

2025 Benefits Overview



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Medical Plans – BCBS of IL

Blue PPO Plan

In-Network Benefits

Deductible

\$750 Individual/\$1,500 Family

\$20 Doctor Visit Co-Pay

\$40 Specialist Doctor Visit Co-Pay

Annual Physical Exam covered at
100%

Out-of-Pocket Maximum

\$2,000 Individual / \$4,000 Family

Co-Insurance Levels

80% benefit level

Blue Choice Select PPO Plan



In-Network Benefits (same as Blue PPO)

Deductible

\$750 Individual/\$1,500 Family

\$20 Doctor Visit Co-Pay

\$40 Specialist Doctor Visit Co-Pay

Annual Physical Exam covered at 100%

Out-of-Pocket Maximum

\$2,000 Individual / \$4,000 Family

Co-Insurance Levels

80% benefit level

Illinois residents only

HDHP - HSA Plan (Blue PPO Network)



In-Network Cost

\$1,650 Individual/ **\$3,300** Family Deductible

100% coverage for Preventive Care

All other expenses subject to deductible/HSA

Lake Forest College contribution to your HSA:

\$600 single / \$1000 Single+Sp/Ch / \$1,300 family

Co-Insurance Level- 80% in-network

Out-of-Pocket Maximum

\$2,750 Individual / \$5,500 Family

College HSA contribution reduces this maximum OOP

80% Rx coverage above deductible



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How to Find a PPO Provider



From your computer or mobile device, log on to **bcbsil.com** and click on **Find Care**®



Call the Customer Service number on your ID card **877-485-3035**

Call BlueCard® Access — available 24/7 **800-810-2583**



Speak with your provider's office



Blue PPO – Blue Choice Select PPO - Providers



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Finding a Medical Provider:

Two network options available:

1. Participating Provider Organization [PPO]

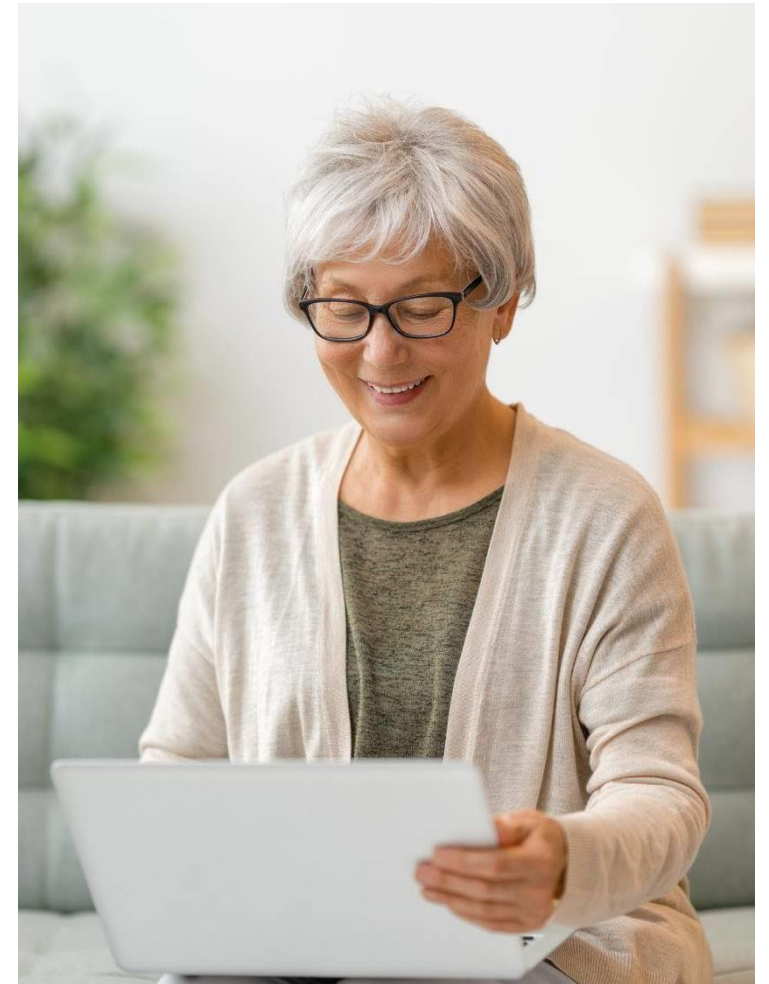
- \$750 PPO Plan

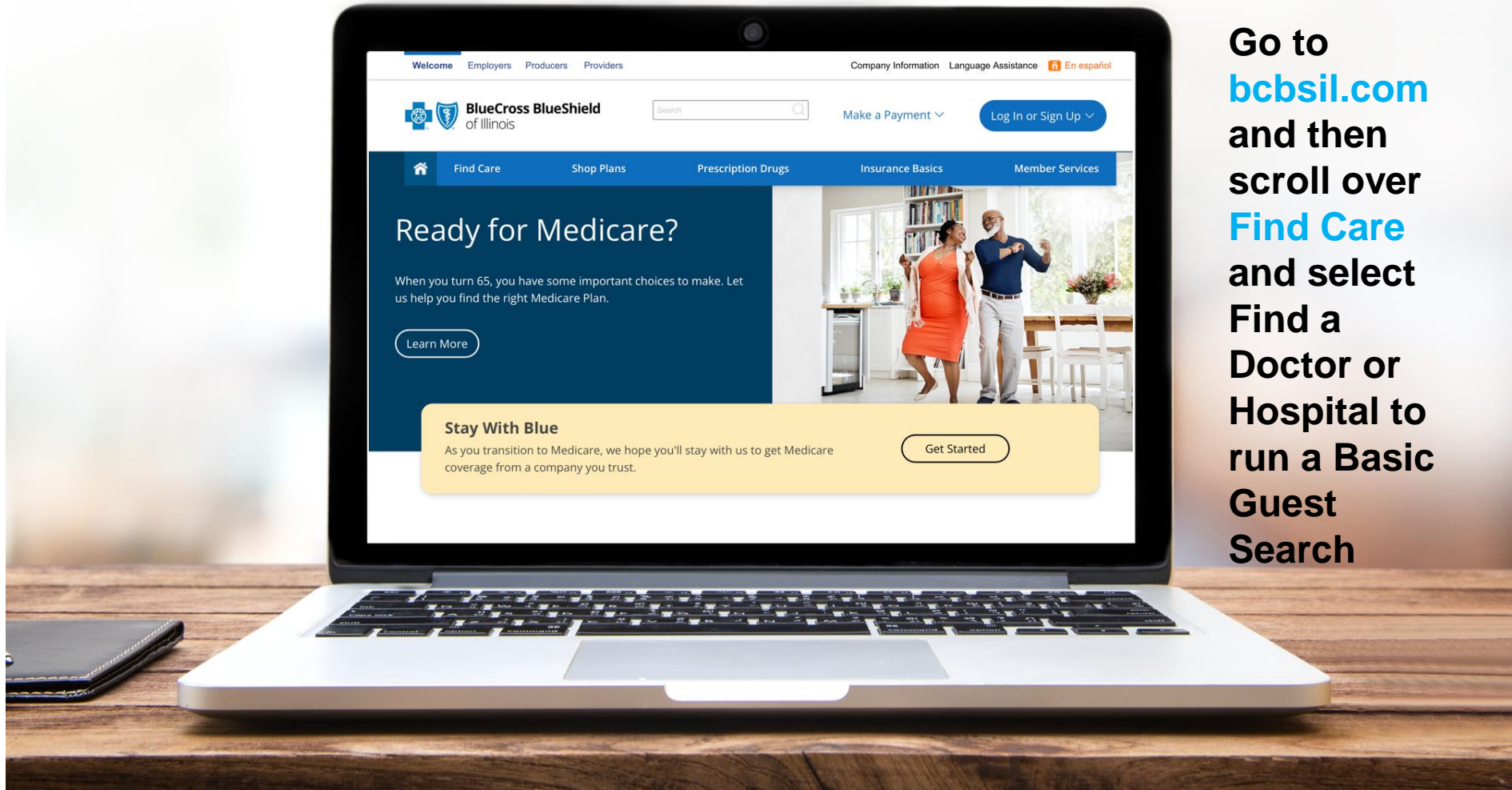
- HSA plan

2. Blue Choice Select PPO [BCS]

(Illinois residents only)

- \$750 BlueChoice PPO Plan





Go to bcbsil.com and then scroll over **Find Care** and select **Find a Doctor or Hospital to run a Basic Guest Search**

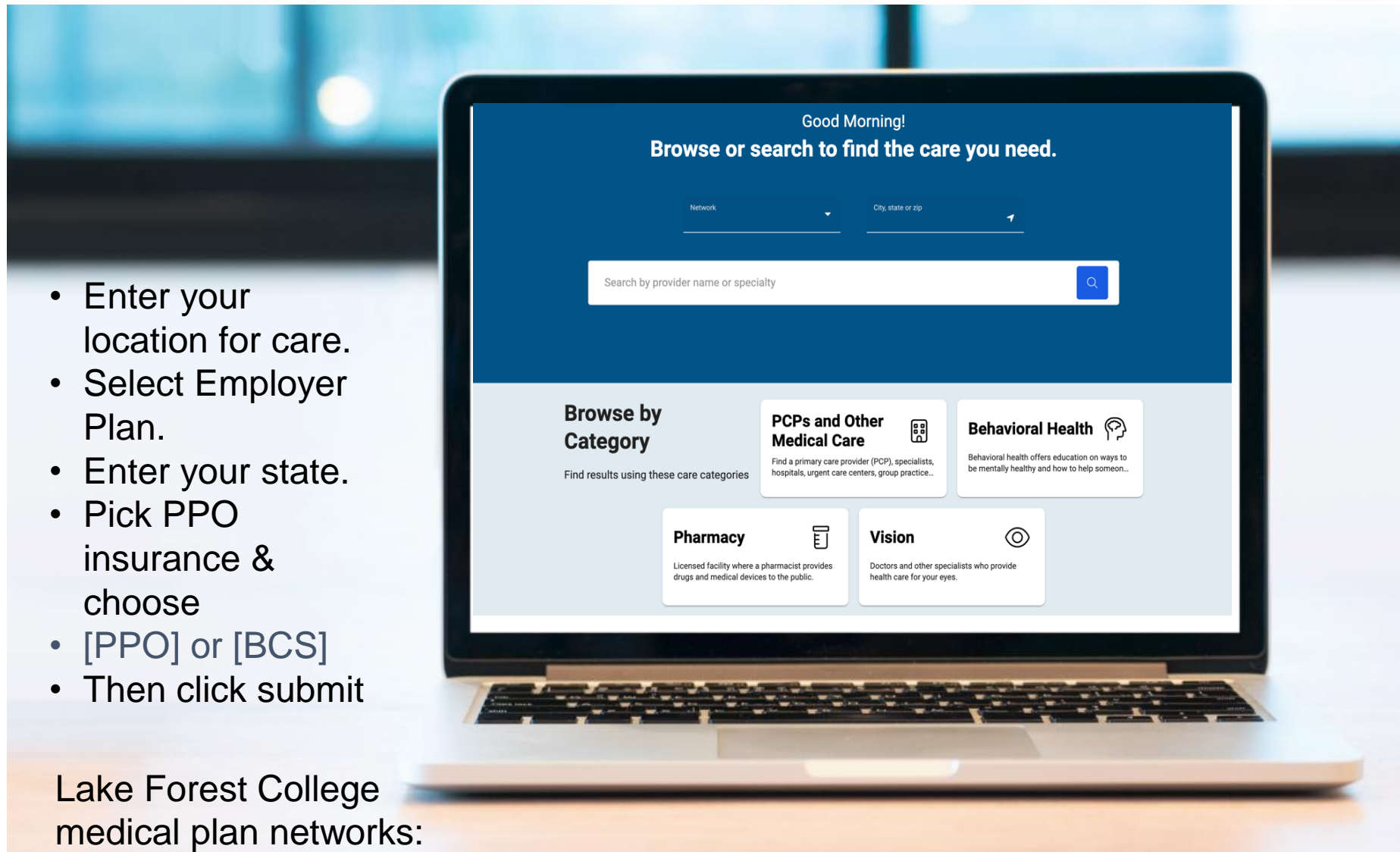


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- Enter your location for care.
- Select Employer Plan.
- Enter your state.
- Pick PPO insurance & choose
- [PPO] or [BCS]
- Then click submit

Lake Forest College
medical plan networks:
Participating Provider
Organization [PPO]
Blue Choice Select [BCS]



BCBS of IL – Benefit Value Advisors (BVA)



What Can a BVA Do For You?

Make it easier to use your health plan; while helping you save time and money

They can help you:

- Find a doctor or facility
- Get cost estimates for procedures and services
- Schedule appointments
- Set up prior authorizations (if needed)
- Available 24 hours a day, 7 days a week* via phone or live chat to help you.



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Your ID Cards

All employees will receive new ID cards.

You should receive your new ID cards in **late December**.



- Two ID cards are provided for family coverage
- You can call Customer Service or log on to Blue Access for Members to order additional or replacement ID cards.



Prescription Drug Benefit

Retail Pharmacy Network

- Major pharmacy chains
- Pharmacy search available online

Home Delivery (Mail Order)

- Up to a 90-day supply
- Convenience and savings

If FDA-approved dosing regimens exceed a 30-day supply limit, members may get a specialty drug in a greater supply amount, per benefits allowed. Cost share is based on the actual day supply dispensed.



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Getting Started

BlueCross BlueShield of Illinois

Search

Make a Payment

Log In or Sign Up

Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

Ready for Medicare?

When you turn 65, you have some important choices to make. Let us help you find the right Medicare Plan.

Learn More

Stay With Blue

As you transition to Medicare, we hope you'll stay with us to get Medicare coverage from a company you trust.

Get Started

Find prescription drug information by visiting bcbsil.com

BlueCross BlueShield of Illinois

Search

Make a Payment

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Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

- Pharmacy and Prescription Plans**
 - Pharmacy Prescription Plan Information
 - Additional Resources
 - QHP 2023 Benefit Changes
 - QHP 2024 Benefit Changes
- Drug Lists**
 - Prescription Drug Lists
 - Search Drug Lists
 - Dispensing Limits
 - Generic Drugs
 - Previous Formulary Updates
- Pharmacy**
 - Find a Pharmacy
 - HMO Pharmacy Programs
 - Non-HMO Pharmacy Programs



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Find The Drug List For Your Plan



[Make a Payment](#) ▾

[Log In or Sign Up](#) ▾

- [Find Care](#)
- [Shop Plans](#)
- [Prescription Drugs](#)
- [Insurance Basics](#)
- [Member Services](#)

Prescription Drug Lists

A drug list is a list of drugs available to Blue Cross and Blue Shield of Illinois members. How much you pay out-of-pocket for prescription drugs is determined by whether your medication is on the list. These prescription drug lists have different levels of coverage, which are called "tiers." Generally, if you choose a drug that is a lower tier, your out-of-pocket costs for a prescription drug will be less. Your doctor should consult the Drug List when prescribing drugs for you. This may help lower your out-of-pocket costs.

If you are a BCBSIL member, log in to your [Blue Access for Members](#)SM account to check your drug list and learn more about your prescription drug benefits. Be sure to review your benefit materials for details. If you have any questions about your prescription drug benefits, call the number on your member ID card.

Please note: Health plans may administer medical and pharmacy coverage separately for select drugs. Some drugs are covered under your medical plan instead of your pharmacy benefits. These can include drugs that must be given to you by a health care provider. These drugs are often given to you in a hospital, doctor's office or health care setting. Examples of these drugs are contraceptive implants and chemo infusion. If you are taking or prescribed a drug that is not on your plan's Drug List, call the number on your member ID card to see if the drug may be covered by your medical plan.

- Prescription Drug Lists for Metallic Individual Plans +
- Prescription Drug Lists for Metallic Individual Plans +
- Prescription Drug Lists for Grandfathered & Transitional Individual Plans +
- Prescription Drug Lists for Employer-offered Plans: Large Group (51 or more) +
- Prescription Drug Lists for Employer-offered Metallic Plans: Small Group (1-50) +
- Prescription Drug Lists for Employer-offered Non-Metallic Plans: Small Group (1-50) +

You may also log in to your [Blue Access for Members](#)SM account to check your drug list and learn more about your prescription drug benefits.

Lake Forest College plans are all linked to the Performance Select drug list

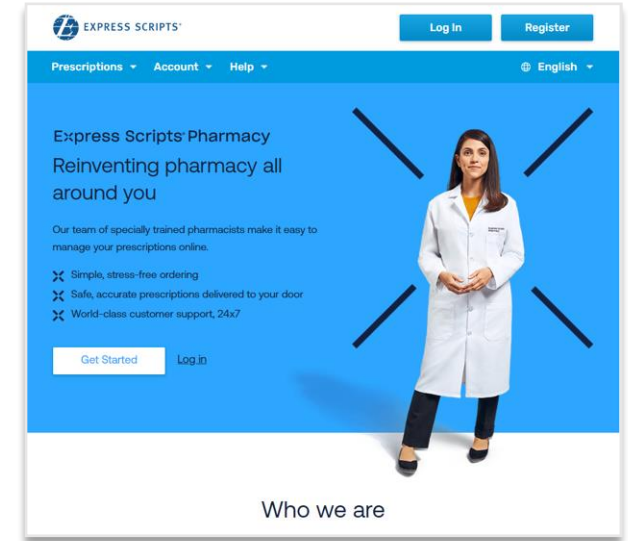


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Home Delivery Prescriptions

Your pharmacy benefit includes mail order service of your maintenance medications from Express Scripts Pharmacy.

- Register online at express-scripts.com/rx or by phone at 833-715-0942
- Once registered, ask your doctor to submit your prescription electronically or by fax
- Transfer your existing prescription from a retail pharmacy online or by phone



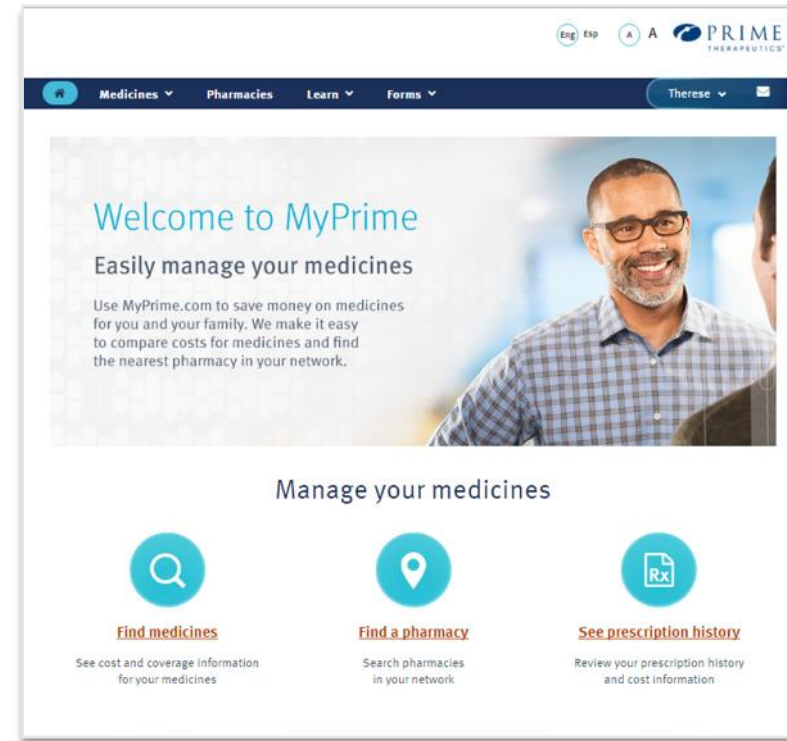
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- Based on your benefit plan, you may be able to use other in-network pharmacies. Check your plan materials for details, or call the customer service phone number on your Member ID card.
- Prime Therapeutics LLC is a pharmacy benefit management company, contracted by Blue Cross and Blue Shield of Illinois to provide pharmacy benefit management services. BCBSIL, as well as several other independent Blue Cross and Blue Shield Plans, has an ownership interest in Prime Therapeutics.
- Express Scripts® Pharmacy is a pharmacy that is contracted to provide mail pharmacy services to members of Blue Cross and Blue Shield of Illinois. The relationship between Express Scripts® Pharmacy and BCBSIL is that of independent contractors. Express Scripts® Pharmacy is a trademark of Express Scripts® Strategic Development, Inc.

MyPrime.com

Single sign-on from
Blue Access for MembersSM to:

- Locate a pharmacy
- Find drugs/drug list
- View prescription claim history
- Create personal medicine list
- Learn about specific drugs
 - Rx cost calculator
 - Health information



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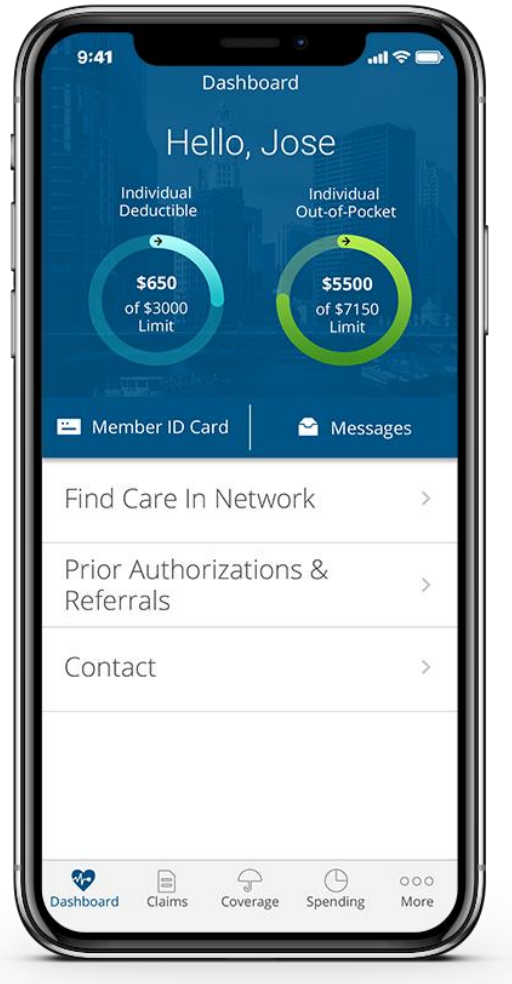
BCBS of IL - Digital Capabilities



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BCBSIL App for Mobile Devices

- Find an in-network doctor, hospital or urgent care facility or search for Spanish-speaking doctors
- Access your claims, coverage and deductible information
- Access temporary digital member ID card
- Secure login with Face ID (iOS only) and Fingerprint ID
- **Let us know your communication preferences**



To download the app, go to Google Play, the App Store or text* BCBSILAPP to 33633



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BCBSIL.com and Blue Access for Members



Save time with self-service support tools and health and wellness resources available through a convenient and secure website

Through BAM, you can:

- Once registered, view, print or download your member ID card
- View claims status and history
- See health care benefit information
- Find a doctor or pharmacy near you
- Schedule a virtual visit for medical or behavioral health
- Update your communication preferences to go paperless
- Log in and perform protected transactions

24 hours a day, 7 days a week*

Claim Statements/EOBs are not available 3 – 6 a.m.



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Sign Up for Blue Access for Members



BlueCross BlueShield of Illinois

Search

Make a Payment

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Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

Ready for Medicare?

When you turn 65, you have some important choices to make. Let us help you find the right Medicare Plan.

Learn More

Stay With Blue

As you transition to Medicare, we hope you'll stay with us to get Medicare coverage from a company you trust.

Get Started

Individual & Family Medicare Medicaid Employer Plans

Go to bcbsil.com and log in to Blue Access for Members via web or mobile. If you are a new user, choose **sign up** and follow the prompts to register.

To register you will need your identification number on the front of your ID card **OR** you can call the Customer Service number on the back of the card.

Get Paid With Member Rewards

Did you know that prices for the same quality medical care can differ by thousands of dollars?

- 1** Use the Member Rewards program by searching online with Provider Finder[®] or call a Benefits Value Advisor to find and select a quality, lower-cost, reward-eligible provider.
- 2** Visit your chosen reward-eligible provider.
- 3** The claim is paid and so are you!

Member Rewards verifies the provider qualifies for a reward and you get a check in the mail from Zelis (our program's vendor).

MDX Medical, LLC, a Zelis company, is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to administer the Member Rewards program for members with coverage through BCBSIL. Reward-eligible options and reward amounts are subject to change. Eligibility for rewards is subject to terms and conditions of the Member Rewards program. Amounts received through Member Rewards may be taxable. BCBSIL does not provide tax advice. Members that have primary coverage with Medicaid or Medicare are not eligible to receive incentive rewards under the Member Rewards program.

BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.



Virtual Visits

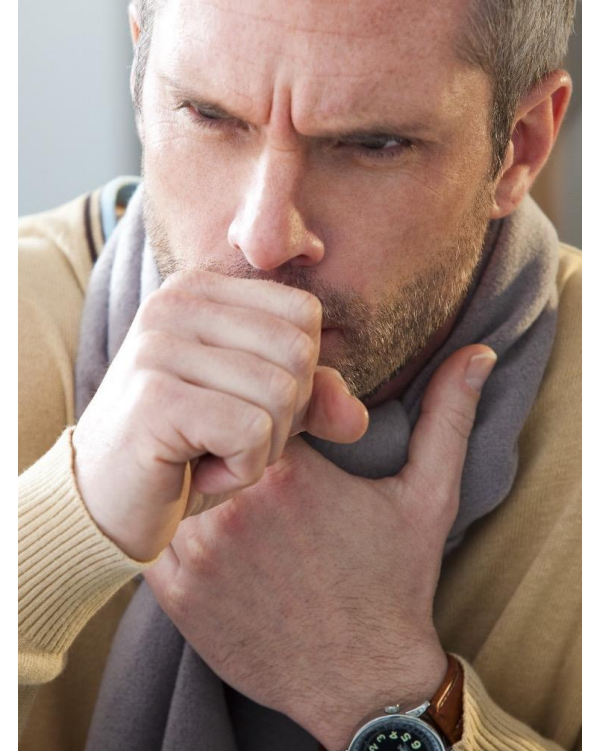


Get Care When and Where You Need It



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- Whether you're at home or traveling, access to an independently contracted, board-certified doctor is available 24/7.
- You can speak to an MDLIVE® doctor immediately or schedule an appointment for a time that works for you.
- MDLIVE doctors can help treat many non-emergency conditions.
- A Virtual Visit may be a better alternative to the emergency room or urgent care center.



Virtual Visits may be limited by plan. For providers licensed in Illinois and the District of Columbia, Urgent Care service is limited to interactive online video; Behavioral Health service requires video for the initial visit but may use video or audio for follow-up visits, based on the provider's clinical judgment. Behavioral Health is not available on all plans.

MDLIVE is a separate company that operates and administers Virtual Visits for Blue Cross and Blue Shield of Illinois. MDLIVE is solely responsible for its operations and for those of its contracted providers. MDLIVE® and the MDLIVE logo are registered trademarks of MDLIVE, Inc., and may not be used without permission.



How Virtual Visits Work



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CONNECT

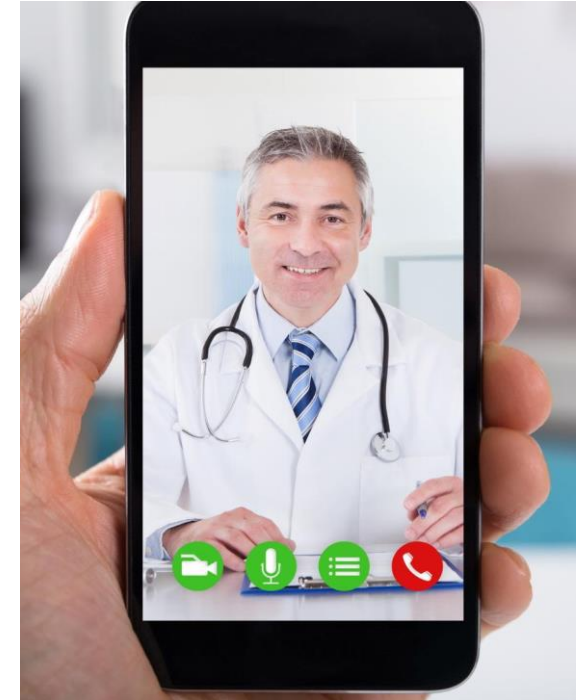
Access where mobile app, online video or telephone service is available

INTERACT

Real-time consultation with an independently contracted, board-certified doctor or therapist

DIAGNOSE

Prescriptions sent to a pharmacy of your choice (when appropriate)



To register, you'll need to provide your first and last name, date of birth and BCBSIL member ID number.



Health & Wellness



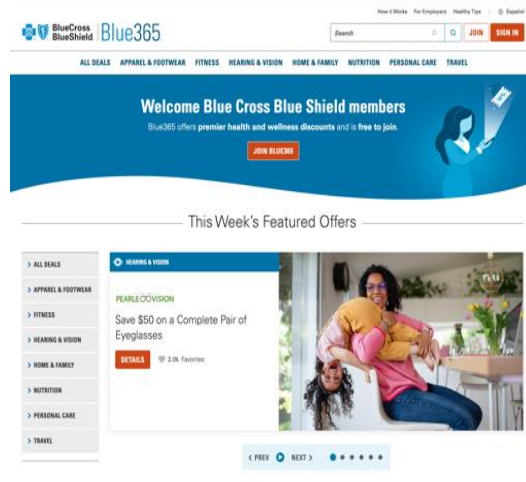
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Blue365 Member Discount Program



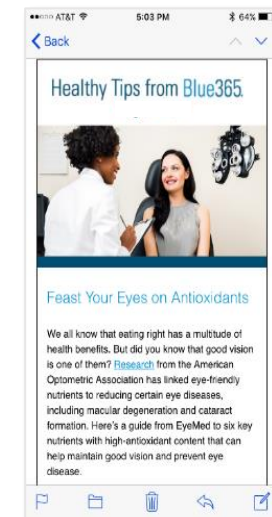
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Member discounts simply for being a BCBSIL member

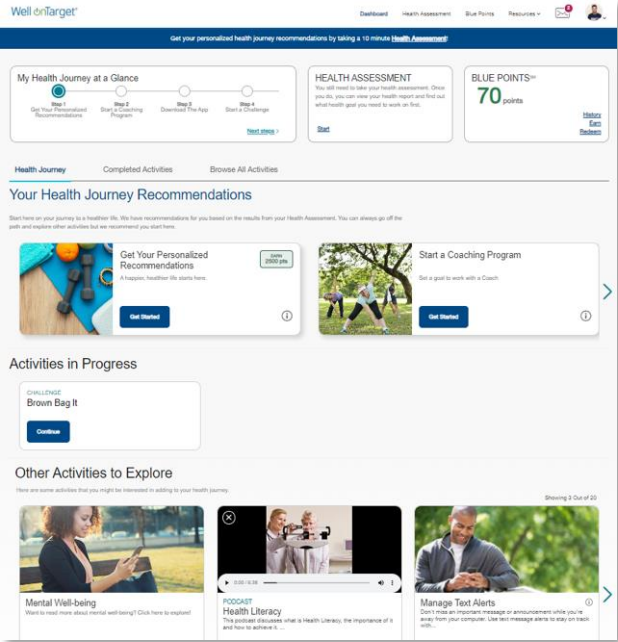


- Exclusive health and wellness deals from national and local retailers
- Save money on fitness gear, family activities, gym memberships, healthy eating, dental, vision, hearing aids and more from top national and local retailers
- Go to www.blue365deals.com/BCBSIL to register, view your available discounts and sign up for weekly emails

relationship between these vendors and Blue Cross and Blue Shield of Illinois is that of independent contractors. TheBlue365 is a discount program only for BCBSIL members. This is NOT insurance. Some of the services offered through this program may be covered under your health plan. Employees should check their benefit booklet or call the Customer Service number on the back of 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 are subject to change. 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. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.



Member Wellness Portal



The portal includes recommended activities that make up your Personal Member Journey

- SM
- Blue Points*
- Health Assessment
- Personalized “My Journey” member dashboard
- Digital self-management programs
- Trackers and tools
- “Explore” wellbeing resources
- Coaching program*
- Interactive symptom checker
- Health and wellness content
- Secured messaging
- Fitness Program
- Tracking for fitness, nutrition and device integration
- Personal wellness challenges
- Health and Wellness content

May be included in other packages.
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.

Blue Points - How to Earn Points



Members earn points for regularly participating in healthy activities. Points are redeemable for rewards via an online shopping mall.

Eligible activities include:

- Health Assessment completion
- Digital self-management program engagement
- Fitness Program enrollment and visits to facilities
- Use of Online Trackers
- Connecting and syncing a fitness or nutrition device or app

The image displays two screenshots from the AlwaysOn Wellness app. The left screenshot shows a user's 'Your Blue Points' balance of 5,000 and instructions on how to earn and redeem points through the app. The right screenshot shows the 'Virtual Visa® Prepaid Card' redemption interface, where a user can select a card value (e.g., \$10, \$25, \$50, \$100, or a custom value) and proceed to checkout. Below these screenshots is a grid of 12 merchant logos, each with a corresponding card value range:

Amazon.com Amazon USA \$1 - \$2000	Target Target USA \$1 - \$2000	Google Play Google Play USA \$1 - \$200	The Home Depot The Home Depot USA, Canada \$1 - \$2000
Best Buy Best Buy USA \$1 - \$2000	Nordstrom Nordstrom USA \$1 - \$2000	Lowe's Lowe's USA \$1 - \$2000	Uber Uber Eats USA \$1 - \$2000
Topgolf Topgolf USA \$10 - \$2000	Nintendo eShop Nintendo eShop USA \$10 - \$200,000	Apple Apple USA \$1 - \$2000	Columbia Sportswear Columbia Sportswear USA \$10 - \$2000

Catapult Health is an independently contracted provider that has contracted with Blue Cross and Blue Shield of Illinois to provide health and wellness screenings 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.

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. Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.

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.

Flexible Gym Network



A choice of gym networks to fit budgets and preferences.*

Plan Options	Digital Only	Base	Core	Power	Elite
Monthly fee	\$10	\$19	\$29	\$39	\$129
Gym* facility network size	Digital access only	3,000	7,500	12,000	12,400

\$19 initiation fee (no initiation fee for digital-only option)

Studio Class Network: Boutique-style classes and specialty gyms are pay-as-you-go with 30% off every 10th class.

Family Friendly: Expands gym network access to your covered dependents at a bundled price discount. Member pays only one enrollment fee per family.

Convenient Payment: Monthly fees are paid via automatic credit card or bank account withdrawals.



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Health Savings Accounts (HSAs)

What is an HSA?



- A health savings account (HSA) is a tax-preferred account to pay for qualified health expenses
- Must be used in conjunction with a qualified high deductible health plan (HDHP)
- You own the account, but both you and your employer can contribute funds; full rollover of balances annually
- **37 Million Americans have HSAs with \$123B in assets**

Benefits of an HSA



- A rare account that has “triple tax savings”
 - Tax free contributions
 - Tax free growth of money in the account
 - Tax free withdrawals (for qualified expenses)
- **You own the account**, even if you leave this employer-based health plan
- HDHP plans have lower premiums which can help fund account



How Does HSA/HDHP Work?



- Lake Forest College and you contribute money to your HSA (employee contributions normally are funded through payroll deductions).
- You can use HSA dollars to pay your health insurance deductible, along with other qualified medical expenses

Who is Eligible for an HSA?

- Anyone who is:
 - Covered by an HDHP
 - Not enrolled in Medicare
 - Not covered by another health plan that is not an HDHP (spouse's health FSA may disqualify you)
 - Not be eligible to be claimed as a dependent on another person's tax return



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HSA Contributions



- Each year, the IRS sets contribution limits
 - These limits are for the total funds contributed, including Lake Forest College contributions and your additional contributions via payroll deduction (lump sum to HSA also available)
- 2025 limits:
 - **\$4,300 for individual coverage**
 - **\$8,550 for family coverage**
- If you can afford to, fund it to the maximum to build for the future (can be a great tax shelter as well)

Catch-Up Contributions



- For individuals ages 55-plus, the IRS allows additional “catch-up contributions.”
- Eligible individuals may contribute an extra \$1,000 for the year.
- This rule is meant to help save additional money for retirement.

Claiming From Your HSA



- Pay your provider or reimburse yourself for what you paid your provider
- Your HSA can only be used for expenses that are incurred on or after the date the HSA was established
- However, HSA funds can be used for expenses from a prior year, if the expenses incurred on or after the date the HSA was established.
 - **Idea: Let compound growth of the HSA build and reimburse yourself years later for expenses in 2025**

Claiming from your HSA



- HSA distributions can be taken for qualified medical expenses for the following people:
 - The account holder (person covered by the HDHP)
 - Spouse of that individual (even if not covered by the HDHP)
 - Eligible dependents of that individual (even if not covered by the HDHP)
 - “Over-age” dependents would need to set up their own HSA and reimburse themselves for their claims (dependents who are not claimed on taxes)

Qualified Expenses (Tax Free)

- The IRS defines expenses that are considered “qualified medical expenses” for HSA distributions (Sect. 213d of IRS code)
- Expenses must be primarily to treat or prevent a physical or mental sickness or illness.
- If you use HSA funds for non-qualified expenses, you will be subject to income tax on the distribution and an additional 20% penalty.

Claiming from HSA –age 65+



- For individuals aged 65 and older, HSA distributions can be used for non-qualified medical expenses without facing the 20% penalty.
 - However, income taxes will apply for non-qualified distributions
 - This rule is regardless of whether the individual is enrolled in Medicare.

Qualified Expenses (Tax Free)

- Examples of qualified medical expenses include:
 - Most medical care that is subject to your deductible (copays, coinsurance, doctor visits, inpatient or outpatient treatment, etc.)
 - Prescription drugs
 - Over-the-counter drugs and personal protective equipment (face masks etc)
 - Insulin (with or without a prescription)
 - Dental and vision care
 - IRS expanded the list of qualified expenses in 2023 and 2024
 - Select insurance premiums
 - COBRA, qualified long-term care insurance (annual limit applies), health insurance premiums paid while receiving unemployment benefits, health insurance after you turn 65 except for a Medicare supplemental policy



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Recordkeeping Guidelines



- *Whenever you use HSA funds to pay for an expense, you should save/organize your receipts by tax year*
- You may need to demonstrate to the IRS that HSA distributions were for qualified medical expenses if you get audited.
- If the IRS requests receipts for verification purposes, failure to provide those receipts could result in having to pay taxes & a penalty.

A Closer Look – PPO v HDHP



	BCBS PPO & BlueChoice Select PPO Network	High Deductible Health Plan with a Health Savings Account
Service	In-Network	In-Network
Deductible Limit		
Employee	\$750	\$1,650
Spouse or Child	\$1,500	\$3,300
Family	\$1,500	\$3,300
Health Savings Account Lake Forest College employer con- tributions		
Employee	n/a	\$600
Spouse or Child		\$1,000
Family		\$1,300
Co-insurance		
After deductible pays	80% after deductible has been met	80% after deductible has been met
Out-of-pocket maximum		
Employee	\$2,000	\$2,750
Spouse or Child	\$4,000	\$5,500
Family	\$4,000	\$5,500
Preventive care	100%, no deductible	100%, no deductible
Primary physician office visit	\$20 co-pay	80% after deductible has been met
Specialist physician office visit	\$40 co-pay	80% after deductible has been met
Inpatient hospitalization	\$250 co-pay	80% after deductible has been met
Emergency room	\$150 co-pay	80% after deductible has been met
Prescription drugs		
Formulary generic (Tier I)	\$10	80 % after deductible has been met
Formulary brand (Tier II)	\$40	
Non-formulary brand (Tier III)	\$75	

A Closer Look – PPO v HDHP



The PPO and HDHP-H S A plans are very close in benefit – Maximum Out-of-Pocket comparison can show worse case scenario in a bad year

In a low claiming year, the HDHP-H S A plan will be better for members

HDHP-H S A lacks the copays for many services with most claims being subject to deductible

Don't forget to consider the paycheck deduction differential – that may favor the HDHP-H S A Plan

	BCBS PPO & BlueChoice Select PPO Network	High Deductible Health Plan with a Health Savings Account
Service	In-Network	In-Network
Deductible Limit		
Employee	\$750	\$1,650
Spouse or Child	\$1,500	\$3,300
Family	\$1,500	\$3,300
Health Savings Account		
Lake Forest College employer contributions		
Employee	n/a	\$600
Spouse or Child		\$1,000
Family		\$1,300
Co-insurance	80% after deductible has been met	80% after deductible has been met
After deductible pays		
Out-of-pocket maximum		
Employee	\$2,000	\$2,750 — \$600 = \$2,150
Spouse or Child	\$4,000	\$5,500 — \$1,000 = \$4,500
Family	\$4,000	\$5,500 — \$1,300 = \$4,200
Preventive care	100%, no deductible	100%, no deductible
Primary physician office visit	\$20 co-pay	80% after deductible has been met
Specialist physician office visit	\$40 co-pay	80% after deductible has been met
Inpatient hospitalization	\$250 co-pay	80% after deductible has been met
Emergency room	\$150 co-pay	80% after deductible has been met
Prescription drugs		
Formulary generic (Tier I)	\$10	80 % after deductible has been met
Formulary brand (Tier II)	\$40	
Non-formulary brand (Tier III)	\$75	

A Closer Look – PPO v HDHP



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Single employee example

Assume two specialist visits and one generic drug in scenario 1 – ER includes all other charges tied to ER trip

Hospital claims come in after the doctor visits and medications, so they are adjudicated first for scenario 2

Assume 4 specialist and 1 PCP doctor visit – 2 brand drugs and 1 generic – in-hospital claims include physician, labs and miscellaneous supplies also in scenario 2

ER Trip & Follow up at Doctor + Pain Meds	PPO		HDHP	
	Claim Amt (after PPO discount)	Member Cost Share	Claim Amt (after PPO discount)	Member Cost Share
ER Trip	\$2,400	\$150	\$2,400	\$1,800
Two Doctor Visits	\$300	\$80	\$300	\$60
1 prescription	\$25	\$10	\$25	\$5
	\$2,725	\$240	\$2,725	\$1,865
Reimbursement from HSA				(\$600)
Net Outlay		\$240		\$1,265

Inpatient Hospital - 2 days - Follow up at Doctor + Meds	PPO		HDHP	
	Claim Amt (after PPO discount)	Member Cost Share	Claim Amt (after PPO discount)	Member Cost Share
Inpatient Hospital+Related Services	\$30,000	\$1,730	\$30,000	\$1,840
Five Doctor Visits	\$700	\$180	\$700	\$700
3 medications	\$210	\$90	\$210	\$210
	\$30,910	\$2,000	\$30,910	\$2,750
Reimbursement from HSA				(\$600)
Net Outlay		\$2,000		\$2,150

What Is Rx 'N Go?



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What is Rx 'n Go?

- Exciting benefit offered by your Employer!
- Over 1,300 generic maintenance medications and insulin products shipped to your home for FREE
- ~800 generic medications on HDHP/HSA plans
- Blood pressure, cholesterol, diabetes, asthma, and emotional health are some of the chronic conditions covered
- 90-day supply sent directly to your home
- Automatic refill
- Doctors can phone, fax, or Escribe the prescription to our pharmacy (**Transition Pharmacy, PA**)

The screenshot displays the Rx'nGo website interface. At the top left is the logo "RX'nGO Care. Delivered." with a navigation menu including "Home", "19", "3", and "My Store". A search bar is present with the placeholder text "Type the name of your medication" and a subtext "Use the search above to locate the medication you would like to order". Below the search bar are six main navigation tiles:

- Start Here**: Get started with your account. Image: A "START HERE" sign.
- Active Prescriptions**: View your prescriptions. Image: Two women looking at a document.
- Orders**: View orders and tracking information. Image: A person in a blue uniform handing a box to another person.
- Order History**: View historical orders not eligible for refill. Image: Hands holding a folder with papers.
- Addresses**: Update your shipping details. Image: A modern house.
- Prescribers**: View/Add Prescribers on your account. Image: A stethoscope on a medical chart.

Rx 'N Go Diabetic Program

Comprehensive Diabetic Program

- Insulin products, needles, and syringes available for FREE
- Prodigy Diabetic Monitors, Lancets & Test Strips
- Oral Medications
- Freestyle Libre CGM
- Insulin biosimilars available (Semglee, Glargine, Lispro)
- Shipped in temperature-controlled packaging and overnighted to your home – call before shipping



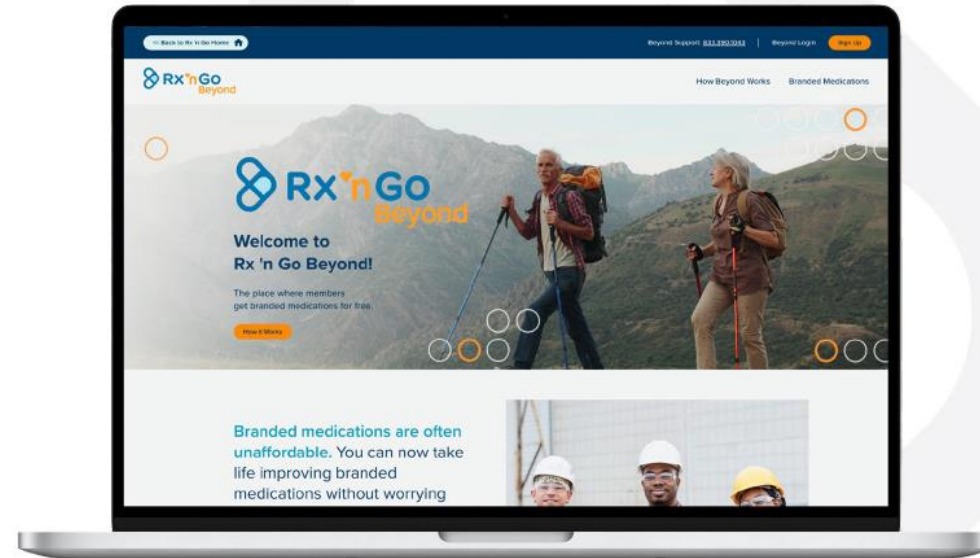
WHAT IS RX 'N GO BEYOND?



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Rx 'n Go Beyond – Branded Medications

- Rx 'n Go Beyond is an international mail-order program for brand-name and specialty medications
- ~200 expensive branded medications available on PPO Plan
- HSA / HDHP members – you still have ~110 medications available at \$0 copay
- Medications are personally imported and shipped from fulfillment pharmacy in Winnipeg, Canada
- Covers many chronic conditions such as *Diabetes, COPD, HIV, MS, Crohn's Disease, Heart Conditions, Rheumatoid Arthritis*
- Before 1st Beyond Fill - Requires fill through retail PBM pharmacy and 30 days of Rx hand
- Specialty products Humira, Stelara, Enbrel, Cosentyx, and Copaxone also available for FREE





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Dental Plan – Delta Dental of Illinois



Delta Dental PPO Option



- Annual Deductible \$75/person
- Annual Maximum \$1,200/person
- In Network
Preventive/Diagnostic 100%
- In Network Basic Services 70%
- Major Restorative Services 50%

Delta Dental DHMO Option



- Own Network of Dentists & One Panel Dentists
- No Annual Deductible
- Schedule of Fees for Preventive/Diagnostic, Basic, and Major Services
- No Annual Maximum Per Person
- PPO and DHMO structured to allow plan changes mid-year (this is a rare benefit for members)

Flexible Spending Accounts



- Health Care Up To **\$3,300** per year (For PPO Plans) Use Healthcare Flexible Spending for:
 - Deductible
 - Medical, Dental, Vision, Prescription Drugs, and Doctor Visit Copays
- Limited FSA for dental/vision expenses for those on the HDHP/H.S.A (**preserves your HSA**)
- Carryover from 2025 into 2026 is \$660 (up from \$640)
- You will receive a debit MasterCard from Flex
- Dependent Care Up To \$5,000 per year

FSA & HSA

MyFlexAccount.com



- ✓ Same site for FSA & HSA
- ✓ Access account info 24/7
- ✓ View your account balance and transaction history
- ✓ Manage Flex Card
- ✓ Sign up for email and text alerts
- ✓ Download forms
- ✓ Access educational materials

FSA & HSA

My Flex Account Mobile



- ✓ Same app for FSA & HSA
- ✓ Check account balances
- ✓ Get transaction details
- ✓ Update reimbursement method
- ✓ Manage Flex Card
- ✓ Free download from Apple Store or Google Play



FSA Manual Claims



- ✓ Three ways to submit claims
 - Online at www.myflexaccount.com
 - Via My Flex Account mobile application
 - Complete a reimbursement form and fax, mail or email it to Flex
- ✓ Reimbursements done via Check or Direct Deposit
- ✓ Reimbursements issued **Weekly-Wednesday**

How to Open Your HSA



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- ✓ You will receive an email from Flex with instructions
- ✓ You will need to register for an account at myflexaccount.com
 - Info needed to register will be included in the email
- ✓ Once registered, click “Enroll Now”
- ✓ For existing HSA owners, your remaining balance can transfer over to Flex H S A with a transfer of assets form



Other Benefits

- Vision will continue with VSP
 - Same Benefits and Rates
- Employer-Paid Basic Life/Long Term Disability will continue with Lincoln Financial

Basic Life and AD&D + LTD

- Basic Life & AD& D – 1.5x salary to \$300,000 maximum
- Long Term Disability – 66.67% of monthly salary up to \$15,000 maximum per month starting 90 days after you are out of work and continuing up to age 65 or SSNRA