

Benefit Summary

Benefit presentations, brochures, and enrollment forms for the open enrollment benefits summarized below are available for viewing and downloading, on the [Employee Website](#).

The Who's Who of Your Village's Benefit Plans

- **Blue Cross Blue Shield of Illinois (BCBS)** is the claims administrator for the Village of Bloomingdale's HMO/PPO medical plans. BCBS determines if you and your dependents are eligible for benefits and processes your claims.
 - » Contact BCBS for questions concerning eligibility, plan benefits, or status of claim payments. HMO Customer Service Representatives can be reached at **800.892.2803** between 8:30 a.m. and 7:00 p.m., CST, Monday through Friday. PPO Customer Representatives can be reached at **800.458.6024**.
 - » BCBS's website is both user-friendly and informative. The site allows you to seek answers about BCBS and available HMO/PPO doctors and hospitals, and to link to vendor sites. Their web address is www.bcbsil.com.
- **Empower Plus through Blue Cross Blue Shield of Illinois** offers convenient online tools and personalized telephone services that help support, inform and motivate individuals in their wellness efforts. All employees, spouses, and dependents covered under the Village of Bloomingdale's BCBS medical plans can participate at no charge to you.
 - » Employees can learn about their health status and potential health risk by completing the confidential Health Assessment online by logging in to and registering on the secure Blue Access for Members web site at www.bcbsil.com.
 - » Programs available online at www.bcbsil.com are:
 - Well onTargetSM** (to access tools and wellness resources to help you manage your health).
 - Blue Points** (a program that rewards you for engaging in healthy activities),
 - Special Beginnings** (maternity program offering expectant mothers support and education).
 - » PPO Employees also have access to the following:
 - 24/7 Nurseline** – contact a registered nurse anytime at **800.299.0274**.
 - Benefits Value Advisor (BVA)** – program designed to help members understand their benefit plans, estimate costs, find network providers, assist with pre-authorization, schedule appointments, and more. Speak with a BVA by calling Customer Service at **800.458.6024** and find out how to make the most of your benefits with quality, cost-effective care.
 - Member Rewards** – a program that offers cash rewards when a lower cost, high-quality provider is selected. This program allows you to use Provider Finder and/or BVA to compare services, minimize your out-of-pocket costs, and give you a cash reward.
- **Delta Dental** is the claims administrator of dental benefits for you and your family. Delta Dental offers both telephonic and web access to your personal information to assist you in managing your dental benefits.
 - » **Telephonic:** A Delta Dental Customer Service Representative can be reached at **800.323.1743** between 7 a.m. to 7 p.m. CST Monday through Thursday and 7 a.m. to 6 p.m. CST Friday or the automated system is available 24 hours a day, seven days a week. Here you can verify eligibility status, review plan benefits, check on the status of a claim, and get claim forms.
 - » **Web:** Employees can access their benefits at www.deltadentalil.com. This website offers you the ability to view claim status and eligibility information, view a summary of your dental benefits, as well as locate a dentist in our area.
- **Express Scripts** is the prescription benefit manager for the Village of Bloomingdale's prescription drug programs. Retail and mail services on the medical programs are administered through Express Scripts.
 - » Express Scripts member service representatives can be reached at **800.294.7041**, 24 hours a day, 365 days a year (except Thanksgiving and Christmas). Contact Express Scripts for questions regarding orders, account information, or to refill prescriptions.
 - » Or you can visit Express Scripts online at www.express-scripts.com to order refills, check order status, compare medication costs, find potential lower-cost options, receive time-sensitive alerts and reminders, print forms, and much more. If you are a first time visitor to our site, take a moment to register. Please have your member ID number and a recent prescription number available.
 - » **Express Scripts Smart90 Program**
If you take maintenance medications (long-term medications), be sure to obtain a 90-day/3-month supply from Walgreens, CVS or through Express Scripts home delivery to avoid paying the full cost of the prescription. Call **800.294.7041** or visit express-scripts.com/90day for more information.
- **VSP** is the Village's Vision benefit administrator. Click Here to view the vision benefit, and find network eyecare providers by visiting www.vsp.com. A Customer Service Representative can also assist in helping you find a VSP doctor or answer any benefit questions. To reach a Customer Service Representative, please call **800.877.7195**. Monday - Friday 7 am – 10 pm CST; Sat 9 am – 10 pm CST; Sun 9 am – 10 pm CST. Member can use their in network benefits online at www.eyeconic.com.
- **Discovery Benefits** is the administrator for the Village of Bloomingdale's Flexible Spending Account (FSA). Discovery Benefits processes all your medical and dependent care expenses that you submit electronically or via fax.
 - » A customer service representative can be reached at **866.451.3399** from 7:30 a.m. through 7:30 p.m., CST, Monday to Friday, excluding holidays.
 - » You can check your account status and retrieve forms 24/7 by going to www.discoverybenefits.com.
- **The Standard** is the life insurance carrier for your Basic employer-paid group and employee-paid supplemental life insurance benefits. The Standard Customer Service Representatives can be reached at **800.535.8465** between 8:00 a.m. and 5:00 p.m. CST Monday through Friday.
- **AFLAC:** Aflac policies provide an extra layer of paycheck protection for various life events, including: Accidental Injuries, Hospital Stays, Critical Illness Events, Short-Term Disability, and Cancer. Eligible employees who are interested in enrolling or changing coverage.
- **NCPERS:** Voluntary Group Life Insurance from the National Conference on Public Employees Retirement Systems (NCPERS), employees who contribute to the IMRF or Police Pension plans may enroll during this time. This Group Decreasing Term Life Insurance plan has a set rate of \$16 per month. The benefit decreases with age to provide the greatest amount of insurance when your growing family needs it most. Coverage for eligible dependents is included in the premium amount. You do not need to answer any health questions or take a medical exam if you enroll during an open enrollment period.

Medical Plans – All Employees

Benefits	Blue Cross Blue Shield of Illinois PPO - P14614
Major Medical Coverage	
Coinsurance	
Network	80% after deductible
Non-Network	60% after deductible
Deductible	
Network	\$650 individual / \$1,950 family
Non-Network	\$1,300 individual / \$3,900 family
Out-of-Pocket (includes deductible and Rx)	
Network	\$1,400 individual / \$4,200 family
Non-Network	\$2,800 individual / \$8,400 family
Office Visit Copay	N/A - deductible and coinsurance apply
Hospital Care	
Network	Deductible applies, then 80% with authorization
Non-Network	\$300 Non-Network penalty, then deductible applies, then 60% with authorization
Hospital Emergency Care	
Network	100% after \$75 copay; waived if admitted
Non-Network	
Other Covered Services	
Network	Deductible applies, then 80%
Non-Network	
Preventive Services	
Network	100%; deductible waived
Non-Network	Subject to out-of-network deductible and coinsurance
Prescription Drug (administered by Express Scripts)	
Retail (30-day supply)	Deductible applies, then 80% coinsurance included in Out-of-Pocket maximum
Mail Order (90-day supply)	

This benefit schedule is for illustrative purposes only; please consult benefits booklet for more information.

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.

The Village complies with applicable Federal civil rights and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Village does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Medical Plans – All Employees

Benefits	Blue Cross Blue Shield of Illinois HMOI - H15135 & BAHMO - B15135
Major Medical Coverage	
Coinsurance	
Network	100%
Non-Network	N/A
Deductible	
Network	N/A
Non-Network	N/A
Out-of-Pocket (includes deductible and Rx)	
Network	\$1,500 individual / \$3,000 family
Non-Network	N/A
Office Visit Copay	
Network	\$25 copay, then 100%
Non-Network	No coverage
Hospital Care	
Network	100%
Non-Network	No coverage
Hospital Emergency Care	
Network	100% after \$75 copay; waived if admitted
Non-Network	
Other Covered Services	
Network	100% after \$25 copay for office visits where applicable
Non-Network	No coverage
Preventive Services	
Network	\$25 copay, then 100%
Non-Network	No coverage
Prescription Drug (administered by Express Scripts)	
Retail (30-day supply)	\$10 generic / \$25 brand name formulary / \$40 non-formulary
Mail Order (90-day supply)	\$10 generic / \$25 brand name formulary / \$40 non-formulary

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Dental Plan



Access to the two network levels is determined by your dentist's membership.

	Delta Dental of Illinois		
	PPO Network	Premier Network	Out-of-Network
Annual Deductible			
Individual	\$50	\$50	\$50
Family	\$150	\$150	\$150
Annual Benefit Maximum	\$1,500 / person	\$1,500 / person	\$1,500 / person
Preventive/Diagnostic (oral exams, x-rays, cleaning, fluoride treatments, space maintainers, sealants)	100%*	100%**	100% of MPA***
Basic (fillings, oral surgery, periodontics, endodontics, general anesthesia in conjunction with oral surgery)	80%*	80%**	70% of MPA***
Major (crowns, bridges, dentures)	80%*	80%**	80% of MPA***
Orthodontia (for dependent children under age 19)	50%*	50%**	50% of MPA***
Lifetime Orthodontia Maximum	\$1,500 / person	\$1,500 / person	\$1,500 / person

**You will not be balance billed for charges exceeding Delta Dental's allowed PPO fees.*

***You will not be balanced billed for charges exceeding Delta Dental's maximum plan allowances (MPAs).*

****You are responsible for charges exceeding Delta Dental's MPAs.*

To Locate Participating Dental Providers

- Visit www.deltadentalil.com/smartmouth, select "Find a Provider," and complete your location or name.
- Select the Delta Dental PPO network for the highest level of benefits, and follow the on-screen instructions.

Delta Dental Premier® is a safety net for our Delta Dental PPO network. You will pay more out-of-pocket with a Delta Dental Premier dentist compared to a Delta Dental PPO dentist. However, you may save more money with a Delta Dental Premier dentist compared to a non-network dentist. Delta Dental Premier Dentists agree to our maximum plan allowances as payment in full, which may be lower than what a dentist would typically charge.

VSP Vision Plan C



Benefits	Plan C	
	In-Network	Out-of-Network
Annual Eye Exam	\$0 copay	\$45
Contact Lens Exam/Fit	Up to \$60 copay	N/A
Single Vision Lenses	\$0 copay	\$30
Bifocal Lenses	\$0 copay	\$50
Trifocal Lenses	\$0 copay	\$65
Lenticular Lenses	\$0 copay	\$100
Standard Progressive	Covered	\$50
Premium Progressive	\$95-\$105	\$50
Photochromics/Tints/Dyes	Covered	N/A
Std Polycarbonate (<19)	Covered	N/A
Std Polycarbonate (>=19)	\$35	N/A
Frame	\$150 + 20% off balance	\$70
Contact Lenses	\$0 copay	\$210
Necessary	\$0 copay; \$150 Allowance	\$105
Elective	(in lieu of lenses & frames)	

Note: The comparisons are outlines 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.



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