



BlueCross BlueShield of Illinois

Experience. Wellness. Everywhere.®

Individual Health Insurance

Plans with a Wide Range of Options
to Fit Your Budget



Apply Today!



Call us toll-free at 1-800-477-2000



Visit us on the web at bcbsil.com



**Contact your authorized independent
Blue Cross and Blue Shield of Illinois agent**



All for You

For over 70 years, Blue Cross and Blue Shield of Illinois has been helping Illinois residents with their health care coverage needs. As the largest health insurer in Illinois, millions of people place their trust in us for our reliability, financial strength and stability.

Our individual and family health insurance plans are specifically designed to help protect you and your loved ones from today's high health care costs. Cover yourself or your family with any of our plans. Here are some of the advantages of coverage from Blue Cross and Blue Shield of Illinois:

- ▶ **Freedom to choose doctors and hospitals**
- ▶ **Choice of deductibles**
- ▶ **80% or 100% coverage for most services**
- ▶ **Prescription drug coverage, including mail order drugs**
- ▶ **100% coverage for preventive care services¹**
- ▶ **Guaranteed renewability**
- ▶ **Coverage while traveling**
- ▶ **Health and Wellness Programs**
 - **24/7 Nurseline**
Call the Nurseline 24/7 for answers to health-related questions
 - **Personal Health Manager**
A resource of online tools to help you make informed health care decisions
 - **BlueExtrasSM Discount Program²**
Includes vision, weight management, fitness club, hearing and complementary medicine discounts
 - **Care Comparison[®] Tool**
Compare hospitals based on performance and services available
 - **Treatment Cost AdvisorTM**
Learn about health and health care expenses

You Get Exceptional Choice From the Largest Network of Contracting Providers

No matter which Blue Cross and Blue Shield of Illinois insurance plan you select, you'll have hundreds of providers to choose from. And with 90% of Illinois doctors and more than 200 hospitals participating in our PPO network, chances are very good that your current health care providers are included.

That's important, because you get the most value from your benefits by using network providers.

Save money by using BlueChoice[®] contracting providers!

Within this large group are providers that participate in our smaller BlueChoice Network. Our agreements with these hospitals, doctors and specialists allow you to save on premiums and on the cost of covered services when you are a member of a BlueChoice plan. You do not need to select a primary care physician, and referrals to specialists are not needed. Simply use our Provider Finder[®] at bcbsil.com to view a list of contracting providers that participate in our plans.

Don't Forget Dental! BlueCare[®] Dental PPO

You'll get dental coverage on day one—with no deductible required—for checkups, cleanings and other preventive services. You can choose any dentist you want, with no referrals needed.

Which Plan Fits You Best?

Blue Cross and Blue Shield of Illinois offers a range of health insurance plans with a wide range of deductibles and benefits for individuals and families. See the Plan Comparison Chart for a side-by-side look at plan benefits. We are confident that you will find a health insurance plan to fit your specific needs and budget.



Our family of plans includes three options: **SelectBlue®**, **BlueValueSM**, **BlueEdgeSM (HSA)**. Each family offers numerous options designed to maximize your flexibility and choice in finding the right health insurance plan for you and your family.

SelectBlue® Family

This is our premier family of health insurance plans offering benefits, convenience and choice, similar to those provided by employer plans.

- A low copayment for doctor office visits (Copayment does not apply to visits for preventive care services.)
- Choice of 100% or 80% coverage level with a wide choice of deductibles, including \$0
- Outpatient emergency care (accident or illness)
- Coverage for hospitalization, surgery and many other services
- Prescription drug coverage

BlueValueSM Family

This family of plans lets you stretch your dollars by offering reliable health care benefits at rates designed to fit your budget.

- An affordable premium without sacrificing benefits
- Choice of 100% or 80% coverage level
- Important features like outpatient prescription drug benefits and optional maternity benefits
- Designed for those who want a high level of benefits and a lower premium

Additional Savings Opportunities

Enroll in an Advantage Plan. Share costs to lower your premium as much as 20%⁴ by choosing

- \$75 copayment on outpatient emergency care
- Higher out-of-pocket maximums

Enroll in a Choice Plan. Use our BlueChoice PPO network to lower your premium as much as 27%.⁴

BlueEdgeSM Family

BlueEdge Individual HSA³ allows you to take charge of your health and be responsible for how you spend your health care dollars.

- Our high-deductible health insurance plans include a broad range of deductibles starting at \$1,200
- Provides reliable coverage with lower premiums
- HSA-eligible individuals enjoy tax advantages
- Choice of two industry-leading provider networks:
 - ✓ Our **PPO Network** - with 90% of Illinois doctors and more than 200 participating hospitals
 - ✓ Or, our **BlueChoice Network** - a smaller network that lets you save on premiums when you use a contracted BlueChoice hospital, doctor or specialist.
 - ✓ With both of our networks, you will not need to select a primary care physician, and referrals to specialists are not needed.

Find the Plan That's Right for You

Choosing the right individual health insurance plan to fit your needs is important to you and your family. Compare our plans to find the coverage you need.

If you're looking for health insurance comparable to that offered by large employers, our SelectBlue family is for you.

The typical SelectBlue buyer is an individual or family who:

- ▶ Prefers fixed doctor visit copayments for non-preventive care services
- ▶ Regularly visits a doctor

If you're budget-conscious, the BlueValue family of plans may be for you.

The typical BlueValue buyer is a cost-conscious individual or family who:

- ▶ Is willing to assume a portion of health care costs in exchange for a lower monthly premium
- ▶ Visits doctors primarily for annual checkups

If you want to control how, when and where your health care dollars are spent, then consider a BlueEdge Individual HSA³.

The typical BlueEdge Individual HSA buyer is an individual or family who:

- ▶ Is actively involved in their health care decisions and finances
- ▶ Seeks additional tax and retirement planning benefits
- ▶ Is willing to fund some of their own health care expenses



BlueEdge HSAs for Individuals and Families

High deductible health plans are even more attractive than ever — because they can be used with a Health Savings Account (HSA).³ An HSA is a tax-advantaged, individually owned savings account that you can access to cover a wide range of qualified medical expenses, when funded. These expenses may generally include your annual deductible and, if applicable, any out-of-pocket cost sharing for covered services.

Here are the Major Benefits of a Health Savings Account (HSA):

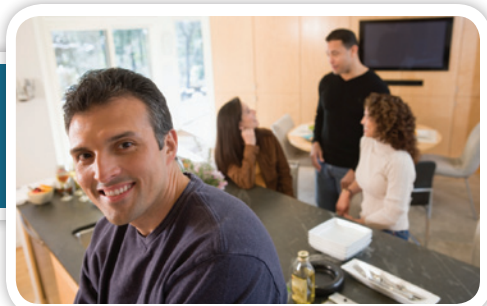
- Control:** The money in an HSA belongs to you. YOU decide how to spend it based on your particular health care needs and budget.
- Flexibility:** You can withdraw your money anytime without a tax penalty as long as you use it for qualified medical expenses.
- Ownership:** You never forfeit your HSA balance. Any unused balance in your account rolls over from one year to the next, providing you protection from potential medical expenses.
- Tax Savings³:** An HSA allows you to put away money that may be fully tax deductible to cover future qualified medical expenses. This means that you can set aside tax-free dollars, subject to certain limits, in an HSA to pay for your qualified medical expenses. Interest that accumulates within your HSA is generally tax free. You typically will pay no taxes or penalties when you use funds from your HSA to pay for qualified medical expenses.

Step 1	Step 2	Step 3
Select and apply for one of the BlueEdge HSA plans.	Research and contact a financial institution to open a Health Savings Account (HSA) after your BlueEdge HSA health plan is activated.	Pay for your out-of-pocket qualified medical expenses out of your Health Savings Account (HSA).
<ul style="list-style-type: none">Choose the deductible and level of coverage that best fit your needs.Choose your PPO network.Apply online or complete and mail in your application.Research banks offering HSAs to use in conjunction with your health plan.	<ul style="list-style-type: none">You may choose any HSA available to work in conjunction with your BlueEdge HSA health plan. Consider the associated fees, investment choices and debit card/checkbook options to determine which HSA is right for you.Fund your HSA as soon as possible in order to maximize your tax advantages for the year.	<ul style="list-style-type: none">Most financial institutions will give you a checkbook and/or debit card so you can pay claims directly out of your HSA. These are convenient ways to pay for prescription drugs. For doctor or hospital visits, we recommend that you ask to be billed later in case adjustments are made to your expenses.While you are not required to open an HSA to be used with your health plan, most customers agree that they get the most out of their plan by taking advantage of the tax benefits, control and flexibility of an HSA.

Plan Comparison Chart

Participating Provider Coverage Shown⁵

	SelectBlue [®]		SelectBlue Advantage SM	BlueChoice SM Select
Individual Deductible	\$0, \$250, \$500, \$1,000, \$2,500 or \$5,000		\$250, \$500, \$1,000, \$1,750, \$2,500 or \$5,000	
Coinsurance (after deductible is met)	Choice of 100% or 80%		80%	
Office Visit Copayment	\$20 ⁶		\$30 ⁶	\$30 ⁶
Individual Out-of-Pocket Expense Limit	\$1,000		\$3,000	
Outpatient Emergency Care (physician and hospital)	100%		80% after you pay \$75 copayment	
Participating Providers	PPO network, including 90% of Illinois doctors plus more than 200 participating hospitals			BlueChoice [®] Network ⁸
Outpatient Prescription Drugs	\$0, \$250 and \$500 Deductible:	w/\$10 copayment for generics. Brand Formulary 35% Brand Non-Formulary 50%	\$250 and \$500 Deductible Plans: w/\$10 copayment for generics. Brand Formulary 35% Brand Non-Formulary 50%	
	\$1,000, \$2,500 and \$5,000 Deductible Plans ONLY:	80% after Deductible	\$1,000, \$1,750, \$2,500 and \$5,000 Deductible Plans ONLY: 80%	
Prescription Drug Utilization Benefit Management Programs	Dispensing Limits: Benefits include coverage limits on certain quantities of medication Specialty Pharmacy Program: To be eligible for maximum benefits, specialty medication must be dispensed at a specialty pharmacy. Member Pay the Difference: When choosing a brand name drug over an available generic drug, the member may be responsible for the difference in cost. Prior Authorization/Step Therapy Requirements: Before receiving coverage for some drugs, a doctor's approval (prior authorization) or trying a less expensive drug first (step therapy) may be required.			
Mental Illness Treatment and Substance Abuse Rehabilitation Treatment				
• Inpatient Hospital Care	60% first 14 days 50% thereafter		60% first 14 days 50% thereafter	
• Inpatient Physician Care	100% or 80%		80%	
• Outpatient Hospital/Physician Care	50%		50%	
Optional Maternity Coverage When elected, maternity benefits will begin 365 days after the effective date of the maternity coverage.	100% or 80%		80%	
Preventive Care	100%		100%	
Outpatient Physician Surgical Services, Hospital Services and Hospital Diagnostic Testing				
Inpatient Physician Medical/Surgical Services and Hospital Services and Diagnostic Testing	100% or 80%		80%	



BlueValue SM	BlueValue Advantage SM	BlueChoice SM Value	BlueEdge SM Individual HSA ³	BlueEdge SM Individual HSA 5000 ³
\$250, \$500, \$1,000, \$2,500 or \$5,000	\$250, \$500, \$1,000, \$1,750, \$2,500 or \$5,000		\$1,200, \$1,750, \$2,600 or \$3,500	\$5,000
Choice of 100% or 80%	80%		Choice of 100% or 80%	100%
None—subject to deductible and coinsurance	None—subject to deductible and coinsurance	None—subject to deductible and coinsurance	Subject to deductible	Subject to deductible
\$1,000	\$3,000		Annual deductible plus \$3,000 ⁷	Annual deductible
100%	80% after you pay \$75 copayment		100% or 80%	100%
PPO network, including 90% of Illinois doctors plus more than 200 participating hospitals		BlueChoice [®] Network ⁸	PPO network, including 90% of Illinois doctors plus more than 200 participating hospitals, or BlueChoice [®] Network ⁸	
80% After deductible			100% or 80% After deductible	100% After deductible

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tions must be obtained through the preferred Specialty Pharmacy Provider.

neric equivalent, you pay your usual share plus the difference in cost.

he medications, your doctor will need to receive authorization from BCBSIL and you may first need to try more clinically appropriate

60% first 14 days 50% thereafter 100% or 80% 50%	60% first 14 days 50% thereafter 80% 50%	60% first 14 days 50% thereafter 100% or 80% 50%	100%
100% or 80%	80%	100% or 80%	100%
100%	100%	100%	100%
100% or 80%	80%	100% or 80%	100%

BlueCare Dental PPO for Individuals and Families

Now is the time to add Dental Coverage

Choose BlueCare Dental PPO and Enjoy:

- ▶ No deductible required for checkups, cleanings and other preventive services
- ▶ A maximum annual benefit of up to \$1,500 per person per year
- ▶ Up to a 20% discount for orthodontic services at participating dentists

BlueCare Dental PPO Eligibility:

- ▶ You must enroll in a Blue Cross and Blue Shield of Illinois health plan to be eligible to enroll in the dental plan. This is your only opportunity to add dental coverage to your medical policy—with no medical questions asked
- ▶ All members on that health plan must be enrolled in BlueCare Dental PPO
- ▶ Once your dental plan is dropped for any reason, you cannot reenroll unless you reenroll in a BCBSIL health plan

Benefits ⁹	Participating Dentists	Non-Participating Dentists ¹⁰
Deductible Deductible applies to Type III services only	\$50 per member per benefit period; \$150 maximum per family	
Calendar Year Maximum Benefit (per individual)	\$1,500 ¹⁰	
Type I Services <ul style="list-style-type: none">• Cleanings• Sealants• Examinations• Space maintainers• X-rays	100% of Maximum Allowance	50% of Maximum Allowance
Type II Services <ul style="list-style-type: none">• Fillings• Simple extractions	80% of Maximum Allowance	50% of Maximum Allowance
Type III Services <ul style="list-style-type: none">• Bridges¹¹• Endodontics• Crowns¹¹• Oral Surgery• Dentures¹¹• Periodontics	50% of Maximum Allowance after deductible	50% of Maximum Allowance after deductible
Orthodontics Not an insured benefit. Up to a 20% discount, up to a maximum savings of \$1,000, is available to you for services received from a participating dentist.	Up to a 20% discount, up to a maximum savings of \$1,000	Not available

Illinois ZIP Codes 600 – 608 Region 1

Member	\$30.55
Member + Spouse	\$61.05
Member + Child(ren)	\$52.35
Family	\$89.55

Illinois ZIP Codes 609 – 629 Region 2

Member	\$28.80
Member + Spouse	\$57.60
Member + Child(ren)	\$49.40
Family	\$84.45

See Why

See Why More Than 7 Million People

Choose Blue Cross and Blue Shield of Illinois

Our Contracting Provider Networks Assure You Freedom of Choice

Blue Cross and Blue Shield of Illinois health insurance plans provide access to the largest PPO network in Illinois, which includes 90% of Illinois doctors and more than 200 participating hospitals. In fact, with our extensive PPO Network, it's likely that your current health care providers participate.

Our BlueChoice Select and BlueChoice Value health insurance plans give you access to our smaller BlueChoice Network. Our agreements with these hospitals, doctors and specialists allow you to save on premiums and the costs of covered services when you are a member of a BlueChoice plan.

Remember, with our BlueEdgeSM Individual HSA plans, now you can choose either our PPO Network or our BlueChoice Network.

Blue Cross and Blue Shield of Illinois Offers You and Eligible Family Members Choices

Blue Cross and Blue Shield of Illinois offers you and eligible family members choices when it comes to your care. Members and eligible dependents have the freedom to visit any physician they choose, with benefits paid at the highest level when the doctor is in the participating provider network. Members do not need to select a primary care physician to coordinate care, and no referrals are needed to see a specialist.

Travel with Confidence — You're Covered Away from Home

As a member of Blue Cross and Blue Shield of Illinois, you'll have access to a program called BlueCard[®] PPO. Contracting providers outside Illinois linked through the BlueCard program allow you to receive benefits for covered services when you travel. Simply present your Blue Cross and Blue Shield of Illinois ID card to a participating provider wherever you are. To find a participating provider while you're away, just call the toll-free number on the back of your card. It's that easy.

No Paperwork in Most Cases — Your Claims Are Handled for You

Present your Blue Cross and Blue Shield of Illinois ID card to your health provider. They will submit a claim, and Blue Cross and Blue Shield of Illinois will send you an Explanation of Benefits, which will also show you how much of your deductible and your out-of-pocket maximum you have met to date as well as your applicable share of costs.



Notes

1 Applies to services provided in-network only.

2 The relationship between these vendors and Blue Cross and Blue Shield of Illinois (BCBSIL) is that of independent contractors. BlueExtras is a discount program available to BCBSIL members. Some of the services offered through BlueExtras may be covered under your health plan. Please refer to your benefit booklet or call the customer service number on the back of your ID card for specific benefit information under your health plan. Use of BlueExtras does not affect your premium, nor do costs of BlueExtras' services or products count toward your calendar year and/or plan deductibles. Discounts are only available through participating vendors. BCBSIL does not guarantee or make any claims or recommendations regarding the services or products offered under BlueExtras. You may want to consult with your physician prior to use of these services and products. BCBSIL reserves the right to discontinue or change this discount program at any time without notice.

3 Please be reminded that Health Savings Accounts (HSA) have tax and legal ramifications. Blue Cross and Blue Shield of Illinois does not provide legal or tax advice, and nothing herein should be construed as legal or tax advice. These materials, and any tax-related statements in them, are not intended or written to be used, and cannot be used or relied on, for the purpose of avoiding tax penalties. Tax-related statements, if any, may have been written in connection with the promotion or marketing of the transaction(s) or matter(s) addressed by these materials. You should seek advice based on your particular circumstances from an independent tax advisor regarding the tax consequences of specific health insurance plans or products.

4 Savings based on a 24-year old male nonsmoker in metro Chicago. All policies are underwritten on an individual basis, and your rate may vary.

5 Benefits reduced when non-participating providers are used. This is a summary of highlights only. Please refer to the Outline of Coverage for each plan for additional details.

6 Not subject to Deductible. Does not apply to out-of-pocket expense limit.

7 The individual out-of-pocket expense plus individual deductible cannot exceed \$5,000.

8 BlueChoice provides you with access to contracting providers.

9 Your dental care benefits are highlighted in this chart. To fully understand all the terms, conditions, limitations and exclusions which apply to your benefits, please read the entire BlueCare Dental PPO Rider.

10 For services received from a non-participating dentist, the member will be responsible for any difference between the dentist's charges and the maximum allowable charge. The maximum allowable charge is based on our network negotiated fees. Further information regarding the maximum allowable charge and network status of dentists is available by calling the toll-free telephone number on the back of your identification card.

11 Benefit Waiting Period – You must be continuously covered under your rider for twelve (12) months before being eligible for the following covered services:
(1) Major Restorative Services; (2) Prosthodontic Services; and (3) Miscellaneous Restorative and Prosthodontic Services.



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