

Subject: Important Plan Changes Illinois Small Group 2022

Dear Group Administrator:

On your plan renewal date, there will be some changes to the benefits offered in your current plans, such as prescription drug list (formulary) changes.

Included with this letter is a list of all Blue Cross and Blue Shield of Illinois small group plans and their benefit level changes.

Your next steps:

- Find the seven-digit plan ID for your current plan(s), in the "Current Health Plans" section of your renewal exhibit
- Use that seven-digit plan ID to find your group's benefit changes in the "Plan Changes" document

If you would like to keep your current plan(s) at renewal, nothing else is needed. Your plan(s) will continue with no interruption. If you would like to make a change, contact your broker or call us at 855-649-9653 with questions. A Benefit Plan Selection form must be completed and returned to us for any changes to your group's coverage. You can also contact Get Covered Illinois at 866-311-1119 or the Office of Consumer Health at 877-527-9431.

Our goal is to serve your health care coverage needs through all of life's changes. If you have any questions, our team stands ready to help.

Sincerely,

Blue Cross and Blue Shield of Illinois

Blue Cross and Blue Shield of Illinois 2022 Affordable Care Act (ACA)/Metallic Plans

Small Group (2-50)

To find your renewal group's 2022 benefit changes, search for the plan by pressing CTRL, then the F key; enter the plan name or 7-character plan ID in the search field and press enter.

Blue PPO Platinum 119; P503PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details. Updates to the 2022 Pharmacy Network.

Blue PPO Platinum 136; P5E1PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 114; G534PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 107; G532PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 116; G536PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 102; G531PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 123; G537PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Silver 120; S532PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 101; G530PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Silver 104; S531PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Silver 105; S535PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 113; G533PPO

In 2022, your in-network individual Deductible will change to \$2,900 from \$2,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network family Deductible will change to \$8,700 from \$8,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network individual Deductible will change to \$5,800 from \$5,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network family Deductible will change to \$17,400 from \$16,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$3,600 from \$3,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$10,800 from \$10,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Gold 115; G535PPO

In 2022, your in-network individual Deductible will change to \$2,900 from \$2,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network family Deductible will change to \$8,700 from \$8,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network individual Deductible will change to \$5,800 from \$5,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network family Deductible will change to \$17,400 from \$16,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$5,250 from \$5,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,800. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Silver 133; S534PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Silver 200; S5J1PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Bronze 132; B536PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue PPO Bronze 106; B535PPO

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Platinum PPO 119; P5E2BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Platinum PPO 136; P5E1BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Gold PPO 107; G532BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Gold PPO 102; G531BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Silver PPO 120; S532BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Gold PPO 101; G530BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Silver PPO 104; S531BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Silver PPO 105; S535BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Gold PPO 113; G533BCE

In 2022, your in-network individual Deductible will change to \$2,900 from \$2,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network family Deductible will change to \$8,700 from \$8,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network individual Deductible will change to \$5,800 from \$5,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network family Deductible will change to \$17,400 from \$16,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$3,600 from \$3,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$10,800 from \$10,500. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Gold PPO 115; G535BCE

In 2022, your in-network individual Deductible will change to \$2,900 from \$2,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network family Deductible will change to \$8,700 from \$8,400. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network individual Deductible will change to \$5,800 from \$5,600. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your out-of-network family Deductible will change to \$17,400 from \$16,800. The deductible is the amount you must pay before the health plan starts paying for most qualified covered services.

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$5,250 from \$5,000. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$14,000 from \$13,800. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Silver PPO 133; S534BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Silver PPO 200; S5J1BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Bronze PPO 132; B536BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Choice Preferred Bronze PPO 106; B535BCE

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Precision Platinum HMO 107; P506PSN

In 2022, benefits are no longer available for non-emergent, self-referred Mental Health or Substance Use Disorder treatment received out of network that are not authorized or referred by your Primary Care Physician (PCP) or Woman's Principal Healthcare Provider (WPHCP).

Updates to the 2022 Pharmacy Network.

Blue Precision Platinum HMO 200; P5J1PSN

In 2022, benefits are no longer available for non-emergent, self-referred Mental Health or Substance Use Disorder treatment received out of network that are not authorized or referred by your Primary Care Physician (PCP) or Woman's Principal Healthcare Provider (WPHCP).

Updates to the 2022 Pharmacy Network.

Blue Precision Gold HMO 201; G5J2PSN

In 2022, benefits are no longer available for non-emergent, self-referred Mental Health or Substance Use Disorder treatment received out of network that are not authorized or referred by your Primary Care Physician (PCP) or Woman's Principal Healthcare Provider (WPHCP).

Updates to the 2022 Pharmacy Network.

Blue Precision Platinum HMO 110; P5E1PSN

In 2022, benefits are no longer available for non-emergent, self-referred Mental Health or Substance Use Disorder treatment received out of network that are not authorized or referred by your Primary Care Physician (PCP) or Woman's Principal Healthcare Provider (WPHCP).

Updates to the 2022 Pharmacy Network.

Blue Precision Gold HMO 101; G532PSN

In 2022, benefits are no longer available for non-emergent, self-referred Mental Health or Substance Use Disorder treatment received out of network that are not authorized or referred by your Primary Care Physician (PCP) or Woman's Principal Healthcare Provider (WPHCP).

Updates to the 2022 Pharmacy Network.

Blue Precision Silver HMO 106; S531PSN

In 2022, benefits are no longer available for non-emergent, self-referred Mental Health or Substance Use Disorder treatment received out of network that are not authorized or referred by your Primary Care Physician (PCP) or Woman's Principal Healthcare Provider (WPHCP).

Updates to the 2022 Pharmacy Network.

Blue Precision Silver HMO 102; S530PSN

In 2022, benefits are no longer available for non-emergent, self-referred Mental Health or Substance Use Disorder treatment received out of network that are not authorized or referred by your Primary Care Physician (PCP) or Woman's Principal Healthcare Provider (WPHCP).

Updates to the 2022 Pharmacy Network.

Blue Options Gold PPO 101; G506OPT

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$6,250 BC / \$8,000 PPO from \$5,000 BC / \$7,000 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$16,500 BC / \$17,400 PPO from \$15,000 BC / \$17,100 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.

Blue Options Gold PPO 106; G508OPT

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$5,250 BC / \$7,250 PPO from \$4,100 BC / \$6,100 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$13,750 BC / \$17,400 PPO from \$12,300 BC / \$17,100 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details. Updates to the 2022 Pharmacy Network.

Blue Options Gold PPO 102; G5070PT

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$3,750 BC / \$6,750 PPO from \$3,500 BC / \$6,500 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$8,500 BC / \$17,400 PPO from \$8,500 BC / \$17,100 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your Preferred Drug copayments will change to \$10/\$20/\$50/\$100/\$250/\$350 from \$0/\$10/\$35/\$75/\$150/\$250. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2022, your Non-Preferred Drug copayments will change to \$20/\$30/\$70/\$120/\$250/\$350 from \$10/\$20/\$55/\$95/\$150/\$250. The copayment is a fixed dollar amount you are required to pay for covered services at the time you receive care.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details. Updates to the 2022 Pharmacy Network.

Blue Options Silver PPO 104; S506OPT

In 2022, your in-network individual Out-of-Pocket Maximum will change to \$7,350 BC / \$8,700 PPO from \$6,850 BC / \$8,550 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, your in-network family Out-of-Pocket Maximum will change to \$17,400 BC / \$17,400 PPO from \$17,100 BC / \$17,100 PPO. The out-of-pocket maximum is the total amount of deductible, coinsurance, and copayment each Member must pay for covered medical expenses incurred during the benefit period.

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details. Updates to the 2022 Pharmacy Network.

Blue Options Silver PPO 107; S507OPT

In 2022, pre-authorization will be required in order to receive benefits for specific services. Please see benefit book for additional details.

Updates to the 2022 Pharmacy Network.