



# Enrollment Guide

Village of Hinsdale  
PPO, HSA, BAHMO, and HMOI  
01/01/2022





# Get the Most from Your Health Plan

Welcome to Blue Cross and Blue Shield of Illinois (BCBSIL), a leader in health care benefits. We have been helping people like you get the most from their health care plans for many years.

Read this guide to learn about benefits your employer is offering. Think about how you and your family will use these benefits. Learn more about products, services and how to be a smart health care user at [bcbsil.com](http://bcbsil.com).

## **Your ID Card**

After you enroll, you will get a member ID card in the mail. Show this ID card when you see a doctor, visit the hospital or go to any other place for care. The back of the card has phone numbers you might need.

## **Blue Access for Members<sup>SM</sup>**

Go to [bcbsil.com/member](http://bcbsil.com/member) and sign up for the secure member website, Blue Access for Members. Find the "Log In" tab and click "Register Now." Use the information on your ID card to complete the process. On this site, you can check your claims, order more ID cards, get health information and much more.

## **Save Money – Stay In-Network**

Using independently contracted network providers can help you save. Look at your ID card to find your network. Then go to [bcbsil.com](http://bcbsil.com) to look for doctors, hospitals and other places for care.

## **Call Customer Service for Help**

Our team knows your health plan and can help you get the most from your benefits. Just call the toll-free number on the back of your ID card.



# The PPO Plan



## With the PPO plan, you can choose any doctor whenever you need care

The PPO plan offers a wide range of benefits and the flexibility to choose any doctor or hospital when you need care. The plan includes an annual deductible that you must satisfy before your benefits begin. Qualified medical expenses are applied toward your deductible.

### PPO Network

Access to the large network of contracting providers is one of the many reasons to select the PPO plan. The network includes hospitals, physicians, therapists, behavioral health professionals and alternative care practitioners.

You and your covered dependents can receive care from any licensed doctor, hospital or other provider. However, when you use a contracting network provider, you will pay less out of pocket, you won't have to file any claims and you will receive the highest level of benefits. If you use a doctor outside the network, you'll still be covered, but your out-of-pocket costs may be significantly higher.

### Medical Care

Your benefits may include coverage for\*:

- physician office visits
- breast cancer screenings
- cervical cancer screenings
- inpatient hospital services
- muscle manipulation services
- outpatient hospital services
- physical, speech and occupational therapies
- outpatient surgery and diagnostic tests
- infertility treatment
- maternity care
- behavioral health and substance abuse
- hospital emergency medical and accident treatment

To find a contracting doctor or hospital, just go to [bcbsil.com](https://www.bcbsil.com) and click on the Find a Doctor or Hospital tab to use the Provider Finder® tool, or call BlueCard® Access at **800-810-BLUE (800-810-2583)** for help. Once you become a member, you can also call the toll-free Customer Service number on the back of your member ID card.

# Confused About Where to Go for Care?

SmartER Care<sup>SM</sup> options may save you money.

If you aren't having an emergency, deciding where to go for medical care may save you time and money.

You have choices for where you get non-emergency care — what we call SmartER Care. Use this chart to help you figure out when to use each type of care.

When you use in-network providers for your family's health care, you usually pay less for care. Search for in-network providers in your area at [bcbsil.com](http://bcbsil.com) or by calling the Customer Service number on your member ID card.



## Doctor's Office

- Office hours vary
- Generally the best place to go for non-emergency care
- Doctor-to-patient relationship established and therefore able to treat, based on knowledge of medical history
- Average wait time is 18 minutes<sup>1</sup>

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## Retail Health Clinic

- Based on retail store hours
- Usually lower out-of-pocket cost to you than urgent care
- Often located in stores and pharmacies to provide convenient, low-cost treatment for minor medical problems

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## Urgent Care Center

- Generally includes evenings, weekends and holidays
- Often used when your doctor's office is closed, and you don't consider it an emergency
- Average wait time is 16-24 minutes<sup>2</sup>
- Many have online and/or telephone check-in

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## Hospital ER

- Open 24 hours, seven days a week
- Average wait time is 35-49 minutes (variable)<sup>3</sup>
- If you receive emergency room (ER) care from an out-of-network provider, you may have to pay more. Providers outside the network may "balance bill" you, which means they may charge you more than your health plan's fee schedule.
- Multiple bills for services such as doctors and facility

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## Freestanding ER

- Open 24 hours, seven days a week
- Could be transferred to a hospital-based ER depending on medical situation
- Services do not include trauma care
- Often freestanding ERs are out-of-network. If you receive care from an out-of-network provider, you may have to pay more. Providers outside the network may "balance bill" you, which means they may charge you more than your health plan's fee schedule.
- All freestanding ERs charge a facility fee that urgent care centers do not. You may receive other bills for each doctor you see.<sup>4</sup>

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If you need emergency care, call **911** or seek help from any doctor or hospital immediately.

<sup>1</sup> Vitals Annual Wait Time Report, 2017.

<sup>2</sup> Wait Time Trends in Urgent Care and Their Impact on Patient Satisfaction, 2017.

<sup>3</sup> National Center for Health Statistics, Centers for Disease Control and Prevention, 2019.






<sup>4</sup> The Texas Association of Health Plans.

Note: The relative costs described here are for independently contracted network providers. Your costs for out-of-network providers may be significantly higher. Wait times described are just estimates.

The information provided in this guide is not intended as medical advice, nor meant to be a substitute for the individual medical judgment of a doctor or other health care professional. Please check with your doctor for individualized advice on the information provided. Coverage may vary depending on your specific benefit plan and use of network providers. For questions, please call the number on the back of your member ID card.

# Deciding Where to Go?

Doctor's Office, Retail Clinic, Urgent Care or ER.

	Doctor's Office	Retail Health Clinic	Urgent Care Center	Hospital ER	Freestanding ER
					
Who usually provides care	Primary Care Doctor	Physician Assistant or Nurse Practitioner	Internal Medicine, Family Practice and Pediatric	ER Doctors, Internal Medicine, Specialists	ER Doctors
Sprains, strains	■	■	■	<ul style="list-style-type: none"> <li>Any life-threatening or disabling conditions</li> <li>Sudden or unexplained loss of consciousness</li> <li>Major injuries</li> <li>Chest pain; numbness in the face, arm or leg; difficulty speaking</li> <li>Severe shortness of breath</li> <li>High fever with stiff neck, mental confusion or difficulty breathing</li> <li>Coughing up or vomiting blood</li> <li>Cut or wound that won't stop bleeding</li> <li>Possible broken bones</li> </ul>	<ul style="list-style-type: none"> <li>Most major injuries except for trauma<sup>†</sup></li> <li>May also provide imaging and lab services but do not offer trauma or cardiac services requiring catheterization<sup>†</sup></li> <li>Do not always accept ambulances</li> </ul>
Animal bites	■	■	■		
X-rays			■		
Stitches			■		
Mild asthma	■	■	■		
Minor headaches	■	■	■		
Back pain	■	■	■		
Nausea, vomiting, diarrhea	■	■	■		
Minor allergic reactions	■	■	■		
Coughs, sore throat	■	■	■		
Bumps, cuts, scrapes	■	■	■		
Rashes, minor burns	■	■	■		
Minor fevers, colds	■	■	■		
Ear or sinus pain	■	■	■		
Burning with urination	■	■	■		
Eye swelling, irritation, redness or pain	■	■	■		
Vaccinations	■	■	■		

## Urgent Care Center or Freestanding ER – Knowing the Difference Can Save You Money

Urgent care centers and freestanding ERs can be hard to tell apart. Freestanding ERs often look a lot like urgent care centers, but costs may be higher. A visit to a freestanding ER often results in significantly higher medical bills than the rate charged by urgent care centers for the same services.

Here are some ways to know if you are at a freestanding ER:

- Looks like urgent care centers, but have the word "Emergency" in their name or on the building.
- Is open 24 hours a day, seven days a week.
- Is not attached to and may not be affiliated with a hospital.
- Is subject to the same ER member share which may include a copay, coinsurance and applicable deductible.

Find urgent care centers<sup>1</sup> near you by texting<sup>2</sup> **URGENTIL** to **33633**.

<sup>†</sup>"Freestanding ED 101: What you need to know" July 2016, The Advisory Board Company.

<sup>1</sup> The closest urgent care center may not be in your network. Be sure to check Provider Finder<sup>®</sup> to make sure the center you go to is in-network.

<sup>2</sup> Message and data rates may apply. Read terms, conditions and privacy policy at [bcbstl.com/mobile/text-messaging](http://bcbstl.com/mobile/text-messaging).



# The HMO Plans

**HMOs offer valuable benefits with the security of predictable copayments.**

The HMOs of Blue Cross and Blue Shield of Illinois (BCBSIL) provide the valuable benefits, member services and flexibility, along with the security of predictable copayments, so there are no financial surprises. Your employer may offer you the HMO Illinois<sup>®</sup> plan, the Blue Advantage HMO<sup>SM</sup> plan or a choice between the two.

When you join one of the HMOs of BCBSIL, 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). Your PCP provides or coordinates your health care, helps you make informed decisions and, when necessary, makes referrals to specialists who are usually within your medical group network. Each specialist referral is authorized for a specific number of visits or timeframe (up to one year).

In addition to their PCP, female members also have the option of choosing a woman's principal health care provider (WPHCP) to provide or coordinate their health care services. Your WPHCP and PCP must be affiliated with or employed by your participating medical group. Physicians in the same medical group do have a referral arrangement. You do not need a PCP referral to see your WPHCP.

## **HMO Networks**

HMO Illinois offers access to one of the largest contracting health care provider networks in Illinois. In fact, your regular doctor may already be part of the network. If your doctor is not in the network and you are undergoing a course of evaluation or medical treatment or are in your third trimester of pregnancy when you join the plan, you may request transition of care benefits. Benefits for transitional services may be authorized for up to 90 days. After this period, all care must be transferred to a new PCP or medical group in the HMO network. Contact Customer Service at the number on your BCBSIL ID card for more information.



The Blue Advantage HMO contracting provider network is a subset of the HMO Illinois network. Although smaller, it offers a broad choice of contracting providers and is for members who are looking for a more affordable health care plan. Blue Advantage HMO members also have access to the same contracting Illinois hospitals as HMO Illinois members for specialty care, with an approved referral from the member's contracting medical group.

## Medical Care

The range of benefits includes coverage for:

- Physician office visits
- Outpatient surgery and diagnostic tests
- Breast cancer screening
- Cervical cancer screening
- Prostate cancer screening
- Colon cancer screening
- Inpatient hospital services
- Maternity care
- Outpatient hospital services
- Mental health and substance use disorder – inpatient and outpatient treatment
- Rehabilitative therapy (such as physical, speech and occupational therapy)
- Inpatient and outpatient treatments

To find a medical group and PCP in the network, go to **bcbsil.com** and click on **Find a Doctor**. You also can refer to a printed directory. You can request a directory by calling Customer Service at the number on your BCBSIL ID card. Each covered family member can choose a different medical group or PCP from the network. It's also easy to change your PCP or medical group for any reason. To select a different PCP within your existing medical group, just call the medical group. To change your medical group, call Customer Service or use the Blue Access for Members<sup>SM</sup> online service at **bcbsil.com**. See Your Health Care Benefit Program booklet or call Customer Service for more information.

## Preventive Care

Another HMO benefit is coverage for preventive health services for children and adults, such as routine physicals, screenings, tests and immunizations, including childhood immunizations. Also, BCBSIL sends reminders to members to schedule flu shots, mammograms and Pap tests, and to have early childhood immunizations completed.

## Vision Care

The vision discount program is offered through a partnered company. You have access to one of the nation's largest networks of independent eye doctors and well-known retail providers – with many in-network providers offering extended weeknight and weekend hours. Call Customer Service at the number on the back of your ID card for more information.

## BlueCard®

This program covers HMO members traveling outside of Illinois who need medical attention. To learn more about this benefit, please call the number on your ID card. To find a contracting provider in the area in which you are traveling, call the BlueCard program toll-free at **800-810-BLUE (800-810-2583)** or search the Blue Cross and Blue Shield Association's website at **bcbs.com**. You can then call the provider directly to make an appointment. You pay the applicable copayment at the time of service and don't need to submit claim forms.

## Emergency Care

You receive health care coverage for hospital emergency room (ER) care, inpatient hospital care directly resulting from any medical emergency and ER follow-up care. Emergency care benefits cover members who have a medical emergency that may occur at any time. When a medical emergency occurs, first try to call your PCP. Someone from your medical group is available 24 hours a day, seven days a week. Your PCP or another doctor in your medical group may be able to treat you in the office. If you are unable to call your PCP, go directly to the nearest hospital emergency room and notify your PCP as soon as possible.

If you are admitted, someone must contact your PCP immediately upon admission. Your emergency room copayment will be waived, but you will have to pay your inpatient hospital copayment, if applicable. Emergency care benefits are limited to the initial emergency treatment. To receive additional benefits, your PCP must provide or coordinate follow-up care.

### **Reconstructive Surgery**

Federal and State of Illinois legislation require that group health plans and health insurers provide coverage for reconstructive surgery following a mastectomy. These laws state that health plans covering mastectomies must also provide coverage in a manner determined in consultation with the attending physician and patient for reconstruction of the breast on which the mastectomy has been performed, surgery and reconstruction of the other breast to produce a symmetrical appearance, and prostheses and treatment for physical complications for all stages of mastectomy care, including lymphedemas.

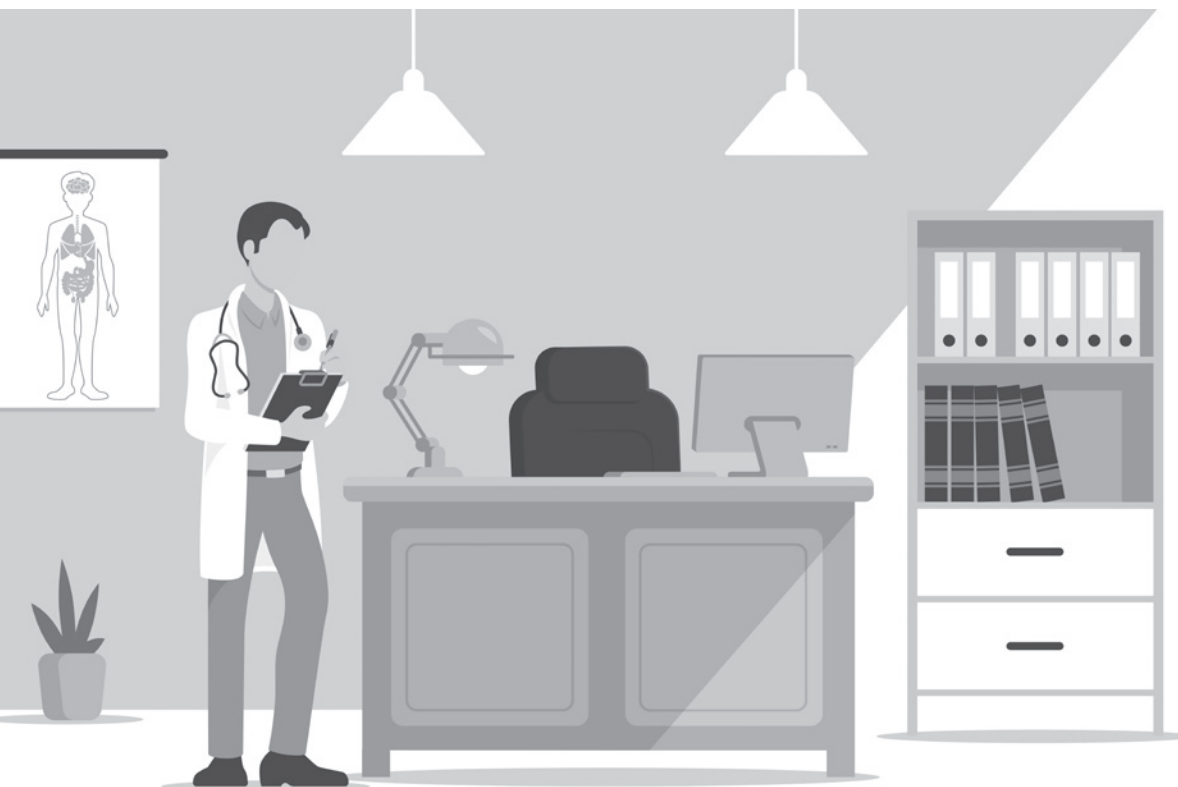
The HMOs of BCBSIL cover these procedures and annual mammograms when ordered by a member's PCP or WPHCP, subject to the terms of the member's applicable health care benefit coverage. Visit us at [bcbsil.com](http://bcbsil.com) or call Customer Service for more information.

### **Utilization Management**

The HMOs of BCBSIL support the belief that the best people to determine what medical care you need are you and your doctor. BCBSIL does not get involved in deciding your course of treatment. This sets it apart from most other HMOs. Your doctor is encouraged to listen to your concerns and discuss all treatment options with you to help you make informed decisions. Your network medical group may review certain referrals or procedures for appropriateness of care. Your HMO doesn't get involved unless you request an appeal from BCBSIL because you disagree with decisions made by your PCP or medical group.

### **Substance Use Disorder**

Treatment for substance use disorder (also known as substance abuse) is covered in your benefit plan. Please contact your PCP for a referral to a specialist.



**If you have a question, visit [bcbsil.com](http://bcbsil.com) or call Customer Service at 800-892-2803.**

# BlueEdge HSA<sup>SM</sup> and BlueEdge Select HSA<sup>SM</sup> Plans



## Why Choose BlueEdge<sup>SM</sup>?

BlueEdge HSA is a consumer-directed health care plan (CDHP) that helps you meet your health and financial goals. It blends a qualified high-deductible health plan with a health savings account (HSA) where you decide to either pay for qualified health care costs with tax-free dollars or let the funds grow as savings.

Deposits to the account can be made by you, your employer or anyone else.

### BlueEdge HSA helps you with:

**Affordability** – Use health savings account funds to help meet your deductible, or leave them untouched to grow as savings.

**Tax savings** – Health savings account funds that are used for qualified health care costs are tax-exempt.

**Portability** – Your health savings account belongs to you. Unused funds can roll over at the end of the year, or you can take the money with you if you change health plans or your job, or if you retire.

**Control** – You decide how, when and where your health care dollars are spent. The savvier a consumer you are, the more you stretch how far your health savings account will take you.

**Freedom and choice** – Choose any doctor when you need care, but choosing a network doctor means you get the highest level of benefits.

### Network Information

Use Provider Finder<sup>®</sup> at **bcbsil.com** to see if your doctor is in the network or to search for another network provider. You may also call BlueCard<sup>®</sup> Access toll-free at **800-810-BLUE (800-810-2583)** for provider information. Once you become a member, you can call the toll-free Customer Service phone number on the back of your member ID card for help.

### There's more to BlueEdge:

**Preventive care and wellness visits** – Adults and children are covered at 100 percent when you use network providers\*. You don't need to meet the deductible to enjoy these benefits.

**Online decision tools** – Personalize how you use your health care and your health care spending. Log in to Blue Access for Members<sup>SM</sup>, a safe, secure website at **bcbsil.com** to:

- Manage your benefits
- Search for a network provider
- Estimate the cost of a procedure or treatment
- Find health and wellness information and support
- Ask health care professionals for help with your concerns through 24/7 Nurseline

# Health Savings Account Administration

Your health savings account is administered by a separate custodian — not Blue Cross and Blue Shield of Illinois. Your employer will give information about your account custodian.

## Special Notice about HSAs

Under IRS regulations, anyone enrolling in this health plan should be aware that any adult can contribute to a health savings account (HSA) if he/she:

- Has coverage under an HSA-qualified high deductible health plan (HDHP)
- Has no other first-dollar medical coverage (other types of insurance such as specific injury insurance or accident, disability, dental care, vision care, or long term care insurance are permitted)
- Is not enrolled in Medicare
  - An individual can be Medicare-eligible and have an HSA. However, once enrolled in Medicare, contributions to the HSA must stop. The individual can keep funds in the account before enrolling in Medicare and use those funds to pay for qualified medical costs tax-free.
- Cannot be claimed as a dependent on someone else's tax return

There are other regulations about contributions and distributions. If you are enrolling in a plan that includes a health savings account, you should first seek professional tax counsel to determine if your individual situation permits use of an HSA. If you have a flexible spending account (FSA), or a health care account (HCA), check with your employer to confirm that you are eligible for an HSA. Both the FSA and HCA are considered a limited purpose account that can only be used for certain expenses.



# How It Works

## BlueEdge HSA Example

Ben and Aileen and their two children have BlueEdge Select HSA family coverage through Aileen's employer. The plan is paired with a health savings account that includes a debit card and checks from the HSA administrator\*. At the beginning of the year, Ben and Aileen put \$3,000 into their health savings account (the contribution cannot exceed the maximum determined annually by the IRS).

### Year One

- **Aileen's health savings account annual contribution = \$3,000**
- **Aileen's annual family deductible = \$3,000**

Ben and Aileen had physicals and preventive care lab tests<sup>†</sup>.

- \$580 was paid by the preventive care benefit.

Both children had annual physicals and routine immunizations.

- \$320 was paid by the preventive care benefit.

Ben tore a ligament in his knee that required surgery.

- Charges of \$675 for the emergency room visit were paid with the health savings account debit card, which counts toward the deductible<sup>††</sup>.

- Surgery charges were \$6,000. Ben paid \$2,325 with the debit card. With this, the \$3,000 family deductible had been satisfied and health plan benefits began. Of the remaining \$3,675, the health plan paid 80 percent (\$2,940) and Ben paid his 20 percent coinsurance (\$735).

Aileen saw a dermatologist and had several moles removed.

- Charges were \$1,200. The health plan paid 80 percent (\$960), and Aileen paid her 20 percent coinsurance (\$240).

All of the health savings account money was spent so there was no amount to roll over to next year.

### Year Two

- **Ben and Aileen decide to contribute \$3,000 once again to their health savings account at the beginning of the year.**

Ben and Aileen had physicals and preventive care lab tests.

- \$525 was paid by the preventive care benefit.

Both children had annual physicals.

- \$275 was paid by the preventive care benefit.

Aileen saw her dermatologist for a follow-up visit.

- She paid for the \$175 visit with the HSA debit card, which also counted toward the deductible.

Ben participated in a smoking cessation program.

- The program cost \$450 and he paid for it with a check from the health savings account. This expense did not count toward the deductible.

At the end of year two, \$2,375 remains in the health savings account and this rolls over to the next year.

\*The provider should first submit your claim for processing so that you receive benefits at the Blue Cross and Blue Shield of Illinois negotiated rate. You may then use the debit card or checks to pay any balance due to the provider.

†In these examples, in-network preventive care is covered at 100%. Not all groups cover preventive care. Ask your employer for details.

††Funds must be available in your health savings account before you can use them to pay for medical services. Ask your employer when funds will be deposited to your account (each pay period, quarterly, annually, etc.).

# Frequently Asked Questions About BlueEdge HSA

## What is a health savings account?

If you have a qualified high-deductible health plan (HDHP), you can establish a tax-exempt health savings account with your own funds, those from your employer or both. You can use the funds to pay for qualified medical care services. Qualified expenses also count toward your annual deductible. Balances roll over from year to year and the account is portable, which means you keep it if you change benefit plans, jobs or if you retire.

## How can I decide if BlueEdge HSA is right for me?

Comparing covered benefits, network providers, the cost of coverage and other out-of-pocket expenses are important when choosing a health plan. For more information on HSAs, visit the U.S. Treasury's website at [treasury.gov](https://www.treasury.gov).

## Who is eligible to open a health savings account?

Only eligible individuals may open an HSA. To qualify for an HSA, you:

- Must be enrolled in an HSA-compatible HDHP as of the first day of the month;
- May not have other coverage that is not an HSA-compatible HDHP, including Medicare coverage (certain exceptions apply);
- May not be claimed as a dependent on another person's tax return.

## How is the HSA account funded?

IRS rules for contributions include, but are not limited to the following:

Any person (an employer, a family member or any other person) may make contributions to an HSA for an eligible individual.

## Is there a specific health plan design for HSAs?

Yes. HSA law and IRS guidance have focused on four parts of the HDHP plan design:

- The deductible
- The out-of-pocket maximum
- Preventive care
- The overall benefit design must provide "significant benefits" at all times to those covered by the HDHP





# Medical Plan Frequently Asked Questions

## **Q. Are my medical records kept confidential?**

A. Yes. Blue Cross and Blue Shield of Illinois (BCBSIL) is committed to keeping all specific member information confidential. Anyone who may have to review your records is required to keep your information confidential. Your medical records or claims data may have to be reviewed (for example, as part of an appeal that you request). If so, precautions are taken to keep your information confidential. In many cases, your identity will not be associated with this information.

## **Q. Who do I call with questions about my benefits?**

A. Call the toll-free Customer Service number on the back of your member ID card.

## **Q. How do I find a contracting network doctor or hospital?**

A. Go to [bcbsil.com](https://www.bcbsil.com) and use Provider Finder®, or call Customer Service at the toll-free number on the back of your member ID card.

## **Q. What do I do when I need emergency care?**

A. Call 911 or seek help from any doctor or hospital. BCBSIL will coordinate your care with the emergency provider.

Some options for non-emergency care include:

- **Your doctor's office** for health exams, routine shots, colds, flu and other minor illnesses or injuries.
- **Walk-in retail health clinics** available in retail stores. Many have a physician assistant or nurse practitioner who can help treat ear infections, rashes, minor cuts and scrapes, allergies, colds and other minor health problems.
- **Urgent or immediate care clinics** for more serious health issues, such as when you need an X-ray or stitches.

## Urgent Care or Freestanding Emergency Room?

Urgent care centers and freestanding ERs can be hard to tell apart. Freestanding ERs often look a lot like urgent care centers, but costs are higher, just as if you went to the ER at a hospital. Here are some ways to know if you are at a freestanding ER.

### Freestanding ERs:

- Look like urgent care centers, but have EMERGENCY in the facility name.
- Are separate from a hospital but are equipped and work the same as an ER.
- Are staffed by board-certified ER physicians and are subject to the same ER copay.
- Find urgent care centers<sup>1</sup> near you by texting<sup>2</sup> **URGENTIL** to **33633** and then type in your ZIP code.

## Q. What should I bring to my first appointment with a new doctor?

A. Your first appointment is an opportunity to share information about your health with your new doctor. Bring as much medical information as possible, including:

- **Medical records and insurance card** — If you are undergoing treatment at the time you change doctors, your medical records are important to your new doctor. Your insurance card provides information about copayments, billing and Customer Service phone numbers.
- **Medications** — Give your new doctor information about prescription and over-the-counter medications, including any herbal medications you take. Be sure to include the name of the medication, the dosage, how often you take it and why you take it.
- **Special needs** — Make a list of any equipment or devices you use including wheelchairs, oxygen, glucose monitors and the glucose strips. Be prepared to explain how you use them, not only to make sure you have the equipment you need, but also to make sure that there is no disruption in your care.

## Q. What questions should I ask if I am selecting a new doctor?

A. In addition to preliminary questions you might ask a new doctor — such as “Are you accepting new patients?” — here are some questions to help you evaluate whether a doctor is right for you.

- What is the doctor’s experience in treating patients with the same health problems that I have?
- Where is the doctor’s office? Is there convenient and ample parking, or is it close to public transportation?
- What are the regular office hours? Does the office have drop-in hours if I have an urgent problem?
- How long should I expect to wait to see the doctor when I’m in the waiting room?
- Are routine lab tests and X-rays performed in the office, or will I have to go elsewhere?
- Which hospitals does the doctor use?
- If this is a group practice, will I always see my chosen doctor?
- How long does it usually take to get an appointment?
- How do I get in touch with the doctor after office hours?
- Can I get advice about routine medical problems over the phone or by email?
- Does the office send reminders for routine preventive tests like cholesterol checks?

## Q. What if I’m already in treatment when I enroll and my provider isn’t in the network?

A. We’ll work with you to provide the most appropriate care for your medical situation, especially if you are pregnant or receiving treatment for a serious illness. You may still be able to see your out-of-network provider for a period of time. Call the toll-free Customer Service number on the back of your member ID card for more information.

<sup>1</sup>The closest urgent care center may not be in your network. Be sure to check Provider Finder to make sure the center you go to is in-network.

<sup>2</sup>Message and data rates may apply. Read terms, conditions and privacy policy at [bcbsil.com/mobile/text-messaging](http://bcbsil.com/mobile/text-messaging).





# Blue Access for Members<sup>SM</sup> Health Care at Your Fingertips

*Blue Cross and Blue Shield of Illinois (BCBSIL) helps you get the most out of your health care benefits with Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>). You and all covered dependents age 18 and up can create a BAM account.*

## With BAM, you can:

- Use our Provider Finder<sup>®</sup> tool to search for a health care provider, hospital or pharmacy
- Request or print your ID card
- Check the status or history of a claim
- View or print Explanation of Benefits statements
- Use our Cost Estimator tool to find the price of hundreds of tests, treatments and procedures
- Download our app
- Sign up for text or email alerts

## It's Easy to Get Started!

1. Go to [bcbsil.com/member](https://bcbsil.com/member)
2. Click **Log Into My Account**
3. Use the information on your BCBSIL ID card to sign up

Or, text\* **BCBSILAPP** to **33633** to get the BCBSIL App that lets you use BAM while you're on the go.

*\*Message and data rates may apply.*


# Understanding Your Explanation of Benefits



Your **Explanation of Benefits (EOB)** lets you know when and how we process your claims. It isn't a bill. It gives you a detailed look at the covered services and shows how much you may owe your provider after we apply your benefits.

## Page One Covers the Basics

- A. Confirm your policy ID.
- B. Learn how to download the mobile app and access your claims online.
- C. Find helpful contacts and a glossary.



**BlueCross BlueShield of Illinois**  
PO Box 7344  
Chicago, IL 60680-7344

**EXPLANATION OF BENEFITS**

- B** Log into **Blue Access for Members<sup>SM</sup>** at [bcsil.com](http://bcsil.com)
  - View plan and claim details
  - Contact us through our secure Message Center
  - Sign up for digital health plan info
  - Search for health care providers
- C** Text\* **GOBCBSIL** to **33633** to download the mobile app.
- C** Have questions about this EOB? Customer Advocates are here to help! **XXX-XXX-XXXX**

**John Smith**  
1234 Cedar Road  
APT #2  
Any Town, IL 76065

Sample

**A**

**SUBSCRIBER INFORMATION**  
GROUP NAME  
Member ID#: XXXXXXXXXXXX777V Group #: 000012345

**Dear John Smith,**

An Explanation of Benefits (EOB) is a statement showing how claims were processed. **This is not a bill.** Your provider(s) may bill you directly for any amount you may owe. **KEEP FOR YOUR RECORDS.**

**C**

**HELPFUL INFORMATION**  
**Want Your Health Care Info Digitally?**  
To get this EOB and other health care info on our mobile app, text\* GOBCBSIL to 33633 to download the app. You can also go digital by logging in at [bcsil.com/member](http://bcsil.com/member). Once logged in, navigate to Settings, click Preferences, then select Go Paperless.

**Health Care Fraud Hotline: 800-543-0867**  
Health care fraud affects health care costs for all of us. If you suspect any person or company of defrauding or attempting to defraud Blue Cross and Blue Shield of Illinois (BCBSIL), please call our toll-free hotline. All calls are confidential and may be made anonymously. For more information about health care fraud, please go to [bcsil.com](http://bcsil.com).

<p><b>GLOSSARY OF TERMS - We have described some of the terms used here to help you understand them, but you should make sure to read your benefit plan materials if you have questions.</b></p> <p><b>Amount Billed:</b> The amount your provider billed for the service(s) rendered.</p> <p><b>Amount Covered (Allowed):</b> Discounts, reductions, and amount covered (allowed) reflect the terms of your plan, and in the case of an in-network provider, the savings we have negotiated with your provider. Your deductible, coinsurance and copay are based on the allowed amount and the terms of your plan. Your share of coinsurance is a percentage of the allowed amount after the deductible is met.</p> <p><b>Coinsurance:</b> The percentage of the allowed amount you pay as your share of the bill. For example, if your plan pays 80% of the allowed amount, 20% would be your coinsurance.</p> <p><b>Copay Amount (Also known as Copayment):</b> The set fee you pay each time you receive a certain service. Some plans do not have copayments.</p>	<p><b>Deductible:</b> The amount, if any, you must pay before we start paying contract benefits. You do not send this amount to us. We subtract this amount from covered expenses on claims you and health care professionals send us. Some services can be covered before the deductible is met.</p> <p><b>Non-Participating Provider:</b> An out-of-network provider who does not accept rates for services we set to keep your costs down.</p> <p><b>Out-of-Pocket Limit (Maximum):</b> Once you pay this amount in deductibles, copayments and coinsurance for covered services, we pay 100% of the allowed amount for covered services for the rest of the benefit period.</p> <p><b>Participating Provider:</b> An in-network or out-of-network provider who accepts agreed-upon rates for services.</p> <p><b>Your Total Costs:</b> This is the sum of your copay, deductible and coinsurance. It also includes any amounts not covered by your health plan. Amounts that a non-participating provider may bill you are not part of this</p>
--	---

\*Message and data rates may apply. Terms & Conditions and Privacy Policy [bcsil.com/text-messaging](http://bcsil.com/text-messaging)  
Blue Cross and Blue Shield of Illinois provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.  
A Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

241939/0421 1

**CLAIM DETAIL (1 OF X)**

**PATIENT:** John Smith **D**

**PROVIDER:** Ralph Johnston M.D. **E**

**CLAIM #** XXXXXXXXXXXXX

**DATE PROCESSED:** 06/20/2020

We reviewed the claim for this patient based on the additional information received regarding other group health care coverage involvement. Blue Cross and Blue Shield of Illinois (BCBSIL) has negotiated discounts with this provider. The following shows how this claim was adjusted.

**Sample**

**F SUBSCRIBER INFORMATION**  
**GROUP NAME**  
 Member ID#: XXXXXXXXX777V Group #: 000012345  
 Customer Advocates are here to help! XXX-XXX-XXXX

Amount Billed	\$7,850.00
Discounts and Reductions	-\$3,930.00
Health Plan Responsibility	-\$2,219.00
<b>You may owe your health care provider for these services</b>	<b>\$1,701.00</b>

Service Description	Service Dates	YOUR BENEFITS APPLIED				YOUR RESPONSIBILITY				Your Total Costs
		Amount Billed <b>G</b>	Discounts and Reductions <b>H</b>	Amount Covered (Allowed) <b>I</b>	Health Plan Responsibility <b>J</b>	Deductible Amount <b>K</b>	Copay Amount <b>L</b>	Coinsurance <b>M</b>	Amount Not Covered <b>N</b>	
Surgical Charges	04/04/2020	4,000.00	(1) 1,800.00	2,200.00	960.00	1,000.00		240.00		1,240.00
Recovery Room	04/04/2020	900.00	(1) 410.00	490.00	392.00			98.00		98.00
Med/Surg Supplies	04/04/2020	300.00	(1) 140.00	160.00	128.00			32.00		32.00
Med/Surg Supplies	04/04/2020	100.00							(2) 100.00	100.00
Laboratory Services	04/04/2020	1,200.00	(1) 820.00	380.00	304.00			76.00		76.00
Laboratory Services	04/04/2020	400.00	(1) 270.00	130.00	72.00		50.00	8.00		58.00
MRI Outpatient	04/04/2020	950.00	(1) 490.00	460.00	363.00		15.00	82.00		97.00
<b>CLAIM TOTALS</b>		<b>\$7,850.00</b>	<b>\$3,930.00</b>	<b>\$3,820.00</b>	<b>\$2,219.00</b>	<b>\$1,000.00</b>	<b>\$65.00</b>	<b>\$536.00</b>	<b>\$100.00</b>	<b>\$1,701.00</b>

**Total covered benefits approved for this claim: \$2,219.00 to Ralph Johnston M.D. on 06-20-20.** **J<sup>2</sup>**

**Notes about amounts under "YOUR BENEFITS APPLIED" and "YOUR RESPONSIBILITY"**

(1) The amount billed is greater than the amount allowed for this service. Based on our agreement with this provider, you will not be billed the difference.

(2) Your Health Care Plan does not provide benefits for surgical assistant services when billed by the same physician who performed the surgery or administered the anesthesia. No payment can be made. **P**

Your health care plan has a calendar year maximum for x-rays and laboratory services performed in the outpatient department of a hospital, a clinic or a doctor's office. When this maximum has been reached, the balance is eligible under your major medical benefits, subject to a yearly deductible and a coinsurance share.

**For your up-to-date Medical Spending summary, visit Blue Access for Members<sup>SM</sup> on our website, the BCBSIL Mobile App or call the phone number on the back of your ID card.** **Q**

JOHN SMITH - For benefit period 01-01-20 through 12-31-20 to date this patient has met \$4,515.02 of her/his \$7,350.00 Out-of-Pocket Expense Limit.

**On Page Two You Can:**

**At a glance, confirm the:**

**D.** Patient      **E.** Provider      **F.** Policy Information

**Get the Details**

**YOUR BENEFITS APPLIED**—This section shows your list of services and how they're covered.

- G.** Amount Billed is the total amount your provider billed for the services.
- I.** Amount Covered (Allowed) is the amount billed (G) minus any discounts or reductions (H).
- J.** Health Plan Responsibility is the portion we paid to your provider.

**See Your Cost Share**

**YOUR RESPONSIBILITY**—This section shows your member cost-share amounts, including:

**K.** Deductible      **L.** Copays      **M.** Coinsurance

**O.** Your Total Costs is the sum of your copay, deductible and coinsurance. You may owe less if your provider collected any of these payments before beginning services. It also includes any amounts not covered by your health plan. The total cost in this column details the amount shown in the claim summary (O<sup>2</sup>). It does not include any amounts that a non-participating provider may bill you.

**Get More Information**

- Your EOB may include a little more information about:
- J<sup>2</sup>.** Total covered benefits approved – This is the amount and the date we paid your provider. The total matches the total in the Health Plan Responsibility column (J).
  - P.** Numbered notes give more details about discounts and reductions (H) and any amounts that aren't covered (N).
  - Q.** Health care plan maximums help you track your yearly out-of-pocket totals so you'll know when your patient cost-shares are met.

Sign up to get your EOBs online on **Blue Access for Members<sup>SM</sup>** or Text\* **GOBCBSIL to 33633** to download the mobile app.

\* Message and data rates may apply. See terms and conditions and our privacy policy at [bcbsil.com/text-messaging](http://bcbsil.com/text-messaging).

# We're with you wherever you go

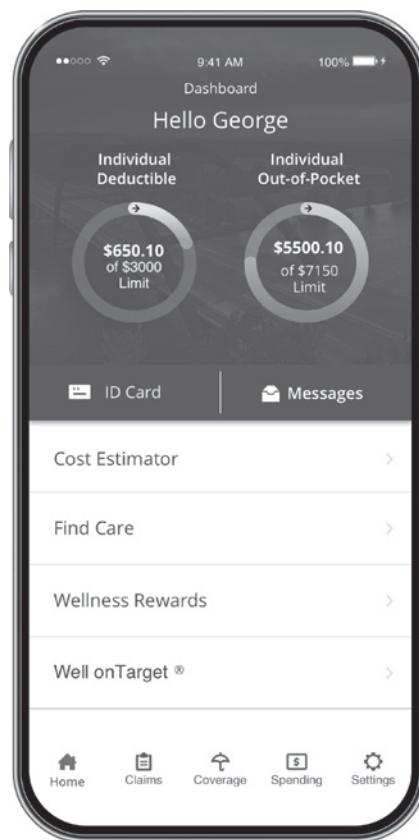


To access your important Blue Cross and Blue Shield of Illinois (BCBSIL) health benefit information anywhere you go, download the BCBSIL App.

- Find an in-network doctor, hospital or urgent care facility
- Access your claims, coverage and deductible information
- View and email your member ID card
- Log in securely with your fingerprint
- Access Health Care Accounts and Health Savings Accounts
- Download and share your Explanation of Benefits\*
- Get Push Notifications and access to Message Center\*

**Text\*\* BCBSILAPP to 33633 to get the app.**

**Available in Spanish**



\* Currently only available on iPhone®. iPhone is a registered trademark of Apple Inc.

\*\* Message and data rates may apply. Terms and conditions and privacy policy at [bcbsil.com/mobile/text-messaging](https://bcbsil.com/mobile/text-messaging).



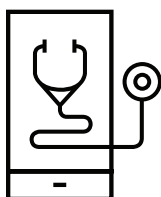
# Your Doctor Is In...Provider Finder<sup>®</sup>

**Spend less time  
looking for a doctor  
and more time enjoying  
your life.**

Provider Finder from Blue Cross and Blue Shield of Illinois (BCBSIL) is a fast, easy-to-use tool to find your next health care provider. Plus, it can help you manage health care costs.

Go to **bcbsil.com** and log in or create a Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) account and click on the Doctors and Hospitals tab in Provider Finder to:

- Find in-network providers, hospitals, laboratories and more.
- Search by specialty, ZIP code, language spoken, gender and more.
- See clinical certifications and recognitions.
- Estimate the out-of-pocket costs of more than 1,600 health care procedures, treatments and tests.\*
- Use quality awards such as Blue Distinction<sup>®</sup> Center (BDC), BDC+ or Total Care to inform your choices.
- See side-by-side provider or facility quality ratings and patient reviews.\*



## **Go Mobile with BCBSIL**

At [bcbsil.com](http://bcbsil.com), log into or create your BAM account. You can stay linked to your claims activity, member ID card and coverage details. It's also where to see prescription refill reminders and health tips by text messages at 33633.

\*Available for most networks and plans.



## Virtual Visits: Get 24/7 Care, Anywhere

**Call your doctor's office first. They also may offer telehealth consultations by phone or online video.**

With Virtual Visits, the doctor is always in. Get 24/7 non-emergency care from a board-certified doctor by phone, online video or mobile app from the privacy and comfort of your own home.

Don't risk crowded waiting rooms, expensive urgent care or ER bills, or waiting weeks or more to see a doctor, when you can speak with a Virtual Visits doctor within minutes.

Virtual Visits, provided by Blue Cross and Blue Shield of Illinois (BCBSIL) and powered by MDLIVE®, are a convenient alternative for treatment of more than 80 health conditions, including:

- Allergies
- Cold/Flu
- Fever
- Headaches
- Nausea
- Sinus infections

Virtual Visits with licensed behavioral health therapists are available by appointment. Get virtual care for:

- Anxiety
- Depression
- Stress management
- And more

**Virtual Visit doctors can even send an e-prescription to your local pharmacy.**



**Activate your MDLIVE account today:**

- **Call MDLIVE at 888-676-4204**
- **Go to MDLIVE.com/bcbsil**
- **Text BCBSIL to 635-483**
- **Download the MDLIVE app**



Virtual Visits may not be available on all plans. Non-emergency medical service in Montana and New Mexico is limited to interactive online video. Non-emergency medical service in Arkansas and Idaho is limited to interactive online video for initial consultation.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Illinois. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an independent Licensee of the Blue Cross and Blue Shield Association

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BlueCross BlueShield of Illinois



## Get the most from your benefits

**A Benefits Value Advisor<sup>1</sup> (BVA) is like a tour guide, helping to point you in the right direction.**

**BVAs can help you save money on health procedures and tests. They can also help you understand and use your benefits more wisely.**

You'll get guidance for all your health plan benefits so you only need one call to get support. BVAs can help you:

- Maximize your benefits to get better value
- Get cost estimates for various providers and procedures
- Schedule appointments
- Find a doctor or facility
- Set up preauthorization

In addition, you can access Provider Finder<sup>®</sup> to search for in-network physicians, specialists or hospitals. You can estimate the cost and your out-of-pocket expenses for hundreds of procedures, treatments and tests. Log in to your Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) account and click on "Doctors and Hospitals." If you haven't registered, go to [bcbsil.com](https://bcbsil.com), click the "Log In" tab and then click the "Register Now" link.

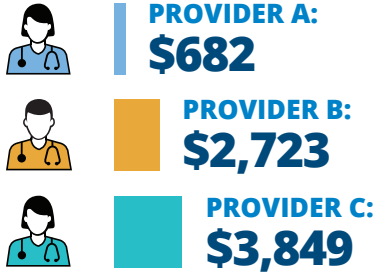


# Get Informed on Cost Estimates

The same procedure performed in the same area by different providers can vary greatly in cost.

Here are examples<sup>2</sup>.

## Estimated cost comparison for brain MRI



## Estimated cost comparison for a knee replacement



**One call can help you get the most from your benefits.**

Call the number on the back of your member ID card before your next procedure.

1. Benefits Value Advisors offer cost estimates for various providers, facilities and procedures. Lower pricing and cost savings are dependent on the provider or facility of your choosing. Member communications and information from Benefits Value Advisors are not meant to replace the advice of health care professionals. Members are encouraged to seek the advice of their doctors to discuss their health care needs. Decisions regarding course and place of treatment remain with the member and his or her health care providers. Cost estimates are just an estimate. In addition to your usual deductibles, copayments and/or coinsurance, the actual cost of the services may vary based on a number of factors including the date of service, the actual procedure performed and what services were billed by the provider and your particular benefit plan. Coverage is subject to the limitations, exclusions and terms of your plan.

2. Examples shown are for specific locations and time periods and are not intended to represent costs for procedures in your area.



# Same Procedure, Different Cost and Potential Cash in Your Pocket!

Did you know that prices for the same quality medical services can differ by thousands of dollars within the same region and health plan network? Blue Cross and Blue Shield of Illinois (BCBSIL) provides **Member Rewards** – a program administered by Sapphire Digital that offers cash rewards when a lower-cost, quality provider is selected from several options.

- Compare it to where you park your car – the \$30 lot or the \$15 one just a few blocks away.
- Member Rewards allows you to shop for your health care services in a similar way, and as the following examples show, you can save money depending on where you go for care.
- Best of all – shopping with Member Rewards could help lower your out-of-pocket costs and help get you a cash reward.

Reward Eligible Procedure	Provider A Cost	Provider B Cost
Lab/Blood Draw (New!)	\$30	\$85
MRI of the Brain	\$682	\$2,723
Knee Replacement	\$17,003	\$47,617

Most of us look for value when we're shopping – why not apply this practice to shopping for health care services? Member Rewards uses Provider Finder® to help you reduce costs and take more control of your health care financial decisions.

# What Is the Member Rewards Program?

**Member Rewards – combined with Provider Finder, our nationwide database of independently contracted health care providers – can help you:**

- Compare costs and quality for numerous procedures
- Estimate out-of-pocket costs
- Earn cash while shopping for care
- Save money and make the most efficient use of your health care benefits
- Consider treatment decisions with your doctors

## How Does It Work?

1. When a doctor recommends treatment, call a Benefits Value Advisor at the number on the back of your member ID card, or log into Blue Access for Members<sup>SM</sup> at **bcbsil.com** and click the **Doctors and Hospitals** tab – then on **Find a Doctor or Hospital**.
2. Choose a Member Rewards eligible location, and you may earn a cash reward.
3. Complete your procedure and, once verified, you will receive a check within 4 to 6 weeks.

Questions? Call the number on the back of your member ID card.

## Key Features



### Ease of Shopping

- You can quickly find the information you need to help you choose a facility or service.
- Member Rewards is available via computer, smartphone and other mobile devices.



### Cash Rewards

- It's easy to understand how much you could save with a reward option, based on location.
- After verification, Sapphire Digital will send you any earned reward check. Note that rewards are taxable.

Sapphire Digital is an independent company that has contracted with Blue Cross and Blue Shield of Illinois (BCBSIL) to administer the Member Rewards program for members with coverage through BCBSIL. Eligibility for rewards is subject to terms and conditions of the Member Rewards program. Amounts you receive through Member Rewards may be taxable. BCBSIL does not provide tax advice, so please contact your HR or tax advisor for more information. Members that have primary coverage with Medicaid or Medicare are not eligible to receive incentive rewards under the Member Rewards program.

BCBSIL makes no endorsement, representations or warranties regarding third-party vendors.

239181.1220



# Check Out Your HMO Vision Care Program

## What Are My Vision Care Benefits?

Benefits for covered members include\*:

- \$0 copay for one eye examination every 12 months
- \$0 copay for one standard contact lens evaluation and fitting every 12 months, when performed at the same time as the eye examination
- Spectacle lenses or contact lenses and a frame allowance every 12 or 24 months\*\*
- Choice of any frame brand available, including the world's leading frame designers, like Oakley® and Ray-Ban®



PRADA



TIFFANY & CO.

**Remember:** When you visit an EyeMed network provider, your copayment or other share of the cost is due on the day of your visit.

For more details about what your plan covers, please visit [eyemedvisioncare.com/bcsil](http://eyemedvisioncare.com/bcsil) or call EyeMed at 844-684-2254.

## Do I Need a Referral?

You don't need a referral. Simply visit any EyeMed Select provider and show your medical ID card to access your vision care benefits and discounts.

## Do I Need a Vision ID Card?

As long as you have your BCBSIL medical ID card, you do not need a separate vision ID card. However, if you would like a separate card, you can register online at [eyemedvisioncare.com/bcsil](http://eyemedvisioncare.com/bcsil) or via the EyeMed mobile app to download and/or print a card.



**As a member of Blue Cross and Blue Shield of Illinois (BCBSIL), you and your covered dependents are eligible for vision care benefits through EyeMed.**

## Are There Discounts Included?

You receive extra discounts\*\* above your vision program benefits, including:

- 40 percent off frames
- 20 percent off any item not covered by the plan (limitations may apply)
- 15 percent off retail or 5 percent off the promotional price of LASIK. For more information regarding the LASIK feature, call **877-5LASER6**.

See a list of available discounts in the blue box to the right.

## How Do I Locate a Contracted EyeMed Provider?

The EyeMed Select network consists of thousands of independent and retail contracted providers, including national favorites like LensCrafters®, Pearle and Target Optical®.

For a list of EyeMed Select providers near you, visit [eyemedvisioncare.com/bcbsil](http://eyemedvisioncare.com/bcbsil) or call EyeMed.



In addition, you have online, in-network access to [contactsdirect.com](http://contactsdirect.com) and [glasses.com](http://glasses.com).

## Are There Any Exclusions?

The following are some of the items not covered as part of the vision care program. Refer to your benefits booklet for a full list.

- Medical treatment of eye disease or injury
- Vision therapy
- Services performed by a provider who is not in the EyeMed network
- Replacement of lost eyewear
- Services not performed by licensed personnel

### Discounts

Frames	35% off retail price
Other Add-ons	20% off retail price

### Standard Lenses

Single Vision	\$50
Bifocal	\$70
Trifocal	\$105
Lenticular	\$105
Standard Progressive	\$135

### Lens Options

UV Treatment	\$15
Tint (Solid and Gradient)	\$15
Scratch Coating	\$15
Polycarbonate - Adults	\$40
Polycarbonate - Kids under 19	\$40
Standard Anti-reflective	\$45
Conventional Contact Lenses	15% off retail price

### For more information:

Call EyeMed at **844-684-2254**  
Mon. - Sat., 6:30 a.m. - 10 p.m.  
Sun. 10 a.m. - 7 p.m. CT  
[eyemedvisioncare.com/bcbsil](http://eyemedvisioncare.com/bcbsil)

\* For more information about your vision benefits, refer to your benefits booklet or call the customer service number on the back of your ID card. This flier is just a summary of your benefits and does not change the benefits provided in the booklet.

\*\* Federal law prohibits the dispensing of a quantity of contact lenses whose intended use would exceed the expiration date of the contact lens prescription.

\* Complete pair eyeglasses purchase discounts: Frame, lenses and lens options must be purchased in same transaction to receive full discount.

Benefits are available from the EyeMed Vision Care, LLC provider network and are administered by First American Administrators, Inc., independent companies that offer benefits on behalf of Blue Cross and Blue Shield of Illinois.

Third party brands are the property of their respective owners.

Third party brands are the property of their respective owners. Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association





# Wellness Information







# Be Your Healthiest Self...We'll Help

Online...on the phone...on the go. However you choose to fit good health into your daily life, you've got tools to help you. Follow these simple steps to sign up for Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) – where you can access all the health and wellness programs included with your plan.



**Go to [bcbsil.com](https://bcbsil.com).**



**Sign up for BAM.**



**Click the My Health tab.**

## **A Path to Wellness**

Work with a coach, or complete self-management online programs to help reach your wellness goals with Well onTarget<sup>®</sup>. Plus earn rewards for healthy activities.<sup>1</sup>

## **Commit to Be Fit**

Get unlimited access to a national network of fitness centers, so you can exercise wherever life takes you.<sup>2</sup>

## **Quick Answers to Health Questions**

Should you go to the emergency room? Urgent care? Wait to see your doctor? 24/7 Nurseline can help you decide – any day, any time.<sup>3</sup>

## **Behavioral Health Support**

Your mental health is vital to your wellbeing. Your plan gives you access to treatment options to help with anxiety, depression, substance use and more.

## **Guidance for Your Growing Family**

Check out apps from Ovia Health<sup>®</sup> for expert advice to support you through all the stages of planning for and having a baby.<sup>4</sup>



## Help for Chronic Conditions

You and your covered family members may have access to support for certain health issues. If you are a good fit for one of the programs below, Blue Cross and Blue Shield of Illinois or one of the companies below will let you know how to sign up.

- **Lose weight:** Say goodbye to dieting with Naturally Slim®.<sup>5</sup> Learn how to eat mindfully while enjoying all your favorite foods.
- **Prevent diabetes:** The diabetes prevention program from Omada® can help you lower your chances of long-term health problems. Learn how to eat, exercise and deal with stress in a healthy way.<sup>6</sup>
- **Control diabetes:** Make managing your type 1 or type 2 diabetes a little easier with Livongo®.<sup>7</sup> Get a meter, test strips and lancets shipped to your door, all at no added cost.
- **Handle high blood pressure:** Programs from Omada and Livongo offer a health coach and a connected blood pressure monitor to track your numbers and help lessen your risk.
- **Manage joint and spine pain:** Exercise your way to knee, hip, shoulder, neck and back health with the Hinge Health® program.<sup>8</sup> An app and wearable sensors guide you through movements you can do in your home, on your time.
- **Cope with cancer:** Our cancer nurses are here to support you through your journey – from finding a provider through treatment and beyond. They can also help explain your care options and health benefits.



**Get healthy reminders and tips for using your benefits.**

Text **MYCONTACTIL** to **33633** or go to **upp.bcbsil.com** to let us know how we should contact you.<sup>9</sup>

1. Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at [wellontarget.com](http://wellontarget.com) for further information. Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.
  2. Individuals must be at least 18 years old to purchase a membership. The Fitness Program is provided by Tivity Health™, an independent contractor that administers the Prime Network of fitness centers. The Prime Network is made up of independently owned and operated fitness centers.
  3. For medical emergencies, call 911. This program is not a substitute for a doctor's care. Talk to your doctor about any health questions or concerns.
  4. Ovia Health is an independent company that provides maternity and family benefits solutions for Blue Cross and Blue Shield of Illinois.
  5. Naturally Slim is an independent company that provides Metabolic Syndrome Management for Blue Cross and Blue Shield of Illinois.
  6. Omada is an independent company that provides disease management services for Blue Cross and Blue Shield of Illinois. Omada is solely responsible for the products and services that it provides.
  7. Livongo is an independent company that provides disease management services for Blue Cross and Blue Shield of Illinois.
  8. Hinge Health is an independent company that provides online Musculoskeletal Management Solutions for Blue Cross and Blue Shield of Illinois. Hinge Health is solely responsible for the products and services that it provides.
  9. Message and data rates may apply. Terms and conditions and our privacy policy are available at [bcbsil.com/mobile/text-messaging](http://bcbsil.com/mobile/text-messaging).
- Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.



# Understand Your Health Plan Before You Get Care to Help Avoid Higher Costs.

Preauthorization (also known as 'prior authorization') means that approval is needed from your health plan before you have certain health tests or services. To help make sure your care is appropriate and avoid unexpected costs, it's important that approval is received **before** you get these services.

Usually, your network provider will take care of preauthorization before the service is performed. But it is always a good idea to check if your doctor has gotten the needed approval.

## Your Preauthorization Checklist

Once your health plan coverage starts, you can begin using the resources below. Be a smart health care shopper – use these tools to stay informed about your plan benefits!



1

### Connect with us

Use the information on your Blue Cross and Blue Shield of Illinois (BCBSIL) member ID card to create a Blue Access for Members<sup>SM</sup> (BAM<sup>SM</sup>) account at [bcbsil.com](https://www.bcbsil.com). And download the BCBSIL App at the Apple or Google Play store. Both tools can help you keep up with your benefits.

2

### Know what your plan requires

Log in to BAM and click My Coverage. Under the **Referral and Prior Authorization Information** tab, you'll see a list of services that may require preauthorization. You can find a more detailed list of services that require approval under your plan in your benefit booklet. Confirm with your provider that they have gotten approval before your service.

3

### Track your status

You can check whether your preauthorization has been submitted or approved online. In BAM, go to **My Coverage**, then **Referral and Prior Authorization Information**. Or in the BCBSIL App, click **More**, then **Prior Authorization**.



We want you to get the most out of your health care benefits – let us help!  
Call the number on the back of your BCBSIL member ID card for questions.

# Services That May Require Preauthorization

**We want you to be clear about what your health plan covers.**

**Here is a list of services<sup>1</sup> that may need approval in advance:**

- Inpatient hospital stays<sup>2</sup>
- Stays in a facility for rehabilitation, long-term care or skilled nursing care
- Behavioral health care, either in or outside of a hospital
- Some high-cost specialty drugs

**Some services you get without a stay at the hospital may also require approval, such as:**

- Air ambulance (for non-emergencies)
- CT scans, MRIs and other advanced imaging
- Breast lift or reduction surgery
- Electrical stimulation of the brain, nerves or stomach
- Home health care
- Home infusion
- Hospice
- Some ear, nose or throat services, such as bone conduction hearing aids, cochlear implants or surgery
- Some sleep studies
- Some surgeries of the face, jaw, mouth or teeth
- Some treatments for heart disease
- Some wound care services, such as high-pressure oxygen treatment



**You are responsible for calling BCBSIL if you get out-of-network care. Be sure to notify BCBSIL within two days of an emergency, maternity, mental health or substance abuse hospital admission at an out-of-network facility. For preauthorization or other questions, call the number on the back of your member ID card.**

1. Preauthorization requirements vary by plan. Check your benefits booklet or call the Customer Service number on the back of your member ID card for questions about your benefits.

2. In-network inpatient hospitals are required to request preauthorizations on your behalf.



# 24/7 Nurseline

## Nurses available anytime you need them.

Health happens – good or bad, 24 hours a day, seven days a week. That is why we have registered nurses waiting to talk to you whenever you call our 24/7 Nurseline\*.

Our nurses can answer your health questions and try to help you decide whether you should go to the emergency room or urgent care center or make an appointment with your doctor. You can also call the 24/7 Nurseline whenever you or your covered family members need answers to health questions about:

- Asthma
- Dizziness or severe headaches
- Cuts or burns
- Back pain
- High fever
- Sore throat
- Diabetes
- A baby's nonstop crying
- And much more

Plus when you call, you can access an audio library of more than 1,000 health topics – from allergies to surgeries – with more than 500 topics available in Spanish.

So, put the 24/7 Nurseline phone number in your contacts today, because health happens 24/7.



Call the 24/7 Nurseline number on the back of your member ID card.

Hours of Operation:  
**Anytime**



# Experience Wellness Your Way

Well onTarget® gives you the tools and resources to create your personal journey — no matter where you may be on your path to wellness.

Well onTarget can give you the support you need to make healthy choices — while rewarding you for your hard work.

## Member Wellness Portal

The heart of Well onTarget is the member portal, available at [wellontarget.com](http://wellontarget.com)\*. It links you to a suite of inviting programs and tools.

- **Health Assessment (HA)<sup>1</sup>:** The HA presents a series of questions to learn more about you. After you take the HA, you will get a personal and confidential wellness report. The report offers you tips for living your healthiest life. Your answers will help tailor the Well onTarget portal with the programs that may help you reach your goals. If you choose, you can share this report with your health care provider.
- **Self-Management Programs:** These programs let you work at your own pace to reach your health goals. Learn more about nutrition, fitness, losing weight, quitting smoking, managing stress and more. Track your progress as you make your way through each lesson. Reach your milestones and earn Blue Points<sup>SM,2</sup>

Start experiencing the wellness portal today. Go to [wellontarget.com](http://wellontarget.com).

Well onTarget®

\*Members can use their Blue Access for Members<sup>SM</sup> credentials to access the [wellontarget.com](http://wellontarget.com) site.

- **Online Wellness Challenges:** Challenge yourself to meet your wellness goals.
- **Tools and trackers:** These resources can help keep you on course while making wellness fun. Use symptom checkers and health trackers.
- **Fitness Tracking:** Track your fitness activity using popular fitness devices and mobile apps.
- **Blue Points Program:** Blue Points can help motivate you to maintain a healthy lifestyle. Earn points for participating in wellness activities. You can redeem points in the online shopping mall.<sup>3</sup>
- **Health and wellness content:** Reader-friendly articles about conditions and medicines.

## Fitness Program

Fitness can be easy, fun and affordable. The Fitness Program gives you unlimited access to a nationwide network of more than 10,000 fitness locations. You can visit locations while you're on vacation or traveling for work.

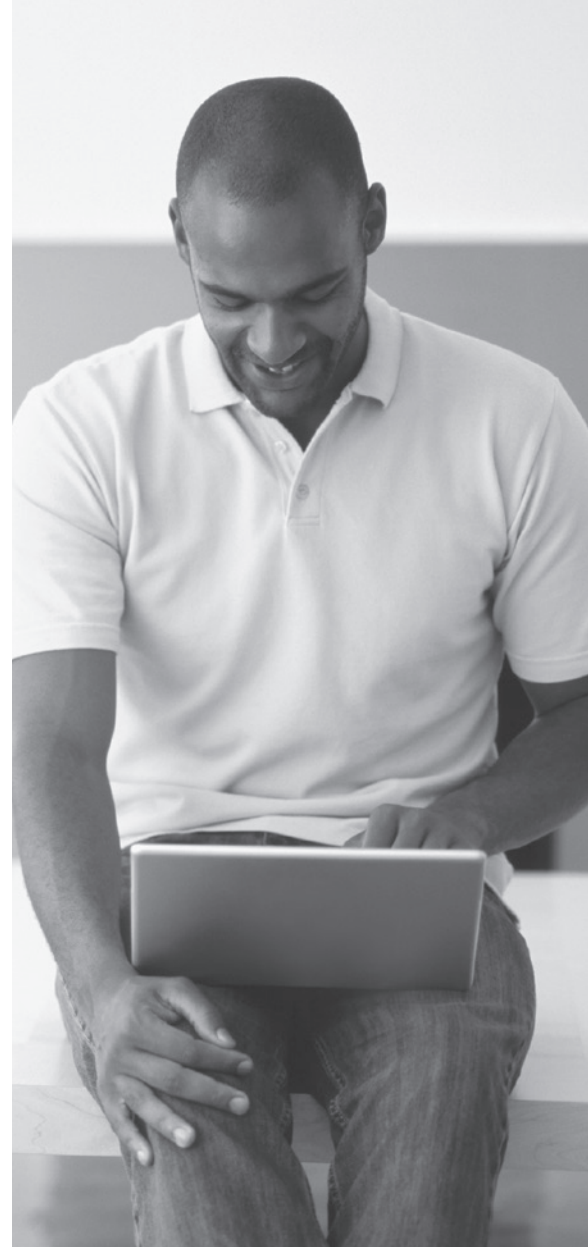
Other program perks include:

- **No long-term contract:** Membership is month to month. Flexible plans from \$19 to \$99 per month and studio classes are available.<sup>4</sup>
- **Blue Points:** Get 2,500 points for joining the Fitness Program. Earn additional points for weekly visits.
- **Convenient payment:** Monthly fees are paid via automatic credit card or bank account withdrawals.
- **Web resources:** You can go online to search for locations and track your visits.
- **Complementary and Alternative Medicine (CAM):** Discounts Through the Whole Health Living Choices Program, a nationwide network of 40,000 health and well-being providers, such as acupuncturists, massage therapists and personal trainers. Register at [whlchoices.com](http://whlchoices.com).

It's easy to join the Fitness Program! Just call the toll-free number **888-762-BLUE (2583)** Monday through Friday, between 7 a.m. and 7 p.m. CT (6 a.m. and 6 p.m. MT).

## Wellness Program Questions?

Call Customer Service at **877-806-9380**.



## Take Wellness on the Go

Check out the AlwaysOn Wellness mobile app, available for iPhone® and Android™ smartphones. It can help you work on your health and wellness goals — anytime and anywhere.

1. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

2. Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at [wellontarget.com](http://wellontarget.com) for further information.

3. Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

4. Taxes apply. Individuals must be at least 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Check your preferred location to see their membership age policy. Underage dependents can log in and join through the primary member's account as an "additional member."

The Fitness Program is provided by Tivity Health™ Services, LLC, an independent contractor which administers the Prime® Network of fitness centers. The Prime Network is made up of independently-owned and managed fitness centers. Prime is a registered trademark of Tivity Health, Inc. Tivity Health is a trademark of Tivity Health, Inc.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.



# Live Well with the Well onTarget Member Wellness Portal

The Well onTarget® Member Wellness Portal at [wellontarget.com](https://wellontarget.com) provides you with tools to help you set and reach your wellness goals. The portal is user-friendly, so you can find everything you need quickly and easily.

## Explore Your Wellness World

When you log in to your portal, you will find a wide variety of health and wellness resources, including:

- The Health Assessment (HA)
- Self-Management Programs
- Health trackers
- Trusted news and health education content

## See Your Stats in a Flash

Everything you want to see quickly is on your dashboard. The dashboard shows all of your Well onTarget programs. You can see where you are today compared with where you were when you started. You can also read the latest health news, check your activity progress and more.

## Take a Snapshot of Your Health

The HA asks you questions about your health and habits.<sup>1</sup> You then get a Personal Wellness Report. This report suggests ways to make positive lifestyle changes. Your report can also help you decide which Well onTarget program to start first to get the most benefit. You can even print a Provider Report to share with your doctor.

Well onTarget®



## Blue Points<sup>SM</sup> Program<sup>2</sup>

Small rewards may motivate you to make positive changes to meet your wellness goals. With Well onTarget, you can earn Blue Points for making healthy choices. If you enroll in the Fitness Program or take your HA, you earn points.<sup>3</sup> You can also earn points when you achieve milestones in the Self-Management Programs. Redeem your Blue Points in the online shopping mall, which offers a wide variety of merchandise.<sup>4</sup>

## Health Tools and Trackers

Knowing what you eat and how much you work out can help you reach your goals. But keeping track of all you do can be time-consuming. To make it easy, the portal has trackers that let you record how much sleep you get, your stress levels, your blood pressure readings and your cholesterol levels.

The portal also offers a symptom checker. When you don't feel well, this tool can help you decide if you should see a doctor.

## Self-Management Programs

These programs consist of:

1. Interactive programs with learning activities and content that focus on behavioral changes to reinforce healthier habits.
2. Educational programs that inform about symptoms, treatment options and lifestyle changes.

These two learning methods allow you to study on your own time and may help you get to the next level of wellness. Topics include nutrition, weight management, physical activity, stress management, tobacco cessation and more.

## Fitness Tracking

Earn Blue Points for tracking your fitness activity using popular fitness devices and mobile apps.



## Take Wellness on the Go

Check out the Well onTarget AlwaysOn Wellness mobile app, available for iPhone<sup>®</sup> and Android<sup>™</sup> smartphones. It can help you work on your wellness goals — anytime and anywhere.

1. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.
2. Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.
3. This does not apply to points you earn for completing Fitness Program activities.
4. Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

The Fitness Program is provided by Tivity Health<sup>®</sup>, an independent contractor that administers the Prime Network of fitness centers. The Prime Network is made up of independently owned and operated fitness centers.

# Blue Points<sup>SM</sup> — Rewards for Healthy Living

**Well onTarget understands how hard it can be to maintain a healthy lifestyle. Sometimes, you may need a little motivation. That's why we offer the Blue Points<sup>1</sup> program. This program may help you get on track — and stay on track — to reach your wellness goals.**

With the Blue Points program, you will be able to earn points for regularly participating in many different healthy activities. You can redeem these points in the online shopping mall, which provides a wide variety of merchandise.

Created with your needs in mind, the Blue Points program has many convenient, user-friendly, personalized and flexible features:

## Earn Points Instantly

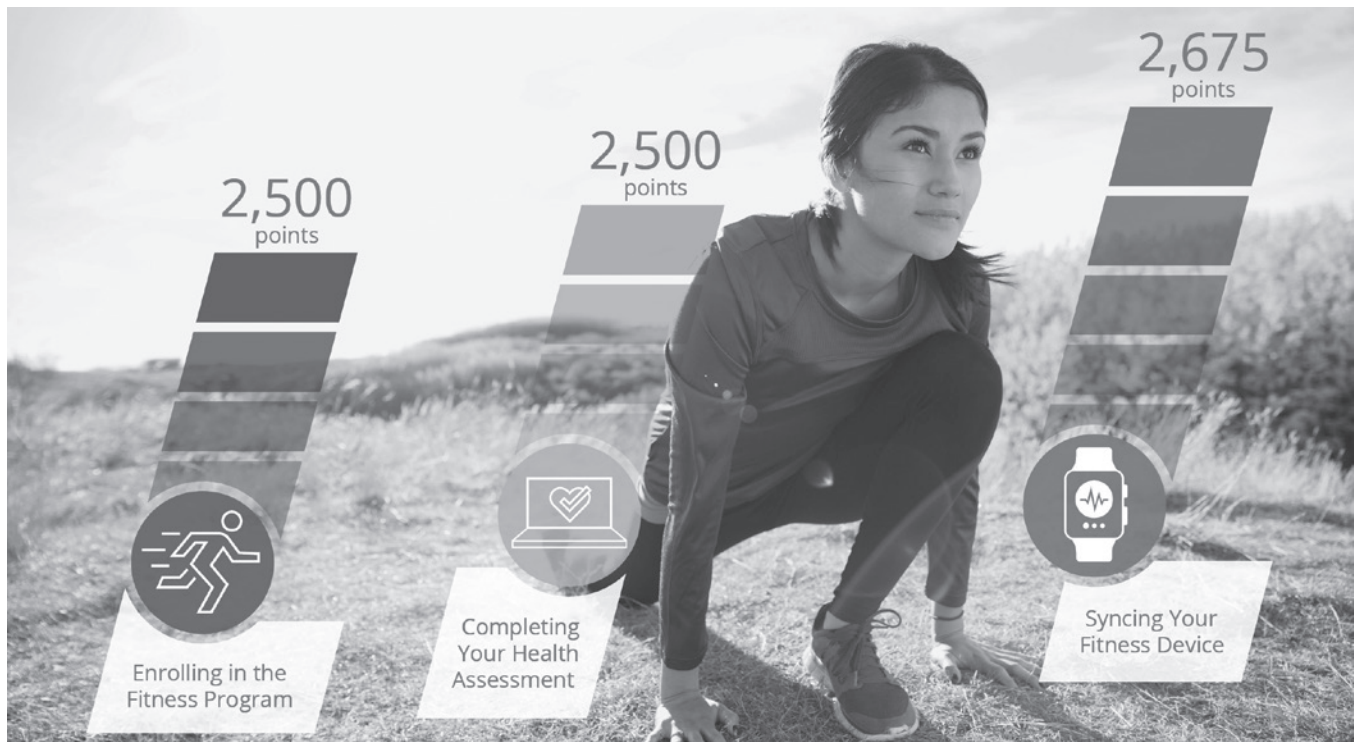
The program gives you points immediately, so you can start using them right away.<sup>2</sup>

## Get Extra Points

Don't have enough points yet for that reward you really want? No problem! You can apply the points you have and use a credit card to pay the remaining balance.

## Easily Manage Your Points

The interactive Well onTarget portal, available at [wellontarget.com](http://wellontarget.com), uses the latest user-friendly technology. This makes it easy to find out how many points are available for you to earn. You can also track the total number of points you've earned year-to-date. All of your points information will appear on one screen.





## Choose from a Large Selection of Rewards

Redeem your points in our expanded online shopping mall. Reward categories include apparel, books, health and personal care, jewelry, electronics, music and sporting goods. You'll also find discounted items on electronics, games, luggage and other merchandise.<sup>3</sup>

## Participate in Activities That Match Your Goals

Look how quickly your Blue Points can add up! Here are some sample activities you can complete to earn Blue Points:

Activities	Potential Blue Points Amounts
Completing the Health Assessment every six months <sup>4</sup>	2,500 points every six months
Complete a Self-management Program	1,000 points per quarter
Using the trackers to track your progress toward your goals	10 points, up to a maximum of 70 points per week
Enrolling in the Fitness Program	2,500 points
Adding weekly Fitness Program center visits to your routine	Up to 300 points each week
Completing Progress Check-ins	Up to 250 points per month
Connecting a compatible fitness device or app to the portal	2,675 points
Tracking progress using a synced fitness device or app	55 points per day



*Log on to **wellontarget.com** today to find all the interactive tools and resources you need to start racking up Blue Points. Keep yourself motivated to earn more points by heading over to the online shopping mall and checking out all the rewards you can earn for adopting — and continuing — healthy habits.*



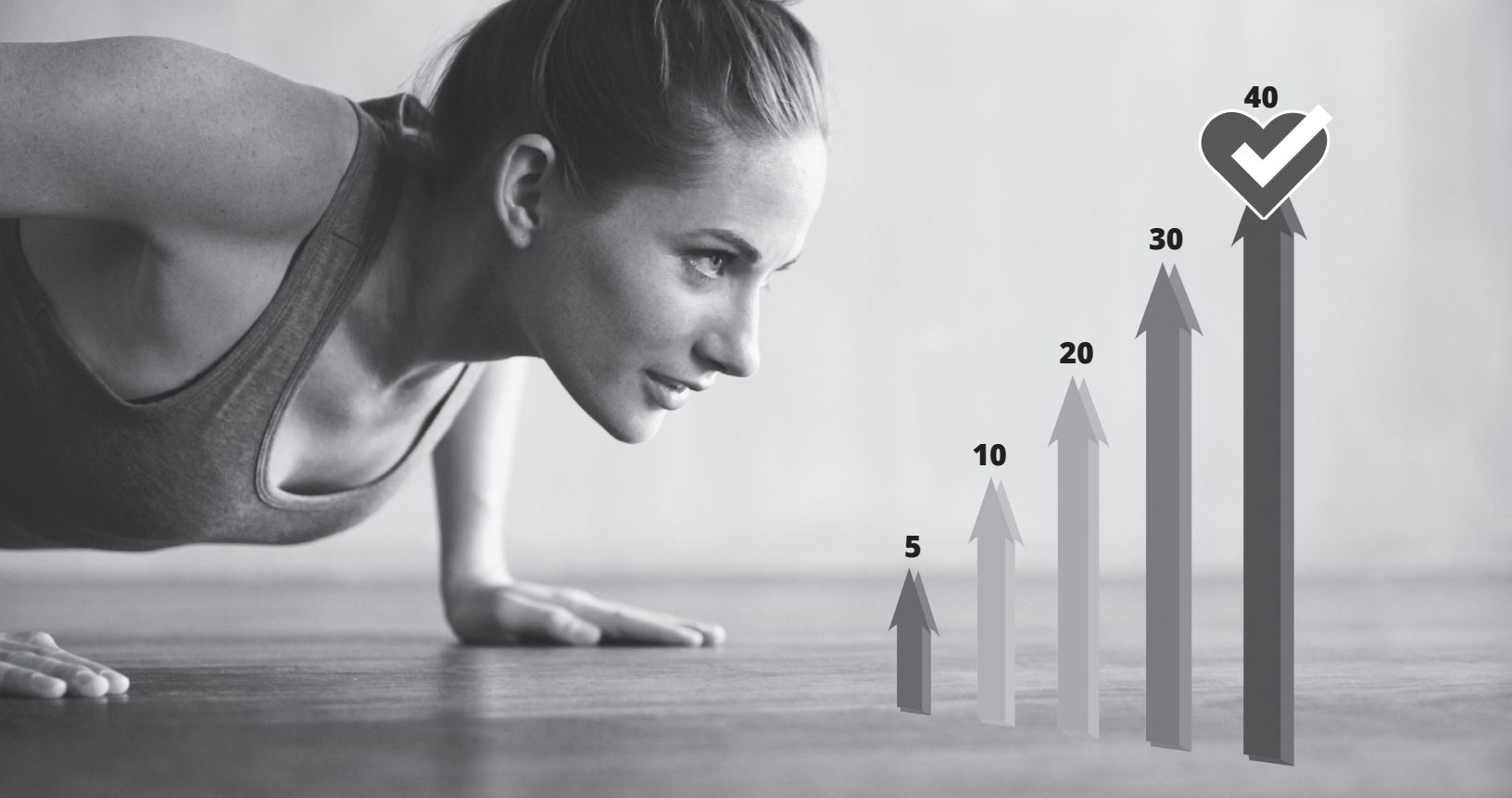
<sup>1</sup> Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.

<sup>2</sup> This does not apply to points you earn for completing Fitness Program activities.

<sup>3</sup> Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

<sup>4</sup> Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

The Fitness Program is provided by Tivity Health®, an independent contractor that administers the Prime Network of fitness centers. The Prime Network is made up of independently owned and operated fitness centers.



# Make Your Fitness Program Membership Work for You

## The Fitness Program gives you flexible options to help you live a healthy lifestyle.

Since you are a Blue Cross and Blue Shield of Illinois (BCBSIL) member, the Fitness Program is available exclusively to you and your covered dependents (age 16 and older).\* The program gives you access to a nationwide network of fitness locations. Choose one location close to home and one near work, or visit locations while traveling.

### Other program perks include:

- **Flexible Gym Network:** A choice of gym networks to fit your budget and preferences.\*\*

Options	Digital Only	Base	Core	Power	Elite
Monthly Fee	\$10	\$19	\$29	\$39	\$99
Gym Facility Network Size†	Digital Access Only	3,000	7,500	12,000	12,400
<b>\$19 Initiation Fee (No initiation fee for Digital Only Option)</b>					

- **Studio Class Network:** Boutique-style classes and specialty gyms with pay-as-you-go option and 30% off every 10th class.
- **Family Friendly:** Expands gym network access to your covered dependents at a bundled price discount.
- **Convenient Payment:** Monthly fees are paid via automatic credit card or bank account withdrawals.

† Represents possible network locations. Check local listings for exact network options as some locations may not participate. Network locations are subject to change without notice.

## Features

- **Mobile App:** Allows members to access location search, studio class registration, location check-in and activity history.
- **Real-time Data:** Provided to the mobile app and Well onTarget portals.
- **Complementary and Alternative Medicine (CAM) Discounts Through the WholeHealth Living Choices Program:** Save money through a nationwide network of 40,000 health and well-being providers, such as acupuncturists, massage therapists and personal trainers. To take advantage of these discounts, register at [whlchoices.com](http://whlchoices.com).
- **Blue Points<sup>SM</sup>:** Get 2,500 points for joining the Fitness Program. Earn additional points for weekly visits. You can redeem points for apparel, books, electronics, health and personal care items, music and sporting goods.\*\*\*
- **Web Resources:** You can go online to find fitness locations and track your visits.
- **Digital Fitness:** Stay active from the comfort of your own home. Access thousands of digital fitness videos and live classes including cardio, bootcamp, barre, yoga, and more through an online platform. Digital access is included with Base, Core, Power and Elite memberships. You can also join the Digital Only plan option if only interested in access to digital fitness options.

## Are You Ready for Fitness?

### It's easy to sign up:

1. Go to [bcbsil.com](http://bcbsil.com) and log in to Blue Access for Members<sup>SM</sup>.
2. Under "**Quick Links**," choose "**Fitness Program**." On this page, you can enroll, search for nearby fitness locations and learn more about the program.
3. Click "**Enroll Now**." Then search and select the plan option that is best for you. Remember, you can visit any participating fitness location in your plan after you sign up.
4. Verify your personal information and method of payment. Print or download your Fitness Program membership ID card. You may also request to receive the ID card in the mail.
5. Visit a fitness location today!

Prefer to sign up by phone or have questions about the Fitness Program? Just call the toll-free number **888-762-BLUE (2583)** Monday through Friday, between 7 a.m. and 7 p.m., CT (6 a.m. and 6 p.m., MT).

## Find fitness buddies, take a digital class and try something new!

Join the Fitness Program today to help you reach your health and wellness goals.



\*Individuals must be 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Check your preferred location to see their membership age policy. Underage dependents can login and join through the primary member's account as an "additional member."

\*\*Taxes may apply. Individuals must be at least 18 years old to purchase a membership.

\*\*\*Member agrees to comply with all applicable federal, state and local laws, including making all disclosures and paying all taxes with respect to their receipt of any reward.

The Fitness Program is provided by Tivity Health<sup>TM</sup>, an independent contractor that administers the Prime Network of fitness locations. The Prime Network is made up of independently owned and operated fitness locations.

The WholeHealth Living Choices program is administered by Tivity Health<sup>TM</sup> Services, LLC. This is NOT insurance. Some of the services offered through this program may be covered by a health plan. The relationship between these vendors and Blue Cross and Blue Shield of Illinois is that of independent contractors.

Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.

BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Blue Cross<sup>®</sup>, Blue Shield<sup>®</sup> and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans



# Blue365<sup>®</sup>

## A Discount Program for You

Blue365 is just one more advantage you have by being a Blue Cross and Blue Shield of Illinois (BCBSIL) member. With this program, you may save money on health and wellness products and services from top retailers that are not covered by insurance. There are no claims to file and no referrals or preauthorizations.

Once you sign up for Blue365 at [blue365deals.com/bcbsil](https://blue365deals.com/bcbsil), weekly "Featured Deals" will be emailed to you. These deals offer special savings for a short period of time.

Below are some of the ongoing deals offered through Blue365.

### **EyeMed | Davis Vision**

You can save on eye exams, eyeglasses, contact lenses and accessories. You have access to national and regional retail stores and local eye doctors. You may also get possible savings on laser vision correction.

### **TruHearing<sup>®</sup> | Beltone<sup>™</sup> | American Hearing Benefits**

You could get savings on hearing tests, evaluations and hearing aids. Discounts may also be available for your immediate family members.

### **Dental Solutions<sup>SM</sup>**

You could get dental savings with Dental Solutions. You may receive a dental discount card that provides access to discounts of up to 50% at more than 70,000 dentists and more than 254,000 locations.\*

### **Jenny Craig<sup>®</sup> | Sun Basket | Nutrisystem<sup>®</sup>**

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

See all the Blue365 deals and learn more at [blue365deals.com/bcbsil](https://blue365deals.com/bcbsil).

## Fitbit®

You can customize your workout routine with Fitbit's family of trackers and smartwatches that can be employed seamlessly with your lifestyle, your budget and your goals. You'll get a 20% discount on Fitbit devices plus free shipping.

## Reebok | SKECHERS®

Reebok, a trusted brand for more than 100 years, makes top athletic equipment for all people, from professional athletes to kids playing soccer. Get 20% off select models. SKECHERS, an award-winning leader in the footwear industry, offers exclusive pricing on select men's and women's styles. You can get 30% off plus free shipping for your online orders.

## InVite® Health

InVite Health offers quality vitamins and supplements, educational resources and a team of healthcare experts for guidance to select the correct product at the best value. Get 50% off the retail price of non-genetically modified microorganism (non-GMO) vitamins and supplements and a free Midnight Bright Black Coconut Charcoal Tooth Polish with a \$25 purchase.

## Livekick

Livekick is the future of private fitness. Choose from training or yoga over live video with a private coach. Get fit and feel healthier with action-packed 30-minute sessions that you can do from home, your gym or your hotel while traveling. Get a free two-week trial and 20% off a monthly plan on any Live Online Personal Training.



## eMindful

Get a 25% discount on any of eMindful's live streaming or recorded premium courses. Apply mindfulness to your life including stress reduction, mindful eating, chronic pain management, yoga, Qigong movements and more.

**For more great deals, or to learn more about Blue365, visit [blue365deals.com/bcsil](https://blue365deals.com/bcsil).**

The relationship between these vendors and Blue Cross and Blue Shield of Illinois (BCBSIL) is that of independent contractors. BCBSIL makes no endorsement, representations or warranties regarding any products or services offered by the above-mentioned vendors.

\* Dental Solutions requires a \$9.95 signup and \$6 monthly fee.

Blue365 is a discount program only for BCBSIL members. This is NOT insurance. Some of the services offered through this program may be covered under your health plan. You should check your benefit booklet or call the customer service number on the back of your ID card for specific benefit facts. Use of Blue365 does not change monthly payments, nor do costs of the services or products count toward any maximums and/or plan deductibles. Discounts are given only through vendors that take part in this program and may be subject to change. BCBSIL does not guarantee or make any claims or recommendations about the program's services or products. Members should consult their doctor before using these services and products. BCBSIL reserves the right to stop or change this program at any time without notice.



# Adult Wellness Guidelines

## Making Preventive Care a Priority



### Adult Health – for ages 18 and over

Preventive care is very important for adults. By making some good basic health choices, women and men can boost their own health and well-being. Some of these positive choices include:

- Eat a healthy diet
- Get regular exercise
- Don't use tobacco
- Limit alcohol use
- Strive for a healthy weight

Screenings	
Weight	Every visit or at least annually
Body Mass Index (BMI)	Every visit or at least annually
Blood Pressure (BP)	Every visit or at least annually
Colon Cancer Screening	Adults age 50-75 for colorectal cancer using: • Guaiac Fecal Occult Blood Test (gFOBT) annually or; • Fecal Immunochemical Testing (FIT) annually or; • Fecal Immunochemical Testing (FIT)-DNA every 1-3 years or; • Flexible sigmoidoscopy every 5 years or; • Flexible sigmoidoscopy every 10 years with FIT annually or; • Colonoscopy every 10 years or; • CT Colonography every 5 years** Ages 45 to 49 should discuss the risks and benefits of screening with your health care provider*. The risks and benefits of different screening methods vary.
Diabetes Screening	Those with high blood pressure should be screened. Those who are overweight or have cardiovascular risk factors should be screened. All others should be screened starting at age 45.**
Hepatitis C (HCV) Screening	Once for adults born between 1945 and 1965. Most adults need to be screened only once. Persons with continued risk for HCV infection (eg, PWID) should be screened periodically, and persons at high risk for infection
HIV Screening	Adults ages 18 to 65, older adults at increased risk and all pregnant women should be screened
Immunizations (Vaccines)	
Tetanus Diphtheria Pertussis (Td/Tdap)	Get Tdap vaccine once, then a Td booster every 10 years
Influenza (Flu)	Yearly
Human Papillomavirus (HPV)	All Adults age 18-26, 2 or 3 doses depending on age at time of initial vaccination if not already given.**
Herpes Zoster (Shingles)	Two doses of RZV starting at age 50, or one dose of ZVL at age 60 or over. Discuss your options with your health care provider.*
Varicella (Chicken Pox)	2 doses if no evidence of immunity
Pneumococcal (Pneumonia)	Ages 65 and over, one dose of PCV 13 and one dose of PCV 23 at least one year after PCV 13**
Measles, Mumps, Rubella (MMR)	1 or 2 doses for adults born in 1957 or later who have no evidence of immunity

\* A health care provider could be a doctor, primary care provider, physician assistant, nurse practitioner or other health care professional.

\*\* Recommendations may vary. Discuss the start and frequency of screenings with your health care provider, especially if you are at increased risk.



## Women's Health

Women have their own unique health care needs. To stay well, women should make regular screenings a priority. In addition to the services listed in the Adult Health section, women should also discuss the recommendations listed on the chart to the right with their health care provider.

## Men's Health

Men are encouraged to get care as needed and make smart choices. That includes following a healthy lifestyle and getting recommended preventive care services. If men follow a game plan for better overall health, they'll be more likely to win at wellness.

In addition to the services listed in the Adult Health section, men should also discuss the recommendations shown in the chart to the right with their health care provider.

**Learn more.** Additional sources of health information include:

- [ahrq.gov/patients-consumers/prevention/index.html](https://ahrq.gov/patients-consumers/prevention/index.html)
- [cancer.org/healthy/index](https://cancer.org/healthy/index)
- [cdc.gov/healthyliving/](https://cdc.gov/healthyliving/)

You probably don't hesitate to ask your health care provider about nutrition and exercise, losing weight and stopping smoking. Other topics for discussion may include:

- Dental health
- Problems with drugs or alcohol
- Sexual behavior and sexually transmitted diseases
- Feelings of depression
- Domestic violence
- Accident/injury prevention
- Preventing falls, especially for ages 65 and over

Women's Recommendations	
Mammogram	At least every 2 years for women ages 50 to 74 Ages 40 to 49 should discuss the risks and benefits of screening with their health care provider
Cholesterol	Women age 45 and older. Women age 20-45 should be screened if they are at increased risk for coronary heart disease. Talk with your health care provider about the starting and frequency of screening that is best for you.
Cervical Cancer Screening	Women ages 21 to 65: Pap test every 3 years Another option for ages 30 to 65: Pap test with HPV test every 5 years Women who have had a hysterectomy or are over age 65 may not need a Pap test*
Osteoporosis Screening	Beginning at age 65, at age 60 if risk factors are present or postmenopausal women younger than 65 years who are at increased risk of osteoporosis*
Low-dose Aspirin Use	Ages 50-59 talk with your health care provider about low-dose aspirin use for the prevention of cardiovascular disease and colorectal cancer.
Intensive Behavioral Counseling	All sexually active adolescents and for adults who are at increased risk for sexually transmitted infections (STIs).

Men's Recommendations	
Cholesterol	Men age 35 and older should be screened. Men age 20-35 should be screened if they are at increased risk for coronary heart disease. Talk with your health care provider about the starting and frequency of screening that is best for you.
Prostate Cancer Screening	Discuss the benefits and risks of screening with your health care provider.
Abdominal Aortic Aneurysm	Have an ultrasound once between ages 65 to 75 if you have ever smoked.
Low-dose Aspirin Use	Ages 50-59 talk with your health care provider about low-dose aspirin use for the prevention of cardiovascular disease and colorectal cancer.



\*Recommendations may vary. Discuss screening options with your health care provider, especially if you are at increased risk.

The recommendations provided in the table are based on information from organizations such as the Advisory Committee on Immunization Practices, the American Academy of Family Physicians, the American Cancer Society and the United States Preventive Services Task Force. The recommendations are not intended as medical advice nor meant to be a substitute for the individual medical judgment of a health care provider. Please check with your health care provider for individualized advice on the recommendations provided.

Coverage for preventive care services at no cost share may vary depending on your specific benefit plan and use of network providers. For questions, please call the Customer Service number on the back of your ID card.



**Good health is a gift anyone would wish for a child, but it doesn't happen without your help.**

Some things you can do to help keep your child well:

- Introduce good nutrition at an early age and be a good role model
- Encourage lots of play and physical activity
- Keep up with recommended vaccines

Blue Cross and Blue Shield of Illinois (BCBSIL) wants your child to be well.

## Children's Wellness Guidelines

### Laying the Groundwork for a Healthy Tomorrow

#### Children's Health

Put your child on the path to wellness. Schedule a yearly Well Child visit with your child's health care provider\* following immunization guidelines. The health care provider will watch your child's growth and progress and should talk with you about eating and sleeping habits, safety and behavior issues.

According to the Bright Futures recommendations from the American Academy of Pediatrics, the provider should:

- Check your child's Body Mass Index percentile regularly beginning at age 2
- Check blood pressure yearly, beginning at age 3
- Screen hearing at birth, then yearly from ages 4 to 6, then at ages 8 and 10
- Test vision yearly from ages 3 to 6, then at ages 8, 10, 12, and 15

Help protect your child from sickness. Make sure they get the recommended vaccinations shown in the charts. If your child has missed vaccinations, ask your health care provider how to catch up.

Learn more. An additional source of health information is available at [healthychildren.org](https://www.healthychildren.org).

Please note: These recommendations are for healthy children who don't have any special health risks. Take time to check the following summaries of key preventive services.

\*A health care provider could be a doctor, primary care provider, physician assistant, nurse practitioner or other health care professional.

# Be sure your child is up-to-date on immunizations and health screenings.

## Routine Children's Immunization Schedule<sup>1</sup>

Vaccine	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	11/2 - 3 years	4 - 6 years
Hepatitis B (HepB)	●	●								
Rotavirus (RV) RV1 (2 Dose Series); RV 5 (3 Dose Series)			●	●	●	3 dose series				
Diphtheria Tetanus and Pertussis (DTaP)			●	●	●			●		●
Haemophilus Influenzae Type B (Hib)			●	●	●	●				
Pneumococcal Conjugate (PCV)			●	●	●	●				
Inactivated Polio Vaccine (IPV)			●	●		●				●
Influenza (Flu)					●	Recommended <b>yearly</b> starting at age 6 months with 2 doses given the first year				
Measles, Mumps and Rubella (MMR)						●				●
Varicella (Chicken pox)						●				●
Hepatitis A (HepA)						●	First dose: 12 to 23 months Second dose: 6 to 18 months later		●	

● One dose    ■ Shaded areas indicate the vaccine can be given during shown age range.

## Adolescents

As your children grow into adolescents, they should continue yearly preventive care visits for exams and scheduled immunizations. These visits give the health care provider a chance to:

- Discuss the importance of good eating habits and regular physical activity.
- Talk about avoiding alcohol, smoking and drugs.
- Screen for sexual activity and sexually transmitted diseases as appropriate.
- Screen for HIV between the ages of 15 and 18, or earlier if at increased risk.

## Recommended Immunizations for ages 7 to 18<sup>1</sup>

Vaccine	7 - 10 years	11 - 12 years	13 - 15 years	16 years	17 - 18 years
Tetanus Diphtheria Pertussis (Tdap)		●			
Human Papillomavirus (HPV) - boys and girls		●	2 doses		
Meningococcal (MenACWY)		●		●	
Influenza (Flu)	Yearly				

1. These recommendations come from the Centers for Disease Control and Prevention and the American Academy of Pediatrics ([cdc.gov/vaccines/hcp/acip-recs/index.html](https://www.cdc.gov/vaccines/hcp/acip-recs/index.html)). The recommendations are not intended as medical advice nor meant to be a substitute for the individual medical judgment of a health care provider. Please check with your health care provider for individual advice on the recommendations provided.

Coverage for preventive services may vary depending on your specific benefit plan and use of network providers. For questions, please call the Customer Service number on the back of your ID card.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association



Blue Cross and Blue Shield of Illinois (BCBSIL) is required to provide you a HIPAA Notice of Privacy Practices as well as a State Notice of Privacy Practices. The HIPAA Notice of Privacy Practices describes how BCBSIL can use or disclose your protected health information and your rights to that information under federal law. The State Notice of Privacy Practices describes how BCBSIL can use or disclose your nonpublic personal financial information and your rights to that information under state law. Please take a few minutes and review these notices. You are encouraged to go to the Blue Access for Members (BAM) portal at BCBSIL.com to sign up to receive these notices electronically. Our contact information can be found at the end of these notices.

### HIPAA NOTICE OF PRIVACY PRACTICES – Effective 9/23/13

**YOUR RIGHTS. When it comes to your health information, you have certain rights.**

This section explains your rights and some of our responsibilities to help you.

<b>Get a copy of your health and claims records</b>	<ul style="list-style-type: none"> <li>You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this by using the contact information at the end of this notice.</li> <li>We will provide a copy or a summary of your health and claims records usually within 30 days of the request. We may charge a reasonable, cost-based fee.</li> </ul>
<b>Ask us to correct health and claims records</b>	<ul style="list-style-type: none"> <li>You can ask us to correct your health and claims records if you think they are incorrect or incomplete. Ask us how to do this by using the contact information at the end of this notice.</li> <li>We may say “no” to your request. We’ll tell you why in writing within 60 days.</li> </ul>
<b>Request confidential communications</b>	<ul style="list-style-type: none"> <li>You can ask us to contact you in a specific way or to send mail to a different address. Ask us how to do this by using the contact information at the end of this notice.</li> <li>We will consider all reasonable requests and must say “yes” if you tell us you would be in danger if we do not.</li> </ul>
<b>Ask us to limit what we use or share</b>	<ul style="list-style-type: none"> <li>You can ask us <b>not</b> to share or use certain health information for treatment, payment or our operations. Ask how to do this by using the contact information at the end of this notice.</li> <li>We are not required to agree to your request, and we may say “no” if it would affect your care.</li> </ul>
<b>Get a list of those with whom we’ve shared information</b>	<ul style="list-style-type: none"> <li>You can ask for a list (accounting) for six years prior to your request date of when we shared your information, who we shared it with and why. Ask us how to do this by using the contact information at the end of this notice.</li> <li>We will include all the disclosures except for those about treatment, payment, and our operations, and certain other disclosures (such as any you asked us to make). We will provide one accounting a year for free, but we may charge a reasonable, cost-based fee if you ask for another one within 12 months.</li> </ul>
<b>Get a copy of this Notice</b>	<ul style="list-style-type: none"> <li>You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. To request a copy of this notice, use the contact information at the end of this notice and we will send you one promptly.</li> </ul>
<b>Choose someone to act for you</b>	<ul style="list-style-type: none"> <li>If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices for you.</li> <li>We confirm this information before we release them any of your information.</li> </ul>

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**File a complaint if you feel your rights are violated**

- You can complain if you feel we have violated your privacy rights by using the contact information at the end of this notice.
- You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by calling 1-877-696-6775; or by visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/) or by sending a letter to them at: 200 Independence Ave., SW, Washington, D.C. 20201.
- We will not retaliate against you for filing a complaint.

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**YOUR CHOICES. For certain health information, you can tell us your choices about what we share.**

If you have a clear preference on how you want us to share your information in the situations described below, tell us and we will follow your instructions. Use the contact information at the end of this notice.

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**In these cases, you have both the right and choice to tell us to:**

- Share information with your family, close friends, or others involved in payment for your care
- Share information in a disaster or relief situation
- Contact you for fundraising efforts

*If there is a reason you can't tell us who we can share information with, we may share it if we believe it is in your best interest to do so. We may also share information to lessen a serious or imminent threat to health or safety.*

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**We never share your information in these situations unless you give us written permission**

- Marketing purposes
- Sale of your information

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**OUR USES AND DISCLOSURES. How do we use or share your health information?**

We typically use or share your health information in the following ways.

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**Help manage the health care treatment you receive**

- We can use your health information and share it with professionals who are treating you.  
*Example: A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.*

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**Run our organization**

- We can use and disclose your information to run our organization and contact you when necessary.  
*Example: We use health information to develop better services for you.*

*We can't use any genetic information to decide whether we will give you coverage except for long-term care plans.*

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**Pay for your health Services**

- We can use and disclose your health information since we pay for your health services.  
*Example: We share information about you with your dental plan to coordinate payment for your dental work.*

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**Administer your plan**

- We may disclose your health information to your health plan sponsor for plan administration purposes.  
*Example: If your company contracts with us to provide a health plan, we may provide them certain statistics to explain the premiums we charge.*

**How else can we use or share your health information?**

We are allowed or required to share your information in other ways, usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information go to:  
[www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html)

- |  |   |
|--|---|
| <b>Help with public health and safety issues</b>                                     | <ul style="list-style-type: none"> <li>• We can share your health information for certain situations such as:             <ul style="list-style-type: none"> <li>- Preventing disease</li> <li>- Helping with product recalls</li> <li>- Reporting adverse reactions to medications</li> <li>- Reporting suspected abuse, neglect or domestic violence</li> <li>- Preventing or reducing a serious threat to anyone's health or safety</li> </ul> </li> </ul>   |
| <b>Do research</b>   | <ul style="list-style-type: none"> <li>• We can use or share your information for health research.</li> </ul>   |
| <b>Comply with the law</b>   | <ul style="list-style-type: none"> <li>• We will share information about you when state or federal law requires it, including the Department of Health and Human Services if they want to determine that we are complying with federal privacy laws.</li> </ul>   |
| <b>Respond to organ/tissue donation requests and work with certain professionals</b> | <ul style="list-style-type: none"> <li>• We can share health information about you with an organ procurement organization.</li> <li>• We can share information with a medical examiner, coroner or funeral director.</li> </ul>   |
| <b>Address workers compensation, law enforcement, and Other government requests</b>  | <ul style="list-style-type: none"> <li>• We can use or share health information about you:             <ul style="list-style-type: none"> <li>- For workers compensation claims</li> <li>- For law enforcement purposes or with a law enforcement official</li> <li>- With health oversight agencies for activities authorized by law</li> <li>- For special government functions such as military, national security, and presidential protective services or with prisons regarding inmates.</li> </ul> </li> </ul> |
| <b>Respond to lawsuits And legal actions</b>   | <ul style="list-style-type: none"> <li>• We can share health information about you in response to an administrative or court order, or in response to a subpoena.</li> </ul>  |
| <b>Certain health information</b>  | <ul style="list-style-type: none"> <li>• State law may provide additional protection on some specific medical conditions or health information. For example, these laws may prohibit us from disclosing or using information related to HIV/AIDS, mental health, alcohol or substance abuse and genetic information without your authorization. In these situations, we will follow the requirements of the state law.</li> </ul>   |

**OUR RESPONSIBILITIES. When it comes to your information, we have certain responsibilities.**

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that compromises the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing.

You may change your mind at any time. Let us know in writing if you change your mind.

Additional information about your Privacy Rights can be found @ <https://www.hhs.gov/hipaa/>

## STATE NOTICE OF PRIVACY PRACTICES – Effective 9/23/13

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Blue Cross and Blue Shield of Illinois (BCBSIL) collects nonpublic personal information about you from your insurance application, healthcare claims, payment information and consumer reporting agencies. BCBSIL:

- **Will not** disclose this information, even if your customer relationship with us ends, to any non-affiliated third parties except with your consent or as permitted by law.
- **Will** restrict access to this information to only those employees who perform functions necessary to administer our business and provide services to our customers.
- **Will** maintain security and privacy practices that include physical, technical and administrative safeguards to protect this information from unauthorized access.
- **Will** only use this information to administer your insurance plan, process your claims, ensure proper billing, provide you with customer service and comply with the law.

BCBSIL is able to share this information with certain third parties who either perform functions or services on our behalf or when required by law. These are some examples of third parties that we can share your information with:

- Company affiliates
- Business partners that provide services on our behalf (claims management, marketing, clinical support)
- Insurance brokers or agents, financial services firms, stop-loss carriers
- Regulatory agencies, other governmental entities and law enforcement agencies
- Your Employer Group Health Plan

You have a right to ask us what nonpublic financial information that we have about you and to request access to it.

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### CHANGES TO THESE NOTICES

We have the right to change the terms of these notices, and the changes we make will apply to all information we have about you. The new notices will be available upon request or from our website. We will also mail a copy of the new notices to you as required by law.

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### CONTACT INFORMATION FOR THESE NOTICES

If you would like general information about your privacy rights or would like a copy of these notices, go to: [www.bcbsil.com/important-info/hipaa](http://www.bcbsil.com/important-info/hipaa)

If you have specific questions about your rights or these notices, contact us in one of the following ways:

- Call us by using the toll-free number located on the back of your member identification card.
  - Call us at 1-877-361-7594.
  - Write us at Privacy Office Divisional Vice President  
Blue Cross and Blue Shield of Illinois  
P.O. Box 804836  
Chicago, IL 60680-4110
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**REVIEWED: January 2020**

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**Health care coverage is important for everyone.**

We provide free communication aids and services for anyone with a disability or who needs language assistance. We do not discriminate on the basis of race, color, national origin, sex, gender identity, age, sexual orientation, health status or disability.

To receive language or communication assistance free of charge, please call us at 855-710-6984.

If you believe we have failed to provide a service, or think we have discriminated in another way, contact us to file a grievance.

Office of Civil Rights Coordinator  
300 E. Randolph St.  
35th Floor  
Chicago, Illinois 60601

Phone: 855-664-7270 (voicemail)  
TTY/TDD: 855-661-6965  
Fax: 855-661-6960  
Email: [CivilRightsCoordinator@hcsc.net](mailto:CivilRightsCoordinator@hcsc.net)

You may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at:

U.S. Dept. of Health & Human Services  
200 Independence Avenue SW  
Room 509F, HHH Building 1019  
Washington, DC 20201

Phone: 800-368-1019  
TTY/TDD: 800-537-7697  
Complaint Portal: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>  
Complaint Forms: <http://www.hhs.gov/ocr/office/file/index.html>

If you, or someone you are helping, have questions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 855-710-6984.

Español Spanish	Si usted o alguien a quien usted está ayudando tiene preguntas, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 855-710-6984.
العربية Arabic	إن كان لديك أو لدى شخص تساعدك أسئلة، ف لديك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم فوري، اتصل على الرقم 855-710-6984.
繁體中文 Chinese	如果您，或您正在協助的對象，對此有疑問，您有權利免費以您的母語獲得幫助和訊息。洽詢一位翻譯員，請撥電話號碼 855-710-6984。
Français French	Si vous, ou quelqu'un que vous êtes en train d'aider, avez des questions, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 855-710-6984.
Deutsch German	Falls Sie oder jemand, dem Sie helfen, Fragen haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 855-710-6984 an.
ગુજરાતી Gujarati	જો તમને અથવા તમે મદદ કરી રહ્યા હોય એવી કોઈ બીજી વ્યક્તિને એસ.બી.એમ. કાયકમ બાબતે પ્રશ્નો હોય, તો તમને વિના ખર્ચે, તમારી ભાષામાં મદદ અને માહિતી મેળવવાનો હક્ક છે. દુભાષિયા સાથે વાત કરવા માટે આ નંબર 855-710-6984 પર કોલ કરો.
हिंदी Hindi	यदि आपके, या आप जिसको सहायता कर रहे हैं उसके, प्रश्न हैं, तो आपको अपनी भाषा में निःशुल्क सहायता और जानकारी प्राप्त करने का अधिकार है। किसी अनुवादक से बात करने के लिए 855-710-6984 पर काल करें।
Italiano Italian	Se tu o qualcuno che stai aiutando avete domande, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare il numero 855-710-6984.
한국어 Korean	만약 귀하 또는 귀하가 돕는 사람이 질문이 있다면 귀하는 무료로 그러한 도움과 정보를 귀하의 언어로 받을 수 있는 권리가 있습니다. 통역사가 필요하시면 855-710-6984 로 전화하십시오.
Diné Navajo	T'áá ni, éí doodago ła'da bíká anánílwo'ígíí, na'ídílkidgo, ts'ídá bee ná ahóótí'i' t'áá níík'e níká a'doolwoł dóó bína'ídílkidgíí bee níł h odoonih. Ata'dahalne'ígíí bich'í' hodíílnih kwe'é 855-710-6984.
فارسی Persian	اگر شما، یا کسی که شما به او کمک می کنید، سوالی داشته باشید، حق این را دارید که به زبان خود، به طور رایگان کمک و اطلاعات دریافت نمایید. جهت گفتگو با یک مترجم شفاهی، با شماره 855-710-6984 تماس حاصل نمایید.
Polski Polish	Jeśli Ty lub osoba, której pomagasz, macie jakiegokolwiek pytania, macie prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 855-710-6984.
Русский Russian	Если у вас или человека, которому вы помогаете, возникли вопросы, у вас есть право на бесплатную помощь и информацию, предоставленную на вашем языке. Чтобы связаться с переводчиком, позвоните по телефону 855-710-6984.
Tagalog Tagalog	Kung ikaw, o ang isang taong iyong tinutulungan ay may mga tanong, may karapatan kang makakuha ng tulong at impormasyon sa iyong wika nang walang bayad. Upang makipag-usap sa isang tagasalin-wika, tumawag sa 855-710-6984.
اردو Urdu	اگر آپ کو، یا کسی ایسے فرد کو جس کی آپ مدد کر رہے ہیں، کوئی سوال درپیش ہے تو، آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ مترجم سے بات کرنے کے لیے، 855-710-6984 پر کال کریں۔
Tiếng Việt Vietnamese	Nếu quý vị, hoặc người mà quý vị giúp đỡ, có câu hỏi, thì quý vị có quyền được giúp đỡ và nhận thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, gọi 855-710-6984.

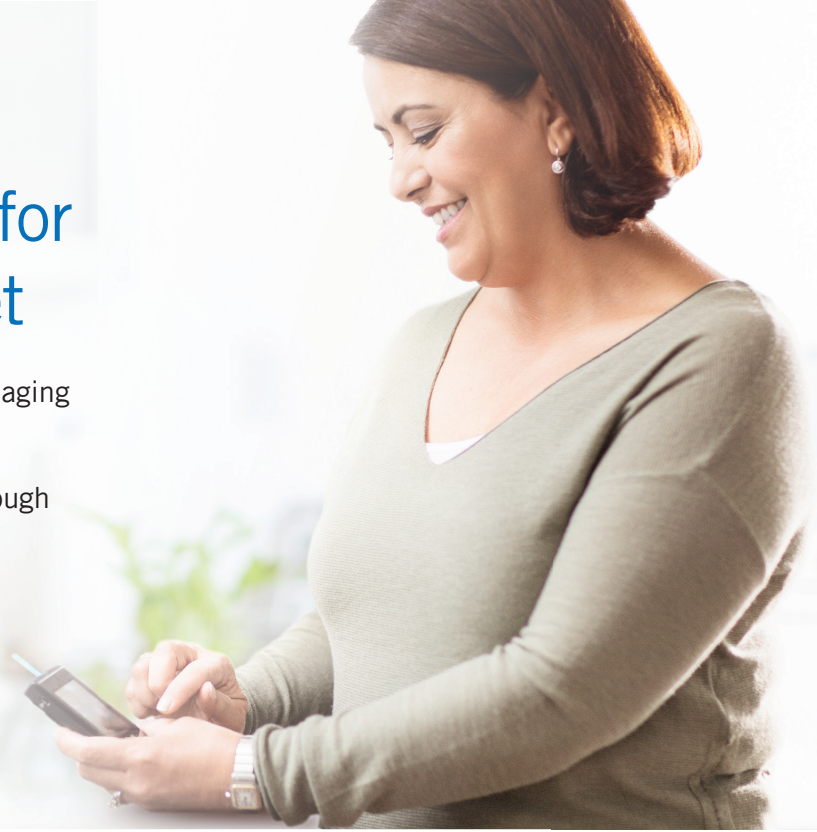


## Additional Information



# Reading this is good for your health and wallet

Livongo is a health benefit that helps make managing your diabetes easier, and it's included in your benefits. The program is offered to you and your family members with diabetes and coverage through Blue Cross and Blue Shield of Illinois (BCBSIL).



## Checking, tracking, and support

- Real-time, personalized tips with each blood glucose check
- Optional family alerts keep everyone in the loop
- Support when you're out of range
- Your meter can send data directly to your doctor
- Unlimited strip reordering right from your meter
- Automatic uploads means no more paper logbooks

The only thing easier than using Livongo is signing up for it:



**More details and how to register coming soon!**

### ***EL PROGRAMA LIVONGO ESTÁ DISPONIBLE EN ESPAÑOL***

*Cuando se registre, usted seteará el idioma de preferencia y luego el medidor y el programa estarán en Español.*

# Clinically-proven weight loss without counting calories

Now you can lose weight, gain energy, sleep better, and improve your mind and body—all while eating your favorite foods.

Your employer has partnered with Wondr Health™ to help you improve your health at no cost to you.\*

Go to [wondrhealth.com/BCBSIL](https://wondrhealth.com/BCBSIL)



## What is Wondr?

### No points, plans, or counting calories

Forget eating kale salads 24/7; Wondr is a skills-based digital weight loss program that teaches you how to enjoy the foods you love to improve your overall health. Our behavioral science-based program was created by a team of doctors and clinicians (which is why we left out the “e” in Wondr) and is clinically-proven for lasting results.

\*To learn more and join the waitlist, visit: [wondrhealth.com/BCBSIL](https://wondrhealth.com/BCBSIL)

### LET'S TALK RESULTS

## In as little as 10 weeks:




84%

 LOST WEIGHT

62%

 FEEL MORE CONFIDENT

61%

 HAVE MORE ENERGY

68%

 ARE MORE PHYSICALLY ACTIVE

85%

 FEEL MORE IN CONTROL OF THEIR WEIGHT

57%

 FEEL THEIR MOOD HAS IMPROVED

# What to expect



**Learn more or apply at [wondrhealth.com/BCBSIL](https://wondrhealth.com/BCBSIL).**

Application period not open yet? Join our waitlist.



**You'll receive a Welcome Kit** to kick off the program after your application's been accepted.



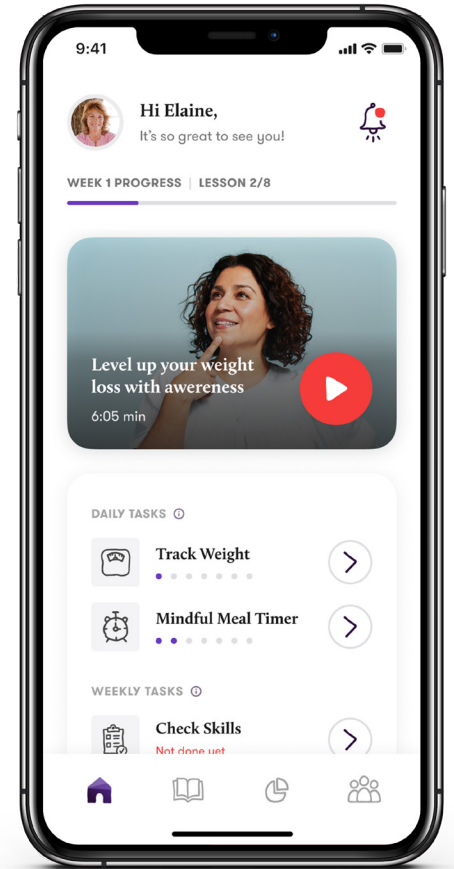
**Sign in online or on our mobile app** (available on App Store and Google Play) to access weekly video lessons and our mindful eating tools.



**Watch our weekly master classes.** On your start date, you can sign in to view your Week 1 videos and start your journey to better overall health.



**Learn life-changing skills during the program's first phase—WondrSkills™, then move to the skill reinforcement phase—WondrUp™, and keep the momentum going in the skill maintenance phase—WondrLast™.**



Questions? Visit [support.wondrhealth.com](https://support.wondrhealth.com).



**“I love the whole idea of the psychology of things. I like to look in the why's and how it works. You can eat whatever you want. You just need to retrain your brain into thinking about how you need to eat your food.”**

**—Brad M.**  
WONDR PARTICIPANT

LOST **70** lbs | GAINED Confidence



# Join Omada to build healthy habits that last



Omada® is a digital lifestyle change program. We combine the latest technology with ongoing support so you can make the changes that matter most—whether that’s around eating, activity, sleep, or stress. It’s an approach shown to help you lose weight and reduce the risks of type 2 diabetes and heart disease.

## • EAT HEALTHIER

Learn the fundamentals of making smart food choices.

## • INCREASE ACTIVITY

Discover easy ways to move more and boost your energy.

## • OVERCOME CHALLENGES

Gain skills that allow you to break barriers to change.

## • STRENGTHEN HABITS

Zero in on what works for you, and find lasting motivation.

## • STAY HEALTHY FOR LIFE

Continue to set and reach your goals with strategies and support.

### YOU'LL GET YOUR OWN:



Interactive program



Wireless smart scale



Weekly online lessons



Professional health coach



Small group of participants



# access your maternity and family benefits

Ovia Health provides maternity and family apps to support you through your entire parenthood journey. These apps are included in your health plan benefits, offered through Blue Cross and Blue Shield of Illinois (BCBSIL).

Follow these easy steps to **download Ovia and launch your account:**

1 Download the app that's right for you



Ovia Fertility

Health & Fertility



Ovia Pregnancy

Pregnancy & Postpartum



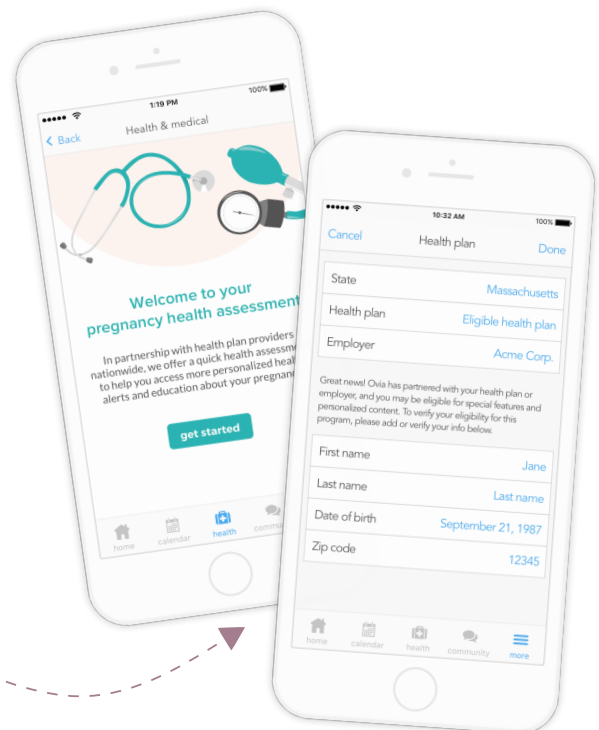
Ovia Parenting

Family & Working Parents

2 When signing up, choose “I have Ovia Health as a benefit” before tapping “Sign up” and make sure to select BCBSIL as your health plan and enter your employer name (optional).

3 Already have an Ovia app on your phone?

1. Open your app and tap “Health” to take the Ovia Health Assessment.
2. Tap “Update my healthcare information” and select BCBSIL as your health plan and enter your employer name (optional).



If you do not indicate BCBSIL as your health plan, you'll only be able to access some of the features available to you:

- ✓ Health and menstrual cycle tracker
- ✓ Pregnancy calendar & daily baby updates
- ✓ Child's development checklist
- ✓ Daily health and wellness content
- ✓ Data & symptom feedback



With Ovia Health, you'll have access to enhanced, personalized health and wellness features:



**Health assessment and symptom tracking**

Receive alerts and predictive, personal coaching when Ovia detects a potential medical issue



**Over fifty physician-developed clinical programs to help you be as healthy as possible**

Engage with personalized health and wellness programs to help you navigate infertility, sexual health, birth planning, preterm delivery, mental health, breastfeeding, and more



**Unlimited 1-on-1 coaching**

Message instantly with Registered Nurse health coaches to ask all your questions



**Career and return-to-work programs**

Find coaching and career advice for preparing for maternity leave, returning to work, and being a working parent



**BlueCross BlueShield  
of Illinois**

Provided by  **Hinge Health**



# Conquer back or joint pain without drugs or surgery

As a member of Blue Cross and Blue Shield of Illinois, you get access to a new innovative digital program for chronic **back, knee, hip, shoulder, and neck pain** at **no cost to you**. This program, provided by Hinge Health, includes:

- A tablet computer and wearable sensors
- Unlimited 1-on-1 health coaching
- Personalized exercise therapy

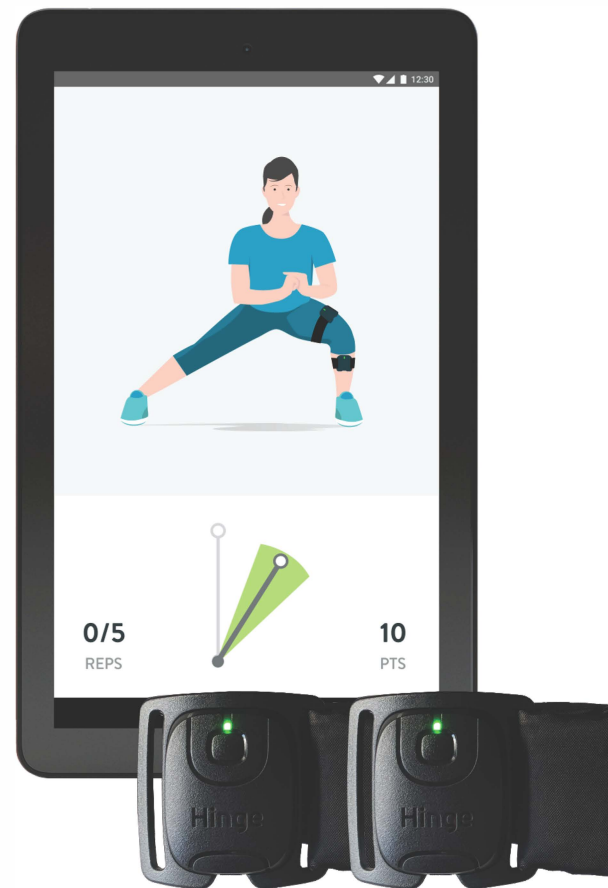
**Over 30,000** participants have enrolled in their programs so far, and cut their pain by over 60%!\*

Questions? Call the number on the back of your member ID card.

Hinge Health is an independent company that provides an online musculoskeletal program for Blue Cross and Blue Shield of Illinois. Hinge Health is solely responsible for the products and services that it provides.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

\*Source: Hinge Health 2017-2019 Outcomes Analysis



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Coming soon! To learn more visit:  
**HINGEHEALTH.COM**





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