Sangamon County Open Enrollment & Benefits Presentation 2025

BPA TROXELL BENEFITS

Open Enrollment 2025

- Plan changes discussed will go into effect December 1st, 2025, HOWEVER employee premiums will change January 1st, 2026

- Open Enrollment is the ***one and only period of the year*** where employees can freely make changes to their enrollment elections.
  - During this time, a member can add or drop coverage for themselves and/or dependents.
  - Open Enrollment will run from November 1st – 30th
  - After November 30th, a member would have ***30 days after a Qualifying Event*** to make enrollment changes.
    - Examples of a Qualifying Event are marriage, divorce, birth of a child, death and loss of occupation

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Insurance Changes Effective 12-1-25

The Sangamon County Board of Managers has acted diligently over the years in assessing the most affordable insurance while maintaining the best possible coverage. To accomplish this, occasionally this means that different health insurance plan options must be considered.

BCBSIL maintains a proprietary PPO network that not only includes Memorial, HSHS, Springfield Clinic and SIU, but also larger regional providers including, but not limited to, Barnes Jewish and Washington University in St. Louis, Northwestern and University of Chicago in Chicago.

To mitigate cost increases and continue to maintain a satisfactory health insurance plan, effective December 1st, 2025, Sangamon County's health plan will include a new 3-tiered network design through BCBSIL called Blue Choice Options (BCO)

The current plan will continue to be Sangamon County's insurance option through the month of November.

BlueCross BlueShield of Illinois



BlueCross BlueShield of Illinois (BCBSIL)



Blue Choice Options Plan (BCO)



Online Provider Search:
my.providerfinderonline.com

(BCO)



For additional confirmation, check with your provider on their participation with the BCBSIL PPO or BCE network.

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Health Insurance

Plan option for 2025-2026:

- Blue Choice Options (BCO)

The plan has a calendar year deductible and out-of-pocket max (OOPM), meaning deductibles and OOPM will reset on January 1st.

- If you incur significant claims and have reached your deductible or out-of-pocket-maximum (OOPM), it can be beneficial to receive other necessary services in that same calendar year as your costs will be considerably reduced when the deductible or OOPM is met

The plan is ACA compliant which means:

- Cannot exclude pre-existing conditions (although additional authorizations can be required for some services)
- Include one, 100% covered, annual preventive exam. Women can also receive an additional preventive, gynecological exam 100% covered. It is important to note ONLY preventive services are covered and there can also be additional expenses for other diagnostic testing and/or treatment.

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Health Insurance Terms 101

- **Copay**: Copays are a fixed cost that is negotiated by the insurance company. Copays are lower than the true cost of a service and help with budgeting expenses. Traditionally, copays will be assessed without having to meet a deductible.

- **Deductible**: For services that do not have a copay attached, members will need to pay the full cost of the service until the individual or family (if applicable) level is met. Copays do not count towards the deductible. Usually these are more intensive or invasive services.

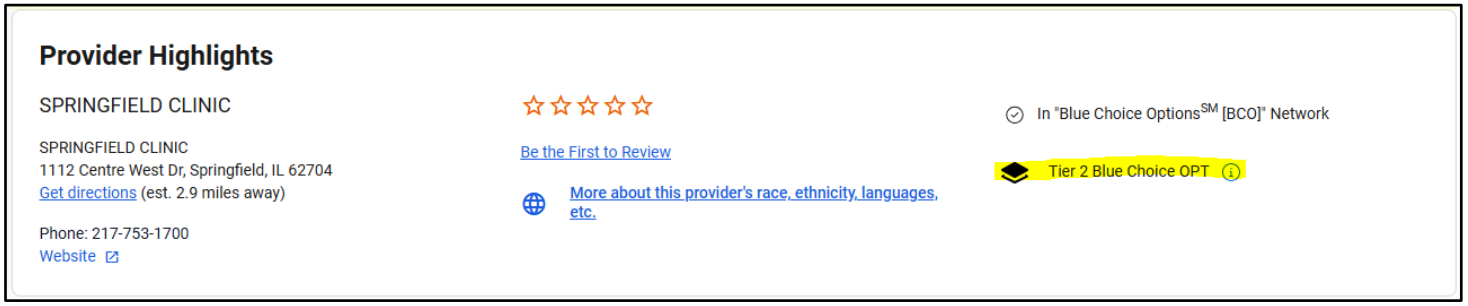
- **Coinsurance**: Once the deductible is met, the health plan will start paying a percentage of the medical costs. With most plans the greater percentage is covered by the insurance company, and the lower percentage is paid by the member.

- **Out-of-Pocket-Maximum**: After the deductible level has been attained and coinsurance starts, the OOPM tracks the total cost of money spent by the member. Once the total spent between deductible, the member's share of coinsurance and copays reaches the OOPM level, the insurance plan will pay 100% of the remaining costs.

Health Insurance

Blue Choice Options (BCO)

- BCO plans use a tiered network approach to health insurance, whereby employees can pay less money by utilizing providers in Tier 1. Tier 1 is the Blue Choice Preferred (BCE) network and Tier 2 is broad BCBSIL PPO network. Tier 3 would be considered “out-of-network”.
- In the greater Springfield area; Memorial, HSHS, SIU and OCI are in Tier 1. Springfield Clinic is in Tier 2.



- The BCO plan will generally follow the same structure as the current PPO option; however, there will be two sets of benefit designs based on whether a member uses Tier 1 or Tier 2 providers.

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Health Insurance

Blue Choice Options (BCO)

	Tier 1	Tier 2
Individual Deductible	$750	$1,000
Family Deductible	$1,500	$2,000
Individual Out-of-Pocket Maximum	$2,500	$3,000
Family Out-of-Pocket Maximum	$5,000	$6,500
Coinsurance	80% After Deductible	70% After Deductible
Primary Care Visit	$20 copay	$30 copay
Specialist Visit	$20 copay	$30 copay
Testing: Diagnostic Blood Work, X-Ray, MRI, CT	No Charge	70% After Deductible
Inpatient Facility and Outpatient Surgery	80% After Deductible	70% After Deductible

**The BCO tiered network does not affect prescriptions. Rx will still follow the same 4-tier drug list as the PPO plan*

Annual, preventive exams and labs will be rendered at a Tier 1 or Tier 2 provider at 100%, no copay

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As a BlueCross BlueShield of IL member, you have access to a secure, online resource tool that can help make your life easier. The BCBSIL Blue Access for Members portal offers benefit information, health and wellness resources, and more to help you live a healthy lifestyle. Through Member Services you can….

- Access ID cards
- Find doctors, health care providers, pharmacies and hospital
- Track deductible and out-of-pocket expenses
- Access Explanation of Benefits (EOB)
- Learn about a variety of health and wellness topics

mybam.bcbsil.com

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FAQ

Q. What is the Blue Choice Options (BCO) network product?

Blue Choice Options (BCO) is a three-tiered network product. BCO uses the Blue Choice Options network as the top tier, the broad PPO network as the second tier and out-of-network (OON) as the third tier.

Q. When will my Blue Access for Members (BAM) account automatically reflect the BCO network?

After 12-1-2025

Q. How do the tiers work?

- Tier 1 — if the member elects to use a provider in the Blue Choice Options network (a smaller, select network), then they pay the least out-of-pocket expenses compared to tiers 2 and 3.
- Tier 2 — the member pays additional out-of-pocket costs by choosing a participating provider in the larger Broad PPO network of providers.
- Tier 3 — the member pays the highest out-of-pocket cost by selecting an out-of-network provider.

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FAQ

Q. How will benefits be paid when using an out-of-state-provider?

- If the member receives care out-of-state through Blue Card, claims will be adjudicated at the tier 1 benefit level.
  - Example: subscriber or member is on vacation in Florida and sees a Blue Card PPO physician for a medical condition. The claim is paid at the tier 1 benefit level using the standard reimbursement rate provided by the out of state BCBS plan.
  - Example: subscriber's dependent attends college in Ann Arbor, Michigan. The dependent sees a Blue Card PPO physician for a medical condition. The claim is paid at the tier 1 benefit level using the standard reimbursement rate provided by the out of state BCBS plan.
- If a member receives care out of state by a provider that is OON, then claims would apply to tier 3 (OON).
- Caveat for border states – if a member visits a provider in a border state that has a contract with BCBSIL and the claim is submitted to BCBSIL, that claim will be applied to tier 2. If a member visits a provider in a border state that has a contract with BCBSIL and the claim is submitted to BCBS of the border state, that claim will be applied to tier 1 under Blue Card.
  - Example: employer's office is located in Chicago. The subscriber and members live in Indiana. The subscriber's physician is located in Indiana and has a PPO contract with BCBSIL. The provider submits the claims to BCBSIL and the claims are paid according to the IL PPO contract rate at the tier 2 benefit level.
  - Example: employer's office is located in Chicago. The subscriber and members live in Indiana. The subscriber's physician is located in Indiana and has a PPO contract with BCBSIL. The provider submits the claims to BCBSIN and the claims are paid according to Blue Card rules at the tier 1 benefit level.

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FAQ

Q. Do I need to take any action, even if I want to keep my plans the same?

Yes, it is beneficial to take time to review the features of the new health insurance plan and confirm your elections are still accurate.

Q. Will I receive new insurance cards?

Yes, if you enroll in medical coverage, you will receive a new card. The employee's ID# will be the same for dependents.

Efforts will be made to have the cards in hand by December 1st. You can also access digital cards through the Blue Access for Members (BAM) website.

Q. Will I receive credit for the deductible I've already paid prior to December 1st?

Yes, you will receive credit for any deductible you've already paid. However, after December 1st if you utilize a Tier 2 provider, you could owe additional money even if you had previously met the deductible or out-of-pocket-maximum.

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FAQ

Q. How do I search for BCBSIL in-network providers?

A. It is recommended that employees use their Blue Access for Members portal. To search for providers as a "guest", follow these steps:

1. Go to **www.bcbsil.com**
2. Click on Find Care at the top of the page, then select Find a Medical Doctor or Hospital
3. Scroll down and click on Search for Doctors as a Guest
4. Confirm your location and plan (or update)
5. Choose the Blue Choice Options (BCO) plan by using the drop-down menu from Plans Link.
6. Search for providers by specialty, medical system affiliation name etc.
7. Providers will populate and will show "In-Network Provider" or BCO "Tier"

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BlueCross BlueShield Of Illinois Contact Information

www.bcbsil.com
Health Insurance Customer Service: 1-877-860-2837

mybam.bcbsil.com

BlueCross BlueShield of Illinois

Contact Information

Sangamon County

Tricia Hoskins
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BPA TROXELL Insurance

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Memorial Choice

- **What is Memorial Choice?**
  - Memorial Choice is a product that provides benefits above and beyond your BCBSIL health insurance. These benefits are available to employees and dependents enrolled in the insurance plan provided by Sangamon County.
- **How do I access my benefits?**
  - If you are enrolled in the health plan you will receive these benefits at no cost to you. You need to present your Memorial Choice member card and your insurance card when receiving services at any MHS location to receive the additional benefits.
- **Does Memorial Choice replace my current health insurance?**
  - No, Memorial Choice provides additional benefits that can help you live a healthier life while lowering your healthcare expenses.

Memorial Choice Benefits

Memorial Choice benefits include:

- $0 copay plus free select primary care, pediatric and preventive care services with Memorial Care providers at all their Memorial Care locations
- $0 charge on select CPT codes including select labs, imaging and testing (the CPT code list is available through your benefits coordinator)
- $0 urgent care copay plus free select urgent care services at Memorial Health System Urgent Care clinics
- $0 copay for telehealth/virtual visits done through a Memorial Health System provider available 8am-8pm daily
- Nurse Concierge services that include same day appointment scheduling, select prescription refills, referrals and more
- Care Coordination for employees with more complex medical needs

Memorial Choice Employee Assistance Program (EAP)

- Sangamon County provides a robust **Employee Assistance Program** to all employees regardless of your enrollment status in the health plan. These benefits are available to all employees and their spouses and dependents up to age 26.
- Benefits of the EAP include:
  - Six face-to-face counseling sessions per year, per unique concern at $0 (including anxiety, depression, trauma, martial issues and more)
  - Telephone intervention or counseling in crisis situations
  - Screening and assessment for issues like trauma, anxiety, depression, substance abuse, marital issues, child behavior and more
  - A website dedicated to the EAP program that provides on-demand videos and presentations on workplace or personal issues including work-life balance, legal troubles, advanced care planning, stress management, self-care in the workplace and more

Memorial Choice

Memorial Care Locations

- Beardstown
- Chatham (with urgent care)
- Jacksonville (urgent care coming Feb. 2023)
- Lincoln
- Petersburg

Springfield

- Fourth & Carpenter (drive-thru lab only)
- Koke Mill (with urgent care)
- North Dirksen (with urgent care)
- South Sixth (with urgent care & drive-thru lab)

Virtual Care

Get fast online care at **MyMemorialApp.com**.

Memorial Choice Nurse Concierge Services

Call **217-862-0669 (0NOW)** to speak with the nurse concierge.

Monday–Friday: 7 a.m.–7 p.m. | Saturday: 8 a.m.–5 p.m.

Question about your bill?

Call **217-862-0080** to speak with a dedicated billing team member.

memorialchoice.personaladvantage.com

For General Questions:

Shannon Wilmarth

swilmarth@troxellins.com

OR

Download the My Memorial App

Employee Assistance Program (EAP)

217-788-9345

OR

Register and Login to the Memorial Choice Portal