

# The Chicago Lighthouse Benefit Summary

Illinois Employees



The Chicago  
Lighthouse

**2025-2026**

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# Eligibility





# Eligibility

**HR Contact:** Katherine Lurquin, SHRM-CP  
**Email:** [Katherine.lurquin@chicagolighthouse.org](mailto:Katherine.lurquin@chicagolighthouse.org)  
**Phone:** 312.997.3641

## Eligibility Requirements

If you are a full-time employee, working 30 or more hours per week, you are eligible to enroll in the benefits described in this summary. Qualified dependents eligible for select benefit coverage include:

- Your legally married husband/wife
- Your child(ren) up to age 26
- Your incapacitated child(ren) of any age who are either incapable of self-support, incapacitated before the age limits of 19 or 25 and claimed as a dependent on your income tax return

## Waiting Period

All benefit eligible employees electing coverage will be effective on the first of the month, following 30 days.

## Qualifying Events

Outside of open enrollment you would need to have a qualifying event to add, drop, or make changes to your benefits. Employees are responsible for notifying Human Resources within 30 days of the qualifying life event to make a change to benefit elections. Qualifying event changes are effective on the date in which the event occurred.

Some examples of qualifying events are:

- Losing existing health coverage
- Losing eligibility for Medicare, Medicaid, or Children's Health Insurance Program (CHIP)
- Turning 26 and losing coverage through a parent's plan
- Getting married or divorced
- Having a baby or adopting a child
- Death in the family



# Insurance Benefits



# Insurance Benefits

## Medical Insurance

**Carrier:** BlueCross BlueShield of IL

**Website:** [www.bcbsil.com](http://www.bcbsil.com)

**Phone:** 800.892.2803 (HMO)  
800.828.3116 (PPO and HDHP/HSA)

### Health Maintenance Organization (HMO)

The HMO gives you access to certain doctors and hospitals but restricts services to in-network providers. There are no out-of-network benefits. Your care is managed by a Primary Care Physician (PCP). If you require a specialist, outpatient procedure or hospitalization, your registered PCP must refer you.

### Preferred Provider Organization (PPO)

A PPO plan offers the freedom to receive care from any in- or out-of-network doctor, specialist or hospital without a referral. You have a deductible to meet and once the deductible is met, coinsurance (or the cost share between you and the carrier) kicks in.

The types of medical services that accumulate towards your deductible are inpatient hospital stays, outpatient surgeries, labs (blood work) and x-rays (MRIs, PET scans, CT scans, etc.). If you go to the doctor, see a specialist, utilize the ER or take a prescription drug, you'll pay a copay for those specific services. Copays do not accumulate towards your deductible but they do accumulate towards your overall out-of-pocket maximum.

### High Deductible Health Plan (HDHP) with Health Savings Account (HSA)

The plan is comprised of two components:

1. High Deductible Health Plan
2. Health Savings Account (HSA)

The HDHP is a high deductible health plan that provides health care benefits after the deductible has been met. All medical services, with the exception of preventive care, are paid for by you at 100%, less carrier discounts, prior to meeting your entire annual deductible. This includes routine office visits, procedures, lab work, prescription drugs, etc.

The HSA is a bank account paired with your HDHP allowing you to set aside money on a tax-free basis to pay your out-of-pocket qualified medical, dental, and vision expenses throughout the year or in the future. You own the money in your HSA account and it is yours to keep – even when you change plans or retire. The funds roll over from year to year to be used when you really need them.

*The tax-preferred status of your HSA contributions depend on a number of factors. Residents of California and New Jersey are taxed on HSA contributions at the state level. State tax laws can change periodically, so you should consult with a tax advisor to confirm the tax treatment of HSA contributions in your state.*

# Insurance Benefits

## Health Savings Account (HSA)

**HSA Vendor:** Inspira Financial

**Website:** <https://mybenefits.inspirafinancial.com>

**Phone:** 844.729.3539

For 2025, your HSA plan banking is administered through Inspira Financial (formally known as Benefit Resources). Please visit <https://mybenefits.inspirafinancial.com> and register to manage your HSA online. You may also download the mobile app for on-the-go account access. If you have any questions about your account, contact Inspira Financial member services at 844-729-3539.

### You're eligible for a health savings account if:

- You are covered by a qualified high deductible health plan (HDHP)
- You are not covered by any other medical coverage that is not considered a qualified HDHP
- You are not enrolled in Medicare (Part A included)
- You are not claimed as a dependent on someone's tax return
- You are not enrolled in a Medical Flexible Spending Account (your own or your spouse's)

### Advantages to having an HSA

There's a triple tax savings benefit as contributions are not taxed going into the account, while they sit there earning interest or when they're taken out for a qualified medical expense

- You pay less in premium for this plan
- Unused funds rollover each year with no maximum on how much you can save and accumulate over time
- The account is portable so you never have to worry about losing the money in the account should you change between plans, retire or even seek employment elsewhere
- Your HSA can be viewed as a second means of savings for your retirement
- You control your healthcare spending and choose when to use your HSA dollars and when to save them
- You become a more informed participant in your healthcare and healthcare spending

### Steps to using your HSA

1. Go to the doctor and present your carrier ID
2. Your doctor submits your medical services to the carrier to be discounted
3. Your carrier adjusts the pricing to reflect the network discounted amount for your services
4. The carrier generates an Explanation of Benefits (EOB) and sends it to you
5. By now you've received an invoice from your doctor - make sure the EOB and invoice match
6. Pay your doctor directly with pre-tax dollars from your HSA or post-tax dollars from your pocket if funds are not available

### Using your HSA on qualified expenses

You can use the money in your HSA to pay for qualified medical, dental and vision expenses permitted under federal tax law. For a full list of qualified medical expenses go to [www.irs.gov](http://www.irs.gov) and search Section 213d.



# Insurance Benefits

## Medical Plan Details

Choice of plan options:	HMO <i>In-Network Benefits Only</i>	BluePrint PPO	ValueChoice PPO	HDHP/HSA
<b>Network</b>	BlueAdvantage HMO	BluePrint PPO	ValueChoice PPO	BlueEdge Select
<b>Deductible</b> Individual (In-Network / Out-of-Network) Family (In-Network / Out-of-Network)	\$0 \$0	\$1,000 / \$2,000 \$3,000 / \$6,000	\$1,500 / \$2,500 \$4,500 / \$7,500	\$3,300 / \$6,600 \$6,600 / \$13,200
<b>Coinsurance</b> In-Network / Out-of-Network	100%	80% / 60%	70% / 50%	100% / 70%
<b>Out-of-Pocket Max</b> Individual (In-Network / Out-of-Network) Family (In-Network / Out-of-Network)	\$1,500 \$3,000 <i>Max in Copays</i>	\$4,000 / \$5,500 \$9,000 / \$13,500 <i>Includes Deductible</i>	\$6,500 / \$12,500 \$14,200 / \$26,900 <i>Includes Deductible</i>	\$3,300 / \$6,600 \$6,600 / \$13,200 <i>Includes Deductible</i>
<b>Physician Services (In-Network)</b> Well Adult / Well Child Physician Office / Specialist Visit X-Rays / Lab Diagnostics Telemedicine	100% \$30 / \$50 copay 100% N/A	100% \$30 / \$50 copay Deductible then 80% \$30 / \$50 Copay	100% Deductible then 70% Deductible then 70% \$48 per physician office visit until ded is reached	100% Deductible then 100% Deductible then 100% \$48 per physician office visit until ded is reached
<b>Emergency Room</b>	\$150 copay	\$150 copay	Deductible then 70%	Deductible then 100%
<b>Prescription Drugs (In-Network)</b> Generic/Formulary/Non-Formulary	<b>Copays:</b> \$10 / \$40 / \$60	<b>Copays:</b> \$10 / \$40 / \$60	<b>Copays:</b> Deductible then 70%	<b>Copays:</b> Deductible then 100%
<b>Mail-Order Prescription Drugs (In-Network)</b> Generic/Formulary/Non-Formulary	\$20 / \$80 / \$120	\$20 / \$80 / \$120	Deductible then 70%	Deductible then 100%
<b>Prescription Out-of-Pocket Max</b> Individual / Family	\$1,000 / \$3,000	\$1,000 / \$3,000	N/A	N/A

HMO (BlueAdvantage HMO #B30814)				PPO (ValueChoice PPO #P36066)			
Contributions:	Monthly	Semi-Monthly	Weekly	Contributions:	Monthly	Semi-Monthly	Weekly
Employee Only	\$288.45	\$144.23	\$66.57	Employee Only	\$283.26	\$141.63	\$65.37
Employee & Spouse	\$611.44	\$305.72	\$141.10	Employee & Spouse	\$600.42	\$300.21	\$138.56
Employee & Child(ren)	\$489.49	\$244.74	\$112.96	Employee & Child(ren)	\$480.68	\$240.34	\$110.93
Family	\$812.46	\$406.23	\$187.49	Family	\$797.83	\$398.91	\$184.11

PPO (BluePrint PPO #P30814)				HDHP/HSA (BlueEdge Select #OMA447)			
Contributions:	Monthly	Semi-Monthly	Weekly	Contributions:	Monthly	Semi-Monthly	Weekly
Employee Only	\$363.31	\$181.66	\$83.84	Employee Only	\$177.47	\$88.73	\$40.95
Employee & Spouse	\$770.08	\$385.04	\$177.71	Employee & Spouse	\$466.98	\$233.49	\$107.76
Employee & Child(ren)	\$616.50	\$308.25	\$142.27	Employee & Child(ren)	\$373.85	\$186.92	\$86.27
Family	\$1,023.25	\$511.63	\$236.14	Family	\$620.52	\$310.26	\$143.20

# Insurance Benefits

## Making the Most of Your Medical Benefits

Employees enrolled in the BlueCross BlueShield medical plan have access to the following services:

### **BlueAccess for Members: [www.bcbsil.com](http://www.bcbsil.com)**

A secure member website that gives you immediate access to health care benefit information and easy-to-use tools.

### **BlueAccess Mobile™**

You are able to access your BlueAccess for Members account straight from your mobile device. Choose to receive text messaging for Rx refill reminders, diet and fitness tips, claim updates and more. Download the application straight to your smartphone for immediate access.

### **24/7 Nurseline: 800.299.0274**

General health information and guidance for specific conditions from fevers to bee stings as well as coaching on appropriate treatment paths.

### **Maternity Care Program: 888.421.7781**

Personalized support provided by Obstetrical nurses.

### **Mail Order Prescriptions: 833.715.0942 or [express-scripts.com/rx](http://express-scripts.com/rx)**

Members can save time and money by calling 24/7 to refill or transfer a current prescription or get started with home delivery.

### **Blue365 Discounts**

As a member you have access to additional special program discounts. Details can be accessed at [www.bcbsil.com](http://www.bcbsil.com) under the “My Coverage” tab and then Discounts.

### **Well onTarget<sup>SM</sup> Member Wellness Program**

Access health and wellness resources that can help you manage your health with resources such as health assessments, health coaching, tracking tools and many more!

### **Virtual Visits—MDLIVE**

MDLIVE's telehealth program provides enrolled members with access to non-emergency medical care without even leaving the couch. Visit a doctor virtually 24 hours a day, 7 days a week for a variety of different ailments and symptoms ranging from allergies, asthma, aches, infections, cold/flu, and more. Log on to [MDLIVE.com/bcbsil](http://MDLIVE.com/bcbsil) or call 888.676.4204 today to find out additional info on this convenient benefit.

# Insurance Benefits

## Find a Provider

- 1 **A.** Go to <https://www.bcbsil.com/>
- 2 **B.** Select Find Care
- 3 **C.** Select Find a Doctor or Hospital
- 4 **D.** Log in to your account to search OR search as Guest to find providers
- 5 **E.** Enter the location where you want to search for a provider and click continue
- 6 **F.** Select Employer Plans  
You will then be prompt to enter in the state that you currently living in and which plan you are enrolled in - HMO or PPO. These are the plans offered through The Chicago Lighthouse:
  - HMO: Blue Advantage HMO [ADV]
  - PPO: Participating Provider Organization [PPO]
  - PPO: Blue Choice PPO [BCS]

## Find in-network doctors & facilities near you

Before you begin your search, answer some questions to help us understand your location and insurance plan. This will allow us to assist you in finding in-network doctors and facilities.

### To get started, tell us where you want to search for care

Sharing your location with us will help us determine which doctors and facilities are nearby.

City, state or zip  
Chicago, IL — 60608

Continue

If you are having trouble finding your plan, please try [logging in](#).

### What type of plan would you like to search?

How you get your insurance affects what doctors are in your network. Carefully select to avoid high out-of-network costs.

**F**

#### Employer Plans

Through my, my spouse's, or my parent's employer

Select

#### Individual & Family Plans

Through my state's Exchange or purchased directly

Select

#### Medicare

Purchased directly or through my employer

Select

#### Medicaid

Through my state government

Select

If you are having trouble finding your plan, please try [logging in](#).

**A** Welcome Employers Producers Providers Company Information Language Assistance **En español**

BlueCross BlueShield of Illinois Search Make a Payment Log In or Sign Up

**B** Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

## We Know You're Gonna Love This

Manage all your plan information in one place by accessing your account online.

Sign Up

Welcome Employers Producers Providers Company Information Language Assistance **En español**

BlueCross BlueShield of Illinois Search

**C** Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

### Providers in Your Network

**Find a Doctor or Hospital**

- Find a Dentist
- Find a Vision Provider
- Virtual Visit
- Providers Outside of U.S.
- Breastfeeding Counseling
- Teledentistry

### Blue Distinction® Specialty Care

- Blue Distinction Centers
- Bariatric Surgery
- Cardiac Care
- Cellular Immunotherapy
- Fertility Care
- Gene Therapy
- Knee and Hip Replacement
- Maternity Care
- Spine Surgery
- Substance Use Treatment and Recovery
- Transplants

### Where You Go Matters

Know Your Network

- Choosing Health Care Options
- Tips To Find a Doctor or Hospital
- What Is an Emergency
- Understanding Costs and Quality
- Provider Network Selection Criteria
- Provider Information Validation
- [Blue Star Group Report](#)
- Utilization Management

### Personalized Search

- Search and get the most accurate results
- See personalized details that may lower your health care costs
- Find out about access to additional programs and benefits available through your health insurance

Log in to Search

Don't have an account? [Register](#)

In addition to staying in network, you or your doctor may need to get benefit approval or "prior authorization" before you get treatment for certain services for them to be covered. Please check your benefit booklet or your plan's terms if you are unsure.

Surprise billing laws may prevent you from being charged out-of-network rates under certain circumstances.

### Basic Guest Search

Even if you're not a member, you can answer a few questions to find the right network to search for doctors.

Search for Doctors as a Guest

In addition to staying in network, you or your doctor may need to get benefit approval or "prior authorization" before you get treatment for certain services for them to be covered. Please check your benefit booklet or your plan's terms if you are unsure.



# Insurance Benefits

## Tips to Save Money

### Preventive/Wellness Exams Covered at 100%

- Preventive care is equal to one physical exam per year per enrolled member
- Females get an annual well-woman exam covered at 100% in addition to their annual exam
- No deductible expenses apply—the exam is completely no cost to you provided it's coded as preventive

### Prescription Drugs

- Ask your doctor if there's a generic version of the medication they're prescribing or you're already taking
- Take advantage of the Generic Prescription Savings Programs at major retailers
- Ask about free samples from your doctor and/or manufacturer rebates

### High Cost Scans, X-Rays & Tests

- MRI, PET scans, CT scans, etc. are nearly 2/3 less costly at free-standing, in-network imaging centers than at hospitals
- Finding an in-network, free-standing imaging center can save you a substantial amount of money

### Accessing Medical Care

The emergency room is a costly experience for issues that aren't true emergencies. There are alternatives that can offer you quick care at a much more affordable cost. The key is finding these alternatives today when you're happy and healthy.

- **Doctor's office:** for symptoms that aren't extreme, call and let them know your symptoms require immediate attention
- **Convenient Care Clinics:** use when you don't have a primary doctor or can't get an appointment. Good for fever, sore throat/strep, coughs/congestion, sports physicals, UTIs, etc.
- **Urgent Care (UC):** less costly than the ER; can treat sprains/strains, minor breaks, mild asthma, minor infections, rashes, small cuts, burns, etc.

# Insurance Benefits

## Voluntary Dental Insurance

**Carrier:** BlueCross BlueShield of IL

**Website:** [www.bcbsil.com](http://www.bcbsil.com)

**Phone:** 800.367.6401

### Dental Health Maintenance Organization (DHMO)

The DHMO plan utilizes the Network Name network and restricts services to in-network providers only. These dental plans require you to choose one in-network dentist or dental facility to coordinate all of your oral health needs. If you need to see a specialist, your primary care dentist will refer you.

This plan doesn't have any deductibles or maximums. Instead, when you receive a dental service, you pay a fixed dollar amount for the treatment based on a pre-determined fee schedule between the carrier and your dentist.

### Preferred Provider Organization (PPO)

This dental plan allows the flexibility to select any dentist in-network or out-of-network, but if you stay in network, you'll pay less.

Dental coverage focuses on preventive and diagnostic procedures in an effort to avoid more expensive services associated with dental disease and surgery. The type of service or procedure received determines the amount the carrier will cover for each visit. Each type of service fits into a class of services according to complexity and cost.

Choice of plan options:	HMO <i>In-Network Benefits Only</i>	Low PPO <i>In-Network / Out-of-Network</i>	High PPO <i>In-Network / Out-of-Network</i>
Network Name	BlueCare Dental HMO	BlueCare Dental PPO	BlueCare Dental PPO
Individual Deductible (Family = 3x)	None	\$50	\$50
Office Visit Copay	\$5	None	None
Preventive Coinsurance	Scheduled Fee	100% / 90%	100% / 90%
Basic Coinsurance	Scheduled Fee	80% / 70%	80% / 70%
Major Coinsurance	Scheduled Fee	50% / 40%	50% / 40%
Annual Plan Maximum	Unlimited	\$1,000 / \$1,000	\$2,000 / \$2,000
Orthodontia Coinsurance	Scheduled Fee	Not Covered	50%*
Orthodontia Lifetime Maximum	\$4,600 per member	Not Covered	\$2,000 / \$2,000

\* Orthodontia on the High PPO covers members to age 19—it's a child only benefit

## Dental Insurance Rates

	HMO			Low PPO			High PPO		
Contributions:	Monthly	Semi-Monthly	Weekly	Monthly	Semi-Monthly	Weekly	Monthly	Semi-Monthly	Weekly
Employee Only	\$16.48	\$8.24	\$3.80	\$30.05	\$15.03	\$6.93	\$34.34	\$17.17	\$7.92
Employee + Dependent(s)	\$37.03	\$18.52	\$8.55	\$82.11	\$41.06	\$18.95	\$100.51	\$50.26	\$23.19

# Insurance Benefits

## Find a Provider

- 1 **A.** Go to <https://www.bcbsil.com/>
- 2 **B.** Select Find Care
- 3 **C.** Select Find a Dentist
- 4 **D.** Select plan/network
  - BlueCare Dental PPO
  - BlueCare Dental HMO
- 5 **E.** Click one of the available radio buttons (Search by Name, Location, Center Name etc.) and enter the appropriate search criteria.
- 6 **F.** The next page will be the Search Results page. On this Search Results page you can:
  - Start a New Search
  - Save the Search
  - Create a PDF
  - Print the Results
  - Email the Results



### Find a PPO Dentist within the United States

- Search by:**
- ☐ Location
  - ☐ Dentist Name
  - ☐ Dental Office Name
  - ☐ County
  - ☐ Saved Searches

**E**

Filter your search:

Dentist Name



Facility Name

City

County

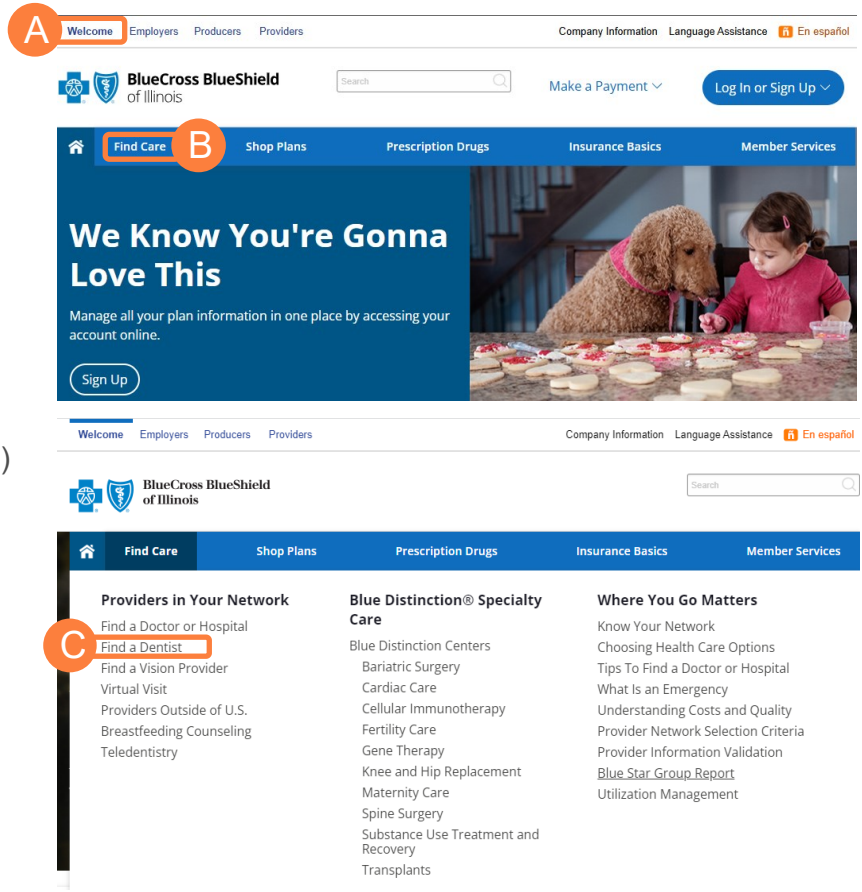
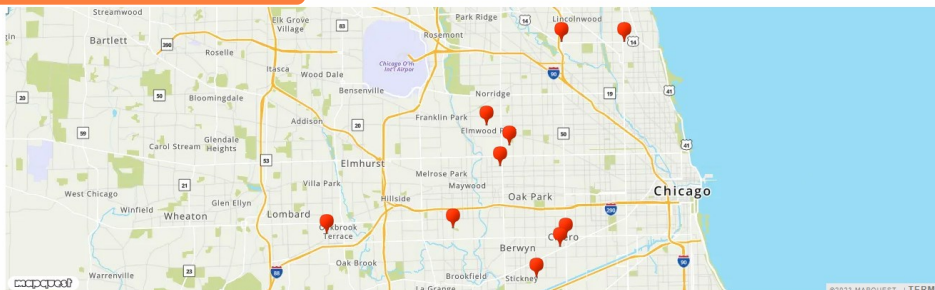
Specialty

No Preference

Language

No Preference

Apply

**F****C****D**

### Find a Dentist

Choose a dental network from the list below to search for a dentist. If your Blue Cross and Blue Shield of Illinois (BCBSIL) plan includes pediatric dental coverage, choose "BlueCare Dental (Traditional National PPO)" as your network. To find out if your plan includes pediatric dental coverage, please check your Summary of Benefits and Coverage (SBC).

- BlueCare Dental PPO\*\***
- BlueCare Dental HMO\*\***
- Medicaid Plans (Blue Cross Community Health Plans)\*\*
- Blue Cross Community MMAI (Medicare-Medicaid Plan)\*\*
- Medicare Advantage Plans\*
- Medicare Supplement Plans\*



# Insurance Benefits

## Voluntary Vision Insurance

**Carrier:** BlueCross BlueShield of IL

**Website:** [www.bcbsil.com](http://www.bcbsil.com)

**Phone:** 866.939.3633

Vision insurance helps offset the cost of routine eye exams and helps pay for vision correction eyewear like eyeglasses and contacts by an eye-care provider.

You're eligible for an eye exam and lenses or contact lenses every 12 months and frames every 12 months. Out-of-network providers will only offer you an allowance towards your vision services.

Vision Plan Details:	Frequency	In-Network	Out-of-Network
Network	EyeMed's Select Network		
Eye Exam	Every 12 months	\$10 copayment	\$30 max allowance
Lenses - Single vision - Bifocal - Trifocal - Lenticular	Every 12 months*	\$10 copayment	Allowance varies
Frames	Every 24 months*	\$130 Allowance + 20% off balance over \$130	\$65 max allowance
Elective Contacts	Every 12 months**	\$130 allowance + 15% off balance over \$130	\$104 max allowance

\*Vision benefit frequencies are based on the date of service within the policy year

\*\* You cannot get contacts and glasses in the same calendar year

## Vision Insurance Rates

Contributions:	Monthly	Semi-Monthly	Weekly
Employee Only	\$7.52	\$3.76	\$1.74
Employee & Spouse	\$14.30	\$7.15	\$3.30
Employee & Child(ren)	\$15.06	\$7.53	\$3.48
Family	\$22.14	\$11.07	\$5.11

# Insurance Benefits

## Find a Provider

- 1 **A.** Go to <https://www.bcbsil.com/>
- 2 **B.** Select Find Care
- 3 **C.** Select Find a Vision Provider
- 4 **D.** Select plan/network: BCBSIL Vision Plans
- 5 **E.** Find an Eye Doctor by location, doctor's last name, or office name. Results will be listed and displayed on a map.

The screenshot shows the BlueCross BlueShield of Illinois website. The top navigation bar includes links for Welcome, Employers, Producers, Providers, Company Information, Language Assistance, and En español. The main header features the BlueCross BlueShield of Illinois logo, a search bar, and a 'Log In or Sign Up' button. The 'Find Care' section is highlighted, showing a banner for 'We Know You're Gonna Love This' with a photo of a child and a dog. Below the banner, the 'Find Care' menu is expanded, showing options like 'Find a Doctor or Hospital', 'Find a Dentist', 'Find a Vision Provider', 'Virtual Visit', 'Providers Outside of U.S.', 'Breastfeeding Counseling', and 'Teledentistry'. The 'Find a Vision Provider' option is highlighted. Below this, the 'BCBSIL Vision Plans' section is shown, listing 'Medicaid Plan (Blue Cross Community Health Plans™)', 'Blue Cross Community MMAI (Medicare-Medicaid Plan)™', and 'Medicare Advantage Plans'. The 'Find an eye doctor' section is highlighted, showing options for 'Search by location', 'Search by doctor', and 'Online & Lasik'. The bottom of the page includes a 'USE MY LOCATION' button and a 'SEARCH BY ZIP' button.

**A** Welcome Employers Producers Providers Company Information Language Assistance En español

BlueCross BlueShield of Illinois Search Make a Payment Log In or Sign Up

**B** Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

**We Know You're Gonna Love This**

Manage all your plan information in one place by accessing your account online.

Sign Up

Welcome Employers Producers Providers Company Information Language Assistance En español

BlueCross BlueShield of Illinois Search

**C** Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

**Providers in Your Network**

- Find a Doctor or Hospital
- Find a Dentist
- Find a Vision Provider
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- Providers Outside of U.S.
- Breastfeeding Counseling
- Teledentistry

**Blue Distinction® Specialty Care**

- Blue Distinction Centers
- Bariatric Surgery
- Cardiac Care
- Cellular Immunotherapy
- Fertility Care
- Gene Therapy
- Knee and Hip Replacement
- Maternity Care
- Spine Surgery
- Substance Use Treatment and Recovery
- Transplants

**Where You Go Matters**

- Know Your Network
- Choosing Health Care Options
- Tips To Find a Doctor or Hospital
- What Is an Emergency
- Understanding Costs and Quality
- Provider Network Selection Criteria
- Provider Information Validation
- Blue Star Group Report
- Utilization Management

BlueCross BlueShield of Illinois Search

**D** Find Care Shop Plans Prescription Drugs Insurance Basics Member Services

**Find a Vision Provider**

If your Blue Cross and Blue Shield of Illinois (BCBSIL) plan includes vision coverage, select from the links below to search for a vision provider.

**D** BCBSIL Vision Plans

- Medicaid Plan (Blue Cross Community Health Plans™)
- Blue Cross Community MMAI (Medicare-Medicaid Plan)™
- Medicare Advantage Plans

BlueCross BlueShield of Illinois English

**E** Find an eye doctor

Search by location Search by doctor Online & Lasik

USE MY LOCATION OR Zip code SEARCH BY ZIP

# Insurance Benefits

## Life and Disability Insurance

**Carrier:** Mutual of Omaha

**Website:** [www.mutualofomaha.com](http://www.mutualofomaha.com)

**Phone:** 800.877.5176

### Basic Life and AD&D Insurance

Life insurance helps ease your loved ones' financial burden. Your designated beneficiary will receive a benefit if you pass away from a covered accident or illness. In addition, the Accidental Death and Dismemberment (AD&D) benefits paired with life insurance provides a benefit to your beneficiary if you pass on or become dismembered due to a specifically covered accident.

Benefits may reduce as you age. See your plan documents for more detail.

This benefit is 100% company paid.

Basic Life/Accidental Death & Dismemberment	
Benefit Amount	2x your basic annual earnings, up to a maximum of \$550,000 - Life Up to the amount of your Life benefit - AD&D

### Voluntary Term Life and AD&D Insurance

Voluntary Term Life/AD&D allows you to purchase additional Life and AD&D coverage for yourself and your dependents. Your age and the amount of insurance you elect determines the premium you'll pay. Costs will increase as you age, and benefits may be reduced. See your plan documents for more detail and to determine if Evidence of Insurability applies.

	Employee	Spouse	Child(ren)
Coverage Increments	\$10,000	\$5,000	\$2,000
Maximum Benefit Amount	\$500,000	\$100,000	\$10,000
Guaranteed Issue Amount*	\$100,000	\$50,000	\$10,000

\*Guarantee issue applies to new hires only. If you wish to apply for coverage after your initial new hire eligibility period, any amount of voluntary life coverage you apply for will be subject to medical underwriting, and you are not guaranteed any amount of coverage.

### Short & Long-Term Disability

Disability Coverage	Short -Term	Long -Term
Waiting Period	Begins on the 15th day of continuous injury or illness	Begins on the 91st day of continuous injury or illness
Benefit Amount	70% of weekly earnings	60% of monthly earnings
Maximum Benefit	\$3,000 per week	\$9,000 per month
Length of Payment Period	12 weeks	Social Security Normal Retirement Age
Premium Contribution	Company paid	Company paid

If you become ill or suffer an injury that prevents you from working, this form of disability insurance replaces a portion of your income for a defined maximum period of time.



# Financial Benefits



# Financial Benefits

## Flexible Spending Accounts (FSA)

**FSA Vendor:** Benefit Resource, Inc. (BRI)

**Website:** [www.benefitresource.com](http://www.benefitresource.com)

**Phone:** 800.473.9595

Flexible Spending Accounts (FSA) allow you to save money on a pre-tax basis to pay for qualified medical expenses and/or dependent care expenses you may incur throughout the year. The money you put into your FSA is done so on a pre-tax basis. This means you are lowering your taxable income and also not paying taxes when the money is used for qualified expenses.

### Health Care FSA

You may contribute up to \$3,300 per plan year to pay for qualified medical, dental and vision expenses for yourself and eligible family members. Funds in this account can cover all eligible expenses on your tax dependents even if they are not enrolled under your health care plan. Eligible reimbursable expenses include medical and dental plan deductibles and copays (if applicable), orthodontia expenses not covered by your dental plan, prescription drugs, prescription eyeglasses and contact lenses, Lasik eye surgery and much more.

Under the Health Care FSA, you are eligible to roll over up to \$660 to the next year.

### Dependent Care FSA

You may contribute up to \$5,000 per plan year to pay for qualified eligible dependent care expenses. Funds in this account are saved on a tax-free basis.

### Transit & Parking FSA

This program's benefit allows employees to use pre-tax income to pay for their public transportation or parking expenses. Elected amounts will not be subject to federal, state, Social Security or Medicare taxes.

- Elect up to \$325 per month in pre-tax deductions for the cost of mass transit
- Elect up to \$325 per month in pre-tax deductions for the cost of parking a car at a transit station or near your office location

# Financial Benefits

## Retirement Plan

**Carrier:** Principal

**Website:** [www.principal.com](http://www.principal.com)

**Phone Number:** 800.547.7754

Saving for retirement is a long-term goal. The Chicago Lighthouse has established a 401(k) retirement plan to help employees save and invest for retirement through ongoing, convenient payroll deductions.

Through our plan, eligible employees have the option to make contributions on a pre-tax basis. Contributions can be invested in the plan's investment options, and employees are eligible to make contributions once they meet the plan's eligibility criteria:

- At least age 21
- Completed 30 days of employment

Once eligibility criteria are met, employees can participate as of the first day of the following month. The Internal Revenue Service (IRS) limits what you can contribute to a retirement plan each year. For 2025, the IRS limit is \$23,500. Employees who are age 50 or over by the end of the year can contribute an additional \$7,500 as a catch-up contribution.

To help employees enroll as soon as they become eligible, our plan uses automatic enrollment. All eligible employees will be enrolled on the 1st of the month following 30 days of employment with a default contribution rate of 5% of their eligible gross earnings (employees may make changes to their contribution rates at any time). Please refer to the automatic enrollment notice for more information.

In addition, The Chicago Lighthouse will provide an employer match of up to 4% - 100% of the first 3% and 50% of the next 2%. Employees are fully vested in the plan after 5 years of service. Please refer to the Summary Plan Description (SPD) for information related to the vesting schedule and other details.

Lastly, if you participate in our retirement plan, be sure to designate a beneficiary either during or shortly after enrollment. You should periodically review your beneficiary to ensure it is up to date.

For more information about the 401(k) plan and services provided by Principal, see your Human Resources Representative.

*This is intended to be a brief informational overview of the retirement plan and does not replace or supersede plan notices, documents, and disclosures. This is not a complete summary of all relevant features of the plan. Plan details are subject to change and may vary from this summary. Annual testing and other factors may limit what you are able to contribute to this retirement plan. Investing involves risk, including loss; you should consider your risk tolerance before investing money. Please carefully review plan materials for information regarding fees, plan features, and investments.*



# Other Benefits





# Other Benefits

## Employee Assistance Program (EAP)

**Carrier:** Mutual Of Omaha

**Website:** [Mutualofomaha.com/eap](http://Mutualofomaha.com/eap)

**Phone Number:** 800.316.2796

The Employee Assistance Program (EAP) provides confidential, free assistance for marital/family problems, financial/legal difficulties, balancing work/life situations, emotional or stress related problems, drug or alcohol abuse and problems relating to work. EAP services are available 24 hours a day, seven days a week for you and your eligible dependents. There is no cost, it's just there for you when you need it.

Here are some challenges our EAP can help with:

- Stress and depression
- Life transitions
- Grief and loss
- Parenting and childcare
- Elder care
- Domestic violence
- Workplace conflict
- Addiction and recovery
- Legal assistance

## Vacation

Employees who are regularly scheduled to work 25 hours or more per week are eligible to accrue paid vacation time in accordance with the following schedule:

- 1-2 years of employment: 10 days (1 day accrued per month, up to 10 day limit per calendar year)
- 3 years of employment: 12 days (1 day accrued per month)
- 4-7 years of employment: 15 days (1.25 days accrued per month)
- 8+ years of employment: 22 days (1.84 days accrued per month)

Part-time employees who are regularly scheduled to work less than 25 hours per week accrue vacation time at a rate of 1 hour per every 35 hours worked, up to 40 hours per calendar year.

Employees can roll over up to 5 vacation days from one calendar year to the next.

Please note: The above schedule does not apply to education staff in the Children's Development Center and employees working under government service contracts.

## Sick Time

Employees earn paid sick time at a rate of 1 hour per 35 hours worked, up to 48 hours per calendar year. (Employees working under government service contracts accrue paid sick time at a rate of 1 hour per 30 hours worked, up to 56 hours per calendar year.) Employees may roll over up to 128 hours of sick time from one calendar year to the next.

## Holidays

Employees receive 12 paid holidays per calendar year. Holidays schedules for each department are sent out each December.



NOTE: This Benefits Summary is merely intended to provide a brief overview of the Company's employee benefit programs. Employees should review the Company's employee handbook and actual plan documents for the precise terms of such programs. In the event of any inconsistency between this Benefits Summary and such governing documents, the governing documents will control. The Company reserves the sole and absolute discretion and right to interpret, apply, amend, discontinue or terminate, without prior notice, any and all of the benefit programs referenced herein. Voluntary plans are individual policies and are not considered sponsored or endorsed plans by your employer. See a benefit counselor for your customized quote for any additional benefit programs.