

This summary is designed to give you an outline of the health benefit programs offered through Mundelein School District 120. Contained in the summary are tips for you on using the plans.

Your 2024 Benefit Summary provides information on your district's benefit plans, including:

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

- Vision Plan
- Medical Plans Comparison
- Blue365 Discount Programs

# **BCBS Member Resources**

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

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

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

#### **Blue Access Features**

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

### **BCBS Global Core**

BCBS Global Core provides members with access to doctors and hospitals in nearly 200 countries and territories around the world. Members can also search for providers, file a claim, translate medical terms, and much more.

To take advantage of the BCBS Global Core program, visit **www.bcbsglobalcore.com** or download the BCBS Global Core mobile app. The BCBS Global Core Service Center is available **24 hours a day, 7 days a week,** toll-free at **800.810. BLUE (2583)** or by calling collect at **804.673.1177**.

#### **Wellbeing Management**

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

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

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

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

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

# Teladoc Diabetes and Hypertension Management (only available to PPO members)

The Teladoc for Diabetes and Hypertension management programs provide 24/7 personalized coaching, connected blood glucose meter, connected blood pressure monitor and an app to help manage chronic conditions. Services are covered as preventative with no out-of-pocket costs to members. The program is provided to all PPO members as well as covered family members with diabetes or hypertension. Join today at TeladocHealth.com/Smile/EBC or call (800) 835.2362. Use registration code: EBC

# Benefits Value Advisor (PPO only)

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

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

A Benefits Value Advisor can:

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

Call 800.458.6024 before your next procedure!

# BCBS Member Rewards (PPO only)

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

- Compare costs and quality for numerous procedures
- Estimate out-of-pocket costs
- Assist in making treatment decisions with their doctors Using this resource to shop for services based on price and location, as well as quality metrics, allows you to earn cash for selecting lower-cost care. The result puts extra cash in your pocket. Please note, all rewards are taxable to the member.

#### **Seasons of Life**

Seasons of Life is an outreach program that provides personalized claims resolution assistance to members and their families who are dealing with the death of a loved one. Seasons of Life ensures that members and their families have compassionate help when they need it.

#### **Teladoc**

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

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

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

Set up your account by going to **Teladoc.com**, calling **1.800.Teladoc** or downloading the Teladoc mobile app. Once you register your account and complete your medical history, you will have access to speak with a doctor by phone or video on your mobile device, computer, or phone.

\*Copay for PPO/HMO is \$0\*



# **Your Medical Options**

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

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

Contact Blue Cross for questions regarding:

- Eligibility
- Plan benefits
- Status of claim payments

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

#### **PPO Medical Plan**

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

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

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

#### **PPO RX Information**

Prime Therapeutics is the administrator of the PPO prescription drug program. They oversee the retail and mail order prescriptions under this plan. Your medical ID card also serves as your prescription ID card. PPO members utilize the Balanced Drug List. To find a participating retail pharmacy or for more information on the Balanced Drug List, log into Blue Access for Members and click on the Prescription Drug link or visit myprime.com.

Prescription Drug Inquiry Unit

Phone: **800.423.1973** (Available 24 Hours Per Day, 7 Days Per Week) | Website: **myprime.com** 

# Home Delivery Customer Service

through Express Scripts

Phone: 833.715.0942 | Website: express-scripts.com/rx

# Specialty Customer Service through Accredo Pharmacy

Phone: 833.721.1619 | Website: accredo.com

### **HMO Medical Plan**

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

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

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

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

#### **HMO RX Information**

Prime Therapeutics is the administrator for the HMO prescription drug program. Your HMO medical card serves as your prescription ID card. HMO members utilize the Performance Drug List. To find a participating retail or mail-order pharmacy and for more information visit **myprime.com**. Or, log into BlueAccess for Members and click on the Prescription Drugs link.

## Prescription Drug Inquiry Unit

Phone: 800.423.1973 (Available 24 Hours Per Day, 7 Days Per Week) | Website: myprime.com

### **Hearing Aid Benefit Coverage**

Benefits will be provided for Hearing Aids for covered persons when a Hearing Care Professional prescribes a Hearing Aid to augment communications. Some related services are included, such as audiological examinations and selection, fitting and adjustment of ear molds to maintain optimal fit when Medically Necessary; Hearing Aid repairs will be covered when deemed Medically Necessary.

## **Dental Plan**

#### **MetLife Dental Coverage**

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

Contact MetLife at **800.942.0854** for questions regarding:

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

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

MetLife Dental PPO Plan				
Benefit	PPO			
Deductibles	\$50 Individual			
(calendar year)	\$150 Family (3)			
Type A: Preventive Services (cleanings & exams)	Deductible waived, reimbursed at 100%			
Type B: Basic Services (fillings, endodontics, periodontics and oral surgery)	Deductible applies, reimbursed at 80%			
Type C: Major Restorative (crowns, bridges & dentures)	Deductible applies, reimbursed at 50%			
Orthodontics (to age 19)	Deductible waived, reimbursed at 50% to a lifetime maximum of \$500			
Annual Maximum Benefit	\$2,000			

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

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

## Personal Finance App

Download MetLife's free Personal Finance App to manage your finances to get the most out of your money. MetLife's Personal Finance App focuses on developing good money habits and is designed to celebrate small wins one step at a time. Available on the App Store and Google Play.

# **Voluntary Vision**

#### Coverage from Vision Service Plan Network Provider Find a network doctor www.vsp.com or call 800.877.7195 Every 12 months Exam covered in full less \$10 copay **Contact Lens Care\*** every 12 months -or- Prescription Glasses Lenses covered in full · Single vision, lined bifocal, and Every 12 months lined trifocal lenses less \$25 copay Polycarbonate lenses for dependent children Frame • Frame of your choice covered up to \$130 Every 24 months • Plus, 20% off any out-of-pocket

\*When you choose contacts instead of glasses, your \$130 allowance applies to the cost of your contacts and the contact lens exam (fitting and evaluation). This exam is in addition to your vision exam to ensure proper fit of contacts. If you choose contact lenses you will be eligible for a frame 12 months from the date the contact lenses were obtained.

Current soft contact lens wearers may qualify for a special contact lens program that includes a contact lens evaluation and initial supply of replacement.

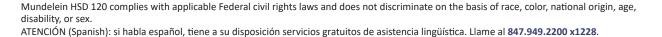
Learn more from your doctor or vsp.com.

# Mundelein School District 120 Medical Plans Comparison

<b>*</b>	Blue Cross and Blue Shield PPO Plan 1		Blue Cross and Blue Shield HMO Illinois	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible*				
Individual	\$250		N/A	
Family	\$750		N/A	
Out-of-Pocket Limit* (deductible included)				
Individual	\$500	\$2,500	\$1,500 in copays	N/A
Family	\$1,500	\$7,500	\$3,000 in copays	N/A
Covered Expenses				
Hospital				
Inpatient Services	100%	80% after \$300 per admission deductible	100%	No coverage
Outpatient Surgery	100%	80%	100%	No coverage
Emergency Room	90% after \$100 copay (waived if admitted)		100% after \$50 copay (waived if admitted)	
Physician	(waivea ii	darriirioaj	(waivou ii c	adminody
Inpatient Services	90%	70%	100%	No coverage
Outpatient Surgery	90%	70%	100%	No coverage
Office Visits				
Specialist Office Visit	90%	70%	100% after \$10 copay	No coverage
Other				
X-ray and Lab	90%	70%	100%	No coverage
Therapy–Speech, occupational or physical therapy	90%1	70%1	100% (60 visits combined per calendar year)	No coverage
Mental/Nervous- Inpatient	100%	80% after \$300 per admission deductible	100%	No coverage
Mental/Nervous– Outpatient Physician Services	90%	70%	100% after \$10 copay	No coverage
Substance Abuse– Inpatient	100%	80% after \$300 per admission deductible	100%	No coverage
Substance Abuse–Outpatient Physician Services	90%	70%	100% after \$10 copay	No coverage
Wellcare	100%	70%	100%	No coverage
Prescription Drugs	Prime Therapeutics		Prime Therapeutics	
Retail Pharmacy 34-day supply	\$10 Generic \$20 Preferred Brand \$40 Non-Preferred Brand		\$5 Generic \$10 Preferred Brand \$25 Non-Preferred Brand	
Mail Order 90-day supply	\$20 Generic \$40 Preferred Brand \$80 Non-Preferred Brand		\$5 Generic \$10 Preferred Brand \$25 Non-Preferred Brand	

<sup>\*</sup>Deductible and Out-of-Pocket amounts accumulate based on the benefit period of Jan 1 to Dec 31.¹Speech— 30 visits per year | Physical/Occupational— 60 visits per year. Dependent Age: to 26 for all married or unmarried dependents and to age 30 for all unmarried military dependents who are Illinois residents.

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



UWAGA (Polish): Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 847.949.2200 x1228.



# **Blue365 Discount Programs**

## **Fitness Program**

The Fitness Program is a four-tier membership program that gives you unlimited access to a nationwide network of fitness centers. With more than 11,000 participating gyms on hand, you can work out at any place or at any time. Choose a gym close to home and one near your office. To search for a gym, please log in to Blue Access for Members or call **888.762.2583**.

Other program perks are:

• No long-term contract required. Membership is month to month.

• Enroll in a tier that fits your budget and preferences with a one time \$19 enrollment fee.

(No enrollment fee for Digital Only option.)

Digital Only: \$10/month Base: \$19/month Core: \$29/month Power: \$39/month Elite: \$129/month

• Automatic withdrawal of monthly fee.

• Online tools for locating gyms and tracking visits.

• Earn bonus Blue Points for joining the Fitness Program. Rack up more points with weekly visits.

### **Vision Program**

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

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

PPO EveMed (Advantage Network): 866.273.0813

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

# Well onTarget®

# **A Dynamic Wellness Program**

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

# Well on Target features:

### Well on Target Member Wellness Portal

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

#### **Blue Points**

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

#### Wondr

# **Digital Weight Loss Program**

A lot can happen in 10 weeks. Blue Cross and Blue Shield of Illinois is offering Wondr™, a digital weight loss program where you can eat your favorite foods and still lose weight. By learning science-based behavioral skills, you can finally feel like you have control. Employees, spouses and covered dependents age 18 and over enrolled in the BCBSIL medical plan are eligible to apply to the program at no cost. Visit wondrhealth.com/EBC to learn more.

# **Navigate**

#### **Wellbeing Solutions**

Your physical, financial, and emotional wellbeing are extremely important. In order to support, and offer you resources all in one place, the EBC has partnered with Navigate Wellbeing Solutions to provide a unified wellbeing engagement platform. Through the secure site, you will have access to group challenges, e-learning opportunities, health resources including workout videos and healthy recipes, and information on free programs the district provides, even if you are not enrolled in benefits. Visit **ebcwellbeing.com** to use these comprehensive online resources and step toward your healthiest, happiest self.

This document is an outline of the coverage provided under your employer's benefit plans based on information provided by your company. It does not include all the terms, coverage, exclusions, limitations, and conditions contained in the official Plan Document, applicable insurance policies and contracts (collectively, the "plan documents"). The plan documents themselves must be read for those details. The intent of this document is to provide you with general information about your employer's benefit plans. It does not necessarily address all the specific issues which may be applicable to you. It should not be construed as, nor is it intended to provide, legal advice. To the extent that any of the information contained in this document is inconsistent with the plan documents, the provisions set forth in the plan documents will govern in all cases. If you wish to review the plan documents or you have questions regarding specific issues or plan provisions, you should contact your Human Resources/Benefits Department.

