



This summary is designed to give you an outline of the health benefit programs offered through NSSEO. 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
- 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
- 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.

Other Benefits Provided by NSSEO

Employee Assistance Program

NSSEO offers its employees and their families an employee assistance program at no cost. A professional EAP counselor can provide confidential services related to: emotional, personal and stress-related concerns, chemical dependency, prenatal care, child care, parenting, special needs, legal and financial matters, academic and financial aid referrals, convenience services (auto care, home repair, moving specialists, etc.) and pet care, elder care, health and wellness, pre-retirement lifestyle planning and marriage, family and relationship issues.

Contact Workplace Solutions at **877.215.6614** for support 24 hours a day, 7 days a week.

Wellness Programs

NSSEO holds annual screenings and flu shots for employees through Empower Health. All active employees who are eligible to participate in health insurance plans can take part in this program at no cost to the individual. Contact Marcia Guiffre at **847.463.8105** for more information.

Dental Plans

Group Administrators, Ltd.

Group Administrators, Ltd., (GAL) is the claims administrator for the NSSEO self-insured dental plan.

GAL determines eligibility and processes your dental claims. Contact GAL for questions concerning your self-insured dental plan at **800.323.1683** or www.groupadministrators.com. Our policy number is NSSEO.

Guardian/First Commonwealth

Guardian/First Commonwealth is the administrator for the NSSEO Guardian/First Commonwealth Dental HMO plan.

To obtain information about the HMO dental program's coverage or if you have claim issues, you can contact Guardian Members Services directly at **866.494.4542**. Visit www.GuardianAnytime.com to find participating dentists.

Group Administrators provides an insurance ID card for those of you on the self-insured dental plan; Guardian/First Commonwealth provides an ID card for your dental HMO.

Dental Plan Comparison		
Benefit	NSSEO Self-Insured Dental Plan	Guardian/First Commonwealth
Deductibles (calendar year)	\$50 Individual* \$150 Family*	None
Preventive Services		
Cleanings	100% (4 per year)	100% (1 every 6 months)
Exams	100% (2 per year)	100% (1 every 6 months)
Basic Services (fillings, endodontics, periodontics and oral surgery)	80%	85%
Major Services (crowns, bridges & dentures)	80%	80%
Orthodontics		
Children (to age 19)	50% to a lifetime maximum of \$1,500	\$1,000 value**
Adults	Not covered	\$1,000 value**
Annual Benefit	\$3,000	Unlimited
Reimbursement	Coverage based on reasonable & customary charges	Employee share listed on member's payment responsibility schedule
Selection of Dentist	Dentist of your choice	Participating HMO Dentist

*Preventive care not subject to deductible.


**Full case, Class I or Class II malocclusion.

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

Life Insurance

In addition to basic life insurance, voluntary life insurance is available to you and your family through IMRF as well as Reliance Insurance Company. Please contact Kim Cowles at **847.463.8127** with any questions.

NSSEO Medical Plans Comparison

	Blue Cross and Blue Shield PPO 1		Blue Cross and Blue Shield PPO 2		Blue Cross and Blue Shield HMO Illinois	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
	\$1,250 / \$2,500	\$2,500 / \$5,000	\$600 / \$1,200		N/A	No coverage
	\$3,750 / \$7,500	\$7,500 / \$15,000	\$2,300 / \$4,600		\$1,500 / \$3,000 (in copays)	N/A
Hospital	80%	60%	80%	70%	100%	No coverage
	80%	60%	80%	70%	100%	No coverage
	80%	60%	80%	70%	100%	No coverage
	80%		80%		\$75 copay (waived if admitted)	
Physician	80%	60%	80%	70%	100%	No coverage
	80%	60%	80%	70%	100%	No coverage
	80%	60%	80%	70%	100% after \$20 copay	No coverage
Other						
X-ray and Lab	80%	60%	80% ¹	70% ¹	100%	
Outpatient Therapy– Speech, occupational or physical therapy	80%	60%	80%	70%	100% (60 visits combined per calendar year)	
Mental/Nervous– Inpatient	80%	60%	80%	70%	100%	
Mental/Nervous - Outpatient Professional Services	80%	60%	80%	70%	100% after \$20 copay	
Substance Abuse– Inpatient	80%	60%	80%	70%	100%	
Substance Abuse - Outpatient Professional Services	80%	60%	80%	70%	100% after \$20 copay	
Wellcare	100%	60%	100%			
Vision	Exam covered at 100% (Frequency: every rolling 12 months).		Exam covered at 100% (Frequency: every rolling 12 months).		Exam covered at 100% Additional eyewear discounts available if provider is contracted with EyeMed	
Prescription Drugs	Prime Therapeutics		Prime Therapeutics		Prime Therapeutics	
Retail Pharmacy 34-day supply	\$10 Generic \$25 Preferred Brand \$45 Non Preferred Brand \$100 Specialty		\$10 Generic \$20 Preferred Brand \$35 Non-Preferred Brand			
Mail Order 90-day supply	\$20 Generic \$50 Preferred Brand \$90 Non Preferred Brand		\$20 Generic \$40 Preferred Brand \$70 Non-Preferred Brand		\$20 Generic \$40 Preferred Brand \$70 Non-Preferred Brand \$50 Injectable	

*Deductible and Out-of-Pocket amounts accumulate based on the benefit period of Jan 1 to Dec 31.

¹Payable at 100% for the first \$200 then drops to 80% for in-network and 70% out-of-network after deductible.

Note: Wellcare is not subject to deductible.

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.

NSSEO complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.

ATENCIÓN (Spanish): si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **847.463.8100 ext 8127**.

UWAGA (Polish): Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer **847.463.8100 ext 8127**.





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 EyeMed (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 onTarget is designed to give you the tools and support you need to make these choices, while rewarding you for your hard work.

Well onTarget features:

Well onTarget Member Wellness Portal

The heart of Well onTarget 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.