



BlueCross BlueShield of Illinois



2025 Enrollment Guide

The City of Chicago

Blue Choice OptionsSM
Blue Advantage HMOSM

Effective Jan. 1, 2025, to Dec. 31, 2025

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

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More Illinois residents get their health care benefits from Blue Cross and Blue Shield of Illinois than from any other health insurer in the state.

Customer Service

Blue Choice Options
800-772-6895

Blue Advantage HMO
800-730-8504

BlueCare Dental HMOSM
BlueCare Dental PPOSM
855-557-5487

Weekdays 8 a.m. - 6 p.m. CT



Blue Choice Options – Tiers I, II & III

Benefits Overview

Blue Choice Options – Broad Access, Personal Choice, Cost Savings

You have access to a plan that is designed for members who want the benefits of a PPO and the flexibility to use a large network when the need arises — all at a price lower than our traditional PPO plan. Blue Choice Options offers the same range of health care benefits and member services as the larger PPO network, but may save you money over other PPO health plans.

You have a choice of providers in the Chicago metropolitan area and Illinois*

Tier I

- Over 92,000 providers
- 233 hospitals
- Pay the lowest out-of-pocket expenses by using a participating provider in the Blue Choice Options network

Tier II

- Over 105,000 providers
- 267 hospitals
- Available in all counties in the state
- Pay additional out-of-pocket costs by choosing a participating provider in the larger PPO network

Tier III

- Out-of-network providers
- Pay the highest out-of-pocket costs by selecting an out-of-network provider

Members who choose the Blue Choice Options plan also get access to BlueCard® when traveling outside the state. This national network of independently contracted providers includes more than 90% of hospitals and 80% of physicians nationwide.

How It All Works: Blue Choice Options – Tiers I, II & III

To receive the highest level of benefits, you and your covered dependents should use the independently contracted doctors and hospitals within the Blue Choice Options network (Tier I). You can receive care from a provider within the larger PPO network (Tier II), but will pay higher out-of-pocket costs. You will pay the highest out-of-pocket cost by choosing an out-of-network provider (Tier III) and may have to pay those fees up front.

* As of June 2024; report compiled by BCBSIL Provider Data Analytics & Reporting

Blue Choice Options – Tiers I, II & III

Benefits Overview

With a PPO-based plan, you have a range of benefits and flexibility to choose your doctor or hospital when you need care. This plan includes an annual deductible that you must satisfy. Qualified medical expenses are applied toward your deductible.


Network access is one of many reasons to choose a PPO-based plan. The networks within BCBSIL include independently contracted hospitals, physicians, therapists, behavioral health professionals and complementary/alternative medicine practitioners.

The tiered benefit plan design helps you control your care.

Medical Care

Your benefits may include coverage for:*

- Physician office visits
- Breast cancer screenings
- Cervical cancer screenings
- Inpatient hospital services
- Muscle manipulation services
- Outpatient hospital services
- Physical, speech and occupational therapies
- Outpatient surgery and diagnostic tests
- Infertility treatment
- Maternity care
- Behavioral health and substance use disorder treatment
- Hospital emergency medical and accident treatment



To find a provider in the Blue Choice Options network, go to bcbsil.com/cityofchicago, click the **Doctors and Hospitals** tab and select **Search for doctors and hospitals in the Blue Choice Options network**.

* Coverage levels vary by health plan, so refer to your plan documents for details.

Blue Choice Options – Tiers I, II & III

Benefits Overview

Preventive Care

Your benefits include preventive care for children and adults, such as physical exams, diagnostic tests and immunizations. Check your group plan for the specific coverage.

Emergency Care

If you need to go to the emergency room of any hospital, your care will be covered subject to your plan's deductible and any applicable copayments or coinsurance. In an emergency, you should seek care from an ER or other similar facility.

Call **911** or other community emergency resources to obtain assistance in life-threatening situations.* Your group plan may require that you, a family member or friend contact BCBSIL if you are admitted to the hospital.

National Coverage

You have nationwide access to contracted providers in networks linked through the BlueCard program when you or your covered dependents live, work or travel anywhere in the country. The national network of independently contracted providers includes more than 80% of all physicians and hospitals in the country. Be sure to use a BlueCard network provider to receive the highest level of benefits.

With the BlueCard program, there are two ways to locate contracted doctors and hospitals:

- Visit bcbsil.com/cityofchicago to find provider names and locations using Provider Finder, an online search tool. Maps and driving directions are also available.
- Call the toll-free number on your ID card.

* For medical emergencies, call **911** or your local emergency services first. Talk to your doctor about any health questions or concerns.



Your health care benefit plan travels with you wherever you go — across the country or around the world.

Blue Choice Options – Tiers I, II & III Practical and Smart

If you have questions about Blue Choice Options, visit bcbsil.com/cityofchicago or call Customer Service at **800-772-6895**.

Blue Choice Options – Tiers I, II & III

Benefits Overview

Reconstructive Surgery Following Mastectomy

Federal and Illinois legislation require group health plans and health insurers to provide coverage for reconstructive surgery following a mastectomy. Specifically, these laws state that health plans that cover mastectomies must also provide coverage in a manner determined in consultation with the attending physician and patient for reconstruction of the breast on which the mastectomy has been performed, surgery and reconstruction of the other breast to produce a symmetrical appearance, and prostheses and treatment of physical complications for all stages of mastectomy, including lymphedema.

Your coverage may also include benefits for baseline and annual mammograms. Check your group plan documents for details.

Dependent Age Eligibility Mandate

Under federal law, your dependents are eligible for health and/or dental coverage up to age 26 and may not be denied coverage due to marital, student or (in some cases) employment status.

Dependents who have previously served as an active or reserve member of the military are eligible to continue their coverage until age 30 if they are unmarried and live within the service area of the plan, as described in your benefit booklet. Please check with your employer for additional details regarding eligibility requirements.

International Coverage

When you or your covered dependents travel outside the United States and need medical assistance services, call **800-810-2583** (toll-free) or **804-673-1177** (collect) for information. Blue Cross and Blue Shield has contracts with doctors and hospitals in more than 190 countries. An assistance coordinator, together with a medical professional, can arrange your doctor's appointment or hospitalization, if necessary.

In most cases, providers that participate in the **Blue Cross Blue Shield Global® Core program** will not require you to pay up front for inpatient care. You are responsible for out-of-pocket expenses, such as a deductible, copayment, coinsurance and services that are not covered by your plan. The doctor or hospital should submit your claim.

You also have coverage at non-contracting hospitals, but you will have to pay the doctor or hospital for care at the time of service, then submit an international claim form with the original bills. Call the toll-free number on your ID card for the address. You can get a claim form from your employer, from Customer Service or online at bcsil.com/cityofchicago.



Blue Advantage HMO

Benefits Overview

Blue Advantage HMO provides the benefits, Customer Service and flexibility you expect from the trusted Blue Cross and Blue Shield name.

When you join Blue Advantage HMO, you choose a contracting medical group within your network.* You will also need to choose a family practitioner, internist or pediatrician from your chosen medical group to serve as your primary care physician. Your PCP provides or coordinates your health care, helps you make informed decisions and, when necessary, refers you to specialists who are usually within your medical group network. Each specialist referral is authorized for a specific number of visits or time frame (up to one year).

In addition to their PCP, female members also have the option of choosing a woman's principal health care provider to provide or coordinate their health care services. The WPHCP and PCP must be affiliated with or employed by your participating medical group. Physicians in the same medical group have a referral arrangement. You do not need a PCP referral to see your WPHCP.

If you have an HMO question, visit bcbsil.com/cityofchicago or call Customer Service at **800-730-8504**.

Blue Advantage HMO network

Blue Advantage HMO gives you access to a broad network of contracting health care providers in Illinois. In fact, your regular doctor may already be part of the network. Tailored for members who prefer a more affordable health care plan, Blue Advantage HMO has premiums that are typically lower than HMO Illinois premiums.

* Contracting medical groups/individual practice associations are independent contractors and are not employees or agents of Blue Cross and Blue Shield of Illinois. Doctors contract independently with the medical groups, which, in turn, contract with BCBSIL. BCBSIL contracts with medical groups to participate in the network, not with individual doctors. Your BCBSIL HMO is your health care benefits plan, not your health care provider.

HMOs offer valuable benefits with the security of predictable copayments.



Benefits Overview

Medical Care

A range of benefits includes coverage for:

- Physician office visits
- Outpatient surgery and diagnostic tests
- Screening for breast, cervical, colon and prostate cancer
- Inpatient hospital services
- Maternity care
- Outpatient hospital services
- Inpatient and outpatient mental health and substance use disorder treatment
- Rehabilitative therapy (such as physical, speech and occupational therapy)
- Inpatient and outpatient treatments

To find a medical group and PCP in the network, go to bcbsil.com/cityofchicago, click **Doctors & Hospitals**, then click the **Search for doctors and hospitals in the HMO network** link and select your other criteria. You can also request a printed directory by calling Customer Service at the number on your member ID card.

Each covered family member can choose a different medical group and PCP from the network. It's also easy to change your PCP or medical group for any reason. To select a different PCP within your existing medical group, just call the medical group. To change your medical group, call Customer Service or use the online form available in Blue Access for Members at bcbsil.com/cityofchicago. See your benefit booklet or call Customer Service for more information.

Preventive Care

Another HMO benefit is coverage for preventive care and wellness services for children and adults, such as routine physicals, screenings, tests and immunizations, including childhood immunizations.

Out-of-Area Coverage

You can access health care benefits when you or your covered dependents travel or temporarily live out of state.

Guest Membership

If you or your covered dependents are out of the BCBSIL service area for at least 90 consecutive days, you can apply to become a guest member of a participating Blue Cross and Blue Shield HMO plan. You must remain a permanent resident within your HMO service area to be eligible for guest membership.

To find out if a guest membership is available at your destination, or to sign up with a Blue Cross and Blue Shield HMO in another state, call the toll-free number on your ID card before leaving home.



Blue Advantage HMO

Benefits Overview

BlueCard

If you or your covered dependents are traveling outside of Illinois for short periods of time (less than 90 consecutive days) and need urgent or emergency care, you can use the BlueCard program.

In an emergency, go directly to the nearest hospital or call **911** (if it is available in your location). Notify your PCP or BCBSIL about your visit within 48 hours, if possible. For more information about your BlueCard benefits, please call the toll-free number on your ID card.

Emergency Care

You have health care coverage for hospital ER care, inpatient hospital care directly resulting from any medical emergency and ER follow-up care. Emergency care benefits cover members who have a medical emergency that may occur at any time.

If possible, try to call your PCP before going to the hospital ER. Your PCP or another doctor in your contracting medical group may be able to treat you in the office, helping you avoid a hospital ER visit that could result in an additional expense to you.

However, if you think your condition is a medical emergency, you should go to the nearest hospital ER or dial **911** immediately. Notify your PCP of any emergency treatment received. Emergency care benefits are limited to the initial emergency treatment unless your PCP orders further treatment. Your PCP must provide or coordinate your follow-up care.

Illinois Dependent Eligibility Mandate

Under federal and Illinois laws, you are allowed to keep your children on your coverage into young adulthood. Specifically, your children are eligible for coverage until they reach age 26 regardless of their residency, employment, student, marital or financial status and, in some cases, other available coverage.

Dependents who have previously served as an active or reserve member of the military are eligible to continue their coverage until age 30 if they are unmarried and live within the service area of the Plan, as described in your benefit booklet.

Please check with your employer for additional details regarding eligibility requirements.

Reconstructive Surgery

Federal and Illinois legislation require that group health plans and health insurers provide coverage for reconstructive surgery following a mastectomy. These laws state that health plans that cover mastectomies must also provide coverage in a manner determined in consultation with the attending physician and patient for reconstruction of the breast on which the mastectomy has been performed, surgery and reconstruction of the other breast to produce a symmetrical appearance, and prostheses and treatment for physical complications for all stages of mastectomy care, including lymphedema.

Blue Advantage HMO covers these procedures and annual mammograms when ordered by a member's PCP or WPHCP, subject to the terms of the member's applicable health care benefit coverage. Visit bcbsil.com/cityofchicago or call Customer Service for more information.

Utilization Management

Blue Advantage HMO supports the belief that the best people to determine what medical care you need are you and your doctor. BCBSIL does not get involved in deciding your course of treatment. Your doctor is encouraged to listen to your concerns and discuss all treatment options with you to help you make informed decisions. Your network medical group may review certain referrals or procedures for appropriateness of care. Your HMO doesn't get involved unless you request an appeal from BCBSIL because you disagree with decisions made by your PCP or medical group.

Substance Use Disorder Treatment

Treatment for substance use disorder (also known as substance abuse) is covered in your benefit plan. Please contact your PCP for a referral to a specialist.

Provider Finder

Looking for a Doctor?

Provider Finder is a convenient way to locate doctors and hospitals in your network. You can filter the search results by provider type, specialty, ZIP code, language and gender. Plus, get door-to-door directions with Google Maps™. It's now faster and simpler to do than ever before!

Find a Doctor Online

Go to bcbsil.com/cityofchicago and click the **Doctors and Hospitals** tab to get started.

Using Provider Finder is an easy, fast and secure way to find:

- Family doctors
- Specialists
- Urgent care centers
- Hospitals
- Pharmacies
- Imaging centers
- Behavioral health professionals
- Labs

Provider Finder offers more ways to search than ever before

The screenshot shows the BlueCross BlueShield of Illinois Provider Finder website. At the top left is the logo and name. On the top right, there is a language dropdown set to 'English' and a 'Log In' button. The main header area is dark blue with the text 'Good Afternoon!' and 'Browse or search to find the care you need.' Below this, there are two dropdown menus: 'Network' set to 'Blue Options or Blue Choice O...' and 'City, state or zip' set to 'Chicago, IL - 60601'. A search bar with the placeholder 'Search for Names and Specialties' and a magnifying glass icon is centered. Below the search bar, there are 'Common Searches' with links for 'Primary Care', 'Urgent Care', 'Behavioral Health', 'Hospital', and 'Durable Medical Equipment'. The bottom section is titled 'Browse by Category' and features four category cards: 'Cost Estimates' (with a document icon), 'Medical Care' (with a group of people icon), 'Urgent Care Center' (with a heart and pulse icon), and 'Behavioral Health' (with a brain icon). Each card includes a brief description of the service.

Blue Access for Members

Your Online Resource

Go Digital

Let us know how you want to communicate with us. Prefer texting? Sign up for claims and benefit information, health tips and other reminders. Prefer email? We'll send info to your favorite email inbox.

Go to bcbsil.com/preferences.

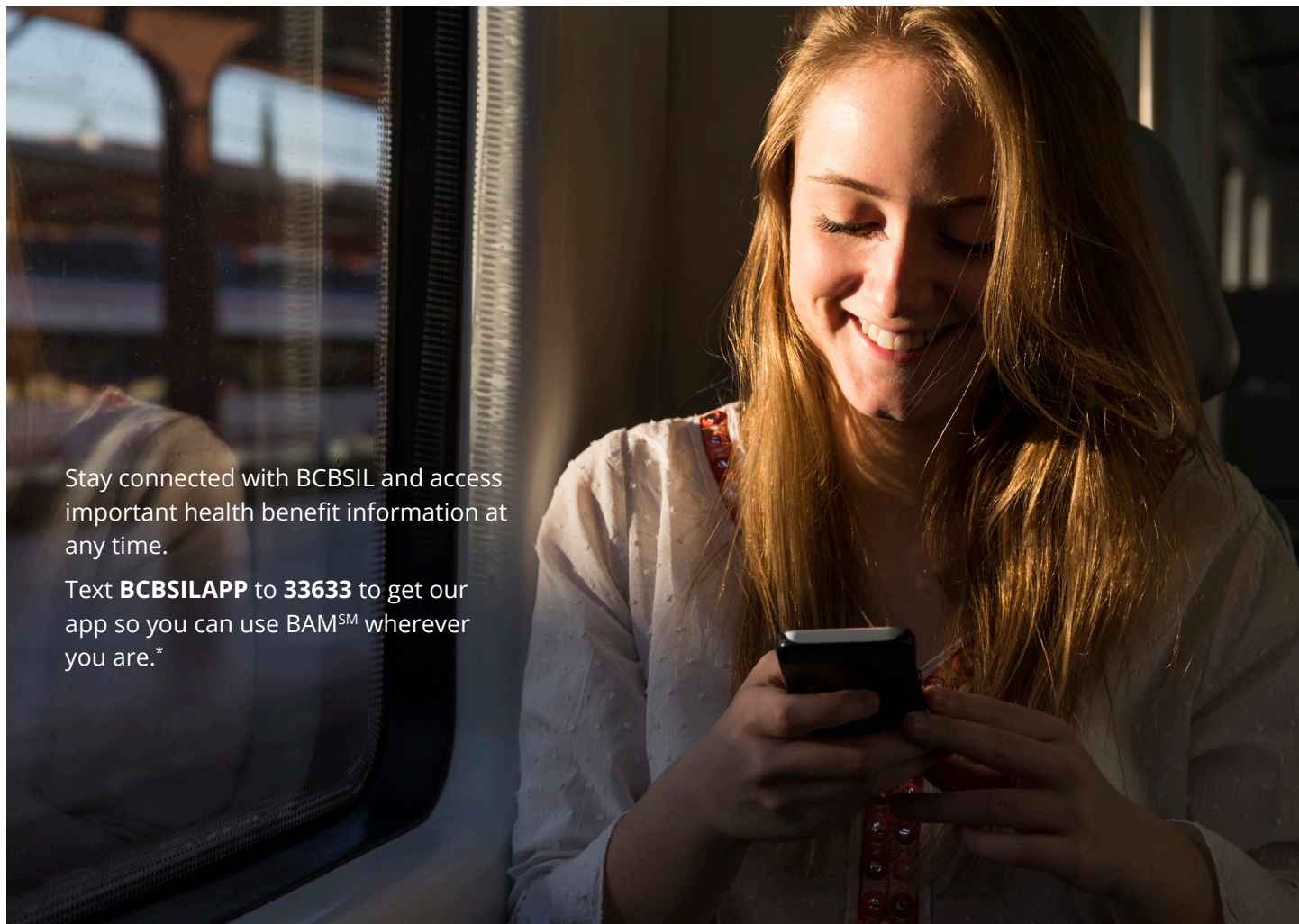
BCBSIL helps you get the most from your health care benefits with Blue Access for Members. You and all covered dependents age 18 and up can create an account. You can:

- Find care – search for in-network doctors, hospitals, pharmacies and other health care providers
- Find Spanish-speaking providers

- Request a new member ID card or get your digital ID card
- Check the status or history of a claim
- View or print Explanation of Benefits statements
- Sign up for text or email alerts

It's Easy to Get Started

- 1 Go to bcbsil.com/cityofchicago.
- 2 Click **Log In** and then **Create Account**.
- 3 Use the information on your member ID card to complete the registration process.



Stay connected with BCBSIL and access important health benefit information at any time.

Text **BCBSILAPP** to **33633** to get our app so you can use BAMSM wherever you are.*

* Message and data rates may apply. Terms, conditions and privacy policy can be found at bcbsil.com/mobile/text-messaging

Make Your Wellness Program Membership Work for You

Experience Wellness Your Way

Well onTarget gives you the tools and resources to create your personal journey — no matter where you may be on your path to wellness.

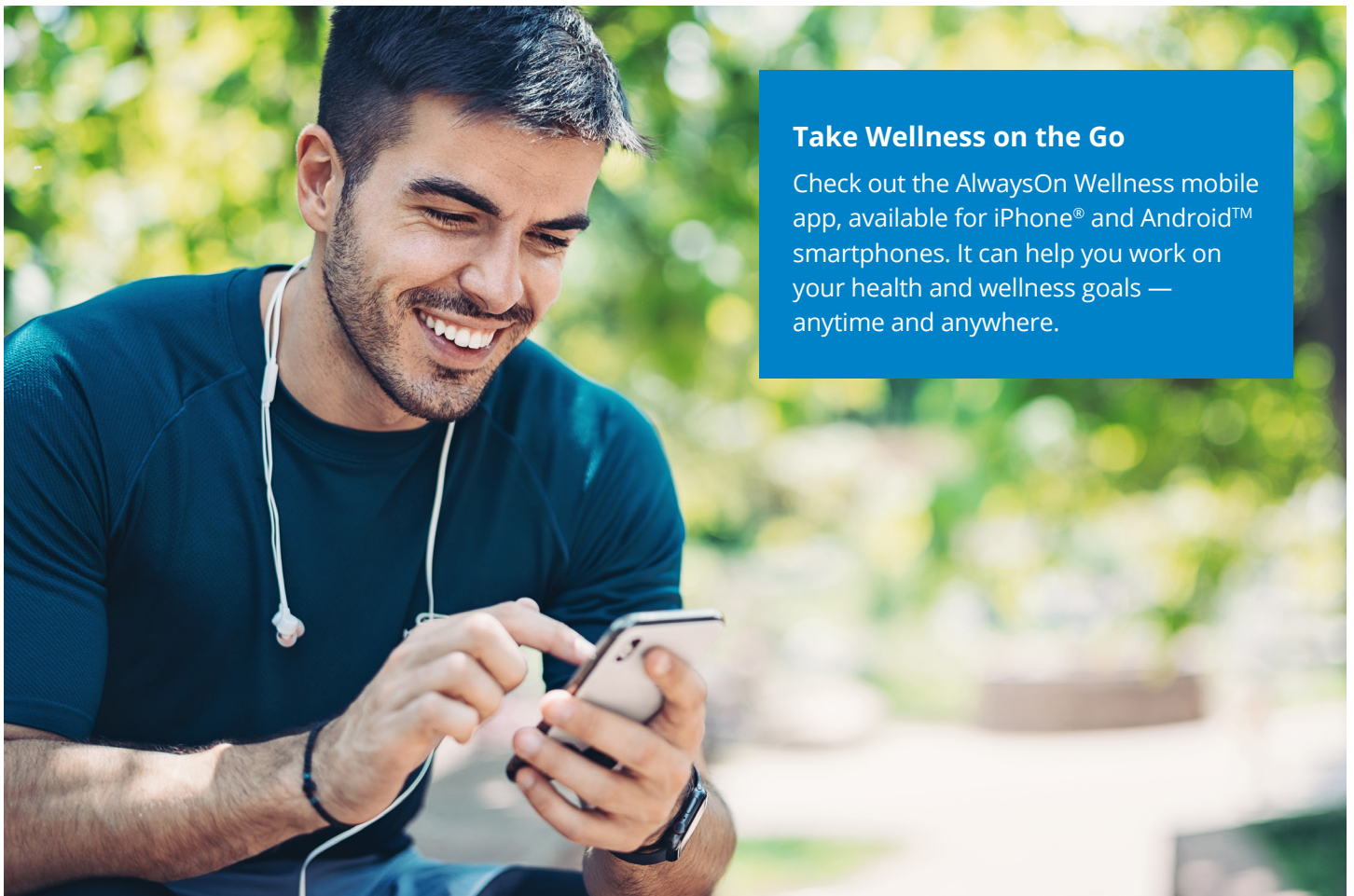
Well onTarget can give you the support you need to make healthy choices — while rewarding you for your hard work.

Member Wellness Portal

The heart of Well onTarget is the member portal, available at wellontarget.com. It links you to a suite of inviting programs and tools. Members can use their BAM credentials to access the Well onTarget website.

- **Health Assessment:** The Health Assessment (HA) presents a series of questions to learn more about you.¹ After you take the HA, you will get a personal and confidential wellness report. The report offers you tips for living your healthiest life. Your answers will help tailor the Well onTarget portal with the programs that may help you reach your goals. If you choose, you can share this report with your health care provider.
- **Self-Management Programs:** These programs let you work at your own pace to reach your health goals. Learn more about nutrition, fitness, losing weight, quitting smoking, managing stress and more. Track your progress as you make your way through each lesson. Reach your milestones and earn Blue Points^{SM, 2}

Start experiencing the wellness portal today. Go to wellontarget.com.



Take Wellness on the Go

Check out the AlwaysOn Wellness mobile app, available for iPhone® and Android™ smartphones. It can help you work on your health and wellness goals — anytime and anywhere.

- **Online Wellness Challenges:** Challenge yourself to meet your wellness goals.
- **Tools and trackers:** These resources can help keep you on course while making wellness fun. Use symptom checkers and health trackers.
- **Fitness Tracking:** Track your fitness activity using popular fitness devices and mobile apps.
- **Blue Points:** This program can help motivate you to maintain a healthy lifestyle. Earn points for participating in wellness activities. You can redeem points in the online shopping mall.³
- **Health and wellness content:** Reader-friendly articles about conditions and medicines.

Fitness Program

Fitness can be easy, fun and affordable. The Fitness Program gives you unlimited access to a nationwide network of more than 10,000 fitness locations.

You can visit locations while you're on vacation or traveling for work.

Other program perks include:

- **No long-term contract:** Membership is month-to-month. Flexible plans from \$19 to \$99 per month and studio classes are available.⁴
- **Blue Points:** Get 2,500 points for joining the Fitness Program. Earn additional points for weekly visits.
- **Convenient payment:** Monthly fees are paid via automatic credit card or bank account withdrawals.

- **Web resources:** You can go online to search for locations and track your visits.
- **Complementary and Alternative Medicine:** Discounts through the Whole Health Living Choices Program, a nationwide network of 40,000 health and wellbeing providers, such as acupuncturists, massage therapists and personal trainers. Register at whlchoices.com.

Join the Fitness Program

Just call the toll-free number **888-762-BLUE (2583)** Monday through Friday, between 7 a.m. and 7 p.m. CT. You may also sign up by logging in to BAM at bcbsil.com/cityofchicago. Select the **Wellness** tab at the top of the page, scroll down to the **Fitness Program** section, click **Learn More** and follow the prompts.

Wellness Program Questions?

Call Well onTarget's Customer Service at **877-806-9380**.



1. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.
2. 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.
3. 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.
4. Taxes apply. Individuals must be at least 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Check your preferred location to see their membership age policy. Underage dependents can log in and join through the primary member's account as an "additional member."

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.

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

Where You Go for Care Matters

Knowing Your Options May Save You Money

Where to Go for Care



What do you do if your clutch player breaks an arm in the big game? Or you slice your finger chopping veggies? Or have stomach cramps after last night's sushi date? Often the choice is clear. If you have signs of a heart attack, it's best to go to the emergency room. But what if you have a sore throat? Or lower back pain?

Knowing where to go can make a big difference in the cost of your care – especially when you use in-network providers.

We make it easy to find independently contracted, in-network providers near you:

- Go to **bcbsil.com** and click **Find Care**
- For personalized search results, go to **bcbsil.com**, click **Log In or Sign Up**, choose **Member Log In or Sign Up** and search in Blue Access for Members
- Call Customer Service at the number on your ID card

Doctor

Is your blood pressure high? Are allergies making you miserable? Can't sleep? Your go-to provider is a good place to start. Some even offer telemedicine. If you need a specialist, your doctor will tell you.

Good for: health exams, shots, cough, sore throat

Average Wait: less than 20 minutes¹

Cost: in network \$ out of network \$\$



Retail Health Clinic

Need a flu shot? Feel queasy? Have an earache or rash? Many grocery stores and pharmacies have on-site medical clinics. Some may even see patients evenings, weekends and holidays.

Good for: headache, stomach ache, sinus pain

Average Wait: variable

Cost: in network \$ out of network \$\$



Urgent Care Center²

Sprain your ankle? Have a monster migraine? Can't stop coughing? Need non-emergency care right away, but your doctor's office isn't open? These centers offer care evenings, weekends and holidays.

Good for: back pain, vomiting, animal bite, asthma

Average Wait: 30 minutes or less³

Cost: in network \$\$ out of network \$\$\$



Hospital ER

Worried you may be having a heart attack? Did you black out after a nasty fall? ER doctors and staff treat serious and life-threatening health issues 24/7. If you receive ER care from an out-of-network provider, you may have to pay more.

Good for: chest pain, bleeding, broken bones

Average Wait: 1 hour or more⁴

Cost: \$\$\$\$



Know the Difference: Freestanding ER vs. Urgent Care Center

Freestanding ERs look a lot like urgent care centers, but may not be affiliated with an in-network hospital. That means you could end up with a hefty bill (or several bills). You might even be sent to a hospital ER for care! Here are ways to spot a freestanding ER:

1. Look for "Emergency" on the building exterior.
2. Check the hours. If it's open 24/7, it's a freestanding ER. Urgent care centers close at night.
3. Confirm it's not connected to a hospital.
4. Ask if it follows the copay, coinsurance and deductible payment model.

If you need emergency care, call 911 or seek help from any doctor or hospital immediately.

Note: Many sites of care now offer telehealth options for your visit. Check with your preferred provider to see if they offer telehealth visits.

1. Vitals Annual Wait Time Report, 2017.

2. The closest urgent care center may not be in your network. Be sure to check Provider Finder® to make sure the center you go to is in-network.

3. Wait Time Trends in Urgent Care and Their Impact on Patient Satisfaction, 2017.

4. National Center for Health Statistics, Centers for Disease Control and Prevention, 2019.

Examples given for each care scenario are not intended as an exhaustive list. You may seek care and be treated for other conditions or illnesses other than those cited as examples.

Information provided in this flier is not intended as medical advice, nor meant to be a substitute for the individual medical judgment of a doctor or other health care professional. Please check with your doctor for individualized advice on the information provided. Coverage may vary depending on your specific benefit plan and use of network providers. For questions, please call the number on your member ID card.



A Discount Program for You



Blue365 is just one more advantage you have as a member of BCBSIL. With this program, you may save money on health and wellness products and services from top retailers that are not covered by insurance. There are no claims to file and no referrals or prior authorizations.

Sign up for Blue365 at blue365deals.com/BCBSIL. Weekly “Featured Deals” will be emailed to you. These deals offer special savings for a short period of time. Here are some of the ongoing deals offered through Blue365:

[EyeMed](#) | [Davis VisionSM](#)

You can save on eye exams, eyeglasses, contact lenses and accessories. You have access to national and regional retail stores and local eye doctors. You may also enjoy possible savings on laser vision correction.

[TruHearing[®]](#) | [Beltone[™]](#) | [Start Hearing](#)

You may get possible savings on hearing tests, evaluations and hearing aids. Discounts may also be available for your immediate family members.

[Dental SolutionsSM](#)

You may get dental savings with Dental Solutions. You may receive a dental discount card that provides access to discounts of up to 50% at more than 70,000 dentists and more than 254,000 locations.*

[Sun Basket](#) | [Nutrisystem[®]](#)

Help reach your weight loss goals with savings from leading programs. You may save on healthy meals, membership fees (where applicable), products and services.

[Fitbit[®]](#)

You can customize your workout routine with Fitbit’s family of trackers and smartwatches that can be employed seamlessly with your lifestyle, your budget and your goals. You’ll get a 20% discount on Fitbit devices, plus free shipping.

[Reebok](#) | [SKECHERS[®]](#)

Reebok, a trusted brand for more than 100 years, makes top athletic equipment for all people, from professional athletes to kids playing soccer. Save 20% on select models. SKECHERS, an award-winning leader in the footwear industry, offers exclusive pricing on select men’s and women’s styles. You can get 30% off, plus free shipping for your online orders.

[InVite[®] Health](#)

InVite Health offers quality vitamins and supplements, educational resources and a team of health care experts for guidance to select the correct product at the best value. Get 50% off the retail price of non-genetically modified microorganism (non-GMO) vitamins and supplements.

Livekick

Livekick is the future of private fitness. Choose from training or yoga over live video with a private coach. Get fit and feel healthier with action-packed 30-minute sessions that you can do from home, your gym or your hotel while traveling. Get a free two-week trial and 20% off a monthly plan on any Live Online Personal Training.

eMindful

Get up to a 50% discount on any of eMindful's live streaming or recorded premium courses. Apply mindfulness to your life including stress reduction, mindful eating, chronic pain management, yoga, Qigong movements and more.

See all the Blue365 deals and learn more at blue365deals.com/BCBSIL.



* Dental Solutions requires a \$9.95 signup and \$6 monthly fee.

The relationship between these vendors and BCBSIL is that of independent contractors. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

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 the health plan you choose to offer. Employees should check their benefit booklet or call the customer service number on 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 may change at any time. 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.

Important Information

Health care coverage is important for everyone.	
We provide free communication aids and services for anyone with a disability or who needs language assistance. We do not discriminate on the basis of race, color, national origin, sex, gender identity, age, sexual orientation, health status or disability.	
To receive language or communication assistance free of charge, please call us at 855-710-6984.	
If you believe we have failed to provide a service, or think we have discriminated in another way, contact us to file a grievance.	
Office of Civil Rights Coordinator 300 E. Randolph St. 35th Floor Chicago, Illinois 60601	Phone: 855-664-7270 (voicemail) TTY/TDD: 855-661-6965 Fax: 855-661-6960
You may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at:	
U.S. Dept. of Health & Human Services 200 Independence Avenue SW Room 509F, HHH Building 1019 Washington, DC 20201	Phone: 800-368-1019 TTY/TDD: 800-537-7697 Complaint Portal: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf Complaint Forms: http://www.hhs.gov/ocr/office/file/index.html

Tener cobertura médica es importante para todos.	
Ofrecemos comunicación y servicios gratuitos para cualquier persona con impedimentos o que requiera asistencia lingüística. No discriminamos por motivos de raza, color, país de origen, sexo, identidad de género, edad, orientación sexual, estado de salud o discapacidad.	
Para recibir asistencia lingüística o comunicativa de manera gratuita, llámenos al 855-710-6984.	
Si cree que no hemos proporcionado un servicio, o si cree que ha sido discriminado de cualquier otra manera, comuníquese con nosotros para presentar una inconformidad.	
Office of Civil Rights Coordinator 300 E. Randolph St. 35th Floor Chicago, Illinois 60601	Teléfono: 855-664-7270 (correo de voz) TTY/TDD: 855-661-6965 Fax: 855-661-6960
Tiene el derecho de presentar una queja por derechos civiles en la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de EE. UU. (U.S. Department of Health and Human Services, Office for Civil Rights) por estos medios:	
U.S. Dept. of Health & Human Services 200 Independence Avenue SW Room 509F, HHH Building 1019 Washington, DC 20201	Teléfono: 800-368-1019 TTY/TDD: 800-537-7697 Portal de quejas: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf Formulario de quejas: http://www.hhs.gov/ocr/office/file/index.html

Know Your Rights and Responsibilities

BCBSIL respects and honors your rights. In return, we ask that you know your responsibilities. To learn more, visit our website at bcbsil.com/member and log in to BAM to view the "Member Rights and Responsibilities." Navigate to **Coverage > Coverage and Benefits**. The link is on the right-hand side. You can also find a summary of your rights and responsibilities in your benefit book. If you don't have your benefit book, please call the toll-free number on your ID card to ask for a copy.

If you, or someone you are helping, have questions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 855-710-6984.

Español Spanish	Si usted o alguien a quien usted está ayudando tiene preguntas, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 855-710-6984.
العربية Arabic	إن كان لديك أو لدى شخص تساعد أسئلة، فلدك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم فوري، اتصل على الرقم 855-710-6984.
繁體中文 Chinese	如果您, 或您正在協助的對象, 對此有疑問, 您有權利免費以您的母語獲得幫助和訊息。洽詢一位翻譯員, 請撥電話 號碼 855-710-6984。
Français French	Si vous, ou quelqu'un que vous êtes en train d'aider, avez des questions, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 855-710-6984.
Deutsch German	Falls Sie oder jemand, dem Sie helfen, Fragen haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 855-710-6984 an.
ગુજરાતી Gujarati	જો તમને અથવા તમે મદદ કરી રહ્યા હોય અથવા કોઈ બીજી વ્યક્તિને એસ.બી.એમ. કાર્યક્રમ બાબતે પ્રશ્નો હોય, તો તમને વિના ખર્ચે, તમારી ભાષામાં મદદ અને માહિતી મેળવવાનો હક છે. દુભાષિયા સાથે વાત કરવા માટે આ નંબર 855-710-6984 પર કોલ કરો.
हिंदी Hindi	यदि आपके, या आप जिसकी सहायता कर रहे हैं उसके, प्रश्न हैं, तो आपको अपनी भाषा में निःशुल्क सहायता और जानकारी प्राप्त करने का अधिकार है। किसी अनुवादक से बात करने के लिए 855-710-6984 पर काल करें।
Italiano Italian	Se tu o qualcuno che stai aiutando avete domande, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare il numero 855-710-6984.
한국어 Korean	만약 귀하 또는 귀하가 돕는 사람이 질문이 있다면 귀하는 무료로 그러한 도움과 정보를 귀하의 언어로 받을 수 있는 권리가 있습니다. 통역사가 필요하시면 855-710-6984 로 전화하십시오.
Diné Navajo	T'áá ni, éí doodago la'da biká anánílwo'ígíí, na'ídílkidgo, ts'ídá bee ná ahóótí'i' t'áá nífk'e níká a'doolwoł dóo bína'ídílkidígíí bee ní h odoonih. Ata'dahalne'ígíí bich'í' hodíílnih kwe'é 855-710-6984.
فارسی Persian	اگر شما، یا کسی که شما به او کمک می کنید، سوالی داشته باشید، حق این را دارید که به زبان خود، به طور رایگان کمک و اطلاعات دریافت نمایید. جهت گفتگو با یک مترجم شفاهی، با شماره 855-710-6984 تماس حاصل نمایید.
Polski Polish	Jeśli Ty lub osoba, której pomagasz, macie jakiegokolwiek pytania, macie prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 855-710-6984.
Русский Russian	Если у вас или человека, которому вы помогаете, возникли вопросы, у вас есть право на бесплатную помощь и информацию, предоставленную на вашем языке. Чтобы связаться с переводчиком, позвоните по телефону 855-710-6984.
Tagalog Tagalog	Kung ikaw, o ang isang taong iyong tinutulungan ay may mga tanong, may karapatan kang makakuha ng tulong at impormasyon sa iyong wika nang walang bayad. Upang makipag-usap sa isang tagasalin-wika, tumawag sa 855-710-6984.
اردو Urdu	اگر آپ کو، یا کسی ایسے فرد کو جس کی آپ مدد کر رہے ہیں، کوئی سوال درپیش ہے تو، آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ مترجم سے بات کرنے کے لیے، 855-710-6984 پر کال کریں۔
Tiếng Việt Vietnamese	Nếu quý vị, hoặc người mà quý vị giúp đỡ, có câu hỏi, thì quý vị có quyền được giúp đỡ và nhận thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, gọi 855-710-6984.



BlueCross BlueShield of Illinois

Built on the site of an abandoned rail line, The 606 is an innovative park and trail system that opened in 2015. Its centerpiece is the elevated, 2.7-milelong Bloomingdale Trail. It is connected to four ground-level neighborhood parks, the Exelon Observatory, public art installations, educational programming and other amenities. The 606 brings together arts, history, design, bike trails, runners, walkers, event spaces, alternative transportation avenues and green, open space. The trail serves more than 80,000 residents from surrounding neighborhoods and visitors from throughout Chicago and beyond.

SOURCE: the606.org

bcbsil.com/cityofchicago

This document is for comparison purposes only and is a brief summary of benefits. For full benefit information, please refer to your contract or certificate (Health Care Benefit Program booklet).

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