

Get Plan Suggestions

Answer these simple questions to learn what health plans might be right for you and your family.

1. How do you prefer to pay for health care?

- a. I want to pay the smallest amount out of my paycheck and more if I need care.
- b. I'm willing to pay the most out of my paycheck to have the lowest out-of-pocket maximum.
- c. I don't mind paying more out of my paycheck to have a copayment and no surprise bills when I receive care.
- d. I don't mind paying more out of my paycheck to have a copayment and no surprise bills when I receive care, but I want the option to see more providers if I choose.

2. Do you have money set aside to help pay for your healthcare needs before reaching your deductible?

- a. Yes.
- b. No.

3. Is it important that you can choose any physician or hospital?

- a. Yes.
- b. No.

4. Are you interested in saving money in a Health Savings Account to help pay for your healthcare now and in the future?

- a. Yes.
- b. No.

REMINDERS:

Employees are responsible for choosing the health plan that provides the necessary coverage for themselves and any dependents. These suggestions are based on factors others use to determine which health plan to choose. However, please review the information provided in the 2021 Benefit Choice Guide and the additional plan comparisons before choosing the best plan for you.

In all of the health plans, you pay nothing for preventive care.

Turn the page to learn what plans your answers suggest. →

Question 1: If you answered...

A

Consider the Consumer Driven Health Plan (CDHP).

This plan has the lowest paycheck contributions. If you don't think you'll need a lot of healthcare, don't pay for a lot of health insurance. But remember, this plan also has the highest deductible. This means that you must pay the full cost of your in-network care until you reach \$1,500 for individual coverage or \$3,000 for family coverage. Once you reach your deductible, you pay 10% of the charges as coinsurance.

While this plan has the highest out-of-pocket costs, the State of Illinois contributes money into your Health Savings Account (HSA) to help offset the deductible. In addition, you have the option to make additional pretax contributions out of your paycheck. Some people choose to contribute some of the money they saved on employee contributions to their HSA. Use the money now—or save it for healthcare needs in the future.

B

Consider the Quality Care Health Plan (QCHP).

This plan has the highest paycheck contributions but the lowest out-of-pocket maximum. In other words, your total out-of-pocket costs are capped at \$1,750 for individual coverage or \$4,375 for family coverage.

C

Consider a Health Maintenance Organization (HMO).

This plan has moderate paycheck contributions, but the plan has no deductible. This means the plan starts paying for healthcare immediately. In addition, the plan has copayments rather than coinsurance, so there are no surprises when you visit the doctor or hospital.

D

Consider the Open Access Plan (OAP).

This plan has moderate paycheck contributions, but the plan has no deductible if you remain within the managed care network (Tier 1). This means the plan starts paying for healthcare immediately. In addition, the plan has copayments rather than coinsurance, so there are no surprises when you visit the doctor or hospital. However, unlike an HMO, you are not limited only to the providers in the managed care network.

Question 2: If you answered...

A

Consider the Consumer Driven Health Plan (CDHP).

This plan has the highest deductible. This means that you must pay the full cost of your in-network care until you reach \$1,500 for individual coverage or \$3,000 for family coverage. Once you reach your deductible, you pay 10% of the charges as coinsurance.

B

Consider a Health Maintenance Organization (HMO) or the Open Access Plan (OAP).

An HMO has no deductible. Similarly, the OAP has no deductible if you remain within the managed care network (Tier 1).

Question 3: If you answered...

A A Health Maintenance Organization (HMO) probably isn't right for you.

In a Health Maintenance Organization, you are required to stay within the plan's provider network. No out-of-network care is covered. In all of the other plans, out-of-network is covered, although you will pay more when you receive care.

B Consider a Health Maintenance Organization (HMO).

In a Health Maintenance Organization, you are required to stay within the health plan provider network. No out-of-network care is covered. You will need to select a primary care physician (PCP) who will direct all healthcare services and make referrals to specialists and hospitals.

It's important to note that the Open Access Plan (OAP) Tier 1 works very much like an HMO. If you expect to only use providers in the OAP managed care network, consider that plan as well.

Question 4: If you answered...

A Consider the Consumer Driven Health Plan (CDHP).

When you enroll in this plan, the State of Illinois contributes money into your Health Savings Account (HSA) to help pay your out-of-pocket costs. In addition, you have the option to make additional pretax contributions out of your paycheck. Some people choose to contribute some of the money they saved on employee contributions to their HSA.

An HSA offers triple tax savings:

- Pre-tax or tax deductible contributions
- Tax-free interest or investment earnings
- Tax-free distribution, when used for qualified medical expenses.

Use the money now—or save it for healthcare needs in the future.

B The Consumer Driven Health Plan (CDHP) probably isn't going to be your first choice.

Look more closely at your other plan options.