



# Health Plan Resource Guide

For Catholic Diocese of Rockford Employees

Beginning July 1, 2017

800.435.5694

[www.pbaclaims.com](http://www.pbaclaims.com)

## Helpful Tips!

Making smart health care choices is good for your health and wealth. Here are some quick tips for being a conscientious consumer that will help keep you healthy and your wallet happy!

- Maintain good health by using a network provider.
- Know what your health plan covers and how to make the most of your coverage.
- Consider using Retail Clinics or Urgent Care Centers for non-life threatening situations. It can save you time and money over emergency room visits.
- Select generic drugs instead of brand name whenever possible.
- Use network providers so the plan pays more of the cost.

## Important Information to Know Effective July 1, 2017:

You now have access to **Blue Cross Blue Shield** Providers!

Need to **find a network provider** - visit [www.bcbsil.com](http://www.bcbsil.com) or call **800.810.BLUE (2583)**. Make sure your Medical Providers have a copy of your new BCBS ID Card.

**Pre-certification** is recommended for any inpatient confinement. Any urgent care admissions should also be reported within 48 hours. For pre-certification **call BCBS Medical Management 800.433.3232**.

Need to **fill a PRESCRIPTION** – for short term medications, **go to any pharmacy** and hand them your **NEW PBA** ID card. For long term medications (90 day supply), you can go to any designated pharmacy **OR use the convenient mail order pharmacy** – forms are available from HR. If you have questions about your drug benefit or covered drugs, visit [www.mycigna.com](http://www.mycigna.com) or call **800.325.1404**. Provide your Pharmacist a copy of your PBA ID card.

**Flu Shots** are now available at participating retail pharmacies with a \$20.00 co-payment. Be sure to show your **NEW PBA** ID card to take advantage of this benefit.

Need to **find a DENTIST** or want to confirm your dentist is in the network - visit [www.cignadentalsa.com](http://www.cignadentalsa.com) and **select the CIGNA Dental PPO Shared Administration Plus network**. Provide your Dentist a copy of your PBA ID card.

### IMPORTANT NOTE REGARDING ID CARDS:

You will have two (2) separate ID cards issued.

One will be from **Blue Cross Blue Shield** which should ONLY be presented to your **Medical** Providers (Physician, Urgent Care Clinic, Hospitals).

The other card will be from **Professional Benefit Administrators, Inc. (PBA)** which is to be used for **Dental** (Dentists), **Vision** (Optometrists, Ophthalmologists) and **Prescription** (Pharmacist) coverage.

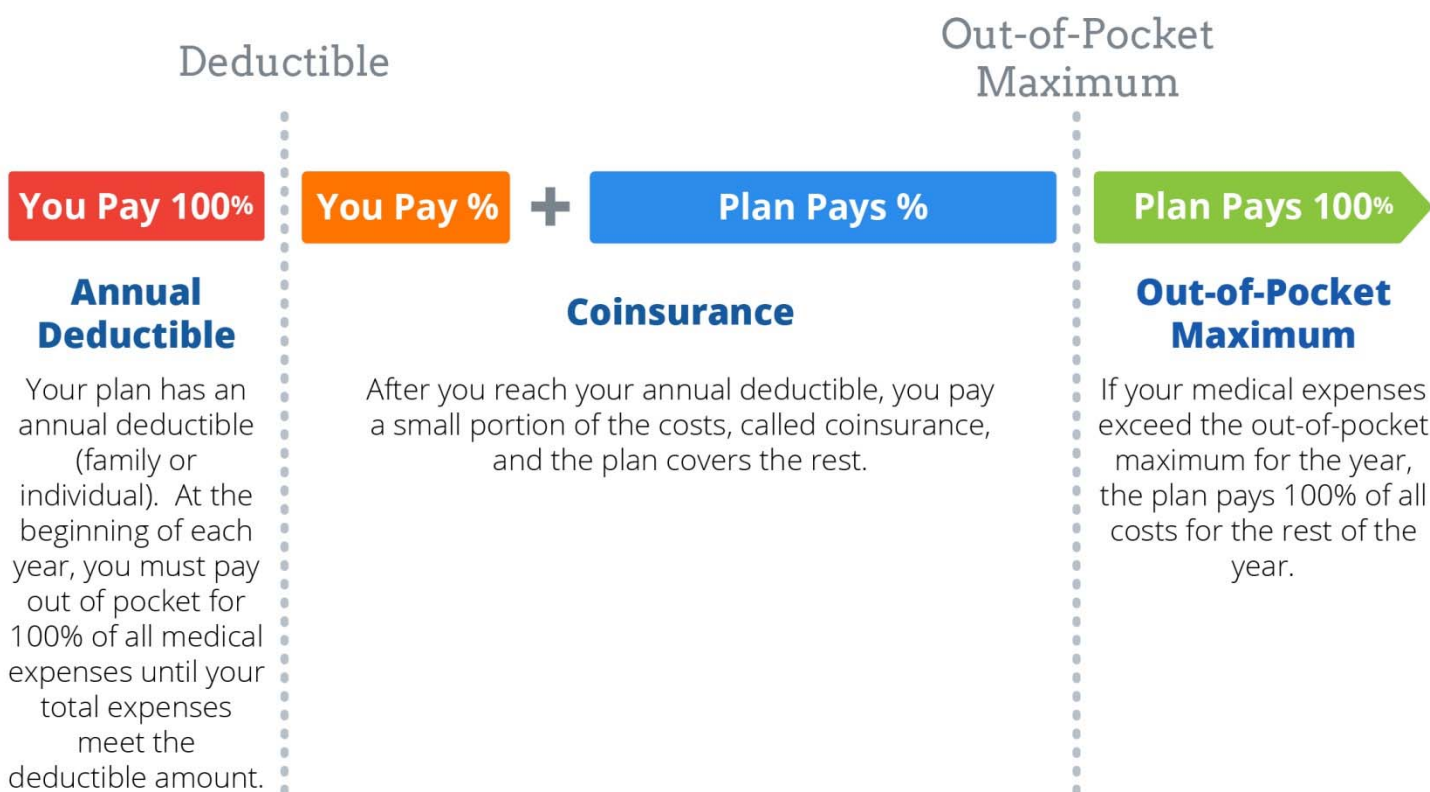
## Important terms to know

**DEDUCTIBLE** means a specified dollar amount of Covered Expenses which must be incurred during a Calendar Year (unless otherwise stated in a benefit schedule) before any other Covered Expenses can be considered for payment according to the applicable benefit percentage.

**COINSURANCE** means that portion of Eligible Expenses to be paid by the Plan and the Participant in accordance with the coverage provisions stated in the Plan. It is the basis used to determine the amount of Covered Expenses which are to be paid by the Participant.

**COPAY** means that amount shown in any benefit schedule which is the Participant's responsibility for charges Incurred for prescription drugs.

## How the Deductible and Co-Insurance works





# Shop, Compare and Choose

Find the right provider for you.



Provider Finder® from Blue Cross and Blue Shield of Illinois (BCBSIL) is the quick and easy way to find providers and treatment costs. It's an innovative tool for helping you choose a provider and estimate health care costs.

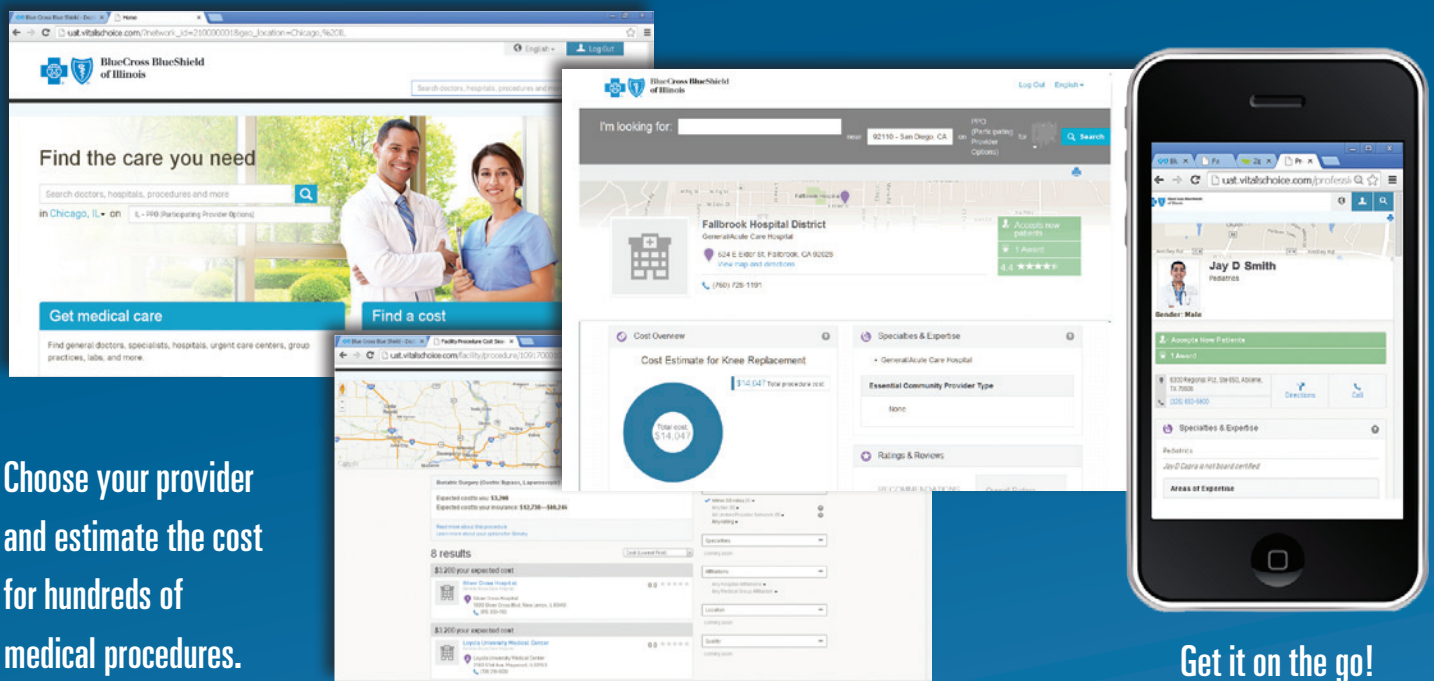
- Find a network primary care physician, specialist or hospital.
- Filter search results by doctor, specialty, ZIP code, language and gender – even get directions from Google Maps™.
- Determine if a Blue Distinction Center® is an option for treatment.
- View patient feedback or add your review for a provider.
- Review providers' certifications and recognitions.
- Estimate the cost of a provider's procedures, treatments and tests.

**It's easy, immediate, secure – and available at [bcbsil.com](http://bcbsil.com).**

## You're in charge with more information.

- Do you want to know more about the providers who take care of you or your family?
- Do you need to know the estimated cost of a medical service?
- Do you want to find savings by comparing costs?
- How do you choose where to go for medical services?

# Informed Choice. Cost Management. More Options.



Choose your provider and estimate the cost for hundreds of medical procedures.

Get it on the go!

Screen shots are for illustrative purpose only.

It's easy to get started with Provider Finder by registering for Blue Access for Members<sup>SM</sup> (BAM):

- 1 Go to **bcbsil.com**.
- 2 Click the **Log In** tab, and then click the **Register Now** link.
- 3 Use the information on your BCBSIL ID card to complete the process.
- 4 Then, log in to BAM. Provider Finder is located under the **Doctors & Hospitals** tab.

You can also call a BCBSIL Customer Service Advocate at the toll-free telephone number on the back of your member ID card for help in locating a provider.



## Get assistance while you're away from home.

Go to [bcbsil.com](http://bcbsil.com) and register or log in to BAM. You can stay connected to your claims activity, member ID card and coverage details – you can also receive prescription reminders and health tips via text messages.

# 90-DAY PRESCRIPTION FILLS

Filling your maintenance medications just got easier with Cigna 90 Now<sup>SM</sup>

You have a lot going on. Taking your medication every day and remembering to pick up your refill every month isn't always easy. We have a program that can help – it's called Cigna 90 Now.

## More choice

Your plan includes a new maintenance medication program called Cigna 90 Now. Maintenance medications are taken regularly, over time, to treat an ongoing health condition. **Cigna 90 Now offers you more choice in how, and where, you can fill your prescription.**

### Choose what works best for you

- If you choose to fill your prescription in a 90-day supply, you have to use one of the 90-day retail pharmacies in your new pharmacy network, or Cigna Home Delivery Pharmacy<sup>SM</sup>, for that fill to be covered under your plan.<sup>1</sup>
- If you choose to fill your prescription in a 30-day supply, you can use any retail pharmacy in your network.<sup>1</sup>



**You choose! 90-day or 30-day supply.**

## Where you can fill a 90-day prescription

With Cigna 90 Now, your plan offers a new retail pharmacy network that gives you more choice in where you can fill your 90-day prescriptions.

There are thousands of retail pharmacies in your new network. They include local pharmacies, grocery stores, retail chains and wholesale warehouse stores – all places where you may already shop! If you prefer the convenience of having your medications delivered to your home, you can also use Cigna Home Delivery Pharmacy to fill your prescriptions.<sup>1</sup>

For more information about your new pharmacy network, you can go to [Cigna.com/Rx90network](https://www.cigna.com/Rx90network).



## Why fill a 90-day supply?

Filling your prescriptions in a 90-day supply may help you stay healthy because having a 90-day supply of your medication on-hand typically means you're less likely to miss a dose.<sup>2</sup> It also means you can make fewer visits to the pharmacy to refill your medication, and depending on your plan, you may be able to save money by filling your prescriptions 90-days at a time.

Here are some of the 90-day retail pharmacies in your network:<sup>3</sup>

- **CVS** (including Target and Navarro)
- **Walmart**
- **Kroger** (including Harris Teeter Pharmacy, Pick N Save Pharmacy, Fred Meyer Pharmacy, Fry's Food and Drug)
- **Access Health** (including Benzer Pharmacy, Marcs, Big Y Pharmacy, Marsh Drugs, LLC, Snyder Drug Emporium)
- **Good Neighbor Pharmacies** (including Big Y Pharmacy, Super RX Pharmacy, Medical Center Pharmacy, Family Pharmacy, King Kullen Pharmacy)
- **Cardinal Health** (including Freds Pharmacy, Medicine Shoppe Pharmacy, Harris Teeter Pharmacy, Medicap Pharmacy)

**Together, all the way.<sup>®</sup>**



## Prefer to have your medications delivered to your door?

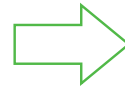
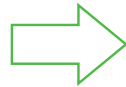
Then Cigna Home Delivery Pharmacy may be right for you! We'll deliver your maintenance medication to you at the location of your choice. And standard shipping is always free. No more waiting in line at the pharmacy!



### Questions?

Please call the number on the back of your ID card.

## 90-Day Fills



Get a 90-day prescription for your medication

Take your prescription to a 90-day retail pharmacy in your network, or mail to Cigna Home Delivery Pharmacy<sup>1</sup>

Receive your medication in a 90-day supply for convenience

## 30-Day Fills



Get a 30-day prescription for your maintenance medication

Take your prescription to any retail pharmacy in your network

Receive your medication

1. Plans vary, so some plans may not include Cigna Home Delivery Pharmacy. Please check your plan materials for more information on what pharmacies are covered under your plan.

2. Internal Cigna analysis performed March 2016, utilizing 2015 Cigna national book of business average medication adherence (customer adherent > 80% proportion of days covered (PDC)), 90-day supply vs. those who received a 30-day supply taking antidiabetics, renin-angiotensin system (RAS) antagonist and statins.

3. Participating 90-day network pharmacies as of April 2016. Subject to change.



### Para obtener ayuda en español llame al número en su tarjeta de Cigna.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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Your pharmacy at your fingertips!

# Cigna HOME DELIVERY PHARMACY



We're your health care company's pharmacy, designed especially for individuals who take prescription medications on a regular basis, such as those used for diabetes, asthma, heart conditions, high blood pressure, birth control and more.

## You'll enjoy:

- Easy refills – up to a 90-day supply means fewer refills
- Reminder service to refill or take your medication available at [Cigna.com/CoachRx](http://Cigna.com/CoachRx)
- Our free QuickFill service will call or email you when its time to refill your prescriptions
- Fast answers from Cigna pharmacists 24/7

**1.800.285.4812**

## Manage your medication

Log in to [myCigna.com](http://myCigna.com) where you can obtain the following important information about your prescription medications:

- Compare medication prices
- Check order status
- Review number of refills remaining
- Order refills and more

## Quickswitch® – we make filling a prescription simple

Have the following information handy when you call. We'll do the rest!

1. Name and Cigna ID number
2. Prescription medication names and strength (for you or a covered family member)
3. Doctor information (name, phone number)
4. Payment information (American Express, Discover, MasterCard or VISA)

With this information, we will request a prescription from your doctor. Once we receive it, we will fill your medication and mail it to your home or other location of your choice.

**GO YOU<sup>SM</sup>**



**Offered by: Connecticut General Life Insurance Company or Cigna Health and Life Insurance Company.**

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# MILES OF SMILES

## Cigna Dental PPO SA Plus Network

Looking for a dental network that will help you take better care of your teeth and your wallet? Consider it found. Cigna Dental offers you access to a nationwide network of quality dental professionals at an affordable price.

### Cigna Dental PPO SA Plus network gives you access to:

- Nearly 124,600 dentists at more than 717,000 access points across the country\*
- Opportunities to lower your expenses when you receive care from an in-network dentist
- A dental network solution from a company that's been trusted for close to 50 years.

### How to find a dentist

1. Go to **CignaDentalSA.com**.
2. Select the Cigna Dental PPO Shared Administration Plus network.
3. On the next screen, enter your search criteria.
4. Fine tune your results by speciality or location. You can also get directions and view the location on a map.



The screenshot shows a web browser window with the title "Cigna Dental PPO Shared Administration Plus". The page content includes a "Home" link, a "Welcome to Cigna Dental PPO" message, and a "How to Search for a Provider" section. The search criteria are as follows:

- Address: 115 Main Street
- City: Burlington
- State: NY
- Zip: 01234
- Dental Specialty: Select a Specialty
- Dentist Last Name: [Empty field]

Step 2 of the search process is shown, where the user can select the distance in miles from the address. The options are 5, 10, 15, 25, 50, and 75 miles. The "25" option is selected. A "Continue Search" button is located at the bottom of the form.

\* Based on 124,585 unique dentists at 717,446 contracted access points in the Shared Administration Plus network as of 3/31/16. Data subject to change.

**Together, all the way.®**



**Offered by: Cigna Health and Life Insurance Company.**

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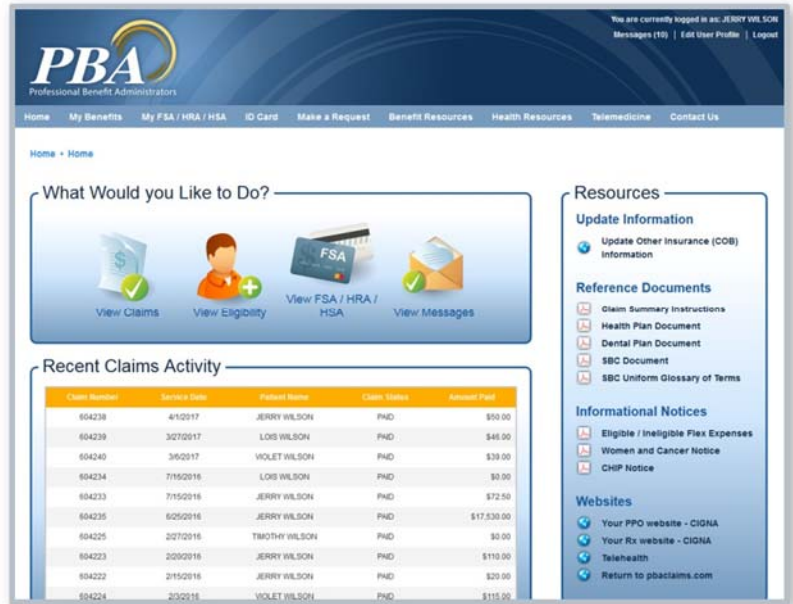
# Member Benefits Portal (View Eligibility, Claims) - pbaclaims.com

The PBA member benefits portal website has an easy to navigate home page that provides quick access to the most common types of information that you and your family may need. This home page offers a quick launch interface that provides easy access to claims data, eligibility information, flex account management, and paperless EOB elections.

Site features:

- A claims dashboard that shows your most recent claims;
- Summary Plan Documents (SPD) and Summary of Benefits and Coverage (SBC);
- Current ID Card;
- Quickly find answers to your benefits related questions in our FAQ section;;
- Access dozens of self-paced, online health & wellness resources;
- Easily contact PBA with benefits related issues;
- Employer customized website links, documents, notices, and forms;
- Important announcements from PBA.

Scan to get started  
creating your new portal  
website account!



**To access your benefit information, you must create an online member account by following the steps below:**

1. Go to [www.pbaclaims.com](http://www.pbaclaims.com) and click "Secure Login" then click "Employee".
2. Click "Need to sign-up for a new account?" to start the account setup process.
3. Click "Agree" if you agree to the terms and conditions.
4. Enter your Date of Birth and Member ID from your Dental/Rx ID Card or your Social Security Number then click "Next".
5. Select 3 security hint questions and type in the corresponding answers then click "Next".
6. Verify your information then click "Finish".

**PBA also has a Mobile App**

Manage your benefits on the go with the PBA Health Claims (scan codes below to install).

**PBA Health Claims**



# How to Read Your Claim Summary

This sample statement will show you where to look for information when your claims are processed. You will receive a Claim Summary that includes all family members during the noted period.


You can see your weekly claims activity on our website by logging into your benefits portal website account at pbaclaims.com.

- 1 PBA contact information appears here. If you have any questions regarding your Claim Summary, please have your user ID number and claim number available when you call.
- 2 Your name and address will appear here.
- 3 Your group number, group name, and check generation date will appear here.
- 4 **For the Period:** Shows the period that claims were incurred.
- 5 **Date(s) of Service:** The date the services were incurred.
- 6 **Type of Service:** The type of service performed by your provider (office visit, lab, x-ray, etc.)
- 7 **Total Charge:** The total amount charged by the provider.
- 8 **Ineligible Amount:** Any amount not covered by the plan. Ineligible Amount will be further explained with a reason code description in section 18 and may be included in the amount you may owe.
- 9 **Reason Code:** Reflects any comments about why a service may not have been covered or any other important information.
- 10 **Discount Amount:** The savings amount applied to this claim will be reflected here. The patient is not responsible for this amount.
- 11 **Covered by Plan:** The new allowed amount of the claim after the ineligible and discount amounts are applied.
- 12 **Deductible Amount:** This reflects how much of the claim will be applied to your deductible.
- 13 **Co-Pay Amount:** This reflects the amount you will be responsible for as defined by your plan.
- 14 **Balance Amount:** The amount after all deductions (ineligible, discount, deductible, and co-pay amounts) are applied.
- 15 **Paid At:** The percentage of benefit paid by the plan.
- 16 **Payment Amount:** Reflects the total benefit that was paid by the plan.
- 17 **Patient's Responsibility:** Any amount you may be responsible for will appear here (deductible, coinsurance, copayments or services that are not covered).

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**PBA** Professional Benefit Administrators  
PO Box 4687  
Oak Brook, IL 60522-4687

**Forwarding Service Requested**

2   
51 1 SP 0-460  
DONALD ABBOTT  
123 ANNUSTREET  
OAK BROOK, IL 60523

**Explanation of Benefits**

RETAIN FOR TAX PURPOSES  
**THIS IS NOT A BILL**

Customer Service

1 If you have questions or need an explanation of this form, contact Customer Service at (800) 435-5694 www.pbaclaims.com

3 **Group:** 098501 - ABC COMPANY  
**Date:** 5/21/2013

4 **For the Period:** **04/01/2013 through 04/22/2013**

Dear DONALD ABBOTT,

The information below is a summary of your healthcare claims for the period referenced above. This information is commonly referred to as an "Explanation of Benefits" (EOB). This is a summary, followed by the claim details, of how your recent claims were processed. It includes any co-pay, deductible, coinsurance (%) or non-covered amounts that you may owe to the pr

<b>Total Amount Billed</b>	This is the total amount for bills received for the dates of service 04/01/2013 through 04/22/2013
\$224.95	
<b>Total Amount Paid By Plan</b>	This is the amount the plan paid for services billed. Please see the claim detail section below for more information.
\$68.00	
<b>Your Financial Responsibility</b>	This is the amount the provider of service may bill you after your health plan benefits were paid. Typically a plan participant may be billed by the provider of service because they may have a deductible, co-pay, coinsurance (%), or the service is not covered by the health plan. A breakdown of your total financial responsibility is shown in the claim detail for each member.
\$37.00	

5 Claim#:	6	7	8	9	10	11	12	13	14	15	16	17
Patient:	23123456	ALD ABBOTT	DOB: 01/01/1950	SEX: M	PLAN: F	HOI: N	COVERAGE: A	STATUS: A	REASON: N	DATE: 04/01/2013	TIME: 10:00	LOCATION: 1000
Dates of Service	Type of Service	Total Charge	Ineligible Amount	Reason Code	Discount Amount	Covered By Plan	Deductible Amount	Co-pay Amount	Balance Amount	Paid At	Payment Amount	
04/01/2013	SUPPLIES	\$55.00	\$55.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0%	\$0.00	
04/01/2013	SUPPLIES	\$19.95	\$19.95	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0%	\$0.00	
<b>Column Totals</b>		<b>\$74.95</b>	<b>\$74.95</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		<b>\$0.00</b>	
<b>Patient's Responsibility:</b>										<b>\$0.00</b>	<b>Other Credits or Adjustments</b>	<b>\$0.00</b>
											<b>Total Net Payment</b>	<b>\$0.00</b>

Claim#:	123123457	Provider:	FAMILY CHIROPRACTIC	Employee:	DONALD ABBOTT							
Patient:	ABBY ABBOTT	Pat#:	123456	Network:	N/A							
Dates of Service	Type of Service	Total Charge	Ineligible Amount	Reason Code	Discount Amount	Covered By Plan	Deductible Amount	Co-pay Amount	Balance Amount	Paid At	Payment Amount	
04/22-04/22/2013	OV SERVICES	\$150.00	\$0.00		\$45.00	\$105.00	\$0.00	\$20.00	\$85.00	80%	\$68.00	
<b>Column Totals</b>		<b>\$150.00</b>	<b>\$0.00</b>		<b>\$45.00</b>	<b>\$105.00</b>	<b>\$0.00</b>	<b>\$20.00</b>	<b>\$85.00</b>		<b>\$68.00</b>	
<b>Patient's Responsibility:</b>										<b>\$37.00</b>	<b>Other Credits or Adjustments</b>	<b>\$0.00</b>
											<b>Total Net Payment</b>	<b>\$68.00</b>

**18 Reason Code Description:** Reflects any comments about why a service may not have been covered or any other important information.

**19 Payment Details:** Reflects who received a benefit payment for this claim.

**20 Plan Status:** Reflects your deductible, and out-of-pocket amounts remaining as defined by your plan.

**21 You Should Know:** Special reminders and announcements appear here.

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Reason Code Description	
10	DUPLICATE OF CHARGES PREVIOUSLY CONSIDERED

Payment Details			
Paid To	Check Date	Check No.	Amount
DONALD ABBOTT	06/21/13	29555	\$68.00

Plan Status	
These totals are accurate as of the last claim shown on this document. If you received care more recently, unprocessed claims for that care will not yet be reflected in the totals shown here.	
Accumulators	Amount Remaining
Ind. Deductible	\$0.00
Fam. Deductible	\$0.00
Ind. Coinsurance	\$233.68
Fam. Coinsurance	\$0.00

You Should Know
Are you tired of receiving paper statements? <a href="#">View &amp; Print Statements online</a> . Go to <a href="http://www.pbaclaims.com">www.pbaclaims.com</a> , click on the employee tab to create your own account, and go paperless!