

The MyBlue Plus Bronze 903 plan from Blue Cross and Blue Shield of Illinois provides coverage for individuals and families under a POS plan type for the period from January 1, 2025, to December 31, 2025. The overall deductible is set at \$4,900 for individuals and \$9,800 for families when using participating providers, while non-participating providers have higher deductibles of \$15,000 and \$45,000, respectively. Certain preventive health care services are covered before the deductible is met, and there are no specific service deductibles. The out-of-pocket limit is \$9,200 for individuals and \$18,400 for families with participating providers, whereas there is no out-of-pocket limit with non-participating providers. Premiums, balance billing charges, and non-covered health care do not contribute to the out-of-pocket limit. Utilizing network providers results in lower costs, and referrals are necessary to see specialists.

Cost variations for common medical events are significant between participating and non-participating providers; for example, a primary care visit costs \$45 with a participating provider but incurs 50% coinsurance with a non-participating provider. Preventive services are free with participating providers but may incur costs with non-participating providers. Prescription drug coverage includes no charge for preferred generic drugs after the deductible, with varying coinsurance for other drug tiers. Emergency room visits cost \$1,000 plus 50% coinsurance, regardless of the provider type.

Excluded services include adult dental care, long-term care, and non-emergency care outside the U.S. However, certain services such as abortion care, bariatric surgery, and chiropractic care are covered with limitations. Policyholders have the right to continue coverage and can seek assistance from agencies for grievances or appeals regarding claim denials. For further details, policyholders are encouraged to refer to the complete terms of coverage or contact customer service.

The policy document outlines essential information regarding claims submission, appeals, and grievances, directing users to contact Blue Cross and Blue Shield of Illinois at 1-800-892-2803 or

visit their website for assistance. It confirms that the plan offers Minimum Essential Coverage, which includes various health insurance types, but notes that eligibility for premium tax credits may be affected if one qualifies for certain types of coverage. The plan does not meet Minimum Value Standards, which may allow for premium tax credits for Marketplace plans. Language access services are available in Spanish, Tagalog, Chinese, and Navajo, with the same contact number for assistance. Coverage examples illustrate potential costs for specific medical situations, emphasizing that actual costs may vary based on care received and provider charges. The overall deductible remains at \$4,900, with a 50% coinsurance for specialist services and an \$850 copayment plus 50% coinsurance for hospital facility services. Examples provided include costs for pregnancy care totaling \$12,700, with the insured paying \$7,960; diabetes management costing \$5,600 with a \$3,220 payment; and a simple fracture totaling \$2,800 with a \$2,800 payment, with the plan covering the remaining costs for these services.