



BENEFITS BULLETIN

FALL, 2016

For all benefits eligible uniformed Police Officers below the rank of Sergeant represented by the Fraternal Order of Police (FOP)



OPEN ENROLLMENT IS COMING SOON

The City is holding the annual medical, dental, vision and FSA enrollment for all eligible employees from October 24 through November 7, 2016. Open enrollment is the time of year when you can:

- Change your medical, dental or vision coverage
- Enroll for coverage, if you don't already have coverage
- Enroll your eligible dependents if they aren't already covered
- Cancel coverage for yourself or your dependents
- Enroll for the first time or re-enroll in a Healthcare Flexible Spending Account

Benefits eligible employees will need to sign for a personalized open enrollment envelope which will be distributed at your work location the end of October.

Recently assigned to another work location? You may need to go back to your old location to pick up your open enrollment envelope.

Recently placed on leave or out on vacation/furlough in October? You must make arrangements to get your packet from your time keeper or benefits liaison.

Open enrollment information will also be posted on www.cityofchicagobenefits.org

Get Ready To Make Enrollment Changes Online

You can enroll online at www.cityofchicagobenefits.org or by phone. To enroll online, you need an eight digit employee number to create an online account. Find your employee ID number in the upper left of your pay stub. (This is not the number you use to swipe in, or the number to access the City's computer system.) Simply add zeroes at the front to make it eight numbers, for example, 5432 becomes 00005432.

If you have never used the online enrollment tool, go to www.cityofchicagobenefits.org and click First Time Logging In and follow the prompts.

If you have already set up an account but forgotten your user name or password: follow the prompts on the website. Get your user name first if you have forgotten both.

To Make Open Enrollment Changes by Phone

Call the Benefits Service Center at 1-877-299-5111 Monday through Friday, 8:00 a.m. to 5:00 p.m. Oct 24-Nov 7.



MEDICAL PLAN CHANGES FOR 2017

HMO Changes: Physician and emergency room co-pays in the Blue Advantage HMO will change beginning January 1, 2017:

HMO CO-PAY CHANGES IN 2017

Primary Care Physician	\$25
Specialist	\$35
Outpatient Mental Health and Substance Abuse Therapy	\$25
Emergency Room	\$150

PPO Changes: The PPO medical plan for uniformed Police Officers below the rank of Sergeant is changing on January 1, 2017 to the medical Blue Choice OPT PPO. This plan will be administered by Blue Cross Blue Shield of Illinois and includes the same network of providers (doctors and hospitals) as the current medical PPO plan. The difference is that the Blue Choice OPT PPO adds a third provider network with enhanced benefit coverage levels. This means the PPO plan for 2017 will have three different network choices called Tiers:

Tier 1 Blue Choice OPT PPO – a narrow network with the lowest out-of-pocket costs

Tier 2 Blue Cross PPO – includes the same “in-network” providers (doctors and hospitals) as the current plan.

Tier 3 Out-of-network – no cost savings and highest out-of-pocket costs.

When a Blue Choice OPT PPO member needs medical care, they have the option of selecting a provider from any Tier.

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Family members can also choose to use physicians and hospitals in different Tiers. The amount of money the PPO member pays out-of-pocket is based on the provider's network Tier. Each Tier has different levels of coverage: the lowest deductible, co-insurance and co-pays are in Tier 1.

In addition to the new three tier network, the 2017 Blue Choice OPT PPO plan, benefit coverage changes include a \$150

emergency room co-pay; new pre-certification requirements, and a network of Transplant and Bariatric Centers of Distinction.

If you are currently enrolled in the City's Blue Cross PPO plan today, you may already be using a Tier 1 provider since all of the doctors and hospitals in Tier 1 are also in the Blue Cross PPO network. To find out which providers are in Tier 1 of the Blue Choice OPT PPO network, call Blue Cross at 1-800-772-6895 or go online at www.bcbsil.com/cityofchicago.

This chart compares how much a PPO member pays out-of-pocket for shoulder surgery in each Tier. As you see, the PPO member's total cost is lowest in Tier 1 because the discount is greater and out-of-pocket costs are lower.

	Tier 1	Tier 2	Tier 3
Network name	Blue Choice OPT	BCBSIL PPO	Out-of-Network
Surgeon's bill amount	\$4,800	\$4,800	\$4,800
BCBSIL discount	\$3,577	\$3,082	No discount
Surgeon's bill minus BCBSIL discount (this is the allowable charge for the bill)	\$1,223	\$1,718	\$4,800
BCBSIL allowed amount for out-of network service	N/A	N/A	\$1,718
Deductible (member pays this once a year)	\$300	\$350	\$1,500
Amount of bill remaining after deductible	\$923	\$1,368	\$218.00
Co-insurance (member's % share of remaining balance)	10%	25%	40%
Member's co-insurance amount	\$92.30	\$342	\$87.20
PPO member's total cost (co-insurance + deductible)	\$392.30	\$692	\$4,669.20*

*Tier 3 billed charges may be higher than the BCBSIL allowed amount. Doctors and hospitals in Tier 3 can bill you for these excess charges.

ENROLLED IN HEALTHCARE FLEXIBLE SPENDING ACCOUNT (FSA)?

Your FSA enrollment does not carry over from year to year. You must re-enroll if you want this benefit for 2017. Enroll online at www.cityofchicagobenefits.org or call the Benefits Service Center at 1-877-299-5111 during the open enrollment period.