. HMO members receive their vision exam benefit via EyeMed only. For a list of providers near you, go to **www.eyemed.com**, click *Find a Provider*, then choose the "Select Network" for HMO members and "Advantage Network" for PPO Members.

Davis Vision: **888.897.9350** | HMO EyeMed (Select Network): **866.273.0813** | PPO EyeMed (Advantage Network): **866.273.0813** 

#### **Weight Management Program**

#### Jenny Craig | Seattle Sutton | Nutrisystem

Members may reach their weight loss goals with savings from leading programs. They may save on healthy meals, membership fees (where applicable), nutritional products and services.

For more discount programs, sign up on the Blue365 website at www.blue365deals.com/BCBSIL

# Well onTarget®

# A Dynamic Wellness Program

Wellness is more than diet and fitness. It involves making healthy choices that enrich your mind, body and spirit. Well on Target is designed to give you the tools and support you need to make these choices, while rewarding you for your hard work.

### Well on Target features:

# Well on Target Member Wellness Portal

The heart of Well on Target is the member portal. It uses the latest technology to offer you an enhanced online experience. This engaging portal links you to a suite of innovative programs and tools including self-directed courses, health and wellness content, tool and trackers, and the Blue Points program.

#### **Blue Points**

With the Blue Points program, you will be able to earn points by regularly participating in a range of healthy activities. You can then redeem your points for popular health and wellness merchandise and services.

