



Enrollment Guide

IPBC
PPO
01/01/2025



Get the Most from Your Health Plan

Welcome to Blue Cross and Blue Shield of Illinois (BCBSIL), a leader in health care benefits. We have been helping people like you get the most from their health care plans for many years.

Read this guide to learn about benefits your employer is offering. Think about how you and your family will use these benefits. Learn more about products, services and how to be a smart health care user at bcbsil.com.

Your ID Card

After you enroll, you will get a member ID card in the mail. Show this ID card when you see a doctor, visit the hospital or go to any other place for care. The back of the card has phone numbers you might need.

Blue Access for MembersSM

Go to bcbsil.com/member and sign up for the secure member website, Blue Access for Members. Find the "Log In" tab and click "Register Now." Use the information on your ID card to complete the process. On this site, you can check your claims, order more ID cards, get health information and much more.

Save Money – Stay In-Network

Using independently contracted network providers can help you save. Look at your ID card to find your network. Then go to bcbsil.com to look for doctors, hospitals and other places for care.

Call Customer Service for Help

Our team knows your health plan and can help you get the most from your benefits. Just call the toll-free number on the back of your ID card.



The PPO Plan

With the PPO plan, you can choose any doctor whenever you need care

The PPO plan offers a wide range of benefits and the flexibility to choose any doctor or hospital when you need care. The plan includes an annual deductible that you must satisfy before your benefits begin. Qualified medical expenses are applied toward your deductible.

PPO Network

Access to the large network of contracting providers is one of the many reasons to select the PPO plan. The network includes hospitals, physicians, therapists, behavioral health professionals and alternative care practitioners.

You and your covered dependents can receive care from any licensed doctor, hospital or other provider. However, when you use a contracting network provider, you will pay less out of pocket, you won't have to file any claims and you will receive the highest level of benefits. If you use a doctor outside the network, you'll still be covered, but your out-of-pocket costs may be significantly higher.

Medical Care

Your benefits may include coverage for*:

- physician office visits
- breast cancer screenings
- cervical cancer screenings
- inpatient hospital services
- muscle manipulation services
- outpatient hospital services
- physical, speech and occupational therapies
- outpatient surgery and diagnostic tests
- maternity care
- behavioral health and substance abuse
- hospital emergency medical and accident treatment

To find a contracting doctor or hospital, just go to **bcbsil.com** and click on the Find a Doctor or Hospital tab to use the Provider Finder® tool, or call BlueCard® Access at **800-810-BLUE (800-810-2583)** for help. Once you become a member, you can also call the toll-free Customer Service number on the back of your member ID card.



Medical Plan Frequently Asked Questions

Q. Are my medical records kept confidential?

A. Yes. Blue Cross and Blue Shield of Illinois (BCBSIL) is committed to keeping all specific member information confidential. Anyone who may have to review your records is required to keep your information confidential. Your medical records or claims data may have to be reviewed (for example, as part of an appeal that you request). If so, precautions are taken to keep your information confidential. In many cases, your identity will not be associated with this information.

Q. Who do I call with questions about my benefits?

A. Call the toll-free Customer Service number on the back of your member ID card.

Q. How do I find a contracting network doctor or hospital?

A. Go to **bcbsil.com** and use Provider Finder®, or call Customer Service at the toll-free number on the back of your member ID card.

Q. What do I do when I need emergency care?

A. Call 911 or seek help from any doctor or hospital. BCBSIL will coordinate your care with the emergency provider.

Some options for non-emergency care include:

- **Your doctor's office** for health exams, routine shots, colds, flu and other minor illnesses or injuries.
- **Walk-in retail health clinics** available in retail stores. Many have a physician assistant or nurse practitioner who can help treat ear infections, rashes, minor cuts and scrapes, allergies, colds and other minor health problems.
- **Urgent or immediate care clinics** for more serious health issues, such as when you need an X-ray or stitches.

Urgent Care or Freestanding Emergency Room?

Urgent care centers and freestanding ERs can be hard to tell apart. Freestanding ERs often look a lot like urgent care centers, but costs are higher, just as if you went to the ER at a hospital. Here are some ways to know if you are at a freestanding ER.

Freestanding ERs:

- Look like urgent care centers, but have **EMERGENCY** in the facility name.
- Are separate from a hospital but are equipped and work the same as an ER.
- Are staffed by board-certified ER physicians and are subject to the same ER copay.
- Find urgent care centers¹ near you by texting² **URGENTIL** to **33633** and then type in your ZIP code.

Q. What should I bring to my first appointment with a new doctor?

A. Your first appointment is an opportunity to share information about your health with your new doctor. Bring as much medical information as possible, including:

- **Medical records and insurance card** — If you are undergoing treatment at the time you change doctors, your medical records are important to your new doctor. Your insurance card provides information about copayments, billing and Customer Service phone numbers.
- **Medications** — Give your new doctor information about prescription and over-the-counter medications, including any herbal medications you take. Be sure to include the name of the medication, the dosage, how often you take it and why you take it.
- **Special needs** — Make a list of any equipment or devices you use including wheelchairs, oxygen, glucose monitors and the glucose strips. Be prepared to explain how you use them, not only to make sure you have the equipment you need, but also to make sure that there is no disruption in your care.

Q. What questions should I ask if I am selecting a new doctor?

A. In addition to preliminary questions you might ask a new doctor — such as “Are you accepting new patients?” — here are some questions to help you evaluate whether a doctor is right for you.

- What is the doctor’s experience in treating patients with the same health problems that I have?
- Where is the doctor’s office? Is there convenient and ample parking, or is it close to public transportation?
- What are the regular office hours? Does the office have drop-in hours if I have an urgent problem?
- How long should I expect to wait to see the doctor when I’m in the waiting room?
- Are routine lab tests and X-rays performed in the office, or will I have to go elsewhere?
- Which hospitals does the doctor use?
- If this is a group practice, will I always see my chosen doctor?
- How long does it usually take to get an appointment?
- How do I get in touch with the doctor after office hours?
- Can I get advice about routine medical problems over the phone or by email?
- Does the office send reminders for routine preventive tests like cholesterol checks?

Q. What if I’m already in treatment when I enroll and my provider isn’t in the network?

A. We’ll work with you to provide the most appropriate care for your medical situation, especially if you are pregnant or receiving treatment for a serious illness. You may still be able to see your out-of-network provider for a period of time. Call the toll-free Customer Service number on the back of your member ID card for more information.

¹ The closest urgent care center may not be in your network. Be sure to check Provider Finder to make sure the center you go to is in-network.

² Message and data rates may apply. Read terms, conditions and privacy policy at bcbsil.com/mobile/text-messaging.



Other Benefits for Non-HMO Plans

Your health care benefit plan travels with you wherever you go – across the country or around the world.

Preventive Care

Your coverage may include preventive care benefits for children and adults, including physical exams, diagnostic tests and immunizations. Check your group plan for specific coverage.

Emergency Care

If you, as a prudent layperson (with an average knowledge of health and medicine) need to go to the emergency room of any hospital, your care will be covered subject to your plan's deductible and any applicable copayments or coinsurance. In an emergency, you should seek care from an emergency room or other similar facility. Call 911 or other community emergency resources to obtain assistance in life-threatening situations. Your group plan may require that you, a family member or friend contact Blue Cross and Blue Shield of Illinois (BCBSIL) if you are admitted to the hospital.

National Coverage

You have nationwide access to contracting providers in networks linked through the BlueCard® program when you or your covered dependents live, work or travel anywhere in the country. The national network includes most physicians and hospitals in the country. Be sure to use a BlueCard network provider to receive the highest level of benefits.

With the BlueCard program, there are two ways to locate contracting doctors and hospitals:

- Visit the website at **bcbsil.com** and click on the Find a Doctor or Hospital tab to use the Provider Finder® tool or call BlueCard® Access at **800-810- BLUE (800-810-2583)** for help. Maps and driving directions are also available.
- Call Customer Service at the toll-free number on the back of your member ID card.



Reconstructive Surgery Following a Mastectomy

Federal and State of Illinois legislation require group health plans and health insurers to provide coverage for reconstructive surgery following a mastectomy. Specifically, these laws state that health plans that cover mastectomies must also provide coverage in a manner determined in consultation with the attending physician and patient for reconstruction of the breast on which the mastectomy has been performed, surgery and reconstruction of the other breast to produce a symmetrical appearance, and prostheses and treatment of physical complications for all stages of mastectomy, including lymphedemas.

Your coverage may also include benefits for baseline and annual mammograms. Check your group plan documents for details.

Illinois Dependent Eligibility Mandate

Under Federal law, your dependents are eligible for health and dental coverage up to the dependent limiting age and may not be denied coverage due to marital, student or employment status before age 26. Check with your employer for additional details regarding eligibility requirements. In addition, eligible military personnel may not be denied coverage before age 30 under Illinois law. If you elect Blue Choice SelectSM coverage, your dependents must live within the defined service area.

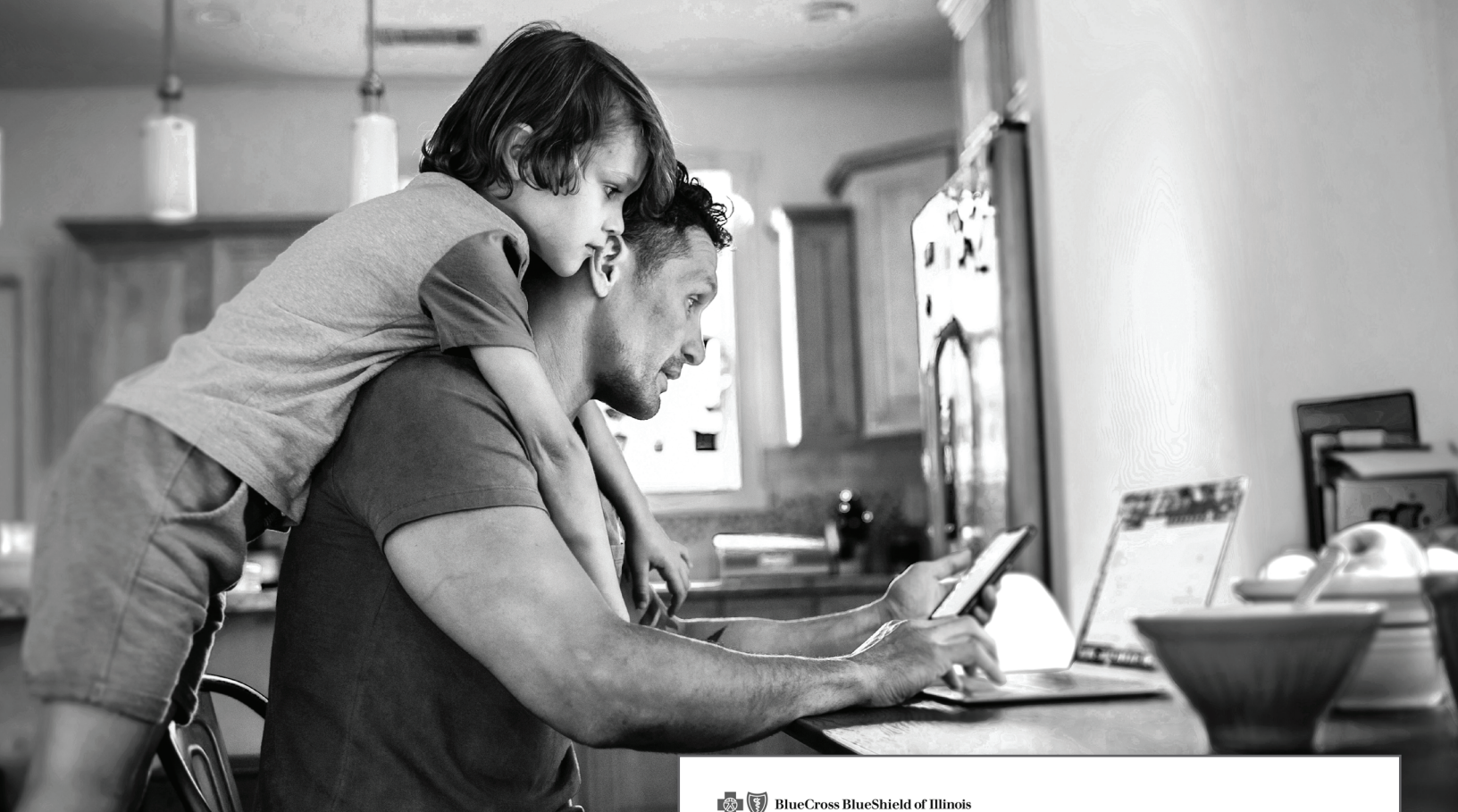
This Illinois law applies to all individual plans and insured group medical and dental plans, as well as self-insured municipalities, counties and schools. The law does not apply to self-funded national account groups or local non-municipal self-funded groups. If you have questions about this law, contact your benefits administrator.

International Coverage

When you travel outside the United States and need medical assistance services, call **800-810-BLUE (800-810-2583)** or call collect to **804-673-1177** for information. Blue Cross and Blue Shield has contracts with doctors and hospitals in more than 190 countries. An assistance coordinator, in conjunction with a medical professional, can arrange your doctor's appointment or hospitalization, if necessary.

Providers that participate in the Blue Cross Blue Shield Global[®] Core[®] program, in most cases, will not require you to pay up front for inpatient care. You are responsible for the out-of-pocket expenses such as a deductible, copayment, coinsurance and non-covered services. The doctor or hospital should submit your claim.

You also have coverage at non-contracting hospitals, but you will have to pay the doctor or hospital for care at the time of service, then submit an international claim form with original bills. Call Customer Service at the toll-free customer service number on your member ID card for the address to send the claim. You can get a claim form from your employer, Customer Service or online at **bcbsil.com**.



Understanding Your Explanation of Benefits

Your **Explanation of Benefits (EOB)** lets you know when and how we process your claims. It isn't a bill. It gives you a detailed look at the covered services and shows how much you may owe your provider after we apply your benefits.

Page One Covers the Basics

- A.** Confirm your policy ID.
- B.** Learn how to download the mobile app and access your claims online.
- C.** Find helpful contacts and a glossary.



BlueCross BlueShield of Illinois

PO Box 7344
Chicago, IL 60680-7344

John Smith
1234 Cedar Road
APT #2
Any Town, IL 76065

Sample

EXPLANATION OF BENEFITS



Log into **Blue Access for Members**™ at bcbsil.com

- View plan and claim details
- Contact us through our secure Message Center
- Sign up for digital health plan info
- Search for health care providers



Text* **BCBSILAPP** to 33633 to download the mobile app.



Have questions about this EOB? Customer Advocates are here to help! XXX-XXX-XXXX

SUBSCRIBER INFORMATION

GROUP NAME

Member ID#: XXXXXXXXX777V Group #: 000012345

Dear John Smith,

An Explanation of Benefits (EOB) is a statement showing how claims were processed. **This is not a bill.** Your provider(s) may bill you directly for any amount you may owe. **KEEP FOR YOUR RECORDS.**

HELPFUL INFORMATION

Want Your Health Care Info Digitally?

To get this EOB and other health care info on our mobile app, text* BCBSILAPP to 33633 to download the app. You can also go digital by logging in at bcbsil.com/member. Go to My Account and choose Profile and Preferences, then click Go Paperless.

Health Care Fraud Hotline: 800-543-0867

Health care fraud affects health care costs for all of us. If you suspect any person or company of defrauding or attempting to defraud Blue Cross and Blue Shield of Illinois (BCBSIL), please call our toll-free hotline. All calls are confidential and may be made anonymously. For more information about health care fraud, please go to bcbsil.com.

GLOSSARY OF TERMS - We have described some of the terms used here to help you understand them, but you should make sure to read your benefit plan materials if you have questions.

Amount Billed: The amount your provider billed for the service(s) rendered.

Amount Covered (Allowed): Discounts, reductions, and amount covered (allowed) reflect the terms of your plan, and in the case of an in-network provider, the savings we have negotiated with your provider. Your deductible, coinsurance and copay are based on the allowed amount and the terms of your plan. Your share of coinsurance is a percentage of the allowed amount after the deductible is met.

Coinsurance: The percentage of the allowed amount you pay as your share of the bill. For example, if your plan pays 80% of the allowed amount, 20% would be your coinsurance.

Copay Amount (Also known as Copayment): The set fee you pay each time you receive a certain service. Some plans do not have copayments.

Deductible: The amount, if any, you must pay before we start paying contract benefits. You do not send this amount to us. We subtract this amount from covered expenses on claims you and health care professionals send us. Some services can be covered before the deductible is met.

Non-Participating Provider: An out-of-network provider who does not accept rates for services we set to keep your costs down.

Out-of-Pocket Limit (Maximum): Once you pay this amount in deductibles, copayments and coinsurance for covered services, we pay 100% of the allowed amount for covered services for the rest of the benefit period.

Participating Provider: An in-network or out-of-network provider who accepts agreed-upon rates for services.

Your Total Costs: This is the sum of your copay, deductible and coinsurance. It also includes any amounts not covered by your health plan. Amounts that a non-participating provider may bill you are not part of this.

*Message and data rates may apply. Terms & Conditions and Privacy Policy bcbsil.com/member/account-access/mobile/text-messaging. Blue Cross and Blue Shield of Illinois provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

CLAIM DETAIL (1 OF 1)
PATIENT: JOHN SMITH **D**
PROVIDER: RALPH JOHNSTON M.D. **E**
CLAIM # XXXXXXXXXXXXX

Sample

DATE PROCESSED: 06/20/2022

F SUBSCRIBER INFORMATION
GROUP NAME

Member ID#: XXXXXXXX777V Group #: 000012345

Customer Advocates are here to help! 8XXX-XXX-XXXX

O²

Amount Billed	\$7,850.00
Discounts and Reductions	- \$3,930.00
Health Plan Responsibility	- \$2,219.00

O³

Paid from your HCA Account	- \$0.00
You may owe your health care provider for these services	\$1,701.00

		YOUR BENEFITS APPLIED				YOUR RESPONSIBILITY				
Service Description	Service Dates	Amount Billed G	Discounts and Reductions H	Amount Covered (Allowed) I	Health Plan Responsibility J	Deductible Amount K	Copay Amount L	Coinsurance M	Amount Not Covered N	Your Total Costs O
Surgical Charges	04/04/2022	4,000.00	(1) 1,800.00	2,200.00	960.00	1,000.00		240.00		1,240.00
Recovery Room	04/04/2022	900.00	(1) 410.00	490.00	392.00			98.00		98.00
Med/Surg Supplies	04/04/2022	300.00	(1) 140.00	160.00	128.00			32.00		32.00
Med/Surg Supplies	04/04/2022	100.00							(2) 100.00	100.00
Laboratory Services	04/04/2022	1,200.00	(1) 820.00	380.00	304.00			76.00		76.00
Laboratory Services	04/04/2022	400.00	(1) 270.00	130.00	72.00		50.00	8.00		58.00
MRI Outpatient	04/04/2022	950.00	(1) 490.00	460.00	363.00		15.00	82.00		97.00
CLAIM TOTALS		\$7,850.00	\$3,930.00	\$3,820.00	\$2,219.00	\$1,000.00	\$65.00	\$536.00	\$100.00	\$1,701.00

Total covered benefits approved for this claim: \$2,219.00 to Ralph Johnston M.D. on 06-20-22. **J²**
Notes about amounts under "YOUR BENEFITS APPLIED" and "YOUR RESPONSIBILITY"

- (1) The amount billed is greater than the amount allowed for this service. Based on our agreement with this provider, you will not be billed the difference.
- (2) Your Health Care Plan does not provide benefits for surgical assistant services when billed by the same physician who performed the surgery or administered the anesthesia. No payment can be made.

For your up-to-date Medical Spending summary, visit Blue Access for MembersSM on our website, the BCBSIL Mobile App or call the phone number on the back of your ID card.

JOHN SMITH - Benefit Period: 01-01-22 Through 12-31-22 To date this patient has met \$2,900.00 of her/his \$2,900.00 Out-of-pocket Expense.

Benefit Period: 01-01-22 Through 12-31-22 To date \$3,870.78 of the Family \$5,800.00 Out-of-pocket Expense has been met.

On Page Two You Can:

At a glance, confirm the:

D. Patient **E.** Provider **F.** Policy Information

Get the Details

YOUR BENEFITS APPLIED – This section shows your list of services and how they're covered.

G. Amount Billed is the total amount your provider billed for the services.

I. Amount Covered (Allowed) is the amount billed (G) minus any discounts or reductions (H).

J. Health Plan Responsibility is the portion we paid to your provider.

See Your Cost Share

YOUR RESPONSIBILITY – This section shows your member cost-share amounts, including:

K. Deductible **L.** Copays **M.** Coinsurance

O. Your Total Costs details the amount shown in O², and is the sum of your copay, deductible and coinsurance. You may owe less if your provider collected any of these payments up front. It also includes amounts not covered by your health plan (N). It does not include charges that a non-participating provider may bill you. If your benefits feature a Health Care Account (HCA), or other Health Savings Account (HSA), any payments from those accounts will be reflected in this line (O³). HCAs and HSAs do not apply to all benefit plans.

Get More Information

Your EOB may include a little more information about:

J². Total covered benefits approved – This is the amount and the date we paid your provider. The total matches the total in the Health Plan Responsibility column (J).

P. See discounts and reductions (H), and any amounts that aren't covered (N).

Q. Track your yearly out-of-pocket totals so you'll know when your patient cost-shares are met.

Sign up to get your EOBs online on **Blue Access for MembersSM** or text* **BCBSILAPP to 33633** to download the mobile app.

* Message and data rates may apply. See terms and conditions and our privacy policy at [bcbsil.com/member/account-access/mobile/text-messaging](https://www.bcbsil.com/member/account-access/mobile/text-messaging).

EOB samples are for illustrative purposes only. Not all EOBs are the same. The format and content of an EOB depends on your benefit plan and the services provided.

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We're with you wherever you go



Download the Blue Cross and Blue Shield of Illinois (BCBSIL) App to manage your health wherever you are.

- Find an in-network doctor, hospital or urgent care facility
- Access your claims, coverage and deductible information
- View or print your member ID card
- Log in securely with your fingerprint or face recognition*
- View your Explanation of Benefits

Then, Manage Your Preferences

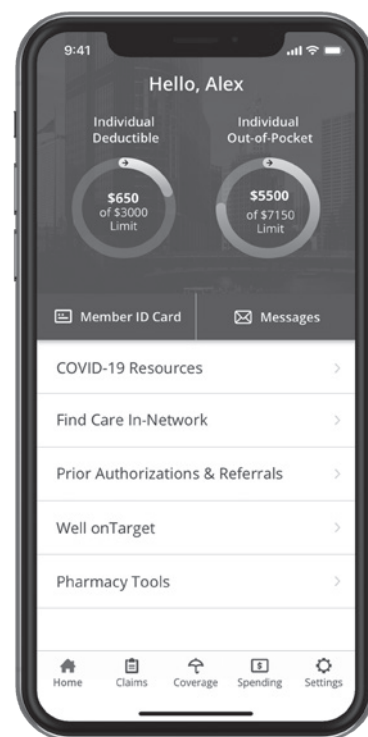
In the BCBSIL App:

- Update your profile with your mobile number.
- Set your notification preferences to text.

Choose the messages and information you want to get:

- Claims, prior authorization or referral updates
- New documents to review
- Secure message notifications
- Find out about new benefits and services

Ready to get started? Text **BCBSILAPP** to **33633**** to get the app.



Available in Spanish



* Availability varies by device.

** Message and data rates may apply. Terms and conditions and privacy policy at bcbsil.com/member/account-access/mobile/text-messaging.



Virtual Visits: **Get Cost-Effective, 24/7 Care**

With Virtual Visits from MDLIVE®, the doctor is always in. This Blue Cross and Blue Shield of Illinois (BCBSIL) benefit gives you access to 24/7 non-emergency care from a board-certified doctor or therapist by phone, online video or mobile app from almost anywhere.

Skip expensive ER bills and waiting to see a doctor. You can speak with a Virtual Visits doctor within minutes.

Services are available in both English and Spanish with translation services available in other languages.

Powered by
MDLIVE

Why Virtual Visits?

- 24/7 access to an independently contracted, board-certified doctor or therapist
- Access via phone, online video or mobile app from almost anywhere
- Average wait time of less than 20 minutes
- Doctors can send e-prescriptions to your local pharmacy

The Virtual Visits benefit is a convenient alternative for treatment of more than 80 health conditions, including:

- Allergies
- Cold/Flu
- Fever
- Headaches
- Nausea
- Sinus infections

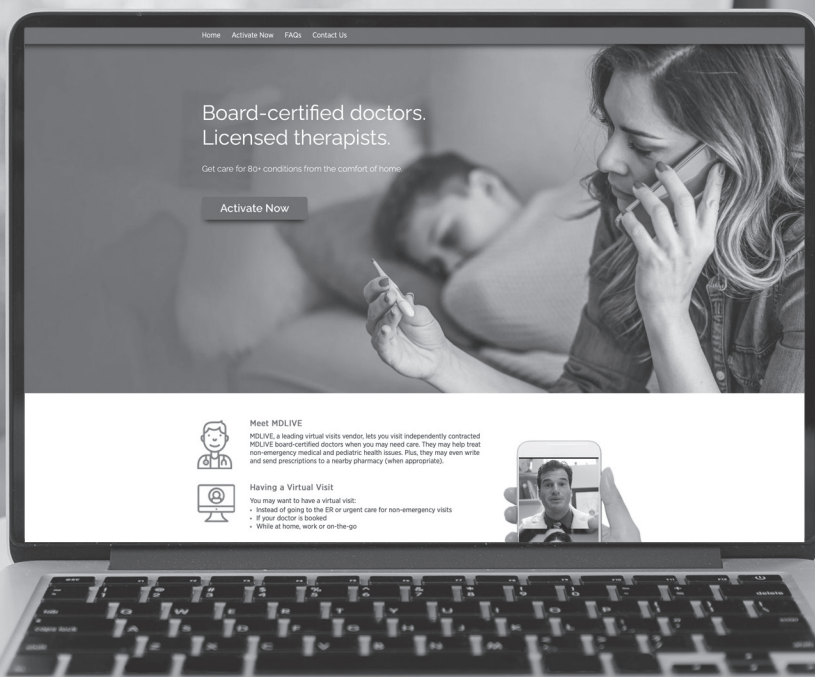
Virtual Visits sessions with licensed behavioral health therapists are available by appointment. Get virtual care for:

- Depression
- Eating disorders
- ADHD
- Substance use disorders
- Trauma and PTSD
- Autism spectrum disorder

First, call your doctor's office; they may also offer telehealth consultations by phone or online video. If you have any questions about this or any other BCBSIL benefit, please call the number on the back of your ID card.

Activate your Virtual Visits account today:

- Call 888-676-4204
- Go to MDLIVE.com/bcbsil
- Text BCBSIL to 635-483
- Download the app



Virtual Visits may be limited by plan. For providers licensed in New Mexico 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.

Blue Cross®, Blue Shield® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.



Compare Costs and You May Earn Cash with Member Rewards

Did you know that prices for the same quality medical services can differ by thousands of dollars within the same region and health plan network? Blue Cross and Blue Shield of Illinois provides **Member Rewards**, a program administered by Zelis that offers cash rewards when a lower-cost, quality option is selected.

- Compare it to where you park your car—the \$30 lot or the \$15 one just a few blocks away.
- Member Rewards allows you to shop for health care services in a similar way, and as the examples in the chart show, you can save money depending on the option you select.
- Best of all, shopping with Member Rewards could help lower your out-of-pocket costs and help get you a cash reward.

Reward Eligible Procedure	Provider A Cost	Provider B Cost
MRI of the Brain	\$682	\$2,723
Artificial Joint Repair	\$17,003	\$47,617

Examples shown are for illustration purposes and are not intended to represent costs for procedures in your area.

Program Benefits

Member Rewards uses our Provider Finder® tool to help you:

- Compare costs and quality for numerous procedures such as screenings, scans, surgeries and more
- Estimate out-of-pocket costs
- Earn cash rewards
- Save money and make the most efficient use of your health care benefits
- Consider treatment decisions with your doctors

Most of us look for value when we're shopping — why not apply this practice to shopping for health care services? With Member Rewards, you can reduce your costs and take more control of your health care financial decisions.

How Does It Work?



1. Find a reward-eligible provider by shopping online with Provider Finder — visit **bcbsil.com**, register or log in to Blue Access for MembersSM and select **Find Care**.



2. Get the procedure or service at your chosen reward-eligible provider.



3. Receive a cash reward by check, which will be mailed to your home, after the claim is paid and the provider is verified as reward-eligible.

Questions? Call the number on the back of your member ID card.

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.



Need a New Doctor?

Use Provider Finder®

ASO

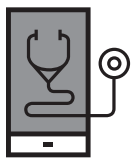
Find a provider and manage medical expenses all in one place.

To access Provider Finder members can create an account on Blue Access for MembersSM (BAMSM) at **bcbsil.com**.

Provider Finder from Blue Cross and Blue Shield of Illinois (BCBSIL) gives members access to in-network health care providers and helps them manage out-of-pocket medical costs.

Provider Finder helps members to:

- Find in-network providers, clinics, hospitals and pharmacies.
- Search by specialty, ZIP code, language spoken, gender and more.
- View clinical certifications and recognitions.
- Compare quality awards for doctors, hospitals and more.
- Read or share reviews for providers.
- Estimate the out-of-pocket costs for more than 1,700 health care procedures, treatments and tests.*
- Access prescription medication savings opportunities with the Medication Finder tool*



Go Mobile with BCBSIL

Even on the go members can manage their ID cards and stay on top of claims activity, coverage information and prescription refill reminders. It's easy: Log into or create a BAM account at **bcbsil.com** or text BCBSILAPP to 33633** to download our mobile app.

* Not all plans provide this information.

** Message and data rates may apply. Terms and conditions and privacy policy are available at bcbsil.com/mobile/text-messaging.

Retrain Your Brain



Feel better with Digital Mental Health programs from Learn to Live.

About half of all people in the U.S. will struggle with a mental health concern at some point in their lives.¹ Whether you're facing a challenge or just want to proactively manage your mental health, you can learn new skills and get help in breaking old patterns that may be holding you back. Digital Mental Health programs from Learn to Live can help you get your mental health on track so you can feel better and enjoy your life more fully.

Find out where you may need support

An online assessment can help pinpoint the right programs for you, such as:

- Stress, anxiety and worry
- Depression
- Insomnia
- Social anxiety
- Substance use
- Panic
- Resilience



Get a mental health tune-up — online



Learn to adjust unhelpful thoughts and manage your mood

Explore quick and easy lessons whenever it fits your schedule. A little homework between sessions helps you keep up your progress. Activities are based on therapy techniques with a track record of helping people get better.



Work with an expert coach to guide you

If you need one-on-one support to reach your goals, connect with a coach by phone, text or email. They'll lift you up, cheer you on and help you master your new skills.



Keep your personal details private

Just like with face-to-face therapy, your personal results, program progress and messages with your coach will not be shared with your employer.

Did you know?

Members who worked with a coach from Learn to Live saw 10% greater improvement in symptoms compared to those who did not.²



Check out the programs included at no added cost through your health plan with Blue Cross and Blue Shield of Illinois:

1. Log in at **bcbsil.com**
2. Select **Behavioral Health**
3. Choose **Digital Mental Health**

Register A Minor

Members 13 to 17 years old can also use the programs. To register a minor, complete one of the following options.

- If you previously created a Learn to Live account, log in, go to the **Resources** tab and click **"Register a Minor."**
- If you do not have an account, complete the three steps above, click **"Get Started"** and then select **"I want to allow a dependent to register for a Learn to Live account."**

1. U.S. Department of Health and Human Services, 2023

2. Learn to Live Quarterly Business Review Report, Q1 2024

Learn to Live provides educational behavioral health programs. Members considering further medical treatment should consult with a physician. Learn to Live, Inc. is an independent company that provides online behavioral health programs and tools for members with coverage through Blue Cross and Blue Shield of Illinois. BCBSIL makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.



BlueCross BlueShield of Illinois



You don't need to
be a rock star to
have a personal
assistant.



You already have one for your health care needs.

Are you ready for health care made easy? We think you are — that's why you have a Blue Cross and Blue Shield of Illinois (BCBSIL) health advocate* waiting to help with your benefits questions and health care needs.

It's easy to reach a health advocate:



Call toll-free 24/7 **877-245-5681**

Use MyEve[§] to see all your health benefits:



1. Visit myhealth.myeve.com or download the MyEve app
2. Enter IPBC as Company
3. Complete personal information

Health advocates can help you and your covered family members:

- Get personal assistance with your health care matters
- Understand your health benefits
- Talk to your BCBSIL clinician about health questions
- Sort out a new diagnosis and what to do next
- Shop for quality, lower-cost health care
- Earn cash rewards for making smart health care choices

**So stop trying to do it all on your own, we're here for you.
Call or chat with your health advocate today.**

* Health advocates do not replace the care of a doctor and you should talk to your doctor about any medical questions or concerns.

§ Evoke Health, LLC. is an independent company that provides health care communications and a digital member platform for Blue Cross and Blue Shield of Illinois.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

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Live Well with the Well onTarget Member Wellness Portal

The Well onTarget® Member Wellness Portal at **wellontarget.com** provides you with tools to help you set and reach your wellness goals. The portal is user-friendly, so you can find everything you need quickly and easily.

Explore Your Wellness World

When you log in to your portal, you will find a wide variety of health and wellness resources, including:

- The Health Assessment (HA)
- Self-Management Programs
- Health trackers
- Trusted news and health education content

See Your Stats in a Flash

Everything you want to see quickly is on your dashboard. The dashboard shows all of your Well onTarget programs. You can see where you are today compared with where you were when you started. You can also read the latest health news, check your activity progress and more.

Take a Snapshot of Your Health

The HA asks you questions about your health and habits.¹ You then get a Personal Wellness Report. This report suggests ways to make positive lifestyle changes. Your report can also help you decide which Well onTarget program to start first to get the most benefit. You can even print a Provider Report to share with your doctor.

Well onTarget®

Blue PointsSM Program²

Small rewards may motivate you to make positive changes to meet your wellness goals. With Well onTarget, you can earn Blue Points for making healthy choices. If you enroll in the Fitness Program or take your HA, you earn points.³ You can also earn points when you achieve milestones in the Self-Management Programs. Redeem your Blue Points in the online shopping mall, which offers a wide variety of merchandise.⁴

Health Tools and Trackers

Knowing what you eat and how much you work out can help you reach your goals. But keeping track of all you do can be time-consuming. To make it easy, the portal has trackers that let you record how much sleep you get, your stress levels, your blood pressure readings and your cholesterol levels.

The portal also offers a symptom checker. When you don't feel well, this tool can help you decide if you should see a doctor.

Self-Management Programs

These programs consist of:

1. Interactive programs with learning activities and content that focus on behavioral changes to reinforce healthier habits.
2. Educational programs that inform about symptoms, treatment options and lifestyle changes.

These two learning methods allow you to study on your own time and may help you get to the next level of wellness. Topics include nutrition, weight management, physical activity, stress management, tobacco cessation and more.

Fitness Tracking

Earn Blue Points for tracking your fitness activity using popular fitness devices and mobile apps.



Take Wellness on the Go

Check out the Well onTarget AlwaysOn Wellness mobile app, available for iPhone[®] and Android[™] smartphones. It can help you work on your wellness goals — anytime and anywhere.

1. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

2. 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.

3. This does not apply to points you earn for completing Fitness Program activities.

4. 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.

The Fitness Program is provided by Tivity Health[®], an independent contractor that administers the Prime Network of fitness centers. The Prime Network is made up of independently owned and operated fitness centers.



Experience a New Kind of Wellness — Log In to the Well onTarget® Portal

Well onTarget is designed to give you the support you need to make healthy lifestyle choices — and reward you for your hard work.

Member Wellness Portal

The Well onTarget Wellness Portal uses the latest technology to give you the tools you need for better health. Your wellness journey begins with a suggested list of activities based on the information you provided in the Health Assessment.*

Well onTarget®

Now you have a step-by-step plan to guide you on the way to living your best life.

The suite of programs and tools include:

- **Digital Self-management Programs:** Learn about nutrition, fitness, weight loss, quitting smoking, managing stress and more!
- **Health and Wellness Library:** The health library has useful articles, podcasts and videos on health topics that are important to you.
- **Blue PointsSM Program:**** Earn points for wellness activities. Redeem your points for a wide variety of merchandise in the online shopping mall.
- **Tools and Trackers:** These interactive resources help keep you on track while making wellness fun.
- **Health Assessment:** Answer some questions to learn more about your health and receive a personal wellness report.
- **Fitness and Nutrition Tracking:** Get Blue Points for tracking activity with popular devices and mobile apps.
- **Personal Challenges:** Join a personal challenge to help you reach your goals. There are over 30 challenges, so you can choose the best one to fit your wellness journey. Topics include stress, sleep, physical activity and more!

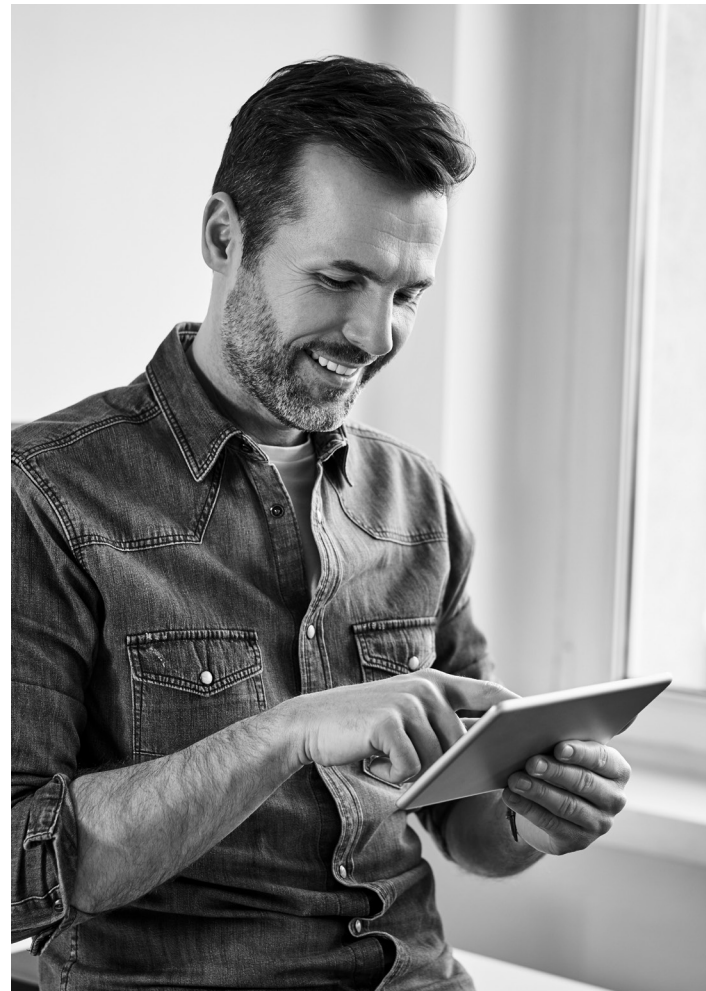
How to Access the Portal

Use your Blue Access for MembersSM (BAMSM) account:

- Log in to BAM at bcbsil.com/member. If this is your first time logging in, you will need to register your account. Click **Create an Account** on the login screen.
- Once you are in BAM, click on the **Wellness tab**. Then click on Visit Well onTarget and you will be taken to the Well onTarget portal.

Questions?

If you have any questions about Well onTarget, call Customer Service at **877-806-9380**.



**Log in to the Well onTarget
Member Wellness Portal today!**

*Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

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Are You Living a Healthy Lifestyle?

Take the Health Assessment and Find Out

Answer a few questions to get your wellness report.

By keeping track of your goals and monitoring your current health status, you have a greater chance of seeing those goals through to completion. Your Health Assessment is the suggested starting point once you've registered on the portal. See logon instructions on page two.

Can you spare some time for your health?

It's easy. You'll be asked a variety of basic lifestyle questions. Share some details about your diet, exercise, sleep and other daily activities.¹

You'll get feedback immediately.

Discover your healthiest habits along with top risks and strengths revealed in your Personal Wellness Report.

You can explore helpful tips, strategies and personalized digital tools to jump start your health journey.

After you log in, watch the Welcome video to learn more about the portal and valuable resources including: self-management programs, fitness and nutrition device integration, personal challenges and more.

You'll stay motivated by tracking your progress using the health trackers and self-progress check-in tools to help reach your personal health goals.

Well onTarget®

The Health Assessment (HA) consists of nine parts, which you can complete all at once or over time, as your schedule permits. These parts include questions about your:

- Diet
- Physical activity
- Tobacco use
- Emotional health
- Health at work and on the road

Get started today.

You can earn 2,500 Blue Points^{SM2} for taking your HA. With the Blue Points program, you will be able to earn points for regularly participating in many different healthy activities. You can redeem these points in the online shopping mall, which provides a wide variety of merchandise. Follow these simple steps to get started:

1. **Visit wellontarget.com and log in.** If you have an existing Blue Access for MembersSM (BAMSM) account, use your BAM username and password. If you aren't a registered user yet, click "Register Now" to create an account.
2. **If you have not taken your HA, there will be a pop-up notification after you log in.** You can also take your HA by clicking on "Start" in the "Health Assessment" box at the top of your dashboard. Once you have completed the HA, your reports will be available in this section.

How will the Health Assessment be personalized?

You will begin by answering a few basic questions. Then, you'll answer more detailed questions based on your answers to the first set of questions. Your health status and lifestyle will determine which questions you will be asked.

Your answers will help tailor the Well onTarget Member Wellness Portal with programs that could help you reach your health goals. You can take the HA twice a year to check your progress and earn Blue Points.



Take Your Health Assessment on the Go

Check out the Well onTarget mobile app (AlwaysOn), available for iPhone® and Android™ smartphones. You can complete your HA and work on your health and wellness goals — anytime and anywhere.



What should I do with my results?

After completing the HA, you will receive a confidential Personal Wellness Report. This can show you how you are doing currently and where and how you can improve.

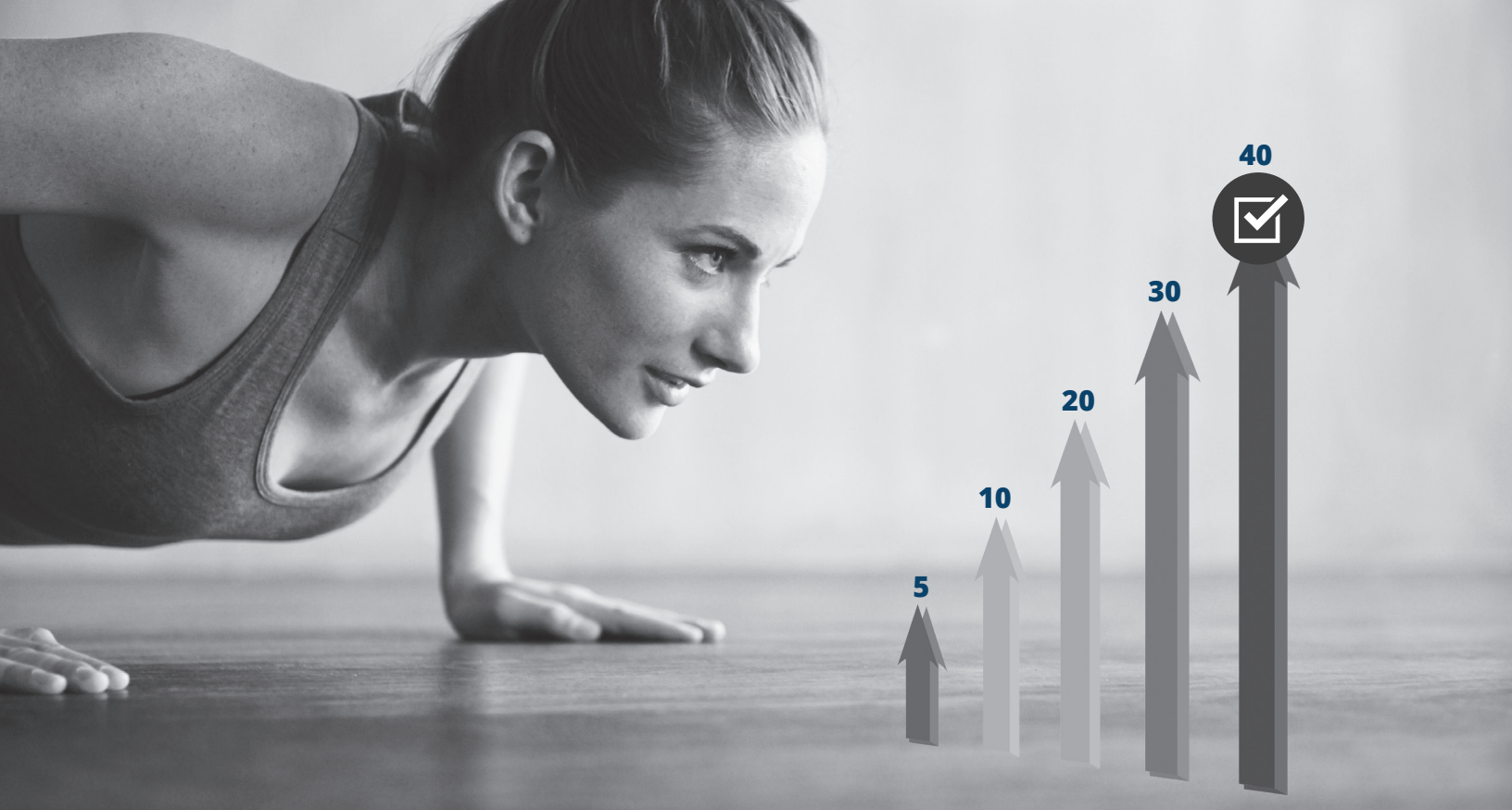
When you know your risks, you can choose your best options to avoid them. When you know your strengths, you can decide to build on them.

Have questions about the HA or the Well onTarget program? Call 877-806-9380.

¹ Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

² Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal at wellontarget.com for further 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.

AlwaysOn is owned and operated by Onlife Health Inc. an independent company that provides digital health management for members with coverage through Blue Cross and Blue Shield Plans in Illinois, Montana, New Mexico, Oklahoma and Texas. No endorsement, representations or warranties regarding third-party vendors and the products and services offered by them are being made.



Make Your Fitness Program Membership Work for You

The Fitness Program gives you flexible options to help you live a healthy lifestyle.

Since you are a Blue Cross and Blue Shield of Illinois (BCBSIL) member, the Fitness Program is available exclusively to you and your covered dependents (age 16 and older).^{*} The program gives you access to a nationwide network of fitness locations. Choose one location close to home and one near work, or visit locations while traveling.

Other program perks include:

- **Flexible Gym Network:** A choice of gym networks to fit your budget and preferences.^{**}

Options	Digital Only	Base	Core	Power	Elite
Monthly Fee	\$10	\$19	\$29	\$39	\$99
Gym Facility Network Size [†]	Digital Access Only	3,000	7,500	12,000	12,400
\$19 Enrollment Fee (No Enrollment fee for Digital Only Option)					

- **Studio Class Network:** Boutique-style classes and specialty gyms with pay-as-you-go option and 30% off every 10th class.
- **Family Friendly:** Expands gym network access to your covered dependents at a bundled price discount.
- **Convenient Payment:** Monthly fees are paid via automatic credit card or bank account withdrawals.

[†] Represents possible network locations. Check local listings for exact network options as some locations may not participate. Network locations are subject to change without notice.

Features

- **Mobile App:** Allows members to access location search, studio class registration, location check-in and activity history.

Check out the Well onTarget Fitness mobile app, available from Apple® or Google Play™. It can help you work on your fitness goals — anytime and anywhere.

- **Real-time Data:** Provided to the mobile app and Well onTarget portals.
- **Complementary and Alternative Medicine (CAM) Discounts Through the WholeHealth Living Choices Program:** Save money through a nationwide network of 40,000 health and well-being providers, such as acupuncturists, massage therapists and personal trainers. To take advantage of these discounts, register at www.whlchoices.com.***
- **Blue PointsSM:** Get 2,500 points for joining the Fitness Program. Earn additional points for weekly visits. You can redeem points for apparel, books, electronics, health and personal care items, music and sporting goods.****
- **Web Resources:** You can go online to find fitness locations and track your visits.

- **Digital Fitness:** Stay active from the comfort of your own home. Access thousands of digital fitness videos and live classes including cardio, bootcamp, barre, yoga, and more through an online platform. Digital access is included with Base, Core, Power and Elite memberships. You can also join the Digital Only plan option if only interested in access to digital fitness options.

Are You Ready for Fitness?

It's easy to sign up:

1. Go to bcbsil.com and log in to Blue Access for MembersSM.
2. Select the Wellness tab on the top navigation bar of the Dashboard page. Then scroll down to the Fitness Program section and click on **Learn More**.
3. Complete registration form.
4. Verify your personal information and method of payment. Print or download your Fitness Program membership ID card. You may also request to receive the ID card in the mail.
5. Visit a fitness location today!

Prefer to sign up by phone or have questions about the Fitness Program? Just call the toll-free number **888-762-BLUE (2583)** Monday through Friday, between 7 a.m. and 7 p.m., CT (6 a.m. and 6 p.m., MT).

Find fitness buddies, take a digital class and try something new!

Join the Fitness Program today to help you reach your health and wellness goals.



*Individuals must be 18 years old to purchase a membership. Dependents, 16-17 years old, can join but must be accompanied to the location by a parent/guardian who is also a Fitness Program member. Check your preferred location to see their membership age policy. Underage dependents can login and join through the primary member's account as an "additional member."

**Taxes may apply. Individuals must be at least 18 years old to purchase a membership.

The Fitness Program is provided by Tivity Health™, an independent contractor that administers the Prime Network of fitness locations. The Prime Network is made up of independently owned and operated fitness locations.

The WholeHealth Living Choices program is administered by Tivity Health™ Services, LLC. This is NOT insurance. Some of the services offered through this program may be covered by a health plan. The relationship between these vendors and Blue Cross and Blue Shield of Illinois is that of independent contractors.

***WholeHealth Living Choices is not available in Montana and Oklahoma.

Participation in the Well onTarget program, including the completion of a Health Assessment, is voluntary and you are not required to participate. Visit Well onTarget for complete details and terms and conditions.

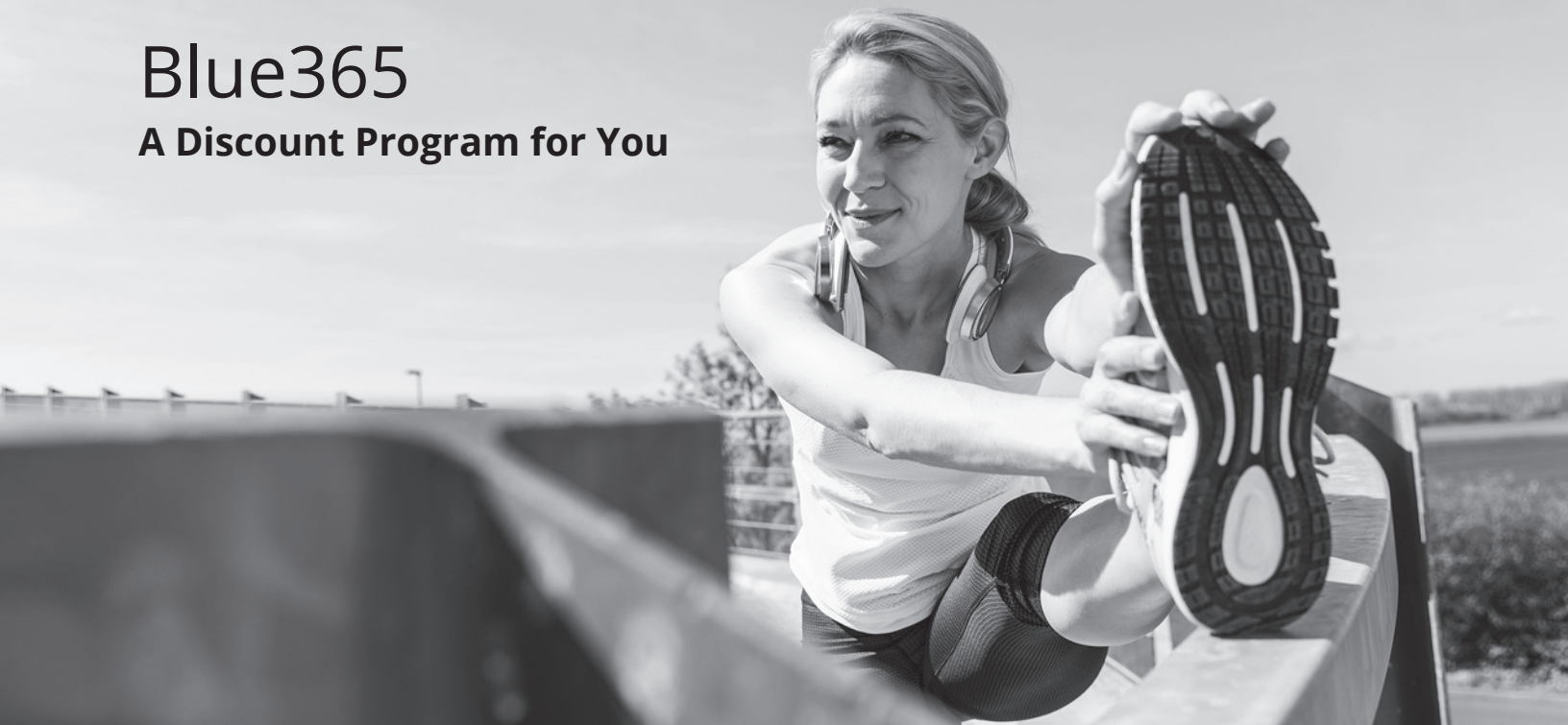
Blue Points Program Rules are subject to change without prior notice. See the Program Rules on the Well onTarget Member Wellness Portal for more information.

****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.

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

Blue365

A Discount Program for You



Blue365 is just one more advantage you have by being a Blue Cross and Blue Shield of Illinois (BCBSIL) member. With this program, you may save money on health and wellness products and services from top retailers that are not covered by insurance. There are no claims to file and no referrals or preauthorizations. Once you sign up for Blue365 at blue365deals.com/bcbsil, weekly “Featured Deals” will be emailed to you. These deals offer special savings for a short period of time.

Below are some of the ongoing deals offered through Blue365.

EyeMed® | Davis Vision®

You can save on eye exams, eyeglasses, contact lenses and accessories. You have access to national and regional retail stores and local eye doctors. You may also get possible savings on laser vision correction.

TruHearing® | Beltone™ | Start Hearing

You could get savings on hearing tests, evaluations and hearing aids. Discounts may also be available for your immediate family members.

Dental SolutionsSM

You could get dental savings with Dental Solutions. You may receive a dental discount card that provides access to discounts of up to 50% at more than 70,000 dentists and more than 254,000 locations.*

Sun Basket | Nutrisystem®

Help reach your weight loss goals with savings from leading programs. You may save on healthy meals, membership fees (where applicable), nutritional products and services.

See all the Blue365 deals and learn more at blue365deals.com/bcbsil.



Fitbit®

You can customize your workout routine with Fitbit's family of trackers and smartwatches that can be employed seamlessly with your lifestyle, your budget and your goals. You'll get a 20% discount on Fitbit devices plus free shipping.

Reebok | SKECHERS®

Reebok, a trusted brand for more than 100 years, makes top athletic equipment for all people, from professional athletes to kids playing soccer. Get 20% off select models. SKECHERS, an award-winning leader in the footwear industry, offers exclusive pricing on select men's and women's styles. You can get 30% off plus free shipping for your online orders.

InVite® Health

InVite Health offers quality vitamins and supplements, educational resources and a team of health care experts for guidance to select the correct product at the best value. Get 50% off the retail price of non-genetically modified microorganism (non-GMO) vitamins and supplements.

Livekick

Livekick is the future of private fitness. Choose from training or yoga over live video with a private coach. Get fit and feel healthier with action-packed 30-minute sessions that you can do from home, your gym or your hotel while traveling. Get a free two-week trial and 30% off a monthly plan on any Live Online Personal Training.

eMindful

Get up to a 50% discount on any of eMindful's live streaming or recorded premium courses. Apply mindfulness to your life including stress reduction, mindful eating, chronic pain management, yoga, Qigong movements and more.

**For more great deals or to
learn more about Blue365,
visit blue365deals.com/bcbsil.**

The relationship between these vendors and Blue Cross and Blue Shield of Illinois (BCBSIL) is that of independent contractors. BCBSIL makes no endorsement, representations or warranties regarding any products or services offered by the above-mentioned vendors.

* Dental Solutions requires a \$9.95 signup and \$6 monthly fee.

Blue365 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. You should check your benefit booklet or call the customer service number on the back of your 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 given only through vendors that take part in this program and may be 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.



Prepare for Your Life-Changing Journey

Women's and Family Health Pregnancy, Parenting and Menopause Support

Wherever you are in your journey, Blue Cross and Blue Shield of Illinois (BCBSIL) is here to support you at no extra cost.

- **Ovia Health™** apps are for tracking your cycle, pregnancy, parenting and menopause support. The apps are available in English and Spanish*, and provide videos, tips, coaching and more.
 - **Ovia:** Track your cycle, predict when you are more likely to get pregnant or receive menopause support when the time comes.
 - **Ovia Pregnancy:** Monitor your pregnancy and baby's growth week by week leading up to your baby's due date.
 - **Ovia Parenting:** Keep up with your child's growth and milestones.
- **Well onTarget®** has self-guided courses about pregnancy that you can take online, covering topics such as healthy foods, body changes and labor.

Plus, if your pregnancy is high-risk, BCBSIL will provide support from maternity specialists to help you care for yourself and your baby. Having a baby changes everything, so use these tools to help you get ready.



Download any of the Ovia Health apps from the Apple App

Store or Google Play. During sign-up, make sure to choose "I have Ovia Health as a benefit." Then select BCBSIL as your health plan and enter your employer name (optional). Also, visit wellontarget.com to explore our online courses. Please call 888-421-7781 if you have questions or want to learn more.

Ovia Health is an independent company that provides maternity and family benefits solutions for Blue Cross and Blue Shield of Illinois. Well onTarget is a voluntary wellness program. Completion of the Health Assessment is not required for participation in the program.

*To access the Spanish version of the Ovia, Ovia Pregnancy and Ovia Parenting apps, you must select "Español" as the language preference in your mobile phone or device settings.



Adult Wellness Guidelines

Making Preventive Care a Priority

Adult Health – for ages 19 and over

Preventive care is very important for adults. By making some good, basic health choices, women and men can boost their health and well-being. Some of these positive choices include:

- Eat a healthy diet
- Get regular exercise
- Don't use tobacco
- Limit alcohol use
- Strive for a healthy weight

Screenings	
Weight	Every visit or at least annually
Body Mass Index (BMI)	Every visit or at least annually
Blood Pressure (BP)	Every visit or at least annually
Cholesterol	Adults 40 to 75 years of age should be screened; or adults 20 to 39 years old who have risk for coronary heart disease. Talk with your health care provider* about the starting and frequency of screening that is best for you.
Colon Cancer Screening	Adults age 45-75 for colorectal cancer using: Guaiac Fecal Occult Blood Test (gFOBT) annually or; Fecal Immunochemical Testing (FIT) annually or; Fecal Immunochemical Testing (FIT)-DNA every 1-3 years or; Flexible sigmoidoscopy every 5 years or; Flexible sigmoidoscopy every 10 years with FIT annually or; Colonoscopy every 10 years or; CT Colonography every 5 years.** The risks and benefits of different screening methods vary. For details about pharmacy benefit coverage, call the number on the back of your Member ID card.
Diabetes Screening	Those with high blood pressure should be screened. Those who are overweight or have cardiovascular risk factors should be screened. All others should be screened starting at age 45.**
Hepatitis C (HCV) Screening	Once for adults age 19-79. Most adults need to be screened only once. Persons with continued risk for HCV infection (eg, PWID) and persons at high risk for infection should be screened periodically.
HIV Screening	Adults ages 19 to 65, older adults at increased risk and all pregnant women should be screened. Those 26-45 years of age, should discuss their options with their health care provider.

* A health care provider could be a doctor, primary care provider, physician assistant, nurse practitioner or other health care professional.
** Recommendations may vary. Discuss the start and frequency of screenings with your health care provider, especially if you are at increased risk.

Adult Health

Men and women are encouraged to get care as needed, make smart choices and make regular screenings a priority. Following a healthy lifestyle and getting recommended preventive care services is a game plan for better overall health.

Discussing recommended preventative care services, screenings and immunizations with your health care provider is a step in the right direction to win at wellness.

Immunizations (Vaccines)	
Tetanus Diphtheria Pertussis (Td/Tdap)	Get Tdap vaccine once, then a Td booster every 10 years
Influenza (Flu)	Yearly
Human Papillomavirus (HPV)	All Adults age 19-26, 2 or 3 doses depending on age at time of initial vaccination if not already given.** Those 27-45 should discuss options with their health care provider.
Herpes Zoster (Shingles)	Two doses of RZV starting at age 50, or one dose of ZVL at age 60 or over. Discuss your options with your health care provider.*
Hepatitis B (Hep B)	2, 3, or 4 doses depending on vaccine or condition beginning at age 19-59. Discuss your options with your health care provider.*
Varicella (Chicken Pox)	2 doses beginning at age 50
Pneumococcal (Pneumonia)	Ages 65 and over, one dose of PCV 15 followed by PPSV 23 OR one dose of PCV 20. Discuss your options with your health care provider.*
Measles, Mumps, Rubella (MMR)	1 or 2 doses for adults born in 1957 or later who have no evidence of immunity
COVID-19 Vaccine	The CDC recommends adults get the COVID-19 vaccine. Talk to your health care provider or pharmacist about the COVID-19 vaccine and when you should get it.
Women's Recommendations	
Mammogram	At least every 2 years for women ages 50 to 74 Ages 40 to 49 should discuss the risks and benefits of screening with their health care provider
Cervical Cancer Screening	Women ages 21 to 65: Pap test every 3 years Another option for ages 30 to 65: Pap test with HPV test every 5 years Women who have had a hysterectomy or are over age 65 may not need a Pap test*
Osteoporosis Screening	Women who are at an increased risk for osteoporosis should be screened at ages 65 and older. Bone measurement testing is recommended for postmenopausal women younger than 65 years who are at increased risk of osteoporosis as determined by a formal clinical risk assessment tool.
Intensive Behavioral Counseling	All sexually active individuals (12 years old and above) who are at increased risk for sexually transmitted infections (STIs).
Men's Recommendations	
Prostate Cancer Screening	Discuss the benefits and risks of screening with your health care provider.**
Abdominal Aortic Aneurysm	Have an ultrasound once between ages 65 to 75 if you have ever smoked.
Intensive Behavioral Counseling	All sexually active individuals (12 years old and above) who are at increased risk for sexually transmitted infections (STIs).

The recommendations provided in the table are based on information from organizations such as the Advisory Committee on Immunization Practices, the American Academy of Family Physicians, the American Cancer Society and the United States Preventive Services Task Force. The recommendations are not intended as medical advice nor meant to be a substitute for the individual medical judgment of a health care provider. Please check with your health care provider for individualized advice on the recommendations provided.

Learn more. Additional sources of health information include:

- ahrq.gov/patients-consumers/prevention/index.html
- cancer.org/cancer/risk-prevention/diet-physical-activity.html
- cdc.gov/vaccines/

You probably don't hesitate to ask your health care provider about nutrition and exercise, losing weight and stopping smoking. Other topics for discussion may include:

- Dental health
- Problems with drugs or alcohol
- Sexual behavior and sexually transmitted diseases
- Feelings of depression
- Domestic violence
- Accident/injury prevention
- Preventing falls, especially for ages 65 and over

* Recommendations may vary. Discuss screening options with your health care provider, especially if you are at increased risk.

** Coverage for preventive care services at no cost share may vary depending on your specific benefit plan and use of network providers. For questions, please call the Customer Service number on the back of your ID card.



Good health is a gift anyone would wish for a child, but it doesn't happen without your help.

Some things you can do to help keep your child well:

- Introduce good nutrition at an early age and be a good role model
- Encourage lots of play and physical activity
- Keep up with recommended vaccines

Blue Cross and Blue Shield of Illinois wants your child to be well.

Children's Wellness Guidelines

Laying the Groundwork for a Healthy Tomorrow

Children's Health

Put your child on the path to wellness. Schedule a yearly Well Child visit with your child's health care provider* and follow immunization guidelines. The health care provider will watch your child's growth and progress and should talk with you about eating and sleeping habits, safety and behavior issues.

According to the Bright Futures recommendations from the American Academy of Pediatrics, the provider should:

- Check your child's Body Mass Index percentile regularly beginning at age 2
- Check blood pressure yearly, beginning at age 3
- Screen hearing at birth, then yearly from ages 4 to 6, then at ages 8 and 10
- Test vision yearly from ages 3 to 6, then at ages 8, 10, 12, and 15

Help protect your child from sickness. Make sure they get the recommended vaccinations shown in the charts. If your child has missed vaccinations, ask your health care provider how to catch up.

Learn more from your child's doctor or at [healthychildren.org](https://www.healthychildren.org).

Please note: These recommendations are for healthy children who don't have any special health risks. Take time to check the following summaries of key preventive services.

*A health care provider could be a doctor, primary care provider, physician assistant, nurse practitioner or other health care professional.

Be sure your child is up-to-date on immunizations and health screenings.

Routine Children's Immunization Schedule¹

Vaccine	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	11/2 - 3 years	4 - 6 years
Hepatitis B (HepB)	●	●				●				
Rotavirus (RV) RV1 (2 Dose Series); RV 5 (3 Dose Series)			●	●	●					
Diphtheria Tetanus and Pertussis (DTaP)			●	●	●		●			●
Haemophilus Influenzae Type B (Hib)			●	●	●	●				
PedvaxHIB			●	●		●				
Pneumococcal Conjugate (PCV)			●	●	●	●				
Inactivated Polio Vaccine (IPV)			●	●		●				●
Influenza (Flu)					●	Recommended yearly starting at age 6 months with 2 doses given the first year				
COVID-19 (Coronavirus disease 2019)					●	Recommended yearly starting at age six months*.				
Measles, Mumps and Rubella (MMR)						●				●
Varicella (Chicken pox)						●				●
Hepatitis A (HepA)						●	1 st dose: 12 to 23 months 2 nd dose: 6 to 18 months later		●	

● One dose Shaded areas indicate the vaccine can be given during shown age range.

*Number of doses recommended depends on your child's age and type of Covid-19 vaccine used.

Adolescents

As your children grow into adolescents, they should continue yearly preventive care visits for exams and scheduled immunizations. These visits give the health care provider a chance to:

- Discuss the importance of good eating habits and regular physical activity.
- Talk about avoiding alcohol, smoking and drugs.
- Screen for sexual activity and sexually transmitted diseases as appropriate.
- Screen for HIV between the ages of 15 and 18, or earlier if at increased risk.

Recommended Immunizations for ages 7 to 18¹

Vaccine	7 - 10 years	11 - 12 years	13 - 15 years	16 years	17 - 18 years
Tetanus Diphtheria Pertussis (Tdap)		●			
Human Papillomavirus (HPV) – boys and girls		● 2 doses			
Meningococcal (MenACWY)		●		●	
Influenza (Flu)			Yearly		
COVID-19 (Coronavirus disease 2019)			Yearly		

1. These recommendations come from the Centers for Disease Control and Prevention and the American Academy of Pediatrics (cdc.gov/vaccines/hcp/acip-recs/index.html). The recommendations are not intended as medical advice nor meant to be a substitute for the individual medical judgment of a health care provider. Please check with your health care provider for individual advice on the recommendations provided.

Coverage for preventive services may vary depending on your specific benefit plan and use of network providers. For questions, please call the Customer Service number on the back of your ID card.

Blue Cross and Blue Shield of Illinois (BCBSIL) is required to provide you a HIPAA Notice of Privacy Practices as well as a State Notice of Privacy Practices. The HIPAA Notice of Privacy Practices describes how BCBSIL can use or disclose your protected health information and your rights to that information under federal law. The State Notice of Privacy Practices describes how BCBSIL can use or disclose your nonpublic personal financial information and your rights to that information under state law. Please take a few minutes and review these notices. You are encouraged to go to the Blue Access for Members (BAM) portal at BCBSIL.com to sign up to receive these notices electronically. Our contact information can be found at the end of these notices.

HIPAA NOTICE OF PRIVACY PRACTICES – Effective 9/23/13

YOUR RIGHTS. When it comes to your health information, you have certain rights.

This section explains your rights and some of our responsibilities to help you.

Get a copy of your health and claims records	- You can ask to see or get a copy of your health and claims records and other health information we have about you. Ask us how to do this by using the contact information at the end of this notice. - We will provide a copy or a summary of your health and claims records usually within 30 days of the request. We may charge a reasonable, cost-based fee.
Ask us to correct health and claims records	- You can ask us to correct your health and claims records if you think they are incorrect or incomplete. Ask us how to do this by using the contact information at the end of this notice. - We may say “no” to your request. We’ll tell you why in writing within 60 days.
Request confidential communications	- You can ask us to contact you in a specific way or to send mail to a different address. Ask us how to do this by using the contact information at the end of this notice. - We will consider all reasonable requests and must say “yes” if you tell us you would be in danger if we do not.
Ask us to limit what we use or share	- You can ask us not to share or use certain health information for treatment, payment or our operations. Ask how to do this by using the contact information at the end of this notice. - We are not required to agree to your request, and we may say “no” if it would affect your care.
Get a list of those with whom we’ve shared information	- You can ask for a list (accounting) for six years prior to your request date of when we shared your information, who we shared it with and why. Ask us how to do this by using the contact information at the end of this notice. - We will include all the disclosures except for those about treatment, payment, and our operations, and certain other disclosures (such as any you asked us to make). We will provide one accounting a year for free, but we may charge a reasonable, cost-based fee if you ask for another one within 12 months.
Get a copy of this Notice	You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. To request a copy of this notice, use the contact information at the end of this notice and we will send you one promptly.
Choose someone to act for you	- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices for you. - We confirm this information before we release them any of your information.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your privacy rights by using the contact information at the end of this notice.
- You can also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by calling 1-877-696-6775; or by visiting www.hhs.gov/ocr/privacy/hipaa/complaints/ or by sending a letter to them at: 200 Independence Ave., SW, Washington, D.C. 20201.
- We will not retaliate against you for filing a complaint.

YOUR CHOICES. For certain health information, you can tell us your choices about what we share.

If you have a clear preference on how you want us to share your information in the situations described below, tell us and we will follow your instructions. Use the contact information at the end of this notice.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in payment for your care
- Share information in a disaster or relief situation
- Contact you for fundraising efforts

If there is a reason you can't tell us who we can share information with, we may share it if we believe it is in your best interest to do so. We may also share information to lessen a serious or imminent threat to health or safety.

We never share your information in these situations unless you give us written permission

- Marketing purposes
- Sale of your information

OUR USES AND DISCLOSURES. How do we use or share your health information?

We typically use or share your health information in the following ways.

Help manage the health care treatment you receive

- We can use your health information and share it with professionals who are treating you.
Example: A doctor sends us information about your diagnosis and treatment plan so we can arrange additional services.

Run our organization

- We can use and disclose your information to run our organization and contact you when necessary.
Example: We use health information to develop better services for you.

We can't use any genetic information to decide whether we will give you coverage except for long-term care plans.

Pay for your health Services

- We can use and disclose your health information since we pay for your health services.
Example: We share information about you with your dental plan to coordinate payment for your dental work.

Administer your plan

- We may disclose your health information to your health plan sponsor for plan administration purposes.
Example: If your company contracts with us to provide a health plan, we may provide them certain statistics to explain the premiums we charge.

How else can we use or share your health information?

We are allowed or required to share your information in other ways, usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information go to:
www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html

Help with public health and safety issues

- We can share your health information for certain situations such as:
 - Preventing disease
 - Helping with product recalls
 - Reporting adverse reactions to medications
 - Reporting suspected abuse, neglect or domestic violence
 - Preventing or reducing a serious threat to anyone's health or safety

Do research

- We can use or share your information for health research.

Comply with the law

- We will share information about you when state or federal law requires it, including the Department of Health and Human Services if they want to determine that we are complying with federal privacy laws.

Respond to organ/tissue donation requests and work with certain professionals

- We can share health information about you with an organ procurement organization.
- We can share information with a medical examiner, coroner or funeral director.

Address workers compensation, law enforcement, and Other government requests

- We can use or share health information about you:
 - For workers compensation claims
 - For law enforcement purposes or with a law enforcement official
 - With health oversight agencies for activities authorized by law
 - For special government functions such as military, national security, and presidential protective services or with prisons regarding inmates.

Respond to lawsuits And legal actions

- We can share health information about you in response to an administrative or court order, or in response to a subpoena.

Certain health information

- State law may provide additional protection on some specific medical conditions or health information. For example, these laws may prohibit us from disclosing or using information related to HIV/AIDS, mental health, alcohol or substance abuse and genetic information without your authorization. In these situations, we will follow the requirements of the state law.

OUR RESPONSIBILITIES. When it comes to your information, we have certain responsibilities.

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that compromises the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing.

You may change your mind at any time. Let us know in writing if you change your mind.

Additional information about your Privacy Rights can be found @ <https://www.hhs.gov/hipaa/>

STATE NOTICE OF PRIVACY PRACTICES – Effective 9/23/13

Blue Cross and Blue Shield of Illinois (BCBSIL) collects nonpublic personal information about you from your insurance application, healthcare claims, payment information and consumer reporting agencies. BCBSIL:

- Will not disclose this information, even if your customer relationship with us ends, to any non-affiliated third parties except with your consent or as permitted by law.
- Will restrict access to this information to only those employees who perform functions necessary to administer our business and provide services to our customers.
- Will maintain security and privacy practices that include physical, technical and administrative safeguards to protect this information from unauthorized access.
- Will only use this information to administer your insurance plan, process your claims, ensure proper billing, provide you with customer service and comply with the law.

BCBSIL is able to share this information with certain third parties who either perform functions or services on our behalf or when required by law. These are some examples of third parties that we can share your information with:

- Company affiliates
- Business partners that provide services on our behalf (claims management, marketing, clinical support)
- Insurance brokers or agents, financial services firms, stop-loss carriers
- Regulatory agencies, other governmental entities and law enforcement agencies
- Your Employer Group Health Plan

You have a right to ask us what nonpublic financial information that we have about you and to request access to it.

CHANGES TO THESE NOTICES

We have the right to change the terms of these notices, and the changes we make will apply to all information we have about you. The new notices will be available upon request or from our website. We will also mail a copy of the new notices to you as required by law.

CONTACT INFORMATION FOR THESE NOTICES

If you would like general information about your privacy rights or would like a copy of these notices, go to:
www.bcbsil.com/important-info/hipaa

If you have specific questions about your rights or these notices, contact us in one of the following ways:

- Call us by using the toll-free number located on the back of your member identification card.
 - Call us at 1-877-361-7594.
 - Write us at Privacy Office Divisional Vice President
Blue Cross and Blue Shield of Illinois
P.O. Box 804836
Chicago, IL 60680-4110
-

REVIEWED: January 2020

Health care coverage is important for everyone.

We provide free communication aids and services for anyone with a disability or who needs language assistance. We do not discriminate on the basis of race, color, national origin, sex, gender identity, age, sexual orientation, health status or disability.

To receive language or communication assistance free of charge, please call us at 855-710-6984.

If you believe we have failed to provide a service, or think we have discriminated in another way, contact us to file a grievance.

Office of Civil Rights Coordinator
300 E. Randolph St.
35th Floor
Chicago, Illinois 60601

Phone: 855-664-7270 (voicemail)
TTY/TDD: 855-661-6965
Fax: 855-661-6960
Email: CivilRightsCoordinator@hcsc.net

You may file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, at:

U.S. Dept. of Health & Human Services
200 Independence Avenue SW
Room 509F, HHH Building 1019
Washington, DC 20201

Phone: 800-368-1019
TTY/TDD: 800-537-7697
Complaint Portal: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
Complaint Forms: <http://www.hhs.gov/ocr/office/file/index.html>

If you, or someone you are helping, have questions, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 855-710-6984.

Español Spanish	Si usted o alguien a quien usted está ayudando tiene preguntas, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 855-710-6984.
العربية Arabic	إن كان لديك أو لدى شخص تساعدك أسئلة، فلدك الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم فوري، اتصل على الرقم 855-710-6984.
繁體中文 Chinese	如果您，或您正在協助的對象，對此有疑問，您有權利免費以您的母語獲得幫助和訊息。洽詢一位翻譯員，請撥電話 號碼 855-710-6984。
Français French	Si vous, ou quelqu'un que vous êtes en train d'aider, avez des questions, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 855-710-6984.
Deutsch German	Falls Sie oder jemand, dem Sie helfen, Fragen haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 855-710-6984 an.
ગુજરાતી Gujarati	જો તમને અથવા તમે મદદ કરી રહ્યા હોય એવી કોઈ બીજી વ્યક્તિને એસ.બી.એમ. કાયદકમ બાબતે પ્રશ્નો હોય, તો તમને વિના ખર્ચે, તમારી ભાષામાં મદદ અને માહિતી મેળવવાનો હક્ક છે. દુભાષિયા સાથે વાત કરવા માટે આ નંબર 855-710-6984 પર કોલ કરો.
हिंदी Hindi	यदि आपके, या आप जिसकी सहायता कर रहे हैं उसके, प्रश्न हैं, तो आपको अपनी भाषा में निःशुल्क सहायता और जानकारी प्राप्त करने का अधिकार है। किसी अनुवादक से बात करने के लिए 855-710-6984 पर कॉल करें।
Italiano Italian	Se tu o qualcuno che stai aiutando avete domande, hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per parlare con un interprete, puoi chiamare il numero 855-710-6984.
한국어 Korean	만약 귀하 또는 귀하가 돕는 사람이 질문이 있다면 귀하는 무료로 그러한 도움과 정보를 귀하의 언어로 받을 수 있는 권리가 있습니다. 통역사가 필요하시면 855-710-6984 로 전화하십시오.
Diné Navajo	T'áá ni, éí doodago ła'da bika anánílwo'ígíí, na'ídlíkidgo, ts'ídá bee ná ahóótí'i' t'áá níí'k'e níká a'doolwoł dóó bina'ídlíkidgíí bee ní h odoonih. Ata'dahalne'ígíí bich'í' hodiílnih kwe'é 855-710-6984.
فارسی Persian	اگر شما، یا کسی که شما به او کمک می کنید، سوالی داشته باشید، حق این را دارید که به زبان خود، به طور رایگان کمک و اطلاعات دریافت نمایید. جهت گفتگو با یک مترجم شفاهی، با شماره 855-710-6984 تماس حاصل نمایید.
Polski Polish	Jeśli Ty lub osoba, której pomagasz, macie jakiegokolwiek pytania, macie prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Aby porozmawiać z tłumaczem, zadzwoń pod numer 855-710-6984.
Русский Russian	Если у вас или человека, которому вы помогаете, возникли вопросы, у вас есть право на бесплатную помощь и информацию, предоставленную на вашем языке. Чтобы связаться с переводчиком, позвоните по телефону 855-710-6984.
Tagalog Tagalog	Kung ikaw, o ang isang taong iyong tinutulungan ay may mga tanong, may karapatan kang makakuha ng tulong at impormasyon sa iyong wika nang walang bayad. Upang makipag-usap sa isang tagasalin-wika, tumawag sa 855-710-6984.
اردو Urdu	اگر آپ کو، یا کسی ایسے فرد کو جس کی آپ مدد کر رہے ہیں، کوئی سوال درپیش ہے تو، آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ مترجم سے بات کرنے کے لیے، 855-710-6984 پر کال کریں۔
Tiếng Việt Vietnamese	Nếu quý vị, hoặc người mà quý vị giúp đỡ, có câu hỏi, thì quý vị có quyền được giúp đỡ và nhận thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, gọi 855-710-6984.



Additional Information



Wondr™

Coach-Led Digital Program for Wellbeing Management and Health Advocacy Solutions

For Large Group Administrative Services Only (ASO), Cost Plus (CP) and Minimum Premium Program (MPP) with Preferred Provider Organizations (PPO) and Health Maintenance Organizations (HMO) networks.

As part of the Wellbeing Management and Health Advocacy Solutions packaging, Blue Cross and Blue Shield of Illinois (BCBSIL) offers a valuable coaching option, with no extra charge to members. You can now provide to your employees digital educational opportunities for metabolic syndrome¹ reversal with Wondr (formerly Naturally Slim). This supplemental remote program can be done in the comfort of the member's own home.

Wondr – Metabolic Syndrome Reversal Program

Wondr is a behavioral counseling program for metabolic syndrome reversal and weight management. Features include:

- Twelve weeks of counseling (personalized for skill building); twelve weeks (customized for skill reinforcement); 28 weeks (customized for skill maintenance).
- Weekly self-paced, informative, online video sessions (including mobile app for on-the-go access, skill reinforcement and habit formation).
- Interactions with health coaches and online community for social support.
- Customized communication materials.
- Employer reporting available for enrollment, participation and weight loss.

Claims-based Billing

Wondr is available through claims-based billing. Payments for participation in the program are submitted through claims and come out of the employer's medical spend.

Coaching Solutions Claims-based Billing²

\$38.50	Per session (twelve-week skill building): Ten sessions maximum per participant. Claims only filed for weekly lesson completion.
\$25.00	Per session (twelve-week skill reinforcement): Seven sessions maximum per participant. Claims only filed for weekly lesson completion. 28-week skill maintenance: Included at no additional cost.

To support the program, Wondr Health™ will receive a weekly file of eligible members. Because metabolic conditions are not always identifiable through a claims screen, BCBSIL provides Wondr Health with the entire membership eligibility. On enrollment, member completes a brief health assessment to determine full eligibility for the program.

1. National Institutes of Health guidelines define metabolic syndrome as having at least three of the following five traits (or taking medication to control them): large waist circumference; high triglyceride level; reduced HDL (good) cholesterol; increased blood pressure; elevated fasting blood sugar.

2. Costs are per participant.

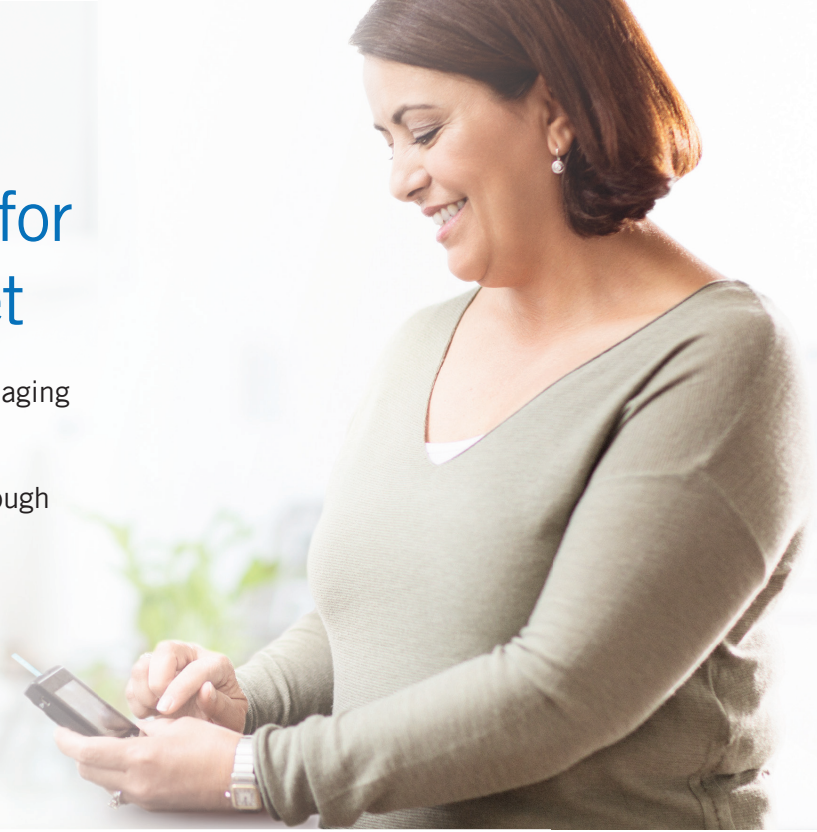
Wondr Health, formerly Naturally Slim, is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide a metabolic syndrome reduction program for members with coverage through BCBSIL.

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

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Reading this is good for your health and wallet

Livongo is a health benefit that helps make managing your diabetes easier, and it's included in your benefits. The program is offered to you and your family members with diabetes and coverage through Blue Cross and Blue Shield of Illinois (BCBSIL).



Checking, tracking, and support

- Real-time, personalized tips with each blood glucose check
- Optional family alerts keep everyone in the loop
- Support when you're out of range
- Your meter can send data directly to your doctor
- Unlimited strip reordering right from your meter
- Automatic uploads means no more paper logbooks



The only thing easier than using Livongo is signing up for it:



More details and how to register coming soon!

EL PROGRAMA LIVONGO ESTÁ DISPONIBLE EN ESPAÑOL

Cuando se registre, usted seteará el idioma de preferencia y luego el medidor y el programa estarán en Español.



BlueCross BlueShield
of Illinois

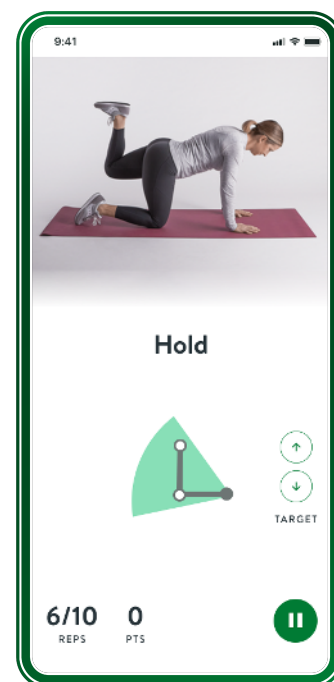


Conquer back and joint pain without drugs or surgery

You and your eligible family members have access to Hinge Health's programs for back, knee, hip, shoulder, or neck pain as part of your Blue Cross and Blue Shield of Illinois membership. Programs may include:

- Technology and wearable sensors
- Unlimited 1-on-1 health coaching
- Personalized exercise therapy

According to one clinical study, more than 10,000 program participants reduced their pain an average of 68%.*



Scan the QR code to learn more or apply at
hinge.health/bcbsil
or call (855) 902-2777

Eligibility: Participants must be 18+ and enrolled in a PPO medical plan through Blue Cross and Blue Shield of Illinois.

*Source: [Hinge Health 2017-2019 Outcomes Analysis](#)

Hinge Health is an independent company that has contracted with Blue Cross and Blue Shield of Illinois to provide an online musculoskeletal program 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.

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association



Get healthy your way

Create lasting change with Omada®.
All at no cost to you.

What you'll get with Omada:

- ✓ Dedicated health coach & care team
- ✓ Smart devices, delivered to your door
- ✓ Interactive weekly lessons
- ✓ Healthier lifestyle in 10 minutes a day | anywhere, anytime
- ✓ Long term results through habit & behavior change

Do what works for you

Find healthy habits and routines that work for you.

24/7 access to support

From weekly lessons to online community, get all the tools you need to face any challenge head-on.

You decide what 'healthy' means

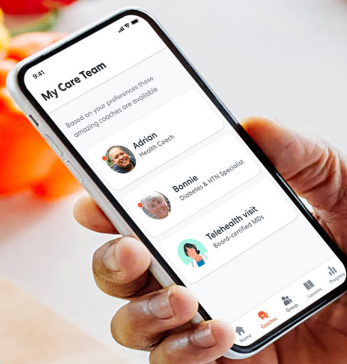
Try new things you actually enjoy, rather than avoiding foods you "can't eat" or things you "shouldn't do."

The best part? It's covered.

If you or the adult family members are enrolled in the Blue Cross and Blue Shield of Illinois health plan and are at risk for type 2 diabetes or heart disease or living with high blood pressure, the Omada program is included in your benefits.

Learn more:

omadahealth.com/myplan-member



**With Omada, there's
a program for you**



Weight loss &
overall health



High blood pressure



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