

Laraway School District 70-C Benefit Summary



Grandfathered Plans

January 1, 2027 – December 31, 2027



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Eligibility



Eligibility

HR Contact: Valerie Teegardin

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Phone: (815) 727-5115

Eligibility Requirements

You are eligible to enroll in the benefits described in this summary. Qualified dependents eligible for select benefit coverage include:

- Your legally married husband/wife
- Your child(ren) up to age 26
- Your incapacitated child(ren) whom are unmarried, incapable of self-support due to a mental or physical disability, and is a federal tax dependent.

New Hire Waiting Period

All benefit eligible employees electing coverage will be effective on the date of hire.

Qualifying Life Events

Outside of open enrollment you would need to have a qualifying event to add, drop, or make changes to your benefits. Employees are responsible for notifying Human Resources within 30 days of the qualifying life event to make a change to benefit elections. Qualifying event changes are effective on the date in which the event occurred.

Some examples of qualifying events are:

- Losing existing health coverage
- Losing eligibility for Medicare, Medicaid, or Children's Health Insurance Program (CHIP)
- Turning 26 and losing coverage through parent's plan
- Getting married or divorced
- Having a baby or adopting a child
- Death in the family

Benefits Microsite

All information regarding the full suite of benefits available through your employment is available on the benefits microsite. You can find the microsite at

<https://laraway70c.ilschoolinsurancenetwork.org/>

The microsite contains:

- Benefit definitions and explanations
- Educational videos
- Policy plan documents
- Claims forms
- Provider finder guides
- Information about additional services:
 - Maternity Services
 - Tobacco Cessation
 - Travel Resources
 - And many more!

Insurance Benefits



Medical Insurance

Carrier: BlueCross BlueShield

Website: www.bcbsil.com

Phone: (800) 828-3116

HDHP with HSA Plan

The plan is comprised of two components:

1. High Deductible Health Plan (HDHP)
2. Health Savings Account (HSA)

The HDHP is a high deductible health plan that provides health care benefits after the deductible has been met. All medical services, with the exception of preventive care, are paid for by you at 100%, less carrier discounts, prior to meeting your entire annual deductible. This includes routine office visits, procedures, lab work, prescription drugs, etc.

The HSA is a bank account paired with your HDHP allowing you to set aside money on a tax-free basis to pay your out-of-pocket qualified medical, dental, and vision expenses throughout the year or in the future. You own the money in your HSA account and it is yours to keep – even when you change plans or retire. The funds roll over from year to year to be used when you really need them.

2027 HSA Contributions

IRS Max Contribution:	Employee Only	Family
Max HSA Contribution	\$4,500	\$9,000
Catch-Up (Age 55+)	\$1,000	

The tax-preferred status of your HSA contributions depend on a number of factors. Residents of California and New Jersey are taxed on HSA contributions at the state level. State tax laws can change periodically, so you should consult with a tax advisor to confirm the tax treatment of HSA contributions in your state.

Health Savings Account (HSA)

You're eligible for a health savings account if:

- You are covered by a qualified high deductible health plan (HDHP)
- You are not covered by any other medical coverage that is not considered a qualified HDHP
- You are not enrolled in Medicare (Part A included)
- You are not claimed as a dependent on someone's tax return
- You are not enrolled in a Medical Flexible Spending Account (your own or your spouse's)

Advantages to having an HSA

- There's a triple tax savings benefit as contributions are not taxed going into the account, while they sit there earning interest or when they're taken out for a qualified medical expense.
- Unused funds rollover each year with no maximum on how much you can save and accumulate over time
- The account is portable so you never have to worry about losing the money in the account should you change between plans, retire or even seek employment elsewhere
- Your HSA can be viewed as a second means of savings for your retirement
- You control your healthcare spending and choose when to use your HSA dollars and when to save them
- You become a more informed participant in your healthcare and healthcare spending

Steps to using your HSA

- Go to the doctor and present your carrier ID
- Your doctor submits your medical services to the carrier to be discounted
- Your carrier adjusts the pricing to reflect the network discounted amount for your services
- The carrier generates an Explanation of Benefits (EOB) and sends it to you
- By now you've received an invoice from your doctor - make sure the EOB and invoice match
- Pay your doctor directly with pre-tax dollars from your HSA or post-tax dollars from your pocket if funds are not available

Using your HSA on qualified expenses

You can use the money in your HSA to pay for qualified medical, dental and vision expenses permitted under federal tax law.

PPO Plan

Carrier: BlueCross BlueShield

Website: www.bcbsil.com

Phone: (800) 828-3116

A PPO plan offers the freedom to receive care from any in- or out-of-network doctor, specialist or hospital without a referral. You have a deductible to meet and once the deductible is met, coinsurance (the cost share between you and the carrier) kicks in. The types of medical services that accumulate towards your deductible are inpatient hospital stays, outpatient surgeries, labs (blood work) and x-rays (MRIs, PET scans, CT scans, etc.). Generally, if you go to the doctor, see a specialist, utilize the ER or take a prescription drug, you'll pay a copay for those specific services. Copays do not accumulate towards your deductible but they do accumulate towards your overall out-of-pocket maximum.

HMO Plan

Carrier: BlueCross BlueShield

Website: www.bcbsil.com

Phone: (800) 892-2803

The HMO gives you access to certain doctors and hospitals but restricts services to in-network providers. There are no out-of-network benefits. Your care is managed by a Primary Care Physician (PCP). If you require a specialist, outpatient procedure or hospitalization, your registered PCP must refer you.

Medical Plan

HMO BA Plan 3 – B14332 In-Network Benefits Only

HMO BA Plan 4 – B01776 In-Network Benefits Only

Network		Blue Advantage		Blue Advantage	
Deductible					
Individual		\$0			\$500
Family		\$0			\$1,000
Coinsurance					
Plan Member Responsibility		0%			20%
Out-of-Pocket Max					
Individual		\$1,500			\$2,500
Family		\$3,000			\$5,000
Physician Services					
Preventive Care		No Charge			No Charge
Primary Physician Visit		\$30 copay			\$35 copay
Specialist Visit		\$50 copay			\$55 copay
Diagnostic Testing		No Charge			Deductible then 20%
Lab Testing		No Charge			Deductible then 20%
Inpatient Hospital		No Charge			\$150 copay + Ded. then 20%
Emergency Room		\$150 copay			\$150 copay + Ded. then 20%
Urgent Care		\$30 copay			\$35 copay
Pharmacy					
Generic/Preferred Brand/Non-Preferred Brand/Specialty					
Retail (30 Days)		Copay: \$10/\$25/\$40/\$40			Copay: \$10/\$50/\$100/\$100
Mail Order (90 Days)		Copay: \$20/\$50/\$80/NA			Copay: \$30/\$150/\$300/NA
Rx Out-of-Pocket Max (Individual / Family)		\$5,100 / \$10,200			Included in Medical Out-of-Pocket Max

Medical Plan

		PPO – 165607 <i>In-Network Benefits Shown</i>		PPO – 165608 <i>In-Network Benefits Shown</i>	
Network		PPO		PPO	
Deductible					
Individual		\$350		\$325	
Family		\$700		\$650	
Coinsurance					
Plan Member Responsibility		10%		10%	
Out-of-Pocket Max					
Individual		\$1,800		\$1,825	
Family		\$5,400		\$5,475	
Physician Services					
Preventive Care		No Charge		No Charge	
Primary Physician Visit		\$20 copay		Deductible then 10%	
Specialist Visit		\$30 copay		Deductible then 10%	
Diagnostic Testing		Deductible then 10%		Deductible then 10%	
Lab Testing		Deductible then 10%		Deductible then 10%	
Inpatient Hospital		Deductible then 10%		Deductible then 10%	
Emergency Room		Deductible then 10%		Deductible then 10%	
Urgent Care		\$30 copay		Deductible then 10%	
Pharmacy					
Generic/Preferred Brand/Non-Preferred Brand/Specialty					
Retail (30 Days)		Copay: \$10/\$20/\$25/\$30		Copay: \$10/\$20/\$30/\$50	
Mail Order (90 Days)		Copay: \$20/\$40/\$50/NA		Copay: \$20/\$40/\$60/NA	
Rx Out-of-Pocket Max (Individual / Family)		\$2,500 / \$7,500		\$5,525 / \$9,225	

Medical Plan

		HDHP – 165602 <i>In-Network Benefits Shown</i>
Network		PPO
Deductible		
Individual		\$1,750
Family		\$3,500
Coinsurance		
Plan Member Responsibility		10%
Out-of-Pocket Max		
Individual		\$3,500
Family		\$7,000
Physician Services		
Preventive Care		No Charge
Primary Physician Visit		Deductible then 10%
Specialist Visit		Deductible then 10%
Diagnostic Testing		Deductible then 10%
Lab Testing		Deductible then 10%
Inpatient Hospital		Deductible then 10%
Emergency Room		Deductible then 10%
Urgent Care		Deductible then 10%
Pharmacy		
Generic/Preferred Brand/Non-Preferred Brand/Specialty		
Retail (30 Days)		Deductible then 20%
Mail Order (90 Days)		Deductible then 20%
Rx Out-of-Pocket Max (Individual / Family)		Included in Medical Out-of-Pocket Max

Making the Most of Your Medical Benefits

Employees enrolled in the BlueCross BlueShield medical plan have access to the following services:

BlueAccess for Members:

www.bcbsil.com

A secure member website that gives you immediate access to health care benefit information and easy-to-use tools.

BlueAccess Mobile™

You are able to access your BlueAccess for Members account straight from your mobile device. Choose to receive text messaging for Rx refill reminders, diet and fitness tips, claim updates and more. Download the application straight to your smartphone for immediate access.

Maven Clinic (HDHP & PPO)

BCBS collaborates with Maven Clinic to support you with fertility, family building, pregnancy, postpartum, pediatrics, parenting, menopause, and managing midlife.

Mail Order Prescriptions: 833.715.0942
or express-scripts.com/rx

Members can save time and money by calling 24/7 to refill or transfer a current prescription or get started with home delivery.

Blue365 Discounts

As a member you have access to additional special program discounts. Details can be accessed at www.bcbsil.com under the “My Coverage” tab and then Discounts.

Go WellbeingSM Member Wellness Program

Access health and wellness resources that can help you manage your health with resources such as health assessments, health coaching, tracking tools and many more!

Virtual Visits—MDLIVE (HDHP & PPO)

MDLIVE’s telehealth program provides enrolled members with access to non-emergency medical care without even leaving the couch. Visit a doctor virtually 24 hours a day, 7 days a week for a variety of different ailments and symptoms ranging from allergies, asthma, aches, infections, cold/flu, and more. Log on to MDLIVE.com/bcbsil or call **888.676.4204** today to find out additional info on this convenient benefit.

Tips to Save Money

Preventive/Wellness

Preventive/Wellness Exams Covered at 100%.

Preventive care is equal to one physical exam per year per enrolled member. Females get an annual well-woman exam covered at 100% in addition to their annual exam. No deductible expenses apply—the exam is completely no cost to you provided it's coded as preventive.

Prescription Drugs

Ask your doctor if there's a generic version of the medication they're prescribing or you're already taking. Take advantage of the Generic Prescription Savings Programs at major retailers. Ask about free samples from your doctor and/or manufacturer rebates.

High Cost Scans, X-Rays & Tests

MRI, PET scans, CT scans, etc. are nearly 2/3 less costly at free-standing, in-network imaging centers than at hospitals. Finding an in-network, free-standing imaging center can save you a substantial amount of money.

Accessing Medical Care

The emergency room is a costly experience for issues that aren't true emergencies. There are alternatives that can offer you quick care at a much more affordable cost. The key is finding these alternatives today when you're happy and healthy.

Doctor's office: for symptoms that aren't extreme, call and let them know your symptoms require immediate attention.

Convenient Care Clinics: use when you don't have a primary doctor or can't get an appointment. Good for fever, sore throat, strep throat, coughs, congestion, sports physicals, UTIs, etc.

Urgent Care (UC): less costly than the ER; can treat sprains, strains, minor breaks, mild asthma, minor infections, rashes, small cuts, burns, etc.



Dental Insurance

Carrier: BlueCross BlueShield

Website: www.bcbsil.com

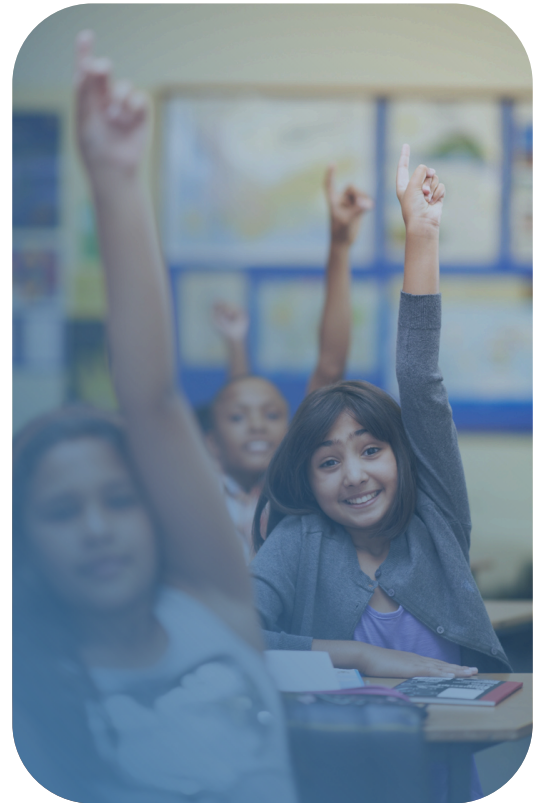
Phone: (800) 367-6401

Dental Preferred Provider Organization (DPPO)

This dental plan allows the flexibility to select any dentist in-network or out-of-network, but if you stay within the BlueCare Dental Network, you'll pay less.

If you use an out-of-network provider, you will be required to pay at the point of service and submit for reimbursement up to the allowable amount. You will be responsible for any amount over allowable reimbursement.

Dental coverage focuses on preventive and diagnostic procedures in an effort to avoid more expensive services associated with dental disease and surgery. The type of service or procedure received determines the amount the carrier will cover for each visit. Each type of service fits into a class of services according to complexity and cost.



		DPPO 1500 - 270729		DPPO 2000 - 270736	
		In-Network	Out-of-Network	In-Network	Out-of-Network
BlueCare Dental					
Individual Deductible (Family = 3x)		\$25	\$25	\$25	\$25
Preventive Coinsurance		100%	100%	100%	100%
Basic Coinsurance		80%	80%	80%	80%
Major Coinsurance		50%	50%	50%	50%
Annual Maximum		\$1,500	\$1,500	\$2,000	\$2,000
Orthodontia Coinsurance		50%	50%	Not Covered	
Orthodontia Age Limit		Age 19	Age 19	Not Covered	
Orthodontia Lifetime Maximum		\$1,500	\$1,500	Not Covered	

Vision Insurance

Carrier: VSP

Website: www.vsp.com

Phone: (800) 877-7195

Vision insurance helps offset the cost of routine eye exams and helps pay for vision correction eyewear like eyeglasses and contacts by an eye-care provider.

You're eligible for an eye exam and lenses or contact lenses every 12 months and frames every 24 months. Out-of-network providers will only offer you an allowance towards your vision services.

	Frequency	In-Network	Out-of-Network
Network Name	VSP Choice		
Eye Exam	Every 12 months	\$0 WellVision exam copay Up to \$60 contacts exam copay	\$45 max reimbursement
Lenses	Every 12 months	\$25 copay	Reimbursement varies
Frames	Every 24 months	\$175 allowance (\$195 for featured brands) + 20% off balance over allowance	\$70 max reimbursement
Elective Contacts	Every 12 months	\$175 allowance	\$105 max reimbursement
Necessary Contacts	Every 12 months	\$25 copay	\$210 max reimbursement

*Vision benefit frequencies are based on the date of service within the policy year

**You cannot get contacts and glasses in the same calendar year

Basic Life and AD&D Insurance

Carrier: The Hartford

Website: www.TheHartford.com

Phone: (800) 523-2233

Life insurance provides a financial benefit to your designated beneficiaries if you pass away, helping to cover expenses like funeral costs and living expenses. Accidental Death & Dismemberment (AD&D) insurance pays benefits if you die or lose a limb or sight due to an accident.

Benefits may reduce as you age. See your plan documents for more detail.

This benefit is 100% company paid.

Basic Life / Accidental Death & Dismemberment

See HR for Benefit Amount



Voluntary Life and AD&D Insurance

Carrier: The Hartford

Website: www.TheHartford.com

Phone: (800) 523-2233

Voluntary term life/AD&D allows you to purchase additional life and AD&D coverage for yourself and your dependents. Your age and the amount of insurance you elect determines the premium you'll pay. Costs will increase as you age, and benefits may be reduced. See your plan documents for more detail and to determine if Evidence of Insurability applies.

	Employee	Spouse	Children
Coverage Increments	\$25,000	\$10,000	Birth to 15 days: \$0 15 days to 6 months: \$500 6 months to 26 years: \$5,000
Maximum Benefit Amount	\$100,000 not to exceed 5x annual earnings	\$50,000, not to exceed 50% of employee election	\$5,000
Guaranteed Issue Amount	\$100,000, not to exceed 3x annual earnings	\$20,000	\$5,000

To calculate your monthly premium, find the appropriate age bracket for life and for AD&D. Add those two rates together. Multiple by the amount of coverage being elected and divide by 1,000. Spouse rates are based on the spouse's age at plan anniversary.

Disability Insurance

Carrier: Unum

Website: www.unum.com

Phone: (866) 679-3054

Long-Term Disability

Long-term disability insurance is a type of income protection that is designed to cover serious injuries and illnesses that keep you out of work for an extended amount of time.

	Long-Term Disability
Waiting Period	Begins on the 91 st day of continuous injury or illness
Benefit Amount	See HR for Benefit Amount
Maximum Benefits	See HR for Benefit Amount
Length of Payment Period	SSNRA
Pre-Existing Condition Exclusion	3 / 12
Premium Contribution	Company Paid

Whole Life Insurance with Long-Term Care

Carrier: The Standard

Website: www.standard.com

Phone: (800) 628-8600

Whole life insurance offers a defined amount of life insurance coverage locking in the cost at your current age. The face value of the policy never decreases and the cost never increases as long as premiums are paid timely. This policy also has a long-term care benefit that provides financial support to cover the cost of long-term care you might need while you're still living as a result of an accident, illness or aging. This policy does not coordinate with any other coverage, so you can still receive benefits on top of any other life insurance you may own or be provided.

Here's how it works

You enroll in Group Whole Life Complete through your employer. Premium payments are conveniently deducted from your paycheck automatically.



Death

When you pass away, your beneficiaries receive the death benefit amount as a lump-sum cash payment.



Long-Term Care

If you require long-term care at some point, you can begin to draw funds from the death benefit to receive a monthly payment that may be used for the cost of that care.



Financial Emergency

If you have a financial emergency and need cash, you can access funds from the cash balance.

What is the Long-Term Care Benefit?

- 6% of the death benefit
- Payable each month for up to 34 months

What about the death benefit?

- It's **RESTORED** to the original face amount of the policy regardless of the amount of LTC benefits paid.

Voluntary Benefits

Carrier: The Hartford

Phone: (866) 547-4205

Website: www.thehartford.com

Accident Coverage

Since accidents can happen at any time, it's important to prepare for the unexpected. This policy can help pay for out-of-pocket expenses associated with an accident by paying you a benefit for each of the covered injuries you suffer and the treatment you received. This policy does not coordinate with any other coverage, so you can still receive benefits on top of what your medical plan provides.

Critical Illness

Critical illness insurance protects your family when you are diagnosed with an unexpected covered condition. This policy provides you with a lump sum cash benefit in the event you or an insured loved one is diagnosed with a covered condition such as heart attack, stroke, cancer and much more. It can help provide some financial protection so you can focus on what's really important – getting better. This policy does not coordinate with any other coverage, so you can still receive benefits on top of what your medical plan provides.

	Coverage Amount
Employee Coverage Amount	\$5,000 – \$20,000 in increments of \$5,000
Spouse Coverage Amount	100% of Employee Amount
Child(ren) Coverage Amount	50% of Employee Amount

Hospital Indemnity

Hospital Indemnity insurance protects your family when you have a hospital or ICU stay. This policy provides financial protection by paying you a benefit for hospital admission, hospital confinement and ICU care. Benefits are paid based on admission and length of stay for a defined number of days. This policy does not coordinate with any other coverage, so you can still receive benefits on top of what your medical plan provides.

	Frequency	Plan Coverage
Hospital Admission	Up to 1 day per year	\$1,000
Daily Hospital Confinement	Up to 90 days per year	\$100 per day
ICU Admission	Up to 1 day per year	\$2,000
Daily ICU Confinement (Day 2+)	Up to 90 days per year	\$200 per day

Financial Benefits



Financial Benefits

Flexible Spending Accounts (FSA)

Carrier: Employee Benefits Corporation

Website: www.ebcflex.com

Phone: (800) 346-2126

Flexible Spending Accounts (FSA) allow you to save money on a pre-tax basis to pay for qualified medical expenses and/or dependent care expenses throughout the year. The money you put into your FSA is done so on a pre-tax basis. This means you are lowering your taxable income and also not paying taxes when the money is used for qualified expenses.

Health Care FSA

You may contribute up to \$3,400 per plan year to pay for qualified medical, dental and vision expenses for yourself and eligible family members. Funds in this account can cover all eligible expenses on your tax dependents even if they are not enrolled under your health care plan. Eligible reimbursable expenses include medical and dental plan deductibles and copays (if applicable), orthodontia expenses not covered by your dental plan, prescription drugs, prescription eyeglasses and contact lenses, Lasik eye surgery and much more.

Dependent Care FSA

You may contribute up to \$7,500 per plan year to pay for qualified eligible dependent care expenses. Funds in this account are saved on a tax-free basis. FSAs have a use-it-or-lose-it provision, so be conservative when electing how much to contribute.

Wellness Benefits



Employee Assistance Program

Carrier: Allone Health

Website: allonehealth.com/portal

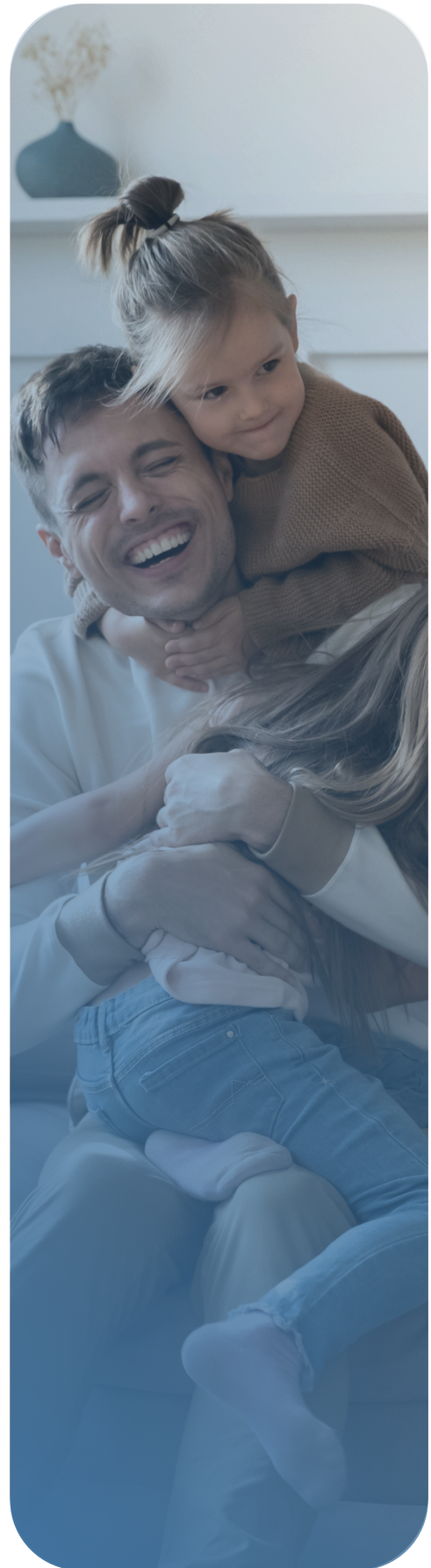
Portal and App Code: LIN500

Phone: (800) 451-1834

The Employee Assistance Program (EAP) provides confidential, free assistance for marital/family problems, financial/legal difficulties, balancing work/life situations, emotional or stress related problems, drug or alcohol abuse and problems relating to work. The program is 100% company paid.

Here are some challenges our EAP can help with:

- Stress and depression
- Life transitions
- Grief and loss
- Parenting and childcare
- Elder care
- Domestic violence
- Workplace conflict
- Addiction and recovery
- Legal assistance



Other Benefits



Travel Resource Services

Carrier: The Hartford

Email: assist@imglobal.com

U.S. & Canada Phone: (800) 243-6108

Other Locations Phone: (202) 828-5885

The best laid travel plans can go wrong, leaving you vulnerable and possibly unable to communicate what you need. When the unexpected happens far from home, it's important to know who to call for assistance. No matter why you're traveling, Travel Assistance services are available 24/7 when you're more than 100 miles from home for 90 days or less.

Beneficiary Resource Services

Website: join.empathy.com/hartfordcare

Phone: (229) 544-2332

In addition to taking care of financial concerns, your Life insurance comes with access to a suite of services to support your loved ones through every step of life's most difficult moments. Some of the services available:

- Will preparation
- Funeral Planning
- Estate planning and probate management
- Immediate arrangements
- Account deactivation
- Personalized checklists

Pet Insurance

Carrier: Pet Partners

Website: www.petpartners.com

Phone: (866) 774-1113

What is Pet Insurance?

Pet insurance is health insurance for dogs and cats. Get reimbursed for costly veterinary bills and focus more on the health of your pets and less on how you're going to pay for it. Plans feature coverage for accidents, illnesses and injuries including cancer coverage.

How it Works:

- Enroll in pet insurance
- Pay your vet
- Submit a claim with your vet bill
- Get reimbursed for eligible expenses

Enroll:

<https://www.petpartners.com/enroll?p=LAA>

Important Contact Information

Benefits Department	
Contact	Valerie Teegardin
Email Address	vteegardin@laraway70c.org
Phone Number	(815) 727-5115

Carrier Contact Information				
Plan	Carrier	Website / Email	Phone #	Policy #
Medical HMO	BCBS of IL	www.bcbsil.com	(800) 892-2803	B14332 / B01776
Medical PPO & HDHP	BCBS of IL	www.bcbsil.com	(800) 828-3116	165602 / 165607 / 165608
Dental PPO	BCBS of IL	www.bcbsil.com	(800) 367-6401	270729 / 270736
Vision	VSP	www.vsp.com	(800) 877-7195	12019596
Basic & Voluntary Life/AD&D	The Hartford	www.TheHartford.com	(800) 523-2233	TBD
Whole Life with Long-Term Care	The Standard	www.standard.com	(800) 628-8600	
Voluntary Accident	The Hartford	www.TheHartford.com	(866) 547-4205	TBD
Voluntary Critical Illness	The Hartford	www.TheHartford.com	(866) 547-4205	TBD
Voluntary Hospital Indemnity	The Hartford	www.TheHartford.com	(866) 547-4205	TBD
Flexible Savings Account	Employee Benefits Corporation	www.ebcflex.com	(800) 346-2126	
Employee Assistance Program	AllOne Health	Allonehealth.com/portal Portal & App Code: LIN500	(800) 451-1834	
Pet Insurance	Pet Partners	www.petpartners.com	(866) 774-1113	
Travel Assistance	The Hartford	assist@imglobal.com	U.S. (800) 243-6108 Outside US: (202) 828-5885	
ID Theft Protection	The Hartford	assist@imglobal.com	(800) 243-6108	