

2017 Plan Changes & Updates

Effective January 1, 2017, through December 31, 2017

Important Information for All Members

2017 Health Insurance Premium Remains at 50% CTPF trustees voted to subsidize the 2017 CTPF health insurance premiums at 50% (*certain limitations may apply*), effective January 1, 2017. The subsidy is set annually and is subject to change. **See page 13 for more information.**

CTPF Plan Rates for 2017
Overall rates for CTPF plans increased an average of 3.3% for 2017. **Refer to the 2017 Health Insurance Handbook for the premium charts on page 19 (Non-Medicare) and page 35 (Medicare) for specific plan costs.**

Prescription Drug PLAN Changes
Each health insurance plan utilizes a formulary (a list of preferred prescription drugs). Formularies may change annually, so make sure you review your plan's 2017 formulary to determine if your prescription expenses will change.

BCBS Non-Medicare PPO Pharmacy Network Change

Effective January 1, 2017, CVS-owned pharmacies, including CVS pharmacies in Target® stores, **will no longer be a part of the Blue Cross and Blue Shield of Illinois pharmacy network.** After January 1, 2017, enrollees will pay the full price for medications at a CVS pharmacy® and must submit a reimbursement form to CVS to receive the out-of-network benefit. There are more than 55,000 in-network pharmacies nationwide. To find an in-network pharmacy near you, log in to www.myprime.com, click on "Pharmacies" and enter your city or zip code. Or, call the Pharmacy Program number on the back of your member ID card. **Members and dependents enrolled in this plan as of January 1, 2017 will receive a letter from Prime Therapeutics.**

2017 MEDICARE PLANS

Effective January 1, 2017

All health plans for Medicare eligible members offered in 2016 will be offered in 2017. Members currently enrolled in these plans do not need to take any action to stay enrolled:

- AARP Medicare Supplement Plan F (UnitedHealthcare) with Express Scripts Medicare® PDP
- Blue Cross and Blue Shield Medicare Advantage PPO with Express Scripts Medicare® PDP
- Humana Group Medicare HMO with Part D Pharmacy

2017 NON-MEDICARE PLANS

Effective January 1, 2017

All health plans for Non-Medicare eligible members offered in 2016 will be offered in 2017. Members currently enrolled in the plans listed below do not need to take any action to stay enrolled:

- Blue Cross and Blue Shield PPO
- Blue Cross and Blue Shield HMO Illinois
- UnitedHealthcare Choice Plus PPO

MEDICARE ADVANTAGE ENHANCEMENTS

Effective January 1, 2017

Medicare Advantage plan benefit enhancements for 2017

Details on all of these enhancements will be mailed by BCBS to current and new participants in this health plan. Here are some highlights:

- Over-the counter (OTC) Drug Debit card - A \$20/month purchase allowance to buy eligible OTC medicines and other health-related items via a pre-paid debit card at participating retailers
- Annual routine hearing exam
- Hearing aid allowance (\$1,000)
- Wellness Incentives (Up to \$100/year)
- Vision discount program and benefits (eye exam-\$0 copay, eyeglasses/contact lenses-\$0 copay/2 years, frame allowance-\$300/2 years)