



BlueCross BlueShield
of Illinois

TRANSFORM^{CO}

WELCOME to Open Enrollment 2025

Plan Options — What to Think About

1

Provider Availability

Will you have coverage for visiting the doctors, hospitals and other facilities you want to use?

2

Your Costs

What is going to come out of your paycheck every month? What about for the whole year?

3

Benefit Payments

How much will you have to pay out of your pocket for your medical expenses?

4

Medical Services

Consider your health status and services you expect to use during the year. What has your experience been in past years?

Plan Options Comparison at a Glance *(Check your plan eligibility)*

Benefit	Enhanced Plan (PPO) Embedded (Individual Based)***		Basic Plan (HSA) Aggregate (Family Based)**		BlueHPN1 Embedded ***
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network
Individual Deductible	\$750	\$1,500	\$2,500	\$2,500	\$1,500
Family Deductible	\$1,500	\$3,000	\$5,000	\$5,000	\$3,000
HSA — Employer Contribution	N/A	N/A	\$250, \$500, \$750 Individual \$1,000, \$1,500 Family	N/A	N/A
Individual Out-of-Pocket (OPX)Max	\$5,000	\$10,000	\$5,950	\$11,900	\$5,500
Family Out-of-Pocket (OPX) Max	\$10,000	\$20,000	\$9,200	\$23,800	\$11,000
Office Visit (PCP/Specialty)	80%*	50%*	80%*	60%*	\$25/\$50 PCP/Specialist
Preventive Care	100%	50%	100%	60%	100%
Virtual Preventive Care by Teladoc Health	100%	Not Covered	100%	Not Covered	Not Covered
Emergency Room	80%* after \$150 ER copay		80%*		100% after \$250 ER copay
Inpatient Admission	80%* after \$250 inpatient deductible per admission	50%* after \$500 inpatient deductible per admission	80%*	60%*	100%* after \$250 inpatient deductible per admission
Virtual Office Visit (PCP) by Teladoc Health (\$99-\$165)	80%*		80%*		Not Covered
Virtual Visit by Teladoc Health - General Medical (\$55)	80%*		80%*		Not Covered
Virtual Visit by MDLIVE (\$48)	Not Covered		Not Covered		100%
Virtual Dermatology by Teladoc Health – (\$85)	80%*		80%*		Not Covered
All Other Covered Services	80%*		80%*		80%*
Pharmacy (ESI)	\$10/\$40/\$60	50%*	80%*	60%	\$10/\$40/\$60

- ¹ No coverage for out-of-network care, except in emergency/urgent situation
- * After deductible
- **Aggregate: Entire family limit (deductible or OOP) must be met before benefits apply to any individual. This amount can be met by any one individual or combination of individuals on the plan. Aggregate plans have an individual limit that applies to self only populations; however, a family limit applies to anyone other than self only (2 or more people on the plan.)
- *** Embedded: Once a person meets individual amount, no more (deductible or OPX) is required for that individual. No participant will contribute more than the individual amount to the family amount.

Specialty Care Benefits

Choose a Blue Distinction facility for care in these specialties for the **highest level** of benefits.

Applies to Basic and Enhanced plans ONLY

Knee and Hip

1. Blue Distinction [®] Center+
80%
2. Blue Distinction [®] Center
80%
3. PPO In-Network
70%
4. Out-of-Network
50%

Bariatric Surgery

1. Blue Distinction [®] Center+
80%
2. Blue Distinction [®] Center
80%
3. PPO In-Network
70%
4. Out-of-Network
50%

Transplants

1. Blue Distinction [®] Center+
90%
2. Blue Distinction [®] Center
90%
3. PPO In-Network
80%
4. Out-of-Network
50%

Benefit Plan Options — Your Choice

The DIFFERENCES between benefit options

	PROs	CONs
PPO (Enhanced)	<ul style="list-style-type: none">• Full PPO network across the U.S. and abroad• No referrals required• No need to select a PCP• In-and out-of-network benefits• Lower deductibles than HSA	<ul style="list-style-type: none">• Employee contributions may be higher• No account to offset deductible or grow in value• No tax benefit
HSA (Basic)	<ul style="list-style-type: none">• Same network access as PPO• No referrals required• No need to select a PCP• In-and out-of-network benefits• HSA contributions are tax-deductible and funds automatically carry over• Employee contribution may be lower• Drugs can eventually reach OPX	<ul style="list-style-type: none">• Higher deductible than PPO• Must meet the deductible before benefits are available, except for preventive care• You pay full discounted drug costs• Must file additional tax form with tax return
HPN	<ul style="list-style-type: none">• National network (in select areas)• No referrals required• No need to select a PCP• Lower deductibles than HAS• Richer benefits (office visit copay's)	<ul style="list-style-type: none">• Limited provider network• National coverage is more limited• In-Network Benefits ONLY - You must stay in the HPN network: no out-of-network coverage, except in an emergency or urgent situation

PPO — How It Works

In-Network Providers

ADVANTAGES

- Receive the highest level of benefits and potentially pay less for care
- Protection from billing over the allowed amounts (balance billing)
- No claim forms (provider files claim)
- No referrals required
- No requirement to select a PCP
- Access to a national PPO network

Out-of-Network Providers

DRAWBACKS

You do have coverage, but

- You pay a greater share of the costs
- You may receive fewer benefits out-of-network
- You may need to file your own claims
- You may be billed for charges over the allowed amount (balance billing)

Blue High Performance Network®

High-Quality Care at a Lower Cost

The BlueHPN® is a network option that offers you a select group of doctors, hospitals and other health care professionals at an affordable cost.

HPN BlueHPN®

Access to HPN providers in select areas

Network: A smaller network based on quality and cost, providing greater savings

Access: HPN providers in HPN areas across the country (in and near 65+ major cities)

BlueHPN ID cards show the “HPN in a suitcase” logo to help providers identify HPN members.



PPO BlueCard® PPO

Access to nationwide Blue Cross and Blue Shield Plan PPO providers

Network: A large network that offers greater choice of doctors while still providing savings for in-network care

Access: Nationwide **Blue Cross and Blue Shield** Plan PPO-contracted providers

Coverage travels with you: PPO members receive an ID card with the “PPO in a suitcase” logo.

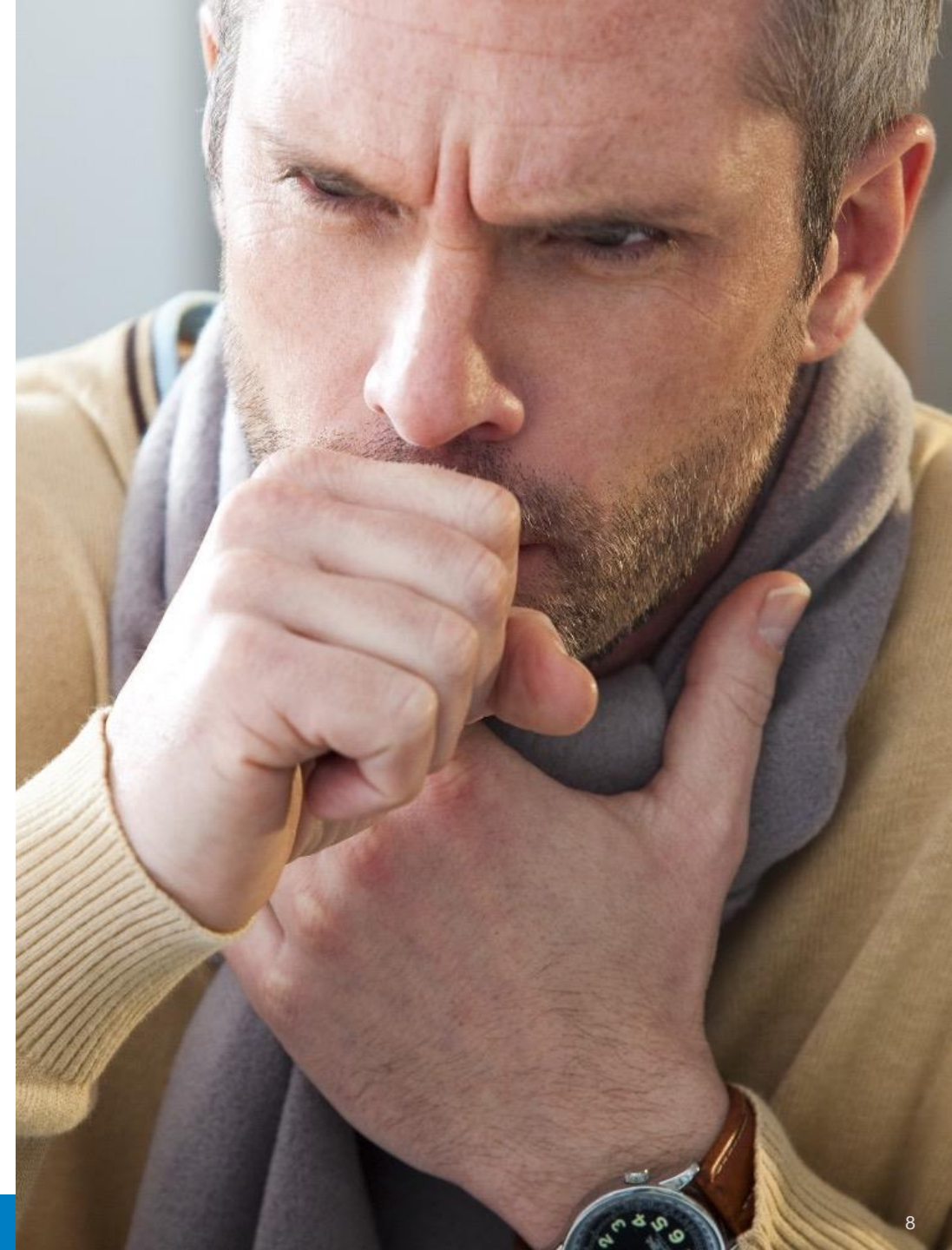


Get Care When and Where You Need It (HPN Only)

- Whether you're at home or traveling, access to an independently contracted, board-certified doctor is available 24/7.
- You can speak to an MDLIVE® doctor immediately or schedule an appointment for a time that works for you.
- MDLIVE doctors can help treat many non-emergency conditions.
- A Virtual Visit may be a better alternative to the emergency room or urgent care center.

Virtual Visits may be limited by plan. For providers licensed in Illinois and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans.

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.



How Virtual Visits Work

CONNECT

Access where mobile app, online video or telephone service is available

INTERACT

Real-time consultation with an independently contracted, board-certified doctor.

DIAGNOSE

Prescriptions sent to a pharmacy of your choice (when appropriate)





VIRTUAL PRIMARY CARE Enhanced and Basic Only

VIRTUAL MEMBER EXPERIENCE

PRIMARY CARE

URGENT CARE

VPC

DERMATOLOGY

Health Savings Account Basics

The Health Savings Account (HSA) consists of two parts:

1

**High Deductible
Health Plan (HDHP)**

2

**The Health
Savings Account**

HSAs must be used in combination with a qualified High Deductible Health Plan (HDHP) such as the BlueEdge HSASM. With HDHPs:

- A higher annual deductible applies
- Out-of-pocket maximums apply only to covered benefits
- Preventive care benefits may be provided without a deductible



How the HSA Works

You own the account.

- No “use it or lose it” rules — you keep the funds in your account if you leave the company or change plans.
 - Balances remaining in the account at year end carry over to the following year.
 - Account earns interest and can be invested, over minimum balances.
- **You will only have access to the amount that is in your account at the time of a claim — but you can save your receipt and repay yourself with funds contributed later in the year.**
 - **With the exception of preventive care, all benefits, including pharmacy, must be subject to the plan deductible.**

HSA Contributions

The IRS determines the minimum/maximum amounts. The amounts are adjusted annually for inflation.

Employee, employer or any other person may make contributions on behalf of an eligible individual.

U.S. Treasury Guidelines	2024 Maximum HSA Contribution	2025 Maximum HSA Contribution
Single Coverage	\$4,150	\$4,300
Family Coverage	\$8,300	\$8,550
Individuals age 55 and older can make catch-up contributions: \$1,000		

Prior Authorization

- Prior authorization is a process used to determine whether a medical service meets the requirements for health plan coverage.
- You need to have prior authorization for some types of medical care such as:
 - Hospital stays/treatment
 - Behavioral Health Services
 - High-cost specialty drugs
 - Some services you get outside a hospital
- Your network provider will usually take care of prior authorization. To be sure, call Customer Service before your service.
- **Check your benefits booklet to learn more. You can find it on Blue Access for MembersSM under Coverage > Coverage and Benefits > All My Benefits**



Services That May Require Prior Authorization

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

Services that may need approval in advance:

Inpatient:

- Acute Hospital
- Rehab
- Skilled Nursing & Long-Term Acute Care
- Inpatient Hospice, Pain Management & Cardiac Rehab (all inpatient services)
- Transplants
- Maternity – Only Procedures and Stay outside of standard care and length of stay

Behavioral Health:

- Inpatient (Acute & Rehab)
- Residential & Partial Hospital Program
- Intensive Outpatient Programs (IOP)
- Applied Behavior Analysis (ABA)
- Outpatient Electroconvulsive Therapy (ECT)
- Repetitive Transcranial Magnetic Stimulation

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

- Advance Imaging - CT, MRI & PET
- Cardiology – Stress Tests, CT, MRI, PET, PET-CT, CTA and MPI
- Sleep Medicine – Sleep Studies, Positive airway pressure (PAP) Therapy and Supply, & Therapy Monitoring.
- Joint and Spine – Shoulder, Knee and Hip Surgeries, Spinal Decompression, Spinal Fusion
- Pain Management – Epidural Injections, Facet Joint Injections (Headache), Interventional Pain Procedures.
- Ear, Nose and Throat – Cochlear Implants, Nasal and Sinus Surgery, Bone Conduction Hearing Aids.
- Air ambulance (for non-emergencies)
- Surgical Procedures - Breast lift or reduction and face lift/reconstruction.
- Electrical Stimulation - Brain, Nerves or Stomach
- Coordinated Home Care Programs - Private Duty Nursing, Home and Outpatient infusion therapy, Home Hospice & All other home health services
- Wound Care – HBO2 Therapy
- Specialty Pharmacy – Drugs administered by your provider

Check your benefits booklet or call the Customer Service number on the back of your member ID card for questions about your benefits.

In-network inpatient hospitals are required to request prior authorizations on your behalf.

Preventive Coverage

What's Covered?

- **Recommended routine gender- and age-specific preventive care and screenings** — including yearly general wellness exams, recommended vaccines and screenings for things like diabetes, cancer and depression — both facility and professional services.
- **Coverage provided in-network at 100% with no copay, no deductible.** Out-of-network benefits may vary.

IMPORTANT to remember:

Lab tests related to a condition such as diabetes or asthma — **are not** considered preventive and are covered under applicable deductible and coinsurance levels.



**Stay healthy
by getting
regular
check-ups**

What's Preventive, What's Not?

PREVENTIVE

Jane has a screening, or preventive, mammogram performed (in-network)

Preventive coverage = 100%, no copay



Mammogram Example

DIAGNOSTIC

- Jane's screening mammogram results showed signs of suspicious growths
- Jane is asked to go in for a second mammogram
- **This second mammogram is diagnostic, or medical** — not preventive — and subject to deductible and coinsurance
- Jane's out-of-pocket expense is based on the discounted PPO cost of the mammogram

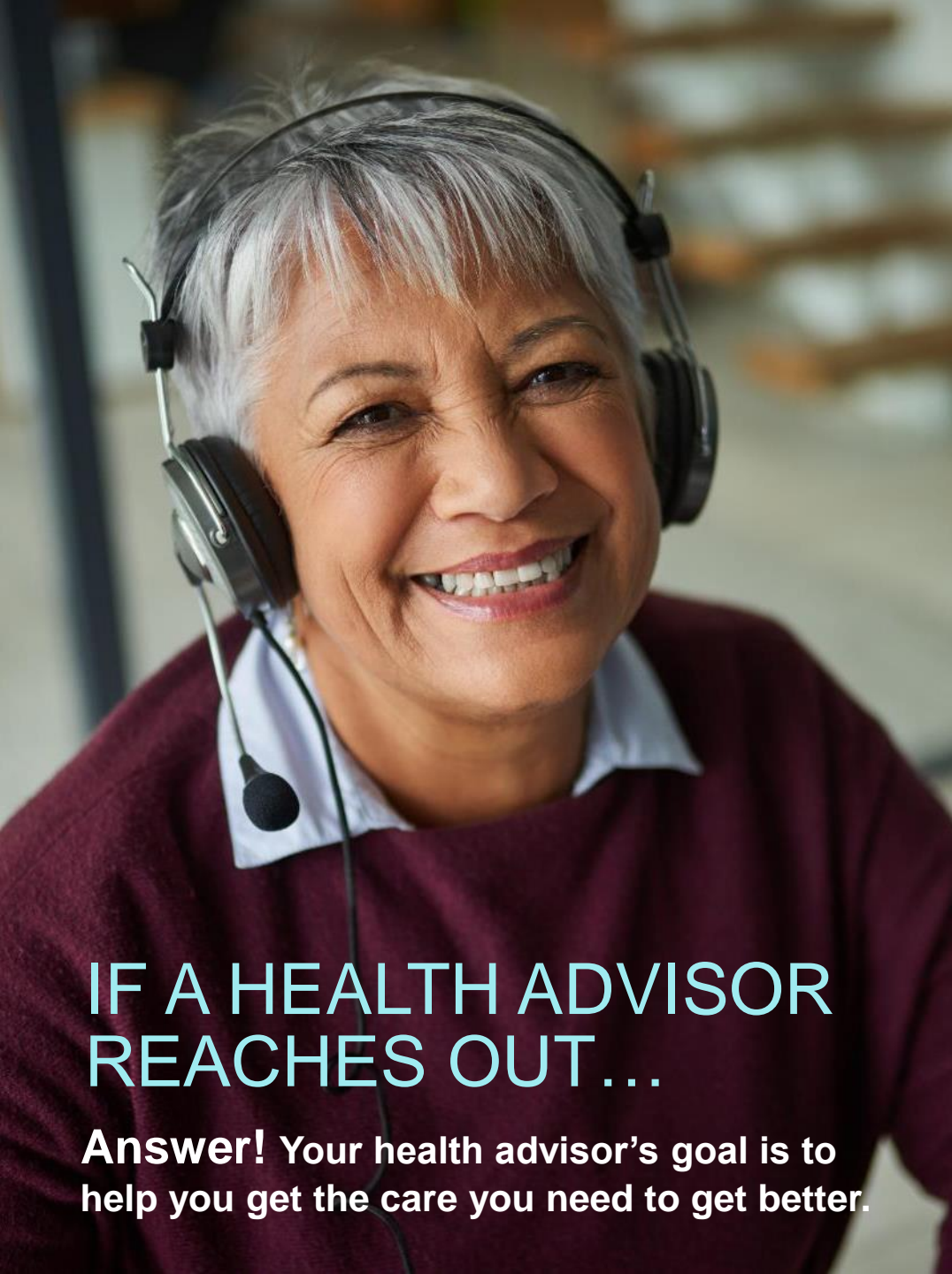
Take Care of Your Mental Health

Your plan includes behavioral health benefits so you and your covered family members can get help for:

- Anxiety
- Autism
- Depression
- Drug or alcohol use
- Eating disorders
- And many other mental health conditions

Log in to **Blue Access for MembersSM** at **bcbsil.com** or call the number on the back of your member ID card to have a BVA help you find a counselor, psychiatrist, treatment facility or other behavioral health provider.





**IF A HEALTH ADVISOR
REACHES OUT...**

Answer! Your health advisor's goal is to help you get the care you need to get better.

A HEALTH ADVISOR:

- Can help to coordinate your and your family's serious health concerns
- Clinical nurse you can count on when you need help the most
- Works with a team of specialists to help make sure you have the right care for your unique circumstances

**Call to request a Health Advisor if you
have a serious inquiry or illness!**

Your BCBSIL ID Cards

All employees will NOT receive new ID cards.

New ID cards issues should be received by **Dec. 31, 2024.**

Member ID Card

Digital Member ID Card

The image is of the member ID card and proof of insurance for any doctor or hospital visit. Simply download or print the image and show it to your Provider.

Download the Blue Cross Blue Shield of Illinois (BCBSIL) app to view on your mobile device.



[View and Download](#) 

Need a New ID Card?

You can use the digital member ID card provided above, or order a new ID card here.

[Order New Member ID Card](#)

1. Download BCBSIL Mobile App or add your digital member ID card to your device's mobile wallet.
2. Tap on the share icon in the top right corner and select "Share Verification of Coverage." This will open an email window that you can send directly to your doctor's office.

- Two ID cards are provided for family coverage.
- Your digital member ID card is always up-to-date and lets you securely verify your BCBSIL coverage with your doctor.
- You can call Customer Service or log on to **Blue Access for Members** SM to order additional or replacement ID cards.

Blue Access for Members & Finding a Provider and Treatment Costs





**Save time
with self-service
support tools
and health and
wellness resources
available through
a convenient and
secure website**

Blue Access for MembersSM (BAMSM)

Through BAM, you can:

- Access your digital Member ID Card which means no more carrying it around in your wallet. You can access it anytime
- View claims status and history
- See health care benefit information
- Find a doctor or pharmacy near you
- Update your communication preferences to make sure you get an email or text alert instead of a paper statement

Log in and perform protected transactions
24 hours a day, 7 days a week*

*Claim Statements/EOBs are not available 3 – 6 a.m.

Sign Up for Blue Access for MembersSM

BlueCross BlueShield of Illinois

Search

Make a Payment

1 Log In or Sign Up

Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

Ready for Medicare?

When you turn 65, you have some important choices to make. Let us help you find the right Medicare Plan.

Learn More

Stay With Blue

As you transition to Medicare, we hope you'll stay with us to get coverage from a company you trust.

Individual & Family Medicare

2

Enter Identification Number

Create Login Confirm Account

Back Step 1 of 3

Please fill out your policy information.

Registering your account will only take a minute. To get started, have your Blue Cross and Blue Shield of Illinois (BCBSIL) ID card handy.

First Name

Last Name

Date of Birth

MM/DD/YYYY

Identification Number

Are You a Legal Guardian?

☐ I am a Legal Guardian

Continue

Legal & Privacy Non-Discrimination Notice

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Go to **bcbsil.com** and log in to Blue Access for Members via web or mobile

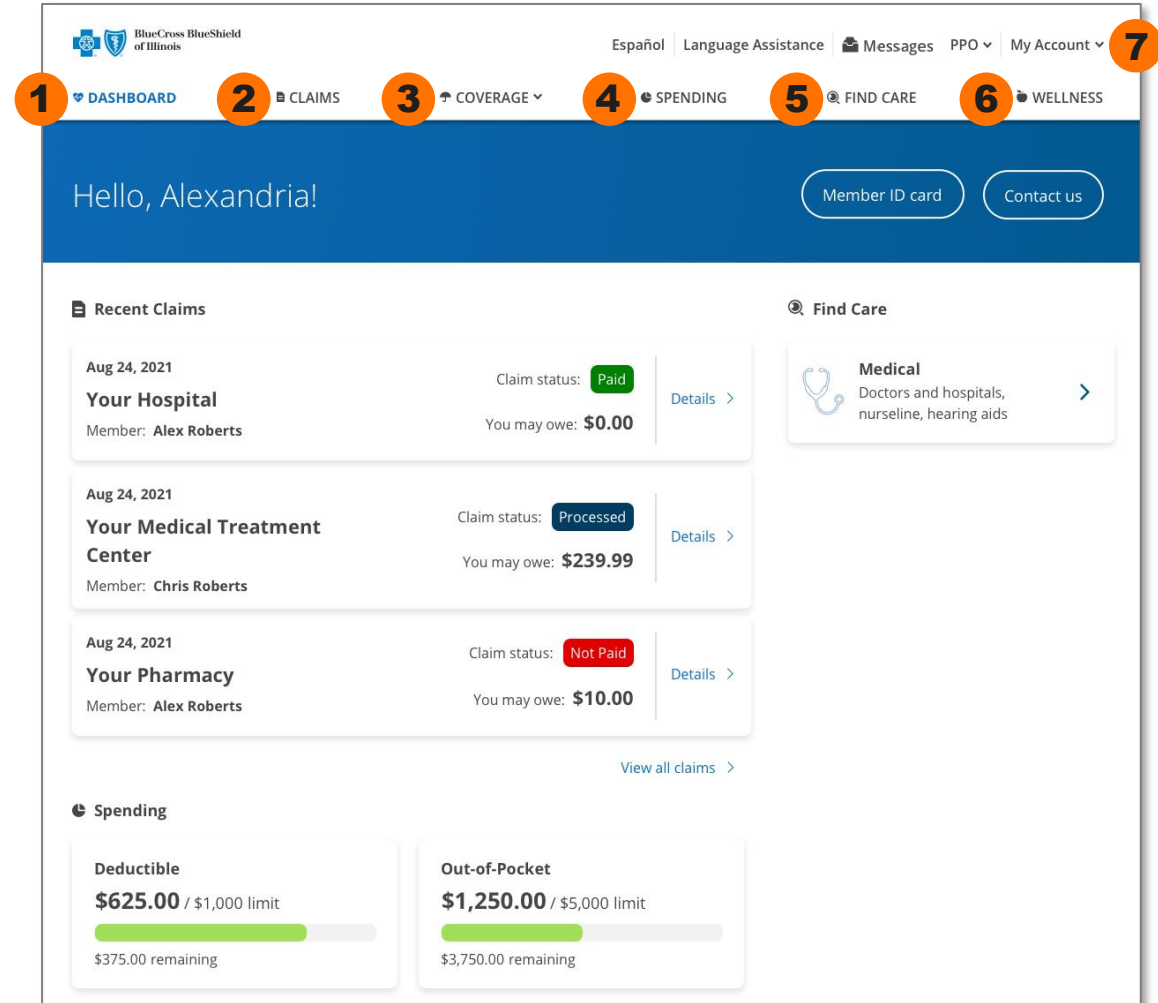
If you are a new user, choose **sign up** and follow the prompts to register

To register you will need your identification number on the front of your ID card **OR** you can call the Customer Service number on the back of the card.

Navigation has Never Been Easier


Start here to view your claims, spending and find care.

- 1 Dashboard** – See your family's claims and health care spending, order an ID, navigate the site quickly and easily
- 2 Claims** – View quick claims summaries or download your Explanation of Benefits (EOB)
- 3 Coverage** – See medical, dental and pharmacy benefit highlights
- 4 Spending** – Track your deductible and out-of-pocket expenses
- 5 Find Care** – Find in-network doctors, hospitals and other health care providers quickly and easily
- 6 Wellness** – Access preventive care guidelines, information and health tips for managing health conditions and living a healthier life
- 7 My Account** – Use this menu for everything else: View your health history, update your profile and preferences, sign up for electronic EOBs, find claim forms, manage privacy preferences and contact us



Member ID Card

Forgot your member ID card? View and print a temporary card, or request a replacement, if needed.



BlueCross BlueShield of Illinois

[Español](#)
[Language Assistance](#)
[MY ACCOUNT ▾](#)



[DASHBOARD](#)
[CLAIMS](#)
[COVERAGE ▾](#)
[SPENDING](#)
[FIND CARE](#)
[WELLNESS](#)

Member ID Card

[Medical](#)
[Pharmacy](#)
[Dental](#)
[Vision](#)
[Hearing](#)

Temporary Member ID Card

The image is your member ID card and proof of insurance for any doctor or hospital visit. Simply download or print the image and show it to your Provider.

[View and Download ▾](#)

Need a New ID Card?

You can use the Temporary Member ID card provided, download the [Blue Cross Blue Shield of Illinois \(BCBSIL\)](#) app to view on your mobile device, or order a new ID card.

Order New Member ID Card

Claims

From the Claims tab, you can easily:

- View a summary of recent claims
- Search for claims by provider or claim number
- Select and download claim details
- View or print Explanation of Benefits
- Access claim FAQs

CLAIMS

BlueCross BlueShield of Illinois

[Español](#) | [Language Assistance](#) | [MY ACCOUNT](#)

DASHBOARD

CLAIMS

COVERAGE

SPENDING

FIND CARE

WELLNESS

Claims

If you receive a bill from a provider, [contact us](#) immediately. We will review the bill and contact the provider to find out why you were billed. You should never get a bill from an in-network provider for covered services.

Search for Claims

Filter

[Select and Download Claims](#)

35 Results

<div>Aug 24, 2019</div> <div>CVS Pharmacy</div> <div>Patient: Alex Roberts</div>	<div>Claim Status: Paid</div> <div>Claim #: 98818297378977</div>	<div>Total Billed:</div> <div>\$271.97</div>	<div>You May Owe:</div> <div>\$0.00</div>	<div>Details</div>
<div>Aug 17, 2019</div> <div>Northwestern Hospital</div> <div>Patient: Alex Roberts</div>	<div>Claim Status: Paid</div> <div>Claim #: 123456712345</div>	<div>Total Billed:</div> <div>\$65.09</div>	<div>You May Owe:</div> <div>\$2.42</div>	<div>Details</div>
<div>Aug 1, 2019</div> <div>University of New Mexico Women's Medical Center</div> <div>Patient: Alex Roberts</div>	<div>Claim Status: Paid</div> <div>Claim #: 738100238172</div>	<div>Total Billed:</div> <div>\$274.39</div>	<div>You May Owe:</div> <div>\$24.16</div>	<div>Details</div>
<div>Jul 1, 2019</div> <div>Walgreens Pharmacy</div> <div>Patient: Alex Roberts</div>	<div>Claim Status: Paid</div> <div>Claim #: 903231773008</div>	<div>Total Billed:</div> <div>\$844.81</div>	<div>You May Owe:</div> <div>\$401.32</div>	<div>Details</div>

Coverage and Benefits

View your benefit highlights, including:

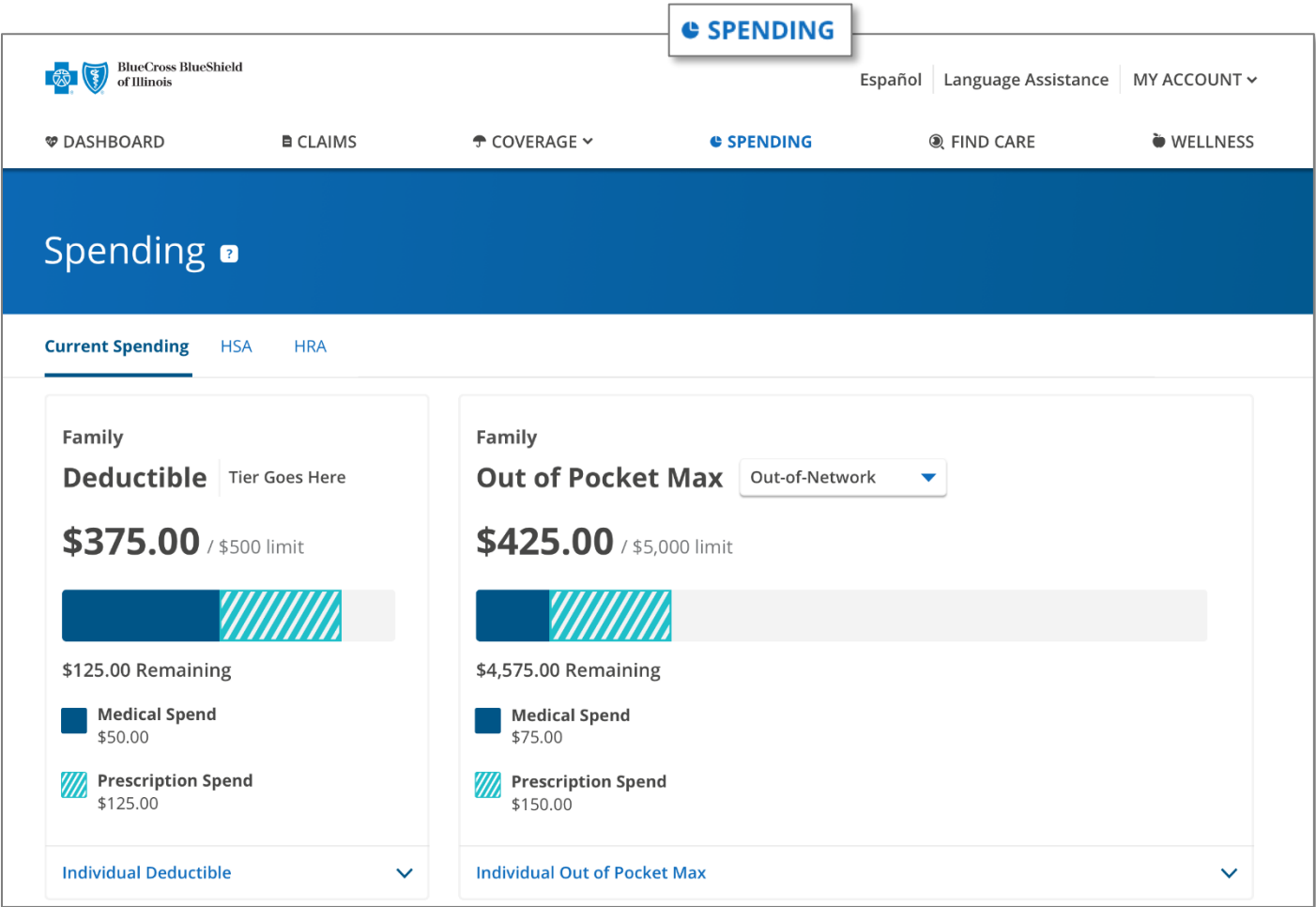
- Coinsurance/copays
- Deductible and out-of-pocket maximum
- Details on how the BlueCard® program works

The screenshot displays the 'Coverage and Benefits' page for BlueCross BlueShield of Illinois. The top navigation bar includes links for DASHBOARD, CLAIMS, COVERAGE (selected), SPENDING, FIND CARE, and WELLNESS. A 'COVERAGE' dropdown menu is open. The page title is 'Coverage and Benefits'. Below this, there are tabs for 'Medical, Dental, and Vision' (selected) and 'Pharmacy'. A 'Member ID Card' button is visible. The main section is titled 'Benefit Highlights' and contains several expandable categories: 'All My Benefits', 'Virtual Visits', 'Virtual Visit Copay', 'Office Visit Copay', and 'Specialist Care Visit Copay'. Each category shows details for In-Network and Out-of-Network coverage.

Category	In-Network	Out-of-Network
Virtual Visit Copay	\$200	Not Covered
Office Visit Copay	\$30	\$60
Specialist Care Visit Copay	\$30	\$60

Spending

View where you are at in meeting your deductible and out-of-pocket maximum. Also see how your spending breaks down between medical and pharmacy.



Wellness

Take charge of your health.

- Access your Plan's wellness programs
- View wellness guidelines
- Find information and resources on numerous health topics

The screenshot shows the BlueCross BlueShield of Illinois Wellness portal. At the top, there's a navigation bar with the BlueCross BlueShield of Illinois logo, a language selector (Español), Language Assistance, Messages, My Account, and a Wellness icon. Below this is a secondary navigation bar with links to DASHBOARD, CLAIMS, COVERAGE, FIND CARE, and WELLNESS. The main content area is titled 'Wellness' and features a 'Wellness Topics' tab. Under this tab, there are three main sections: 'Programs', 'Wellness Guidelines', and 'Articles'. The 'Programs' section includes 'Well onTarget' and 'Naturally Slim'. 'Well onTarget' has a list of features: Health Assessments, Digital Self-Management Programs, BluePointsSM program, and a link to 'Visit Well onTarget'. 'Naturally Slim' describes a weight loss program with digital courses and a link to learn more. The 'Wellness Guidelines' section provides information on preventive care and links to Adult, Perinatal, and Children's Wellness Guidelines. The 'Articles' section lists topics like Alcohol Awareness, Allergies, Arthritis, and Asthma.

BlueCross BlueShield of Illinois

Español | Language Assistance | Messages | My Account

DASHBOARD | CLAIMS | COVERAGE | FIND CARE | WELLNESS

Wellness

Care Coordination | **Wellness Topics**

Programs

Well onTarget

Well onTarget has tools and resources to help you manage your health:

- Health Assessments to help you measure your health.
- Digital Self-Management Programs, lessons, and challenges to help you reach your wellness goals.
- With the BluePointsSM program, you can earn points by completing activities and reaching goals. These points can be redeemed online for rewards.
- Track healthy habits, sync your fitness and nutrition devices with the Well onTarget portal or download the app.

[Visit Well onTarget](#)

Naturally Slim

The Naturally Slim[®] program can help you lose weight and improve your overall health - all while eating the foods you love.

Being at a healthy weight may help lower your chances of getting diabetes or heart disease. This program will help you learn that it's not what you eat, but when and how. You'll get digital courses, an online dashboard, mobile app, social community, coaching support and more, all focused on helping you build new skills to have a healthy relationship with food and physical activity.

Naturally Slim is available to you and your covered dependents (age 18 and over). There are no out-of-pocket costs for this in-network preventive program.

You will receive information from your employer about how to sign up for the Naturally Slim program.

Wellness Guidelines

Preventive care is very important for both adults and children. By making some good basic health choices, you can boost your own health and well-being. Learn more:

[Adult Wellness Guidelines](#)

[Perinatal Wellness Guidelines](#)

[Children's Wellness Guidelines](#)

Articles

We offer a variety of health topics and tips that can help you take control of your well-being and help you live a healthier life.

[Alcohol Awareness](#)

[Allergies](#)

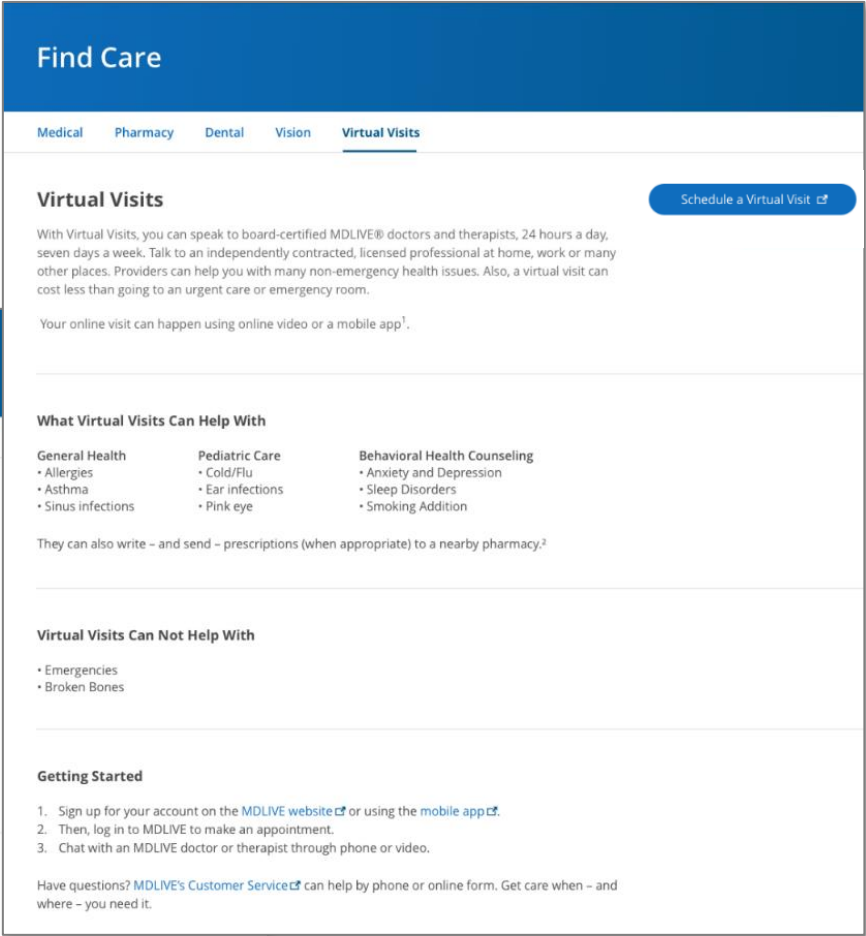
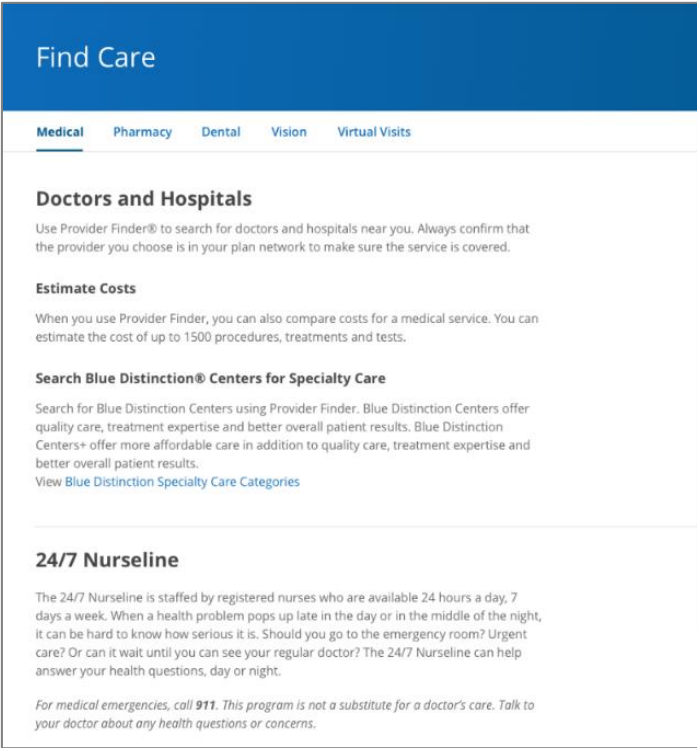
[Arthritis](#)

[Asthma](#)

Find Care

From the Find Care tab you can:

- Access Provider Finder® to find care and get cost information
- Find a network pharmacy or dentist
- Schedule a virtual visit
- Find out about the 24/7 Nurseline Audio Health Library



What Members Can Do in Our **PROVIDER FINDER**[®]



Quickly find in-network doctors, medical groups, hospitals and urgent care



Search for providers by ZIP code, gender, specialty, languages spoken and more



Compare quality ratings for providers and facilities

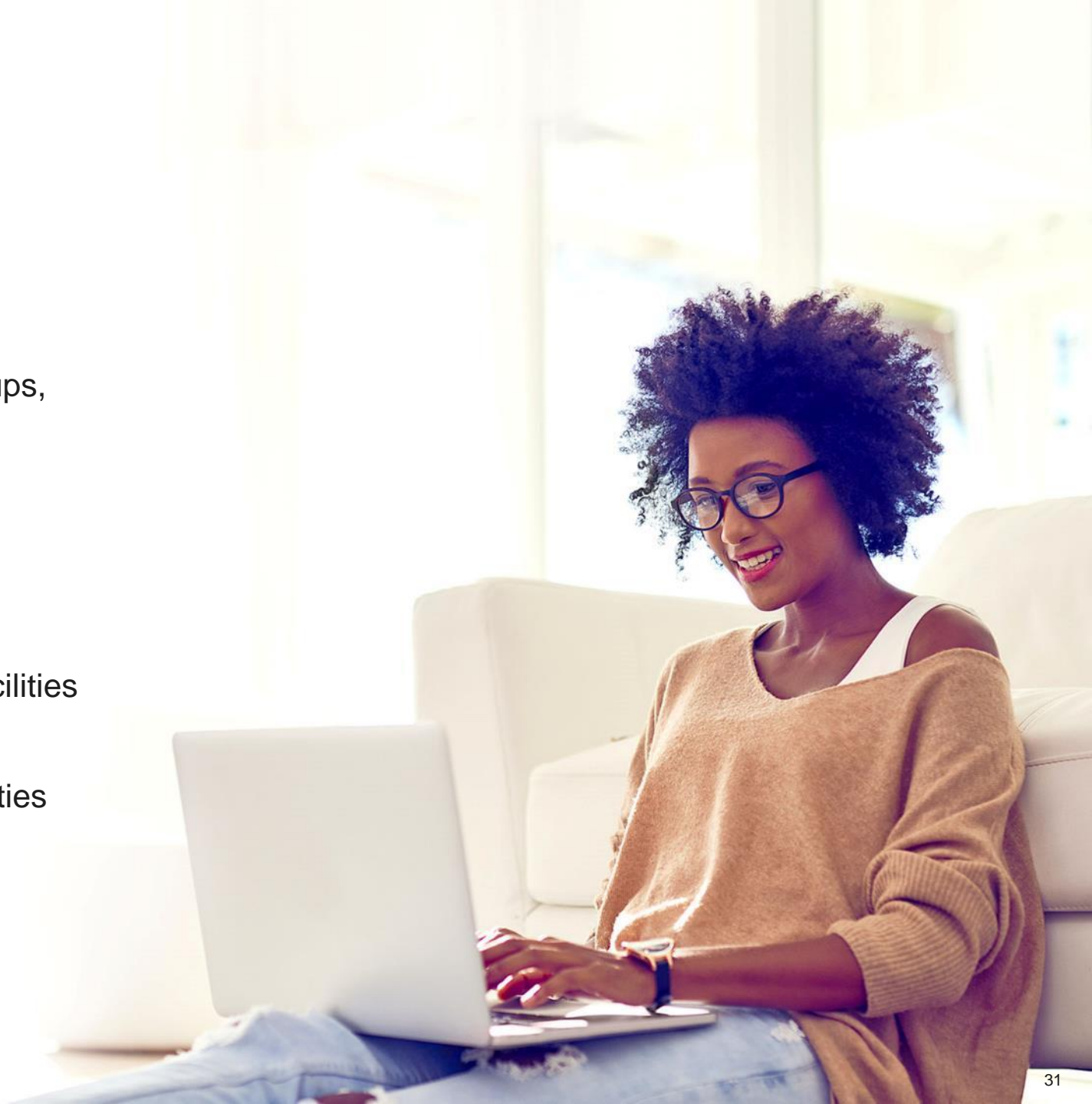


Read or write reviews for providers and facilities



See and compare your out-of-pocket cost estimates for more than 1,700 medical procedures and services*

*Available for most networks and plans



Good Evening!
Browse or search to find the care you need.

Search for Names and Specialties



Common Searches: Primary Care ▾ Urgent Care Behavioral Health ▾ Hospital Physician Office Visit MRI (without contrast), Lower Spine

Provider Finder[®] **HOMEPAGE**

Interface allows for easy
user navigation and a
better member experience

Browse by Category

Find results using these care categories

Cost Estimates



Compare costs for any procedure, or find out what your copay is.

Medical Care



Find general doctors, specialists, hospitals, urgent care centers, group practices, labs, an...

Urgent Care Center



Treatment for a condition that is not life

Behavioral Health



Treatment for Mental Health and Substance

Cost Estimate Search Results

About

Artificial Joint Repair/Revision, Hip or Knee

Estimated Costs
\$5,500

Description of procedure or service

All Specialties ▾ All Tiers ▾ All People & Places ▾ All Genders ▾ All Patient Ratings ▾ All Blue Distinction... ▾ More Filters ▾

VIEWS ONLY:
Member Rewards Only

Your benefits plan may cover Blue Distinction Plus and Blue Distinction Centers at a higher level of benefits, which will be less cost to you. If you would like to view more details click here.

List view Map view Sort By Best Match

Providers:

Rush University Medical Center General Acute Care Hospital

Add to Compare View Profile

LOCATION

Rush University Medical Center
1653 W Congress Pkwy, Chicago, IL 60612
[Get directions](#) (est. 1.3 miles away)

CONTACT INFORMATION

Phone: 312-942-5000

★★★★★ 4.6 [View 350 ratings](#)

Blue Distinction Plus + 7 More Awards

Your Estimated Cost
\$5,500
[Cost Details](#)

In your network

Did you know?

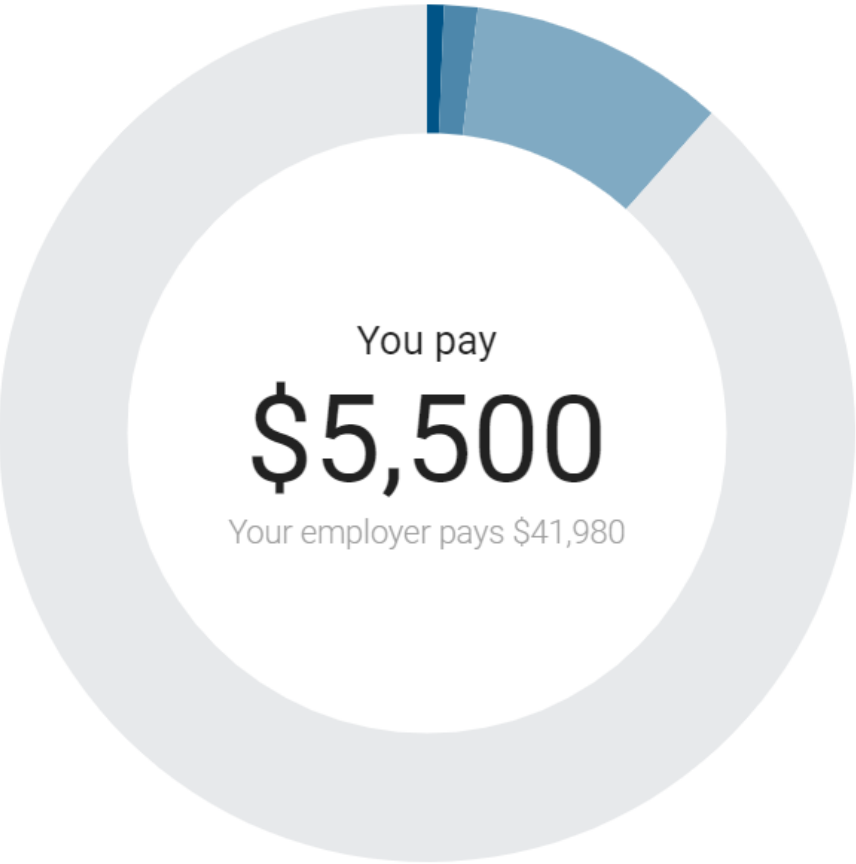
Cost Range for a Knee Replacement





Estimated Procedure Cost
Provider Highlights
Specialties & Expertise
Ratings & Reviews
Quality
Awards & Recognitions
Affiliations
Affiliated Doctors
Locations & Hours
More About This Provider

Viewing cost details For ▼



You pay towards your copay

\$300

You pay towards your deductible

\$600

You pay towards coinsurance

\$4,600

Your employer pays

\$41,980

Total cost

\$47,480

Detailed breakdown of estimated costs, including member's out-of-pocket and employer expenses



In-Network - Labs, Specialty Pharmacy and DME

When receiving services from a lab, specialty pharmacy (RX under medical), or durable medical equipment (DME) provider, it is important to make sure that the provider is in network in the location where you are receiving services.

- A laboratory must be in network in the state where the referring provider is located.
- A specialty pharmacy must be in network in the state where the ordering physician is located.
- A DME provider must be in network in the state from which supplies are shipped or the state in which the retail store is located.

Some in-network labs, specialty pharmacies (RX under medical), or DME providers may be located in another state or many miles away from the referring provider, ordering physician, or location where DME supplies are shipped.

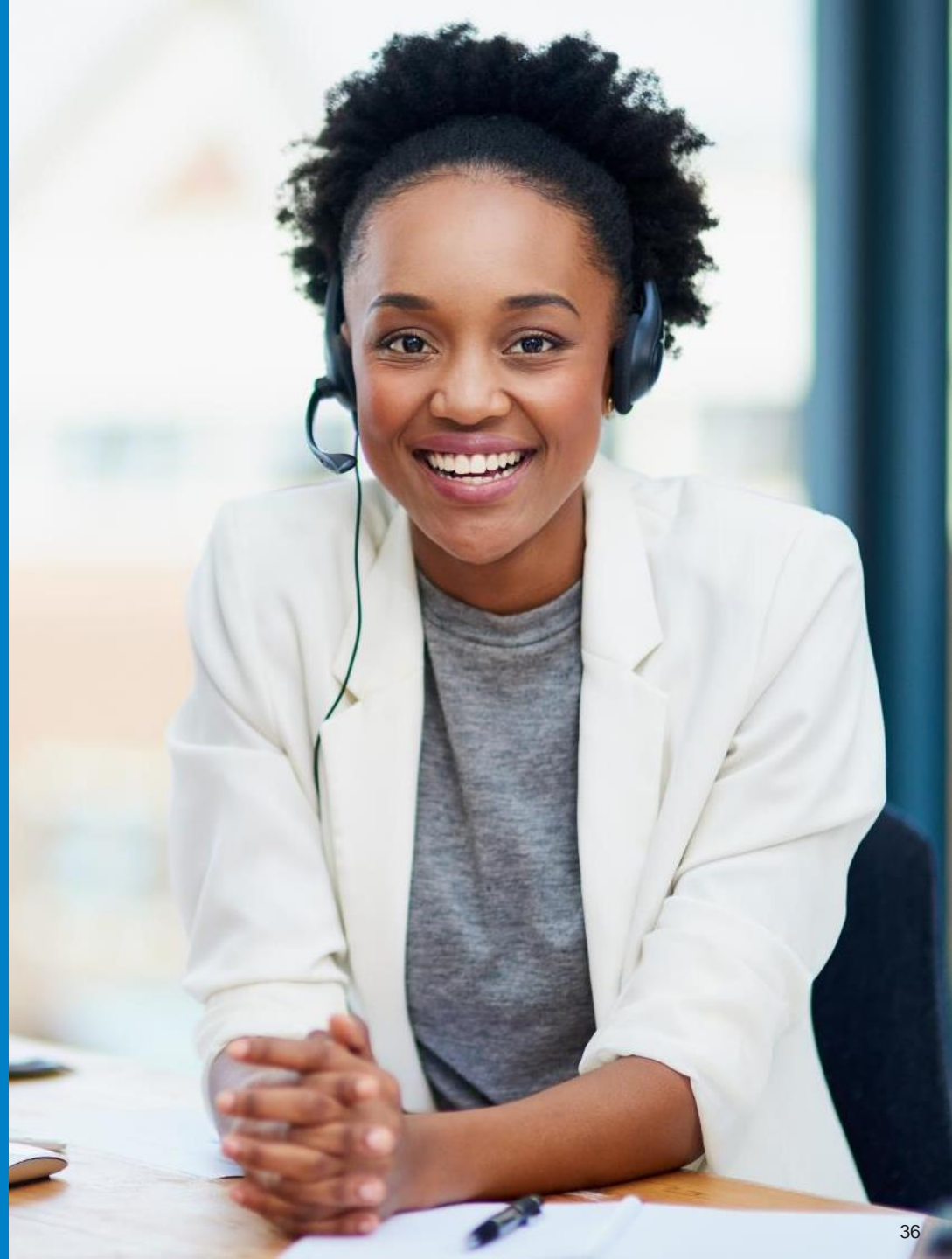
- For a listing of these providers please search through the online directory using the provider type search. Or, for additional assistance, please call customer service on the back of your member ID card.

Prior to receiving services, please confirm with the provider that they are in-network in the state where you are receiving services.

Express scripts - Carved out pharmacy vendor

Tools and Service

- Benefits Value Advisor (BVA)
- Digital Capabilities

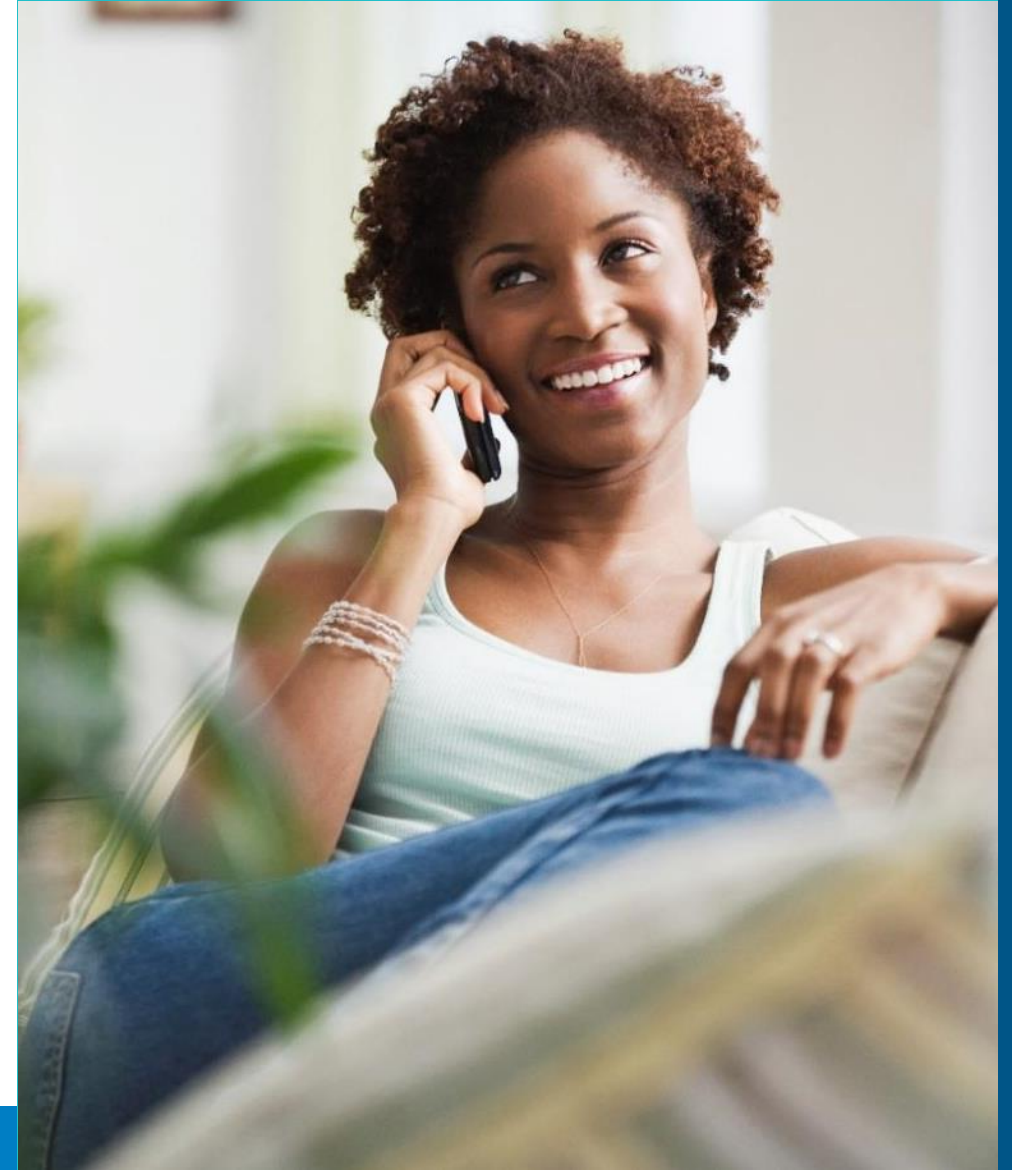


Customer Service

Call Customer Service for assistance and questions about:

- Claims
- Medical benefit coverage
- Finding network providers
- Membership and eligibility
- Navigating digital tools and resources
- ID card requests
- Health education and transfer to other health programs
- Transition of care (*New to the plan*)

877-238-5942



What Can Customer Service Do for You?

Customer Service (Benefit Value Advisors) can now make it easier to use your health plan, while helping you save time and money

They can help you:

- Find a doctor or facility
- Get cost estimates for procedures and services
- Schedule appointments
- Set up prior authorizations (if needed)

Benefits Value Advisors offer cost estimates for procedures and services from various providers and facilities. Lower pricing and cost savings are dependent on the provider or facility selected by the member. Benefits Value Advisors do not give medical advice. Members should talk to their doctor or health care professional about any health questions or concerns.



BVAs are available 24 hours a day, 7 days a week* via phone or live chat to help you.

*Excludes major U.S. holidays

Digital Capabilities



You're Mobile.
We're Mobile.

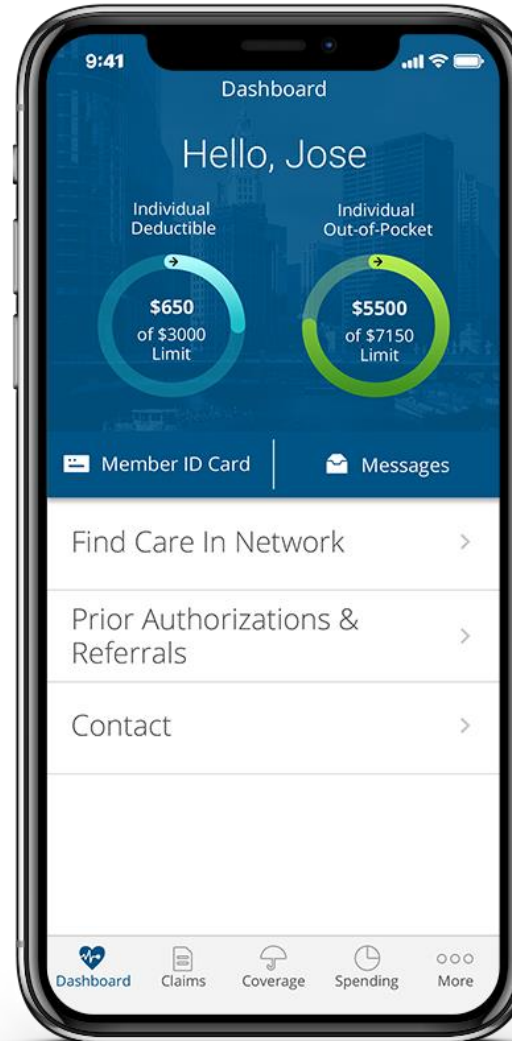
We've got the tools
you need to access
information from your
mobile phone or device:

- bcbsil.com
- Blue Access for MembersSM
- BCBSIL Mobile App
- Text Message



BCBSIL App for Mobile Devices

- Find an in-network doctor, hospital or urgent care facility or search for Spanish-speaking doctors
- Access your claims, coverage and deductible information
- Access temporary digital member ID card
- Secure login with Face ID (iOS only) and Fingerprint ID
- **Let us know your communication preferences**



To download the app, go to Google Play, the App Store or text* BCBSILAPP to 33633

*Message and data rates may apply.

Screen images are for illustrative purposes only.

Only a Text Away ...

Blue Access for MembersSM and Relay¹ deliver important updates directly to you.

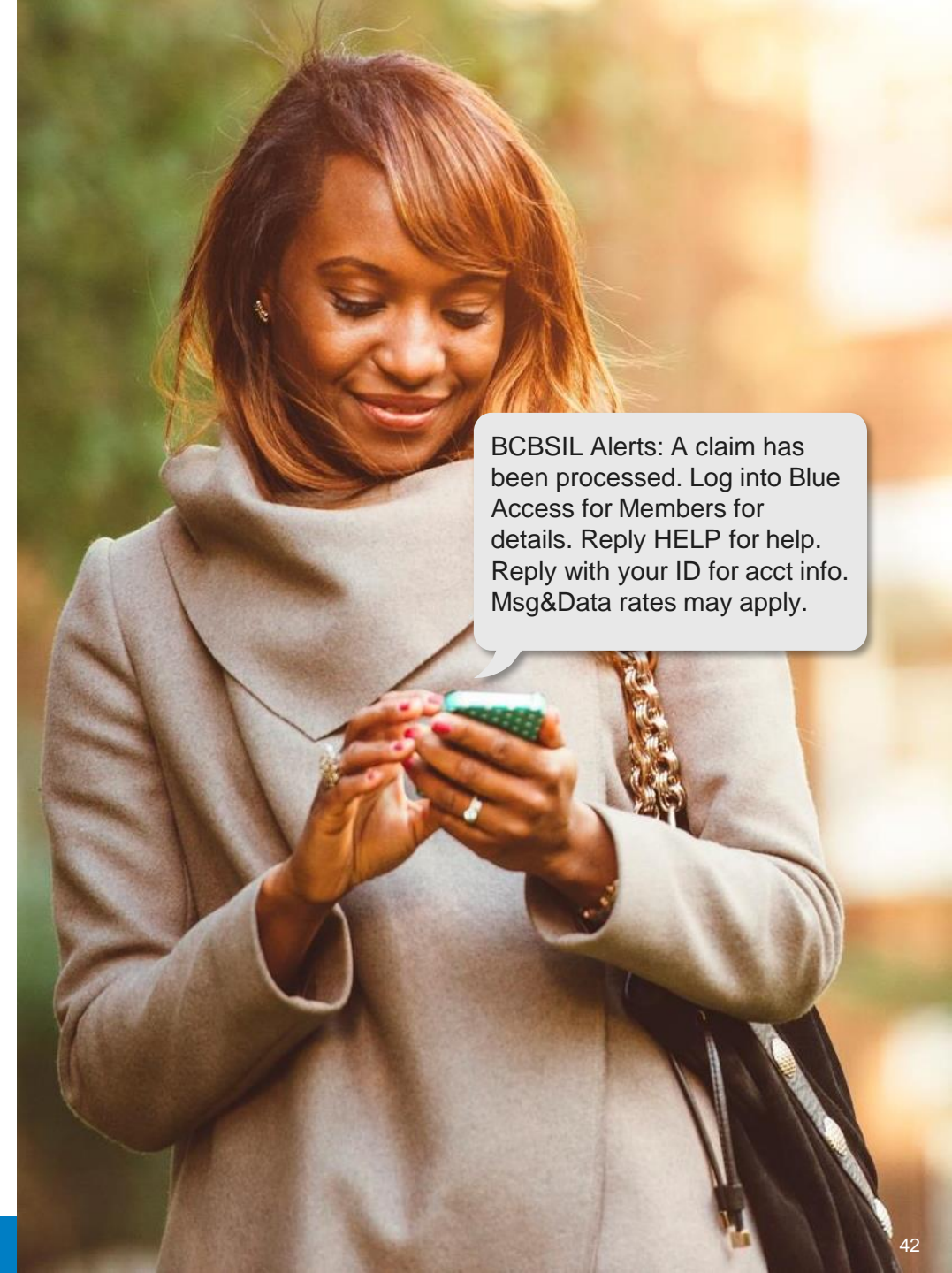
When you provide a mobile phone number you are opted in to receive text messages² with relevant information about your health care plan features, account information and health and wellness programs.

What's included in the SMS feed experience?

- You will receive automated messages, alerts, campaign messaging and care management notifications
- The SMS experience operates like a social media feed

¹Messaging powered by Relay Network, an independent company, that is delivering messages on behalf of Blue Cross and Blue Shield of Illinois.

²Message and data rates may apply. Terms and conditions and privacy policy at bcbsil.com/member/account-access/mobile/text-messaging.



BCBSIL Alerts: A claim has been processed. Log into Blue Access for Members for details. Reply HELP for help. Reply with your ID for acct info. Msg&Data rates may apply.

Additional Wellness Benefits:

- Women's and Family Health
- Cancer Services and Support
- Chronic Care Management Plus
 - Diabetes
 - Hypertension
- Digital Mental Health
- 24/7 Nurseline
- Well on Target
 - Fitness Program
 - Digital Coaching Programs
- Blue365 Discount Program



Women's and Family Health

No matter what stage you are at in life's journey, you should prepare as much as you can. We have tools to help — at no extra cost to you.

- **Ovia Health™ apps** are your companion for the journey ahead: from cycle and fertility tracking to pregnancy, parenthood and menopause.
- **Well onTarget®** offers self-guided courses that help you plan for a healthy pregnancy and baby.
- Plus, if your pregnancy is high-risk, BCBSIL will provide support from **maternity specialists** to help you care for yourself and your baby.

Prepare for your life-changing journey.



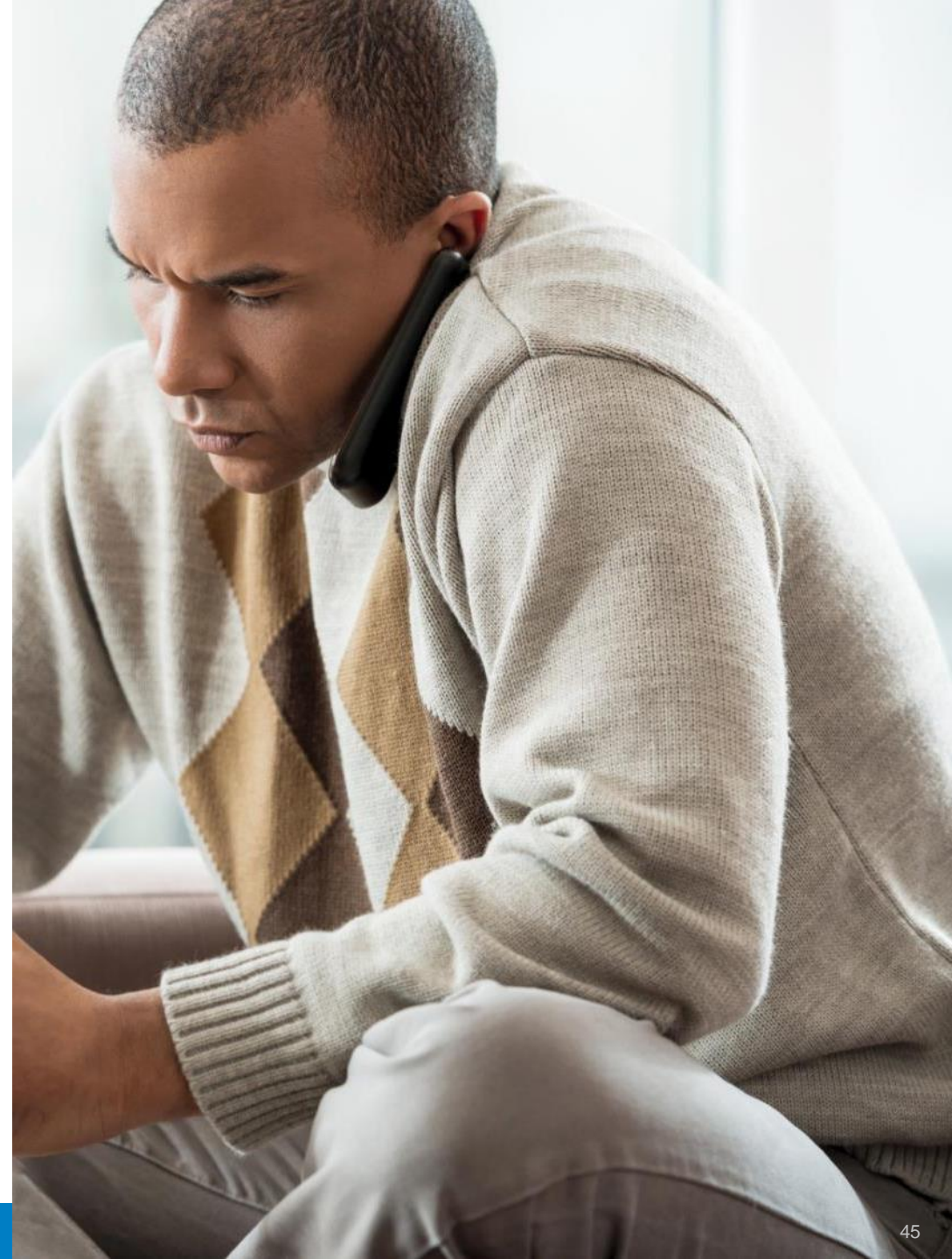
Cancer Services and Support

**A cancer diagnosis can change your life forever.
We are here to help.**

A BCBSIL certified oncology cancer care nurse will provide holistic support to help you and your family make informed decisions and get the care you need, including:

- Educating you about your diagnosis and benefits
- Working with your doctors to help coordinate your care
- Guiding you to services that can help manage pain and other symptoms
- Connecting you with a social worker, behavioral health provider and other sources of support
- At your request, arranging an outside expert medical review of your case

**Oncology cancer care nurse support is available
today by calling 800-327-8497.**

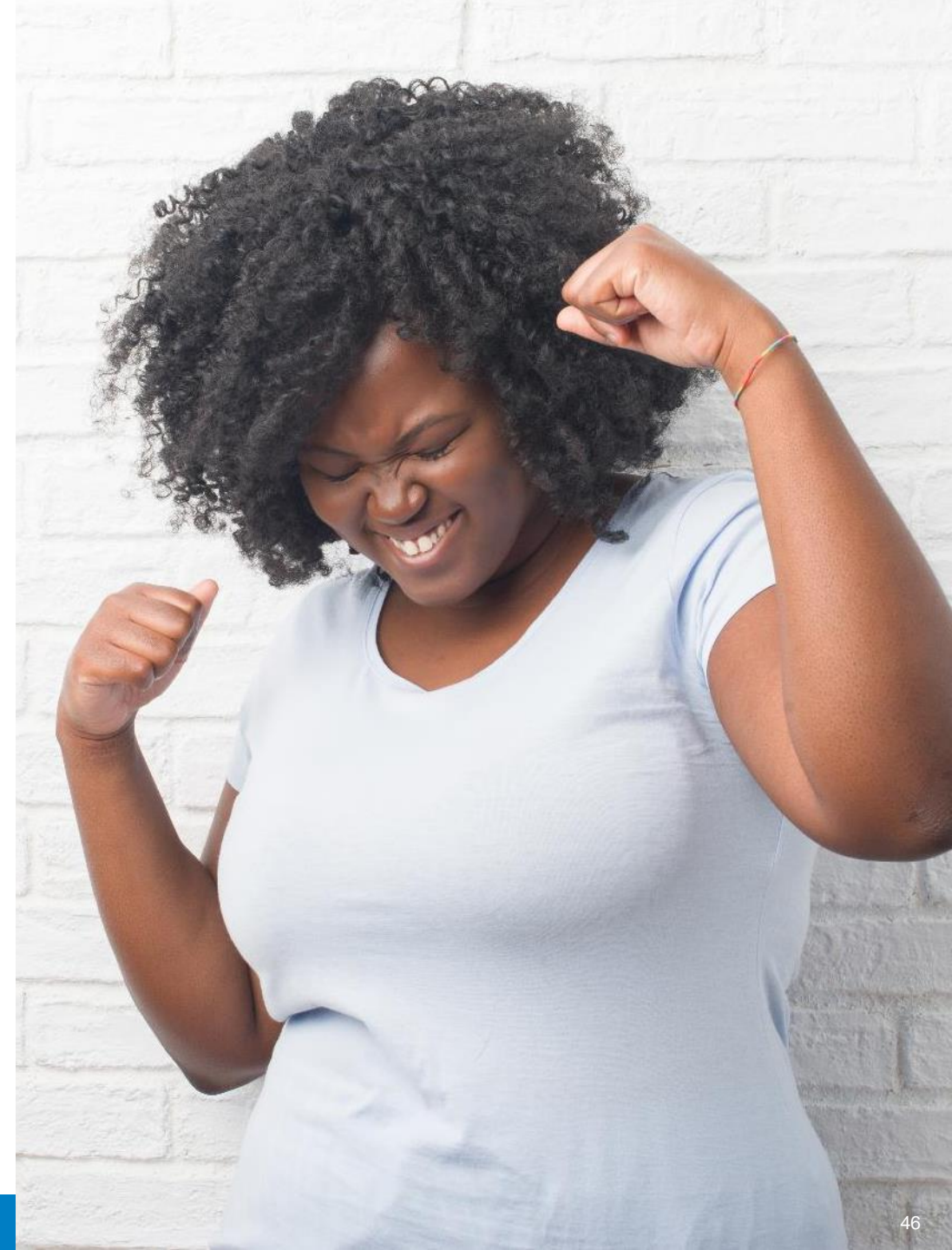


Livongo (Teladoc™ Health) Chronic Care Management Plus

If you have diabetes, prediabetes or hypertension, you can better manage additional weight, high cholesterol or behavioral health issues with options available through CCMP+.

You'll receive a one-stop, personalized experience that adapts based on your needs.

- Includes connected devices and access to health coaches
- Services covered — no out-of-pocket costs
- If you are eligible, Teladoc Health will contact you about how to sign up for this program



Digital Mental Health



Online programs through Learn to Live at no added cost for:

- Stress, anxiety and worry
- Depression
- Social anxiety
- Insomnia
- Panic
- Substance use
- Resiliency

- Available to employees and their family members 13 years and older
- Programs in English and Spanish
- Personal coaching by phone, text or email

Get started with a mental health assessment:

- Log in to Blue Access for MembersSM
- Choose Wellness, then find Digital Mental Health

Learn to Live provides educational behavioral health programs; members considering further medical treatment should consult with a physician.

24/7 Nurseline

Advice anytime.

Advice isn't just needed
from 9 to 5.

Round-the-clock health and
wellness advice from licensed
nurses

Plus, you can also listen to more
than 1,000 health topics

800-299-0274

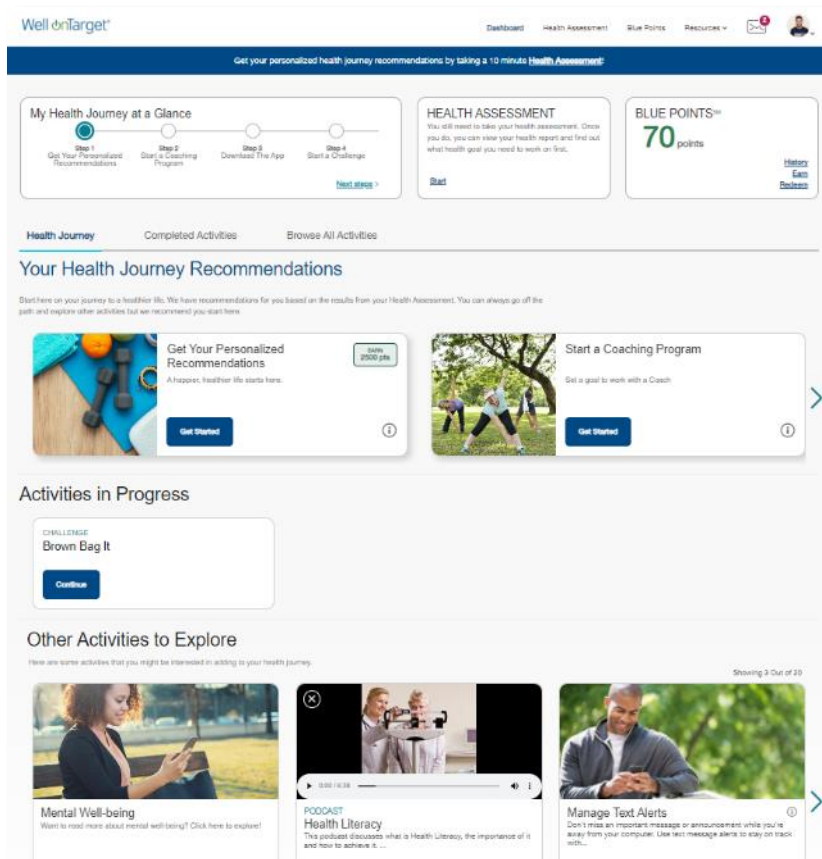
Available in English and Spanish



Health and Wellness - Well on Target



Member Wellness Portal



The portal includes recommended activities that make up your Personal Member Journey.

May be included in other packages.

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.

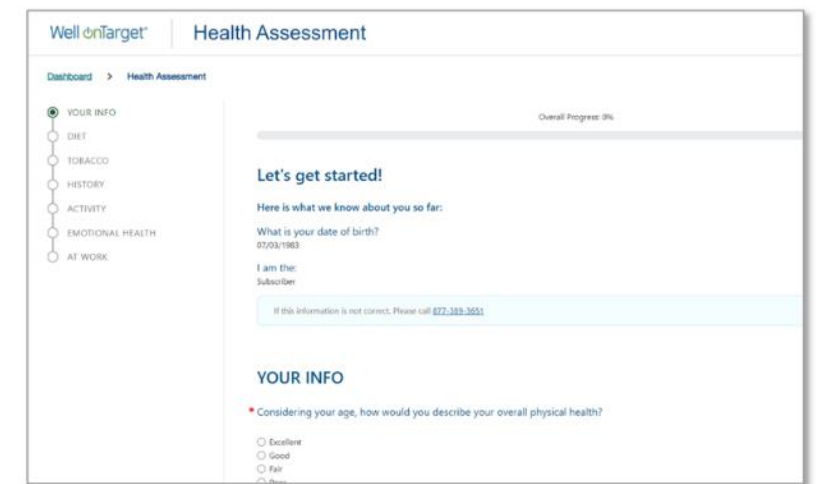
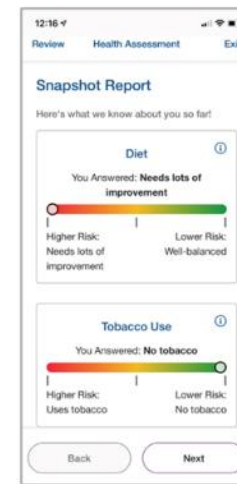
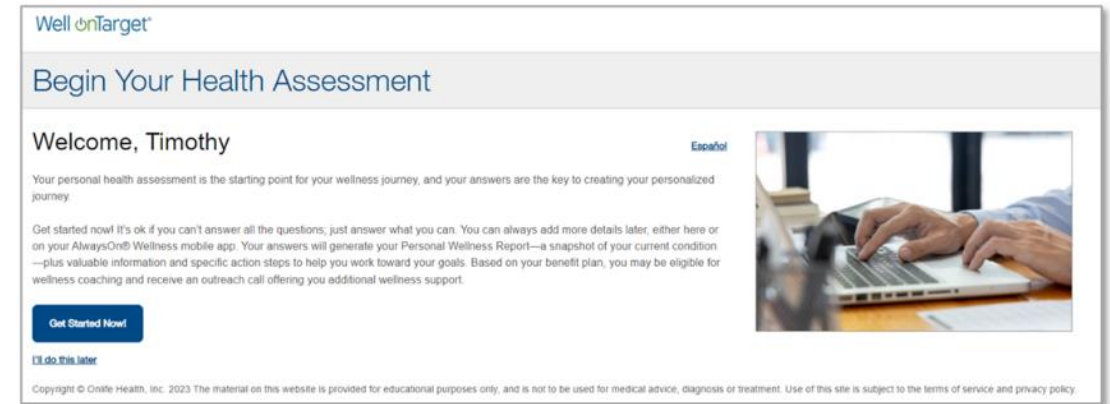
Portal Highlights

- Health Assessment
- Personalized “My Journey” member dashboard
- Digital self-management programs
- Personalized “My Journey” member dashboard
- Trackers and tools
- “Explore” wellbeing resources
- Coaching program*
- Interactive symptom checker
- Health and wellness content
- Secured messaging
- Blue PointsSM rewards*
- Fitness Program
- Tracking for fitness, nutrition and device integration
- Personal wellness challenges
- Mobile app (AlwaysOn)
- Health and Wellness content

*Blue Points program rules are subject to change without prior notice. 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. AlwaysOn is owned and operated by Onlife Health Inc. an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide digital health management for members with coverage through BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

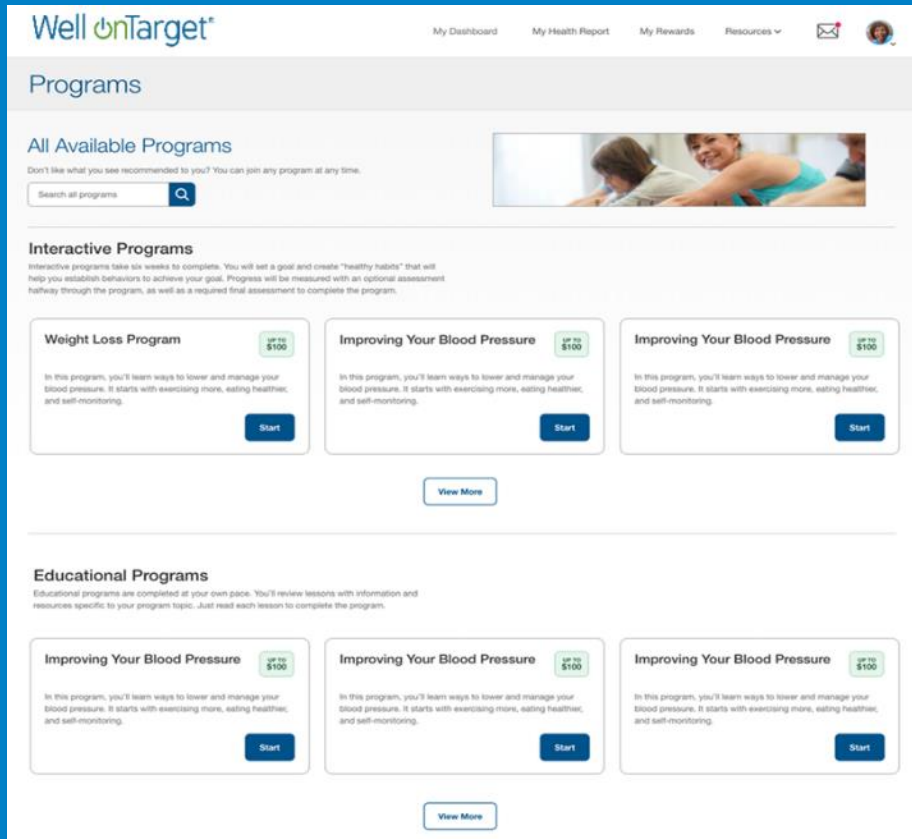
Health Assessment

- Integrated within the portal
- Scientifically based branching logic for a personalized experience
- Drives engagement by recommending self-management programs and coaching after completion
- Personal wellness report with health improvement tips
- Can be completed in the mobile app
- Available in Spanish



Wellness Information, Right at Your Fingertips

Digital self-management programs on a range of wellbeing topics



Interactive

- Enhancing your Physical Activity
- Managing Your Stress
- Improving Your Sleep
- Living with Diabetes
- Quitting Tobacco
- Staying Tobacco-Free
- Achieving Your Healthy Weight
- Maintaining Your Healthy Weight
- Nutrition for Better Health
- Improving Your Blood Pressure
- Financially Fit
- Improving Your Oral Health

Educational

- Managing Your Metabolic Syndrome
- Preventing Diabetes
- Healthy Bones and Joints
- Living With Asthma
- Living With Chronic Obstructive Pulmonary Disease (COPD)
- Living With Congestive Heart Failure (CHF)
- Living With Coronary Artery Disease (CAD)
- Improving Your Cholesterol
- Healthy Pregnancy
- Preventive Health: Reducing Your Risks

Flexible Gym Network

A choice of gym networks to fit budgets and preferences.*

Plan 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
\$19 initiation fee (no initiation fee for digital-only option)					

- **Studio Class Network:** Boutique-style classes and specialty gyms are pay-as-you-go with 30% off every 10th class.
- **Family Friendly:** Expands gym network access to your covered dependents at a bundled price discount. Member pays only one enrollment fee per family.
- **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.

Selecting Options

- You can select an option based on your preference. Once you pay, you'll have access to all locations within the purchased plan and those at the lower price, too.
- The Elite plan has the option to select one home elite gym and access to all other gyms.
- You have the option to change your Elite home gym monthly.

Blue PointsSM – How to Earn Points

Members earn points for regularly participating in healthy activities. Points are redeemable for digital gift cards.

Eligible activities include:

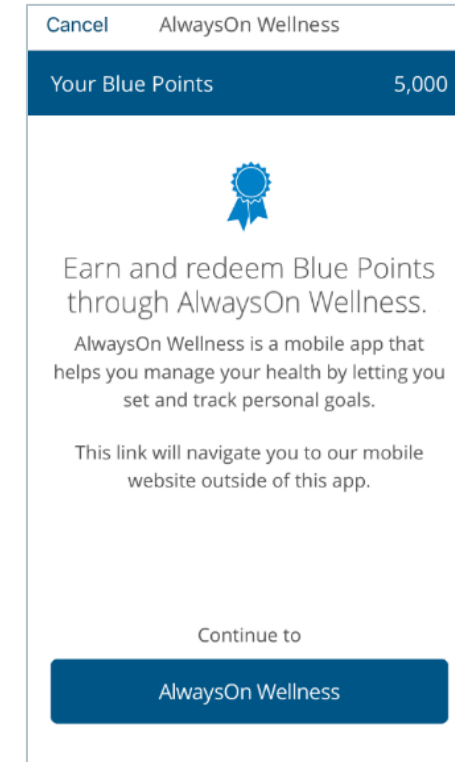
- Biometric screenings (through Catapult HealthSM)
- Health Assessment completion
- Digital self-management program engagement
- Fitness Program enrollment and visits to facilities
- Use of Online Trackers
- Connecting and syncing a fitness or nutrition device or app

Catapult Health is an independently contracted provider that has contracted with Blue Cross and Blue Shield of Illinois to provide health and wellness screenings for members with coverage through BCBSIL. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

AlwaysOn is owned and operated by Onlife Health Inc. an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide digital health management for members with coverage through BCBSIL.

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.

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.

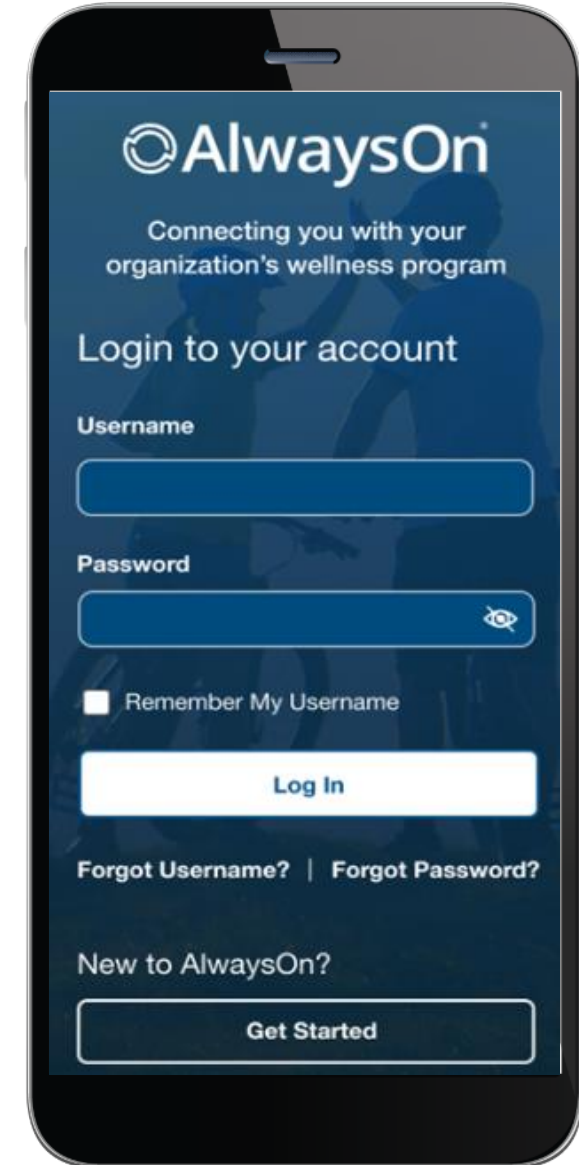


AlwaysOn Mobile App

Mobile App Features

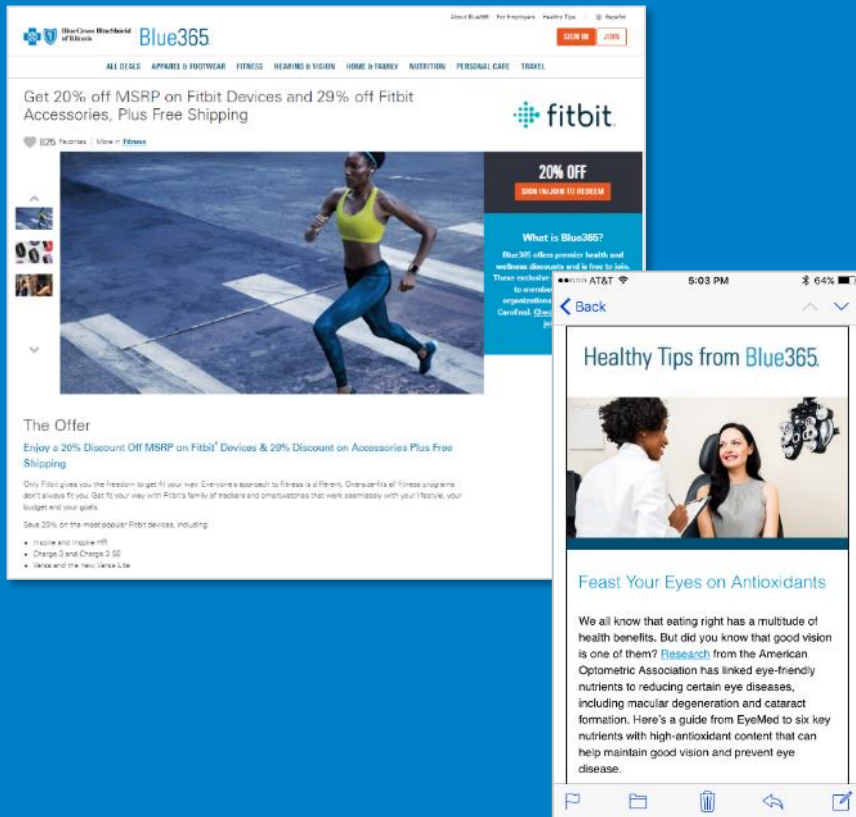
- Health Assessment
- Secure messaging with Health Coach
- Health dashboard and trackers
- Blue PointsSM balance
- Wellness Challenges
- Digital programs included

Available on Google Play and Apple App Store



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 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. AlwaysOn is owned and operated by Onlife Health Inc. Onlife Health Inc. is an independent company that provides digital health management for Blue Cross and Blue Shield of Illinois.

Member discounts simply for being a BCBSIL member



Screen images are for illustrative purposes only.

Blue365[®] Member Discount Program

- Exclusive health and wellness deals from national and local retailers
- Save money on fitness gear, family activities, gym memberships, healthy eating, dental, vision, hearing aids and more from top national and local retailers
- Go to www.blue365deals.com/BCBSIL to register, view your available discounts and sign up for weekly emails

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. Employees should check their benefit booklet or call the Customer Service number on the back of their 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 only given through vendors that take part in this program and are 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. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

How You Can Be a Smarter Consumer

- **Use in-network providers**
- Research costs in **Provider Finder[®]**
- **Review EOBs** and bills sent by your providers
- **Use wellness benefits**
- **See your physician regularly** for preventive care or illness
- **Ask your health care provider questions** about prescribed medications and treatment
- **Visit bcbsil.com** for more health and wellness information



Appendix

Knowing your Network

HPN = Blue High Performance Network (Based on where you live)

Basic and Enhanced PPO plans

- Florida = Network Blue
- Georgia = Blue Open Access POS
- Kansas City metro = Preferred Care Blue
- New Jersey = Horizon Managed Care Network
 - New York = Empire POS
- St. Louis metro = Blue Access Choice
- Washington DC metro = BlueChoice Advantage Open Access
 - Wisconsin = Blue Preferred POS
- All others = PPO (Participating Provider Options)

Deductibles and Coinsurance

DEDUCTIBLE:

First amount of money you need to pay each year before the health plan begins to pay claims

COINSURANCE:

The percentage of the cost for a covered service that you are responsible for paying


In the HSA plan, all services are subject to deductible and coinsurance, including prescription drugs.

In the PPO plans, most covered services (such as hospital stays) are paid at a percentage after the deductible has been met — the remaining percentage is your coinsurance amount.

Other services (such as office visits) have fixed copays.

Sample Explanation of Benefits (EOB) — HSA

EOB shows the total billed and amount that may still be due.

**BlueCross BlueShield of Illinois**

CLAIM DETAIL (1 OF X)
PATIENT: John Smith
PROVIDER: Ralph Johnston M.D.
CLAIM # XXXXXXXXXXXX
We reviewed the claim for this patient based on the additional information received from other group health care coverage involvement. Blue Cross and Blue Shield has negotiated discounts with this provider. The following shows how this claim was adjusted.

DATE PROCESSED: 06/20/2019

SUBSCRIBER INFORMATION
GROUP NAME
Member ID#: XXXXXXXXXX777V Group #: 000012345
Customer Advocates are here to help! <Customer Service Phone>

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

Sample

YOUR BENEFITS APPLIED						YOUR RESPONSIBILITY				
Service Description	Service Dates	Amount Billed	Discounts and Reductions	Amount Covered (Allowed)	Health Plan Responsibility	Deductible Amount	Copay Amount	Coinsurance	Amount Not Covered	Your Total Costs
Surgical Charges	04/04/2019	4,000.00	(1) 1,800.00	2,200.00	960.00	1,000.00		240.00		1,240.00
Recovery Room	04/04/2019	900.00	(1) 410.00	490.00	392.00			98.00		98.00
Med/Surg Supplies	04/04/2019	300.00	(1) 140.00	160.00	128.00			32.00		32.00
Med/Surg Supplies	04/04/2019	100.00							(2) 100.00	100.00
Laboratory Services	04/04/2019	1,200.00	(1) 820.00	380.00	304.00			76.00		76.00
Laboratory Services	04/04/2019	400.00	(1) 270.00	130.00	72.00		50.00	8.00		58.00
MRI Outpatient	04/04/2019	950.00	(1) 490.00	460.00	363.00		15.00	82.00		97.00
CLAIM TOTALS		\$7,850.00	\$3,930.00	\$3,820.00	\$2,219.00	\$1,000.00	\$65.00	\$536.00	\$100.00	\$1,701.00

Total covered benefits approved for this claim: \$2,219.00 to Ralph Johnston M.D. on 06-20-19.

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.

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 benefit period 01-01-19 through 12-31-19 to date this patient has met \$4,515.02 of her/his \$7,350.00 Out-of-Pocket Expense Limit. For your up-to-date Medical Spending summary, visit Blue Access for MembersSM at bcbsil.com, the BCBSIL Mobile App or call the phone number at the beginning of the claim information.

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The EOB is mailed to the home or is available online.