

Vision Plan (IPBC VSP Plan A)

Benefit Summary

The Who's Who of Your City of Edwardsville's Benefit Plans

Benefits	VSP Provider Network: VSP Choice		
	Description	Copay	Frequency
WellVision Exam	Focuses on your eyes and overall wellness	\$10	Every 12 months
Prescription Glasses		\$25	See frame and lenses
Frame	<ul style="list-style-type: none"> \$130 allowance for a wide selection of frames \$150 allowance for featured frame brands 20% savings on the amount over your allowance 	Included in Prescription Glasses	Every 24 months
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses, lenticular Polycarbonate lenses for dependent children 	Included in Prescription Glasses	Every 12 months
Lens Enhancements*	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses 	Covered \$95-\$105 \$150-\$175	Every 12 months
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$130 allowance for contacts Contact lens exam (fitting and evaluation) 	Copay does not apply Up to \$60	Every 12 months
Glasses and Sunglasses	<ul style="list-style-type: none"> Extra \$20 to spend on featured frame brands. Go to www.vsp.com/offers for details. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam 		
Extra Savings			
Retinal Screening	No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam		
Laser Vision Correction	Average 15-20% off the regular price or 5% off the promotional price; discounts only available from contracted facilities		

* Average savings of 20%-25% on other lens enhancements

Your Coverage with Out-of-Network Providers

Get the most of your benefits and greater savings with a VSP network doctor. Your coverage with out-of-network providers will be less or you'll receive a lower level of benefits. Visit www.vsp.com for plan details.

- Examup to \$45
- Frameup to \$70
- Single Vision Lensesup to \$30
- Lined Bifocal Lensesup to \$50
- Lined Trifocal Lenses.....up to \$65
- Progressive Lensesup to \$50
- Contactsup to \$105



- **Blue Cross Blue Shield (BCBS)** is the claims administrator for the City of Edwardsville's PPO medical plans.
 - » Contact BCBS for questions concerning membership, plan benefits, status of claim payments, and more. PPO Customer Service Health Advocates are available at **877.245.5681**, 24 hours a day, 358 days of the year (closed for major holidays).
 - » **Health Advocacy Solutions:** Your personal Health Advocate can help you with understanding your benefits, schedule medical appointments, navigate a chronic illness or new diagnosis, prepare for upcoming surgery, get a preauthorization, or save money on your health care. You can also engage via multiple 24/7 communication channels including the BCBSIL mobile app and the My Evive digital member hub – both of which feature live chat and secure messaging with a Health Advocate. The My Evive Hub also offers proactive engagement, mobile-first design connecting you with your other benefit carriers, in addition to your BCBSIL medical plan!
 - » **The Evive Digital Member Hub** will get you access to BCBSIL's website as well as links to other carrier and vendor websites. Their web address is www.myevive.com.
 - » **Well onTarget®** is a program that can give you the support you need to make healthy choices while rewarding you for your hard work. **Blue Points** is a program that rewards you for engaging in healthy activities including filling out a Health Assessment, syncing a fitness device, and more. Join the low cost Fitness Program with access to more than 10,000 fitness locations nationwide. Employees can access Well onTarget through EVIVE at www.myevive.com.
 - » **Member Rewards** is a program that offers cash rewards when a lower cost, high-quality provider is selected. This program allows you to minimize your out-of-pocket costs, and gives you a cash reward. Speak with a Health Advocate for more information.
 - » **MDLIVE:** Call a Health Advocate at **877.245.5681** or download the EVIVE app to access MDLIVE and connect with a board certified doctor 24/7 (Virtual Visit). You will pay your portion of the Virtual Visit based on your medical plan provisions.
- **Express Scripts** manages the prescription drug benefit for the City of Edwardsville. Retail and mail-order prescription services for the medical programs are administered through Express Scripts.
 - » Express Scripts member service representatives can be reached at **800.294.7041**, 24 hours a day, 7 days a week (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.
- **Express Scripts Smart90 Program:** If you take maintenance medications (long-term medications), be sure to obtain a 90-day/3-month supply from Walgreens, CVS or through Express Scripts home

delivery to avoid paying the full cost of the prescription. Call **800.294.7041** or visit www.express-scripts.com/90day for more information.

- **Delta Dental** is the claims administrator of dental benefits for you and your family. Delta Dental offers both telephonic and web access to your personal information to assist you in managing your dental benefits.
 - » **Telephonic:** A Delta Dental Customer Service Representative can be reached at **800.323.1743**, Monday through Thursday from 7:00 a.m. to 7:00 p.m. CST and Friday from 7:00 a.m. to 6:00 p.m. CST or the automated system is available 24 hours a day, seven days a week. Here you can verify eligibility status, review plan benefits, check on the status of a claim, and get claim forms.
 - » **Web:** Employees can access their benefits at www.deltadentalil.com. This website offers you the ability to view claim status and eligibility information, view a summary of your dental benefits, as well as locate a dentist in your area.
- **VSP (Vision Service Plan)** is the vision carrier for City of Edwardsville. To see a list of participating providers near you, go to www.vsp.com. VSP representatives can be reached at **800.877.7195**, Monday through Friday from 7:00 a.m. to 10:00 p.m. CST, Saturday and Sunday from 9:00 a.m. to 9:00 p.m., CST. **Closed:** Major Holidays (Interactive voice response system available). If you're hearing impaired, call **800.428.4833** for assistance.
- **Securian** is the life insurance carrier for your basic employer-paid and supplemental employee-paid life insurance benefits. Securian's Customer Service Representatives are managed through Ochs and can be reached at **800.392.7295**, Monday through Friday from 8:00 a.m. to 4:30 p.m. CST.
- **HSA Bank** is the banking vendor for the City of Edwardsville's Health Savings Account (HSA). Call **800.357.6246** or visit www.hsabank.com for more information.
- **WEX, Inc** is the administrator for City of Edwardsville's healthcare and dependent care Flexible Spending Account (FSA). Contact WEX to speak with a live Customer Service Representative at 866.451.3399, Monday through Friday from 6:00 a.m. to 9:00 p.m. CST, excluding holidays. WEX's website, www.wexinc.com, has information regarding eligible expenses, how to submit claims, and more.
- **NEW! ComPsych:** As you face life's challenges, it's comforting to know you're not alone. The City of Edwardsville understands that it can be difficult to cope with family, work-related, personal or substance abuse problems. That's why we offer an Employee Assistance Program (EAP) at no cost to you. ComPsych will work with you as you search for solutions to personal and workplace issues. The program is private, voluntary, and includes 24/7 toll-free phone access to EAP professionals and counseling services for immediate and dependent family members.
 - » You may contact ComPsych by phone at **833.806.8722**, or on their website at www.guidanceresources.com. When registering online, click the "Register" tab and enter the Organization Web ID: COEEAP to set up your confidential online profile.

Medical Plans

Benefits	Blue Cross Blue Shield of Illinois PPO Plan (PM2442)	Blue Cross Blue Shield of Illinois High Deductible Health Plan with Health Savings Account (PM2443)
Coinsurance		
Network	80%	100%
Non-Network	60%	60%
Deductible		
Network	\$1,000 individual / \$2,000 family	\$5,000 individual / \$10,000 family
Non-Network	\$6,000 individual / \$12,000 family	\$10,000 individual / \$20,000 family
Out-of-Pocket (includes deductible)		
Network	\$3,750 individual / \$7,500 family	\$5,000 individual / \$10,000 family
Non-Network	\$15,000 individual / \$30,000 family	\$15,000 individual / \$30,000 family
Physician Services		
Network	\$30 PCP / \$60 specialist copay	Deductible applies, then plan pays 100%
Non-Network	Deductible applies, then plan pays 60%	Deductible applies, then plan pays 60%
Emergency Room		
Network	Deductible waived, \$300 copay	Deductible applies, then 100%
Non-Network		
Preventive Services		
Network	Deductible waived, plan pays 100%	Deductible waived, plan pays 100%
Non-Network	Deductible applies, then plan pays 60%	Deductible applies, then plan pays 60%
Prescription Drug (administered by Express Scripts)		
30-day supply	\$10 generic / \$35 brand name formulary / \$60 non-formulary	After deductible: \$10 generic / \$35 brand name formulary / \$60 non-formulary
90-day supply	\$25 generic / \$88 brand name formulary / \$150 non-formulary	After deductible: \$25 generic / \$88 brand name formulary / \$150 non-formulary
Prescription Out-of-Pocket (network)	\$1,950 individual / \$3,900 family	After deductible: no max

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.



Dental Plan

Benefits	Delta Dental PPO	
	Delta Dental PPO Network* and Delta Dental Premier Network**	Non-Network***
Deductible	\$50 single / \$150 family	
Annual Maximum	\$1,500 per covered person	
Lifetime Orthodontic Maximum	\$1,500 per covered child (up to age 19)	
Preventive	Deductible waived, then plan pays 100%	Deductible waived, then plan pays 100%
Basic	Deductible applies, then plan pays 80%	Deductible applies, then plan pays 80%
Major	Deductible applies, then plan pays 50%	Deductible applies, then plan pays 50%
Orthodontic Services	Deductible waived, then plan pays 50%	Deductible waived, then plan pays 50%

*Delta Dental PPO dentists accept payment based on the lesser of the submitted fee or the PPO fee schedule, which is established at a level that typically delivers a 15 - 40% discount off of average billed charges nationally.

**Delta Dental Premier dentists accept payment based on the lesser of the submitted fee or Delta Dental's maximum plan allowance (MPA), which is established at a level that typically delivers a 5 - 15% discount off of average billed charges nationally.

***Non-network (non-Delta Dental PPO/non-Delta Dental Premier) dentists are reimbursed at the 90th MDR.

Delta Dental PPO and Premier dentists cannot balance bill the enrollee for the difference between Delta Dental's allowed fee and the dentist's submitted charge.

