



ILLINOIS INSTITUTE OF TECHNOLOGY

This document contains information that you may find helpful should you wish to file a claim as part of the BCBS Settlement. If you have additional questions regarding the Illinois Institute of Technology Health Plan, please contact Viktoria Rill at x73353. If you have questions regarding the settlement itself, please visit www.bcbssettlement.com.

Name of Health Plan: Illinois Institute of Technology Health Plan

Type of Plan: Self-Funded/Administrative Services

Group number: 017686

Subscriber ID: please refer to your ID card, or contact member services at 800-828-3116

Applicable claim period: September 1, 2015 – October 16, 2020

Premium information: The monthly cost of coverage to the employee is based on income and coverage tier (Self, 1+1, or Family) as is indicated in the charts below. The university paid/pays the remainder of the premium.

2015 Full Monthly Premiums:

In-network PPO

- Single: \$526.56
- 1+1: \$1,053.15
- Family: \$1,579.70

HDHP:

- Single: \$467.39
- 1+1: \$934.80
- Family: \$1,402.18

2016 Full Monthly Premiums:

In-network PPO

- Single: \$529.09
- 1+1: \$1,058.21
- Family: \$1,587.29

HDHP:

- Single: \$469.63
- 1+1: \$939.30
- Family: \$1,408.92

2015 Employee Monthly Premiums:

<i>As of 1/1/2015</i>	In-Network PPO		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$110.44	\$220.89	\$265.06
\$35,000 to 44,999	\$132.53	\$265.07	\$318.05
\$45,000 to 64,999	\$154.62	\$309.24	\$371.09
\$65,000 to 99,999	\$176.71	\$353.42	\$424.06
\$100,000 & over	\$198.80	\$397.60	\$477.05
<i>As of 1/1/2015</i>	HDHP with HSA Option		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$51.27	\$102.55	\$119.95
\$35,000 to 44,999	\$73.36	\$146.73	\$172.94
\$45,000 to 64,999	\$96.45	\$190.90	\$225.98
\$65,000 to 99,999	\$117.54	\$235.08	\$278.95
\$100,000 & over	\$139.63	\$279.26	\$331.95

2016 Employee Monthly Premiums:

<i>As of 1/1/2016</i>	In-Network PPO		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$110.44	\$220.89	\$265.06
\$35,000 to 44,999	\$132.53	\$265.07	\$318.05
\$45,000 to 64,999	\$154.62	\$309.24	\$371.09
\$65,000 to 99,999	\$176.71	\$353.42	\$424.06
\$100,000 & over	\$198.80	\$397.60	\$477.05
<i>As of 1/1/2016</i>	HDHP with HSA Option		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$51.27	\$102.55	\$119.95
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2017 Full Monthly Premiums: *Illinois Tech covered the full 2017 premium increase from January 1 – August 31. Employee premiums increased on September 1.*

In-network PPO

- Single: \$568.86
- 1+1: \$1,137.76
- Family: \$1,706.61

HDHP:

- Single: \$504.94
- 1+1: \$1,009.91
- Family: \$1,514.83

2018 Full Monthly Premiums:

In-network PPO

- Single: \$576.42
- 1+1: \$1,152.88
- Family: \$1,729.29

HDHP:

- Single: \$511.65
- 1+1: \$1,023.33
- Family: \$1,534.96

2017 Employee Monthly Premiums:

<i>As of 1/1/2017</i>	In-Network PPO		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$110.44	\$220.89	\$265.06
\$35,000 to 44,999	\$132.53	\$265.07	\$318.05
\$45,000 to 64,999	\$154.62	\$309.24	\$371.09
\$65,000 to 99,999	\$176.71	\$353.42	\$424.06
\$100,000 & over	\$198.80	\$397.60	\$477.05
<i>As of 1/1/2017</i>	HDHP with HSA Option		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$51.27	\$102.55	\$119.95
\$35,000 to 44,999	\$73.36	\$146.73	\$172.94
\$45,000 to 64,999	\$96.45	\$190.90	\$225.98
\$65,000 to 99,999	\$117.54	\$235.08	\$278.95
\$100,000 & over	\$139.63	\$279.26	\$331.95
<i>As of 9/1/2017</i>	In-Network PPO		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$118.74	\$237.49	\$284.98
\$35,000 to 44,999	\$142.49	\$284.99	\$341.96
\$45,000 to 64,999	\$166.24	\$332.48	\$398.99
\$65,000 to 99,999	\$189.99	\$379.98	\$455.94
\$100,000 & over	\$213.74	\$427.48	\$512.92
<i>As of 9/1/2017</i>	HDHP with HSA Option		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$55.12	\$110.26	\$128.96
\$35,000 to 44,999	\$78.87	\$157.76	\$185.94
\$45,000 to 64,999	\$102.62	205.25	\$242.97
\$65,000 to 99,999	\$126.38	\$252.75	\$299.92
\$100,000 & over	\$150.13	\$300.25	\$356.90

2018 Employee Monthly Premiums:

<i>As of 1/1/2018</i>	In-Network PPO		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$123.49	\$246.99	\$296.38
\$35,000 to 44,999	\$148.19	\$296.39	\$355.64
\$45,000 to 64,999	\$172.89	\$345.78	\$414.95
\$65,000 to 99,999	\$197.59	\$395.18	\$474.18
\$100,000 & over	\$222.29	\$444.58	\$533.44
<i>As of 1/1/2018</i>	HDHP with HSA Option		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$55.12	\$110.26	\$128.96
\$35,000 to 44,999	\$78.87	\$157.76	\$185.94
\$45,000 to 64,999	\$102.62	205.25	\$242.97
\$65,000 to 99,999	\$126.38	\$252.75	\$299.92
\$100,000 & over	\$150.13	\$300.25	\$356.90



2019 Full Monthly Premiums:

In-network PPO

- Single: \$601.15
- 1+1: \$1,202.30
- Family: \$1,773.40

HDHP:

- Single: \$552.84
- 1+1: \$1,105.67
- Family: \$1,630.88

2019 Employee Monthly Premiums:

<i>As of 1/1/2019</i>	In-Network PPO		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$129.66	\$259.34	\$311.20
\$35,000 to 44,999	\$155.60	\$311.21	\$373.42
\$45,000 to 64,999	\$181.53	\$363.07	\$435.70
\$65,000 to 99,999	\$207.47	\$414.94	\$497.89
\$100,000 & over	\$233.40	\$466.81	\$560.11
<i>As of 1/1/2019</i>	HDHP with HSA Option		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$55.67	\$111.36	\$130.25
\$35,000 to 44,999	\$79.66	\$159.34	\$187.80
\$45,000 to 64,999	\$103.65	\$207.30	\$245.40
\$65,000 to 99,999	\$127.64	\$255.28	\$302.92
\$100,000 & over	\$151.63	\$303.25	\$360.47

2020 Full Monthly Premiums:

In-network PPO

- Single: \$619.18
- 1+1: \$1,238.37
- Family: \$1,826.60

HDHP:

- Single: \$563.90
- 1+1: \$1,127.78
- Family: \$1,663.50

2020 Employee Monthly Premiums:

<i>As of 1/1/2020</i>	In-Network PPO		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$133.55	\$267.12	\$320.54
\$35,000 to 44,999	\$160.27	\$320.55	\$384.62
\$45,000 to 64,999	\$186.98	\$373.96	\$488.77
\$65,000 to 99,999	\$213.69	\$427.39	\$512.83
\$100,000 & over	\$240.40	\$480.81	\$576.91
<i>As of 1/1/2020</i>	HDHP with HSA Option		
Annual Salary	Single	1 + 1	Family
Up to \$35,000	\$56.78	\$113.59	\$132.85
\$35,000 to 44,999	\$81.25	\$162.52	\$191.56
\$45,000 to 64,999	\$105.72	\$211.45	\$250.31
\$65,000 to 99,999	\$130.20	\$260.38	\$308.98
\$100,000 & over	\$154.66	\$309.32	\$367.68