

Benefit Summary

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

- **Blue Cross and Blue Shield of Illinois (BCBS)** is the claims administrator for the Village of Franklin Park HMO/PPO medical plans.
 - » Contact BCBS for questions concerning membership, plan benefits, or status of claim payments. HMO Customer Service Representatives can be reached at **800.892.2803**; PPO Customer Representatives can be reached at **800.458.6024** both between 8:30 a.m. and 7:00 p.m., CST, Monday through Friday.
 - » 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**.
- **Blue Care Connection through Blue Cross and 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 Franklin Park's BCBS medical plan 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 website 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). **Life Points** (a program that rewards you for engaging in healthy activities), **Special Beginnings** (maternity program offering expectant mothers support and education), **Blue Care Advisors and Case Management**.
 - » PPO Employees can also access a registered nurse on their 24/7 Nurseline at **800.299.0274**
- **The Standard** is the life insurance carrier for your Basic employer-paid life insurance benefits. The Standard Customer Service Representatives can be reached at **800.535.8465** between 8:00 a.m. and 4:30 p.m. CST Monday through Friday.
- **Express Scripts** manages the prescription drug benefit for the Village of Franklin Park. Retail and mail-order prescription services for the medical programs are administered through Express Scripts.
 - » Express Scripts member service representatives can be reached at **800.711.0917**, 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.



Medical Plans – All Employees

| Benefits | Blue Cross and Blue Shield of Illinois PPO – P14610 | Blue Cross and Blue Shield of Illinois PPO Health Savings Account Non-Union and Firefighters – P14626 | Blue Cross and Blue Shield of Illinois HMO – H15065 |
|--|--|---|---|
| Major Medical Coverage | | | |
| Coinsurance | | | |
| Network | 90% | 90% | 100% |
| Non-Network | 70% | 70% | No coverage |
| Deductible | | | |
| Network | \$300 individual / \$750 family | \$2,000 individual / \$4,000 family | n/a |
| Non-Network | | | |
| Out-of-Pocket (includes deductible) | | | |
| Network | \$2,800 individual / \$8,250 family | \$5,000 individual / \$10,000 family | \$1,500 individual / \$3,000 family |
| Non-Network | | | |
| Office Visit Copay | | | |
| Network | \$15, then 100% | Deductible applies, then 90% | \$20, then 100% |
| Non-Network | Deductible applies, then 70% | Deductible applies, then 70% | No coverage |
| Hospital Care | | | |
| Network | Deductible applies, 90% with authorization | Deductible applies, 90% with authorization | 100% |
| Non-Network | \$300 non-network penalty, then deductible applies, 70% with authorization | \$300 non-network penalty, then deductible applies, 70% with authorization | No coverage |
| Hospital Emergency Care | | | |
| Network | 100% after \$50 copay; waived if admitted | Deductible applies, then 90% | 100% after \$75 copay; waived if admitted |
| Non-Network | | | |
| Other Covered Services | | | |
| Network | 80% | 80% | 100% after applicable copays |
| Non-Network | | | No coverage |
| Preventive Services | | | |
| Network | 100% | 100% | 100% |
| Non-Network | 100% | 70% | No coverage |
| Prescription Drug (administered by Express Scripts) | | | |
| Retail (30-day supply) | \$15 generic / \$25 brand name formulary / \$50 non-formulary | Deductible applies, then 90% | \$15 generic / \$25 brand name formulary / \$50 non-formulary |
| Mail Order (90-day supply) | \$30 generic / \$50 brand name formulary / \$100 non-formulary | n/a | \$15 generic / \$25 brand name formulary / \$50 non-formulary |
| Prescription Drug Out-of-Pocket Maximum (network) | \$3,800 individual / \$4,950 family | Included in medical out-of-pocket | \$5,100 individual / \$10,200 family |

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.