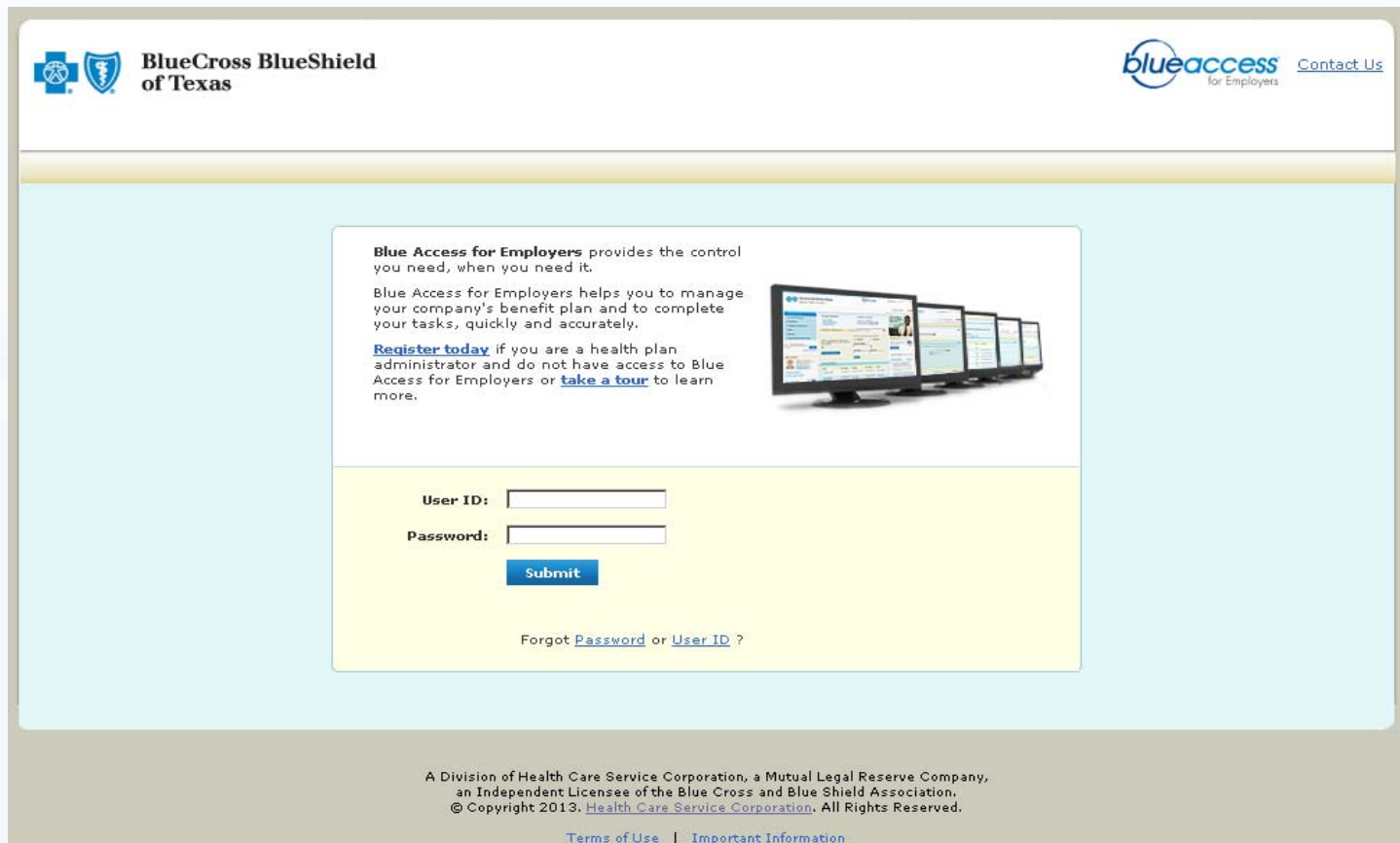


# Summary of Benefits and Coverage (SBC)

Group SBCs – Updates to the SBC Tool

# Instructions to Access System

- Log in to BAE



The screenshot shows the login page for Blue Access for Employers. At the top left is the BlueCross BlueShield of Texas logo. At the top right is the blueaccess for Employers logo with a 'Contact Us' link. The main content area has a light blue background. On the left, there is text describing the system and links to 'Register today' and 'take a tour'. On the right, there is an image of several computer monitors displaying the system interface. Below this, there is a yellow box containing the login form with fields for 'User ID' and 'Password', a 'Submit' button, and a link for 'Forgot Password or User ID?'. At the bottom, there is a footer with legal disclaimers and links for 'Terms of Use' and 'Important Information'.

BlueCross BlueShield of Texas

blueaccess for Employers [Contact Us](#)

Blue Access for Employers provides the control you need, when you need it.

Blue Access for Employers helps you to manage your company's benefit plan and to complete your tasks, quickly and accurately.

[Register today](#) if you are a health plan administrator and do not have access to Blue Access for Employers or [take a tour](#) to learn more.

User ID:

Password:

[Submit](#)

Forgot [Password](#) or [User ID](#) ?

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[Terms of Use](#) | [Important Information](#)

- Log in to BAP

The screenshot displays the BlueCross BlueShield of Oklahoma website. At the top, there are navigation tabs for 'Welcome', 'Employers', 'Producers' (which is highlighted), and 'Providers'. To the right of these tabs are links for 'Feedback' and 'Text Size: AAA'. The main header features the BlueCross BlueShield of Oklahoma logo on the left and the 'blueaccess for Producers' logo on the right, followed by a 'Company Information' link and a search bar. Below the header is a row of five green buttons: 'Home', 'Get a Quote', 'Downloadable Forms', 'Provider Finder®', and 'Contact Us'. A 'Log In' button is also visible on the right side of this row. The 'Log In' section is titled 'Log In' in green. It contains four boxes for different user types: 'I'm a Returning Shopper', 'I'm a Member', 'I'm an Employer', and 'I'm a Producer'. Each box has a small image of a person and a brief description of their needs. The 'I'm a Producer' box is highlighted. Below these boxes is a large banner for 'Producers' featuring a woman's face. On the right side of the banner, there is a 'blueaccess for Producers' logo, a 'User Name' field with the value '00174000', a 'Password' field with masked characters, and a 'Log In' button. To the right of the login fields are two links: 'Need a User Name? Register now' and 'Forgot User Name or Password?'.

Welcome Employers **Producers** Providers Feedback Text Size: AAA

BlueCross BlueShield of Oklahoma blueaccess for Producers Company Information Search

Home Get a Quote Downloadable Forms Provider Finder® Contact Us Log In

**Log In**

**I'm a Returning Shopper**  
I want to complete my application or retrieve a saved quote.

**I'm a Member**  
**Log in to Blue Access for Members**  
I want to access my benefits information, health and wellness resources and more.

**I'm an Employer**  
**Log in to Blue Access for Employers**  
I'm looking for information I can use to add or maintain group benefits for my employees.

**I'm a Producer**  
**Log in to Blue Access for Producers**  
I'd like instant access to information I can use to respond to the needs of my customers.

**Producers**

blueaccess for Producers

User Name 00174000  
Password

Log In

Need a User Name? Register now  
Forgot User Name or Password?

- Click the Appropriate SSO Link
  - For BAE, click the "View Standard Plan SBC Tool" link
    - Click and expand the Account Summary link
    - Click on the Health Plans link
    - Click the Display button
    - Click the View Standard Plans SBC Tool link near the bottom of the screen

BlueCross BlueShield of Illinois

blueaccess for Employers

Contact Us | Help Center

Security Manager Logout

Welcome, Demo User (Acct #DEMO)

Home > Account Summary > Health Plans

**Employer Home**

- Account Summary
  - Account Details
  - Health Plans**
    - Life and Disability
    - Security Manager
    - User Profile
    - ondemand Wellness Portal
  - Enrollment
  - Employee Maintenance
  - Billing
  - Reports
- Form Finder**
  - Find**
  - [Advanced Search](#)
  - [View All Forms](#)
- Find a Doctor**

**Account Summary - Health Plans**

To view the details of a plan and drug coverage, select a product type from the left column, then select the options available for that product type. When you are finished, click on the **Display** button.

**HMO**  
**PPO**  
**DENTAL**

**Product: 0001 HMO**

**Display**

**Benefit Booklet**

Select a group to display Benefit Booklets: 0001

☒ [Benefit Booklet Example](#)

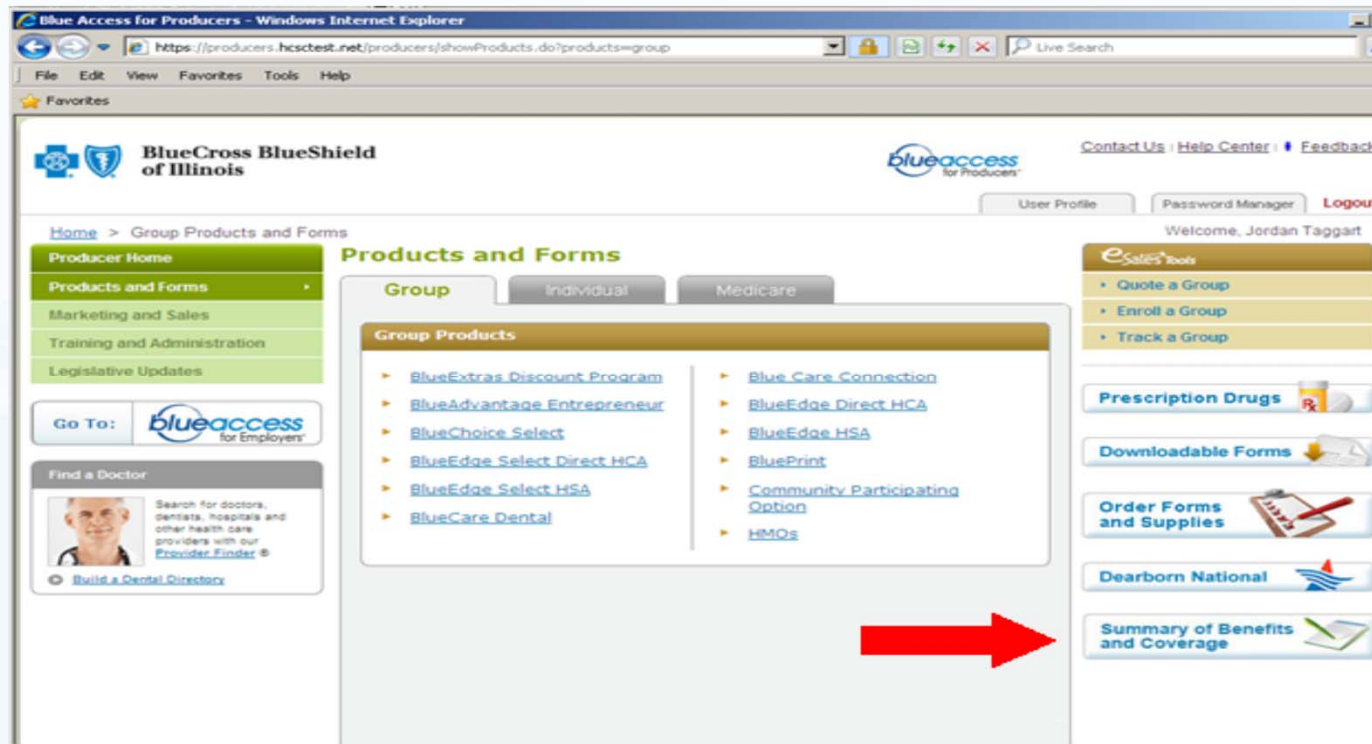
**Summary of Benefits and Coverage**

Under the Affordable Care Act, all health insurers and group health plans are required to provide consumers with a Summary of Benefits and Coverage (SBC). The SBC is a description of the benefits and health coverage offered by a particular plan.

Group Administrators can use the SBC Tool to search, download and email Standard Plan SBCs.

[View Standard Plan SBC Tool](#)

- For BAP, click the "Summary of Benefits and Coverage" link
  - Click Products and Forms
  - Click the Summary of Benefits and Coverage button



- If you enter through either BAP or BAE, you will be taken to the RR Donnelley SBC Tool and logged in. The user will be able to choose to search for Group plan SBCs or Individual (Retail) SBCs. You will be searching for Group Plan SBCs, so please select Group Plan as shown below. Then click on the “Next Step” button.

The screenshot shows a web interface for the RR Donnelley SBC Tool. At the top, there is a 'Logout' link. Below it is a red button labeled 'Create Summary'. Underneath this button is a form with a label 'Document Type:' followed by a dropdown menu currently showing 'Group Plan'. Below the dropdown is a red button labeled 'Next Step'. A mouse cursor is visible near the bottom right of the form area.

- Next you will be brought to the main RR Donnelley tool search screen (shown below) with all the fields you can use to narrow down your search for the SBC you need.

Logout

Search Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2014 ▼

Corporate Entity: -- Select -- ▼

Product Type Display: -- Select -- ▼

Plan ID:

Plan Name:

Plan Description:

Language: ENG ▼

Search



- Two fields – Plan Year and Corporate Entity – are mandatory and must be selected before searching can occur.
  - Insure that the correct Plan Year is selected in the Plan Year drop-down list which allows “2014” and “2013” as options.
  - 2014 is the default, but Standard Group plans enacted prior to 2014 are also available. For these, select 2013 for the Plan Year.

Logout

Search Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2014

Corporate Entity: 2013 --

Product Type Display: -- Select --

Plan ID:

Plan Name:

Plan Description:

Language: ENG

Search



- The second mandatory field, Corporate Entity must also be selected before a search can occur.
  - Insure that the correct Corporate Entity (IL, OK, NM or TX) is selected in the Corporate Entity drop-down list.
  - Your home state is the default.
  - If you need to view SBCs from another state, click the down arrow in the field and select another state. Your search results will be filtered by this field value. This field is required.
  - After an appropriate Corporate Entity is selected, the user may press the red Search button to display available SBCs.

Logout

Search Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2013

Corporate Entity: -- Select --

Product Type Display: -- Select --

Plan ID: IL

Plan Name: OK

Plan Description: NM

Plan Description: TX

Plan Description: MT

Language: ENG

Search



[Logout](#)

Search

Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2013

Corporate Entity: IL

Product Type Display: -- Select --

Plan ID:

Plan Name:

Plan Description:

Language: ENG

Search

Product Type	Product Type Display	Plan ID	Plan Name	Language	Plan Description
Blue Edge HCA	IL - Blue Edge HCA	BCE10105	BCE10105 BlueEdge HCA	ENG	\$1,500_\$1,500_20%_20%_20%
Blue Edge HCA	IL - Blue Edge HCA	BCE10305	BCE10305 BlueEdge HCA	ENG	\$1,500_\$1,500_20%_20%_20%
Blue Choice PPO	IL - Blue Choice PPO	BCP42322	BCP42322 BlueChoice PPO	ENG	\$250_\$1,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCP42323	BCP42323 BlueChoice PPO	ENG	\$250_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCP43432	BCP43432 BlueChoice PPO	ENG	\$250_\$2,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCP43433	BCP43433 BlueChoice PPO	ENG	\$250_\$2,000_\$15_\$30_\$50



- Select a matching and state-appropriate Product Type Display from the Product Type Display drop down list.
- All available Product Types are coded and sorted by Corporate Entity (for example, "IL – ", without the quotes)
- Click the red Search button again.
- Your search results will be further filtered and the number of matching SBCs will be reduced by this field value's search criteria.



Windows Internet Explorer

http://mshdpc-mws-wt30:809

Convert Select

Favorites Kelly

http://mshdpc-mws-wt30:809

HCSC

Logout

Search Customize

Choose one or more cr

Plan Year:

Corporate Entity:

Product Type Display:

Plan ID:

Plan Name:

Plan Description:

Language:

Search

-- Select --

- IL - BAE HMO
- IL - BAE PPO
- IL - Blue Choice PPO
- IL - Blue Edge HCA
- IL - Blue Edge HSA
- IL - Blue Edge Select HCA
- IL - Blue Edge Selected HSA
- IL - Blue Print PPO
- IL - CPO
- IL - Hallmark
- IL - Value Choice CPO
- IL - Value Choice HMO
- IL - Value Choice PPO
- NM - Blue PPO Options
- NM - BlueEdge 100 HSA
- NM - BlueEdge HSA
- NM - BlueNet EPO
- NM - BlueNet 'H' EPO
- NM - BluePPO Evolution
- NM - HMO Blue - Alternatives
- NM - HMO Blue - Traditional
- OK - Blue Choice PPO
- OK - Blue Optimize PPO
- OK - Blue Options PPO
- OK - Blue Preferred PPO
- OK - Blue Traditional PPO
- OK - BlueLincs HMO
- OK - HCA Blue Choice HDHP
- OK - HCA Blue Options HDHP

mentpage

SB Tool UAT Login Montage Production Montage Test Montage L

ress search.

- Blue Choice PPO has been returned below. Some Product Types contain many matches (3 pages below). Further narrowing via other search fields is shown next.

Logout

Search Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2013

Corporate Entity: IL

Product Type Display: IL - Blue Choice PPO

Plan ID:

Plan Name:

Plan Description:

Language: ENG

Search

Product Type	Product Type Display	Plan ID	Plan Name	Language	Plan Description
Blue Choice PPO	IL - Blue Choice PPO	BCP42322	BCP42322 BlueChoice PPO	ENG	\$250_\$1,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCP42323	BCP42323 BlueChoice PPO	ENG	\$250_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCP43432	BCP43432 BlueChoice PPO	ENG	\$250_\$2,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCP43433	BCP43433 BlueChoice PPO	ENG	\$250_\$2,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCP43436	BCP43436 BlueChoice PPO	ENG	\$250_\$2,000_\$10_\$40_\$60

Blue Choice PPO	IL - Blue Choice PPO	BCS72323	BCS72323 BlueChoice PPO	ENG	\$500_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCS72326	BCS72326 BlueChoice PPO	ENG	\$500_\$1,000_\$10_\$40_\$60
Blue Choice PPO	IL - Blue Choice PPO	BCS73433	BCS73433 BlueChoice PPO	ENG	\$500_\$2,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCS73434	BCS73434 BlueChoice PPO	ENG	\$500_\$2,000_\$15_\$35%_50%
Blue Choice PPO	IL - Blue Choice PPO	BCS73436	BCS73436 BlueChoice PPO	ENG	\$500_\$2,000_\$10_\$40_\$60
Blue Choice PPO	IL - Blue Choice PPO	BCS82323	BCS82323 BlueChoice PPO	ENG	\$1,000_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCS82326	BCS82326 BlueChoice PPO	ENG	\$1,000_\$1,000_\$10_\$40_\$60
Blue Choice PPO	IL - Blue Choice PPO	BCS83432	BCS83432 BlueChoice PPO	ENG	\$1,000_\$2,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCS83433	BCS83433 BlueChoice PPO	ENG	\$1,000_\$2,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCS83436	BCS83436 BlueChoice PPO	ENG	\$1,000_\$2,000_\$10_\$40_\$60
Blue Choice PPO	IL - Blue Choice PPO	BCS92322	BCS92322 BlueChoice PPO	ENG	\$1,500_\$1,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCS92323	BCS92323 BlueChoice PPO	ENG	\$1,500_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCS92326	BCS92326 BlueChoice PPO	ENG	\$1,500_\$1,000_\$10_\$40_\$60
Blue Choice PPO	IL - Blue Choice PPO	BCS93433	BCS93433 BlueChoice PPO	ENG	\$1,500_\$2,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCS93434	BCS93434 BlueChoice PPO	ENG	\$1,500_\$2,000_\$15_\$35%_50%
Blue Choice PPO	IL - Blue Choice PPO	BCS93436	BCS93436 BlueChoice PPO	ENG	\$1,500_\$2,000_\$10_\$40_\$60
Blue Choice PPO	IL - Blue Choice PPO	BCSC2326	BCSC2326 BlueChoice PPO	ENG	\$2,500_\$1,000_\$10_\$40_\$60
Blue Choice PPO	IL - Blue Choice PPO	BCSC3433	BCSC3433 BlueChoice PPO	ENG	\$2,500_\$2,000_\$15_\$30_\$50

- If known, the list of returned search results may be further reduced by entering in a Plan ID in the Plan ID field.
- The user may place their cursor in the field and type in a State appropriate Plan ID.
- This field supports the same type of partial search technology used in the previous SBC tool known as Pivot.
- If a whole or partial Plan ID is entered into the Plan ID field, the user should click the red search button again to further filter the returned search results.

**Caution** – The Plan ID field is case sensitive. Entering in an incorrect value will result in the application returning ZERO search results. To restore your previous search results and to try again, clear the incorrect Plan ID value from the field and click the red Search button.





Logout

Search

Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2013

Corporate Entity: IL

Product Type Display: IL - Blue Choice PPO

Plan ID: BCP4

Plan Name:

Plan Description:

Language: ENG

Search

Product Type	Product Type Display	Plan ID	Plan Name	Language	Plan Description
Blue Choice PPO	IL - Blue Choice PPO	BCP42322	BCP42322 BlueChoice PPO	ENG	\$250_\$1,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCP42323	BCP42323 BlueChoice PPO	ENG	\$250_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCP43432	BCP43432 BlueChoice PPO	ENG	\$250_\$2,000_\$10_\$20_\$35
Blue Choice PPO	IL - Blue Choice PPO	BCP43433	BCP43433 BlueChoice PPO	ENG	\$250_\$2,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCP43436	BCP43436 BlueChoice PPO	ENG	\$250_\$2,000_\$10_\$40_\$60



- If known, the list of returned search results may be further reduced by entering in a Plan Description in the Plan Description field.
- The user may place their mouse cursor in the field and type in a state-appropriate Plan Description.
- This field supports the same type of partial search technology used in the previous SBC tool known as Pivot.
- If a whole or partial Plan Description is entered into the Plan Description field, the user should click the red search button again to further filter the returned search results.

**Caution** – The Plan Description field is case sensitive. Entering in an incorrect value will result in the application returning ZERO search results. To restore your previous search results and to try again, clear the incorrect Plan Description value from the field and click the red Search button.

- \$15 was entered into the Plan Description field and the results were narrowed accordingly.
- The Plan Name field works just like the Plan Description field – it is case sensitive as well, but offers partial search.

Logout

Search Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2013

Corporate Entity: IL

Product Type Display: IL - Blue Choice PPO

Plan ID: BCP4

Plan Name:

Plan Description: \$15

Language: ENG

Search

Product Type	Product Type Display	Plan ID	Plan Name	Language	Plan Description
Blue Choice PPO	IL - Blue Choice PPO	BCP42323	BCP42323 BlueChoice PPO	ENG	\$250_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCP43433	BCP43433 BlueChoice PPO	ENG	\$250_\$2,000_\$15_\$30_\$50

- The RRD SBC Tool contains both Spanish and English SBCs. While the default is English, users may choose to search for either Spanish (SPA) or English (ENG) SBCs or both.

Logout

Search
Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2013

Corporate Entity: IL

Product Type Display: IL - Blue Choice PPO

Plan ID: BCP4

Plan Name:

Plan Description: \$15

Language: ENG

-- Any --

ENG

SPA

Product Type	Product Type Display	Plan ID	Plan Name	Language	Plan Description
Blue Choice PPO	IL - Blue Choice PPO	BCP42323	BCP42323 BlueChoice PPO	ENG	\$250_\$1,000_\$15_\$30_\$50
Blue Choice PPO	IL - Blue Choice PPO	BCP43433	BCP43433 BlueChoice PPO	ENG	\$250_\$2,000_\$15_\$30_\$50

- Once you have located the SBC you wish to customize, click the blue hyperlink in the Product Type column of the search results for the corresponding SBC. The row will be highlighted in green to indicate it has been selected.

HCSC

Logout

Search

Customize

Choose one or more criteria below to search for matching plans and press search.

Plan Year: 2013

Corporate Entity: IL

Product Type Display: IL - Blue Choice PPO

Plan ID: BCP4

Plan Name:

Plan Description: \$15

Language: ENG

Search

Product Type	Product Type Display	Plan ID	Plan Name	Language	Plan Description
<a href="#">Blue Choice PPO</a>	IL - Blue Choice PPO	BCP42323	BCP42323 BlueChoice PPO	ENG	\$250_\$1,000_\$15_\$30_\$50
<a href="#">Blue Choice PPO</a>	IL - Blue Choice PPO	BCP43433	BCP43433 BlueChoice PPO	ENG	\$250_\$2,000_\$15_\$30_\$50

Next Step



University of Illinois

For Internal Use Only

- A red Next Step button will appear. Click it.
- The user will be taken to the next customization screen where Coverage Period dates and Coverage For information can be entered.
- Enter in the appropriate Plan Effective and Plan Ending Dates.
- Use MM/DD/YYYYYY format for English SBCs.
- Use DD/MM/YYYYYY format for Spanish SBCs.
- Click the Coverage For drop down list.
- Please note that the list contains appropriate values for ALL states in both English and Spanish.
- Choose an appropriate Coverage For value from the drop down list in the correct language for the SBC you are customizing.

HCSC

Logout

Search

Customize

Plan Effective Date: 01/01/2013

Plan Ending Date: 12/31/2013

Coverage For: All

- All
- Individual/Family
- Employee + Child
- Employee + Children
- Employee + One Child
- Employee + Spouse
- Employee Only
- Family
- Individual
- Individual + Child
- Individual + Children
- Individual + Family
- Individual + Spouse
- Todo
- Empleado + Niño
- Empleado + Niños
- Empleado + Familia
- Empleado + Esposa
- Empleado
- Familia
- Individual
- Individual + Niño

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Current environment is: uat

- When completed, click the red Generate Proof button.

HCSC

---

Logout

Search Customize

**Plan Effective Date:** 01/01/2013

**Plan Ending Date:** 12/31/2013

**Coverage For:** Individual/Family ▼

**Generate Proof**



- The customized SBC will be displayed in draft form.
- Note the "PROOF" watermark in the body of the SBC.
- Proof your SBC.

Your proof will be displayed below.  
Please review it carefully and take one of the following actions:

[Make Changes](#) [Generate Final Copy](#)

1 / 7 53.4% Sign Find

BlueCross BlueShield of Illinois : BCP43433 BlueChoice PPO  
Coverage Period: 01/01/2013-12/31/2013  
Coverage for: Individual/Family | Plan Type: PPO

Summary of Benefits and Coverage: What this Plan Covers & What it Costs

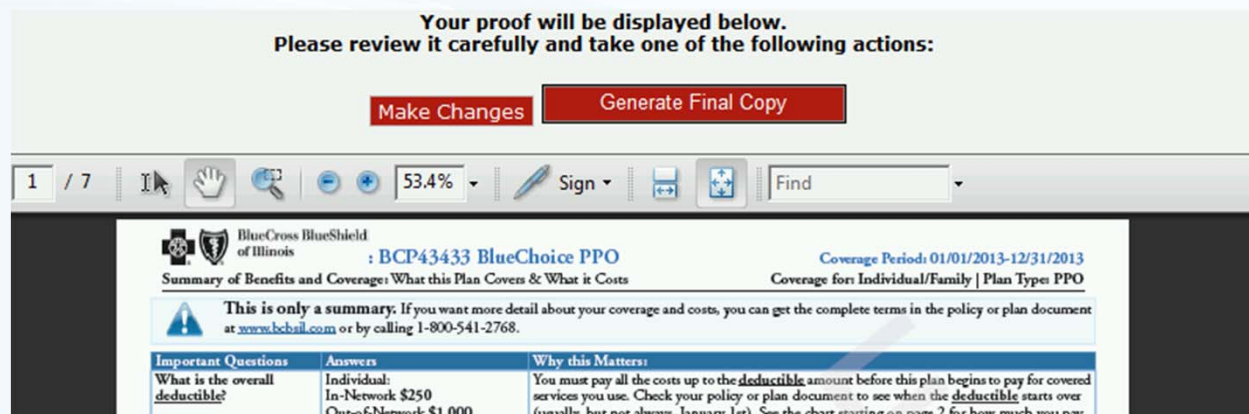
**This is only a summary.** If you want more detail about your coverage and costs, you can get the complete terms in the policy or plan document at [www.bcbsil.com](http://www.bcbsil.com) or by calling 1-800-541-2768.

Important Questions	Answers	Why this Matters
What is the overall deductible?	Individual: In-Network \$250 Out-of-Network \$1,000 Family is equivalent to 3 individuals. Doesn't apply to certain preventative care.	You must pay all the costs up to the <u>deductible</u> amount before this plan begins to pay for covered services you use. Check your policy or plan document to see when the <u>deductible</u> starts over (usually, but not always, January 1st). See the chart starting on page 2 for how much you pay for covered services after you meet the <u>deductible</u> .
Are there other deductibles for specific services?	Yes. \$300 deductible for Out-of-Network hospital admission. There are no other specific deductibles.	You must pay all the costs for these services up to the specific <u>deductible</u> amount before this plan begins to pay for these services.
Is there an out-of-pocket limit on my expenses?	Yes. Individual: In-Network \$2,000 Out-of-Network \$8,000 Family is equivalent to 3 individuals.	The <u>out-of-pocket</u> limit is the most you could pay during a coverage period (usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?	Copay, deductible, premiums, balance-billed charges, and health care this plan does not cover.	Even though you pay these expenses, they don't count toward the <u>out-of-pocket limit</u> .
Is there an overall annual limit on what the plan pays?	No.	The chart starting on page 2 describes any limits on what the insurer will pay for <u>specific</u> covered services, such as office visits.
Does this plan use a network of providers?	Yes. For a list of preferred providers, see <a href="http://www.bcbsil.com">www.bcbsil.com</a> or call 1-800-541-2768.	If you use an in-network doctor or other health care <u>provider</u> , this plan will pay some or all of the costs of covered services. Be aware, your in-network doctor or hospital may use an out-of-network <u>provider</u> for some services. Plans use the term in-network, <u>preferred</u> , or



- Check to ensure you have chosen the correct Plan ID.
- Check to ensure you have chosen the correct SBC language (English or Spanish).
- Check to ensure that the correct Coverage Period dates and Coverage For information appear in the SBCs header.

- If changes are required, click the red Make Changes button.
- The user will be taken back to the Customize SBC screen noted in the steps above.
- If the SBC appears correct, click the red Generate Final Copy Button.
- All of the proofing marks in the document will be removed and the customized SBC will be displayed.





- The customized SBC may be emailed directly to a recipient.
- Your email address is the default.
- Enter in the email address of the individual you wish to send a copy of the final SBC to and click the red Send button.
- A message will display in green text at the top of the screen indicating the email has been sent.
- To send the SBC to another recipient, clear the email address from the Email field, enter in the new email address and click the red Send button again.
- Also the SBC can be saved to your hard drive (see second image on next page).

Preview Statement

Your final copy will be generated and displayed below.

Create Another Go To Summary Listing

Email: bob.smith@xyz.com Send

1 / 7 53.4% Sign Find

BlueCross BlueShield of Illinois : BCP43433 BlueChoice PPO Coverage Period: 03/01/2013-12/31/2013  
Summary of Benefits and Coverage: What this Plan Covers & What it Costs Coverage for Individual/Family | Plan Type: PPO

**This is only a summary.** If you want more detail about your coverage and costs, you can get the complete terms in the policy or plan document at [www.bcbill.com](http://www.bcbill.com) or by calling 1-800-541-2768.

Important Questions	Answers	Why this Matters
What is the overall deductible?	Individual: In-Network: \$250 Out-of-Network: \$1,000 Family is equivalent to 3 individuals. Doesn't apply to certain preventative care.	You must pay all the costs up to the deductible amount before this plan begins to pay for covered services you use. Check your policy or plan document to see when the deductible starts over (usually, but not always, January 1st). See the chart starting on page 2 for how much you pay for covered services after you meet the deductible.
Are there other deductibles for specific services?	Yes, \$300 deductible for Out-of-Network hospital admission. There are no other specific deductibles.	You must pay all the costs for these services up to the specific deductible amount before this plan begins to pay for these services.
Is there an out-of-pocket limit on my expenses?	Yes, Individual: In-Network: \$2,000 Out-of-Network: \$8,000 Family is equivalent to 3 individuals.	The out-of-pocket limit is the most you could pay during a coverage period (usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?	Copay, deductible, premiums, balance-billed charges, and health care this plan does not cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Is there an overall annual	No.	The chart starting on page 2 describes any limits on what the insurer will pay for specific covered

Your final copy will be generated and displayed below.

Create Another Go To Summary Listing

Email: bob.smith@xyz.com Send


1 / 7 53.4% Sign Find

Click to save this file to your computer or another location

BlueCross BlueShield of Illinois : BCP43433 BlueChoice PPO Coverage Period: 03/01/2013-12/31/2013  
Summary of Benefits and Coverage: What this Plan Covers & What it Costs Coverage for Individual/Family | Plan Type: PPO

**This is only a summary.** If you want more detail about your coverage and costs, you can get the complete terms in the policy or plan document at [www.bcbill.com](http://www.bcbill.com) or by calling 1-800-541-2768.

Important Questions	Answers	Why this Matters
What is the overall deductible?	Individual: In-Network: \$250 Out-of-Network: \$1,000 Family is equivalent to 3 individuals. Doesn't apply to certain preventative care.	You must pay all the costs up to the deductible amount before this plan begins to pay for covered services you use. Check your policy or plan document to see when the deductible starts over (usually, but not always, January 1st). See the chart starting on page 2 for how much you pay for covered services after you meet the deductible.
Are there other deductibles for specific services?	Yes, \$300 deductible for Out-of-Network hospital admission. There are no other specific deductibles.	You must pay all the costs for these services up to the specific deductible amount before this plan begins to pay for these services.
Is there an out-of-pocket limit on my expenses?	Yes, Individual: In-Network: \$2,000 Out-of-Network: \$8,000 Family is equivalent to 3 individuals.	The out-of-pocket limit is the most you could pay during a coverage period (usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?	Copay, deductible, premiums, balance-billed charges, and health care this plan does not cover.	Even though you pay these expenses, they don't count toward the out-of-pocket limit.
Is there an overall annual	No.	The chart starting on page 2 describes any limits on what the insurer will pay for specific covered

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- To customize a different SBC, click the red Create Another button.
  - The user will be taken back to the SBC search screen and the process may be repeated.
  - When completed, click the Logout menu item at the top of the screen. The user will be logged out of the RRD SBC Tool.
  - **NOTE:** The RRD SBC Tool will automatically log the user out after 30 minutes of inactivity.