



12 South Center Street  
Bensenville, IL 60106

Office: 630.350.3404  
Fax: 630.350.3438  
[www.bensenville.il.us](http://www.bensenville.il.us)

**VILLAGE BOARD**

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**Village Manager**

Evan K. Summers

June 17, 2022

Mr. John Laubersheimer  
619 South 2<sup>nd</sup> Street  
Springfield, Illinois 62704

Re: June 15, 2022 FOIA Request

Dear Mr. Laubersheimer:

I am pleased to help you with your June 15, 2022 Freedom of Information Act ("FOIA"). The Village of Bensenville received your request on June 15, 2022. You requested copies of the items indicated below:

*"Summary of benefits for all insurance plans. Including premium costs for employer & employee. Amount of employer contribution to any HAS's. Details on any insurance waiver benefit – if this exists."*

Your FOIA is hereby granted in full with the enclosed existing records.

Do not hesitate to contact me if you have any questions or concerns in connection with this response.

Very truly yours,

Corey Williamsen  
Freedom of Information Officer  
Village of Bensenville



# VILLAGE OF BENSENVILLE FREEDOM OF INFORMATION ACT REQUEST FORM

BENSENVILLE

TO: COREY WILLIAMSEN

Freedom of Information Officer  
Village of Bensenville  
12 S. Center Street  
Bensenville, IL 60106

FROM:

Name John Laubersheimer  
Address 618 S. 2nd St  
Springfield, IL 62704  
Phone 217-757-3718  
E-Mail JLaubersheimer@afscme.org

11421

**TITLES OR DESCRIPTION OF RECORDS REQUESTED** (Please Include Date of Birth and Case Number for Police Records):

- Summary of benefits for all insurance plans, including premium costs for employer  
& employee. Amount of employer contribution to our HSAs.  
Details on any insurance waiver benefit if this exists

☐

THIS REQUEST IS FOR A COMMERCIAL PURPOSE (You must state whether your request is for a commercial purpose. A request is for a "commercial purpose" if all or any part of the information will be used in any form for sale, resale, or solicitation or advertisement for sales or services. Failure to disclose whether a request is for a commercial purpose is a prosecutable violation of FOIA.)

Would like your request delivered via: ☒ E-Mail ☐ U.S. Mail ☐ Pick-Up\*

\*Pick-Up is available by appointment at Village Hall Monday thru Friday; between 8:00 a.m. – 5:00 p.m.

I understand that any payment need be received before any documents are copied and/or mailed.

6-19-22  
Date

[Signature]  
Signature

All FOIA responses are posted on the Village's website. Name and address of the requestor will be made public.

The first fifty (50) pages of the request are free. The fee charge is fifteen (15) cents after the first fifty (50) pages.

Unless otherwise notified, your request for public records will be compiled within five (5) working days.

Unless otherwise notified, any request for commercial purposes will be compiled within twenty-one (21) days working days.

-----  
COREY WILLIAMSEN, FREEDOM OF INFORMATION OFFICER

Telephone: (630) 350-3404 Facsimile: (630) 350-3438

E-mail Address: FOIArequest@bensenville.il.us

\*\*\*For Freedom of Information Officer Use Only\*\*\*

6/15/22  
Date Request  
Received

6/22/22  
Date Response  
Due

6/29/22  
Date Extended  
Response Due

\$0-  
Total Charges

6/17/22  
Date Documents  
Copied or Inspected

Received by Employee: \_\_\_\_\_





# Benefit Summary

## Your Village of Bensenville's Benefit Plans

### HMO

- Blue Cross Blue Shield of Illinois (BCBS) is the claims administrator for the Village's HMO medical plan.
- Contact BCBS for questions concerning membership, plan benefits, or status of claim payments. HMO Customer Service Representatives can be reached at **800.892.2803**. Representatives are available between 7:00 a.m. and 8:00 p.m., CST, Monday through Friday and Saturday from 8:00 a.m. until 5:00 p.m., CST.
- BCBS's member website is both user-friendly and informative. The site allows you to seek answers about BCBS and the available HMO doctors and hospitals, view claims, learn about available programs, and to link to vendor sites. The web address is [www.bcbstil.com](http://www.bcbstil.com).
- Blue Cross Blue Shield** offers convenient online tools and personalized telephone services that help support, inform and motivate individuals in their wellness efforts. All employees, spouses, and dependents covered under the BCBS HMO medical plan(s) can participate at no charge to you.
- Well onTarget®** is a program that can give you the support you need to make healthy choices while rewarding you for your hard work. Employees can access Well onTarget® through Blue Access for Members or [www.wellontarget.com](http://www.wellontarget.com).
- Blue Points** is a program that rewards you for engaging in healthy activities including filling out a Health Assessment, syncing a fitness device, and more.
- Join the low cost **Fitness Program** with access to more than 10,000 fitness locations nationwide.
- NEW! Wondr** can help assist you in losing weight and improving your health - at no cost to you! Wondr is a digital, behavioral change program that teaches skills to help you create a healthy relationship with food, lose weight, sleep better, lower stress, and improve your overall quality of life—without counting calories, restricting foods, or giving up the foods you love.

### PPO

- Blue Cross Blue Shield of Illinois (BCBS) is the claims administrator for the Village's PPO medical plan(s).
- Contact BCBS for questions concerning membership, plan benefits, or status of claim payments. PPO Customer Service Health Advocates are available 24/7 at **877.245.5681** - 358 days of the year (closed for major holidays).
- NEW! Health Advocacy Solutions** is your personal Health Advocate who can help you with understanding your benefits, schedule medical appointments, navigate a chronic illness or new diagnosis, prepare for upcoming surgery, get a preauthorization, or save money on your health care - your Health Advocate has the answers! You can engage via multiple 24/7 communication channels including the BCBSIL mobile app and the My Evive Digital Member Hub - both of which feature live chat and secure messaging with a Health Advocate. Please contact your Customer Service Health Advocate **877.245.5681**.
- NEW! Evive Digital Member Hub** will get you access to BCBSIL's website as well as links to other carrier and vendor websites while offering proactive engagement, mobile-first design in connecting you with your other benefit carriers, and BCBS medical plan details! Register for MyEvive at [www.myhealth.myevive.com](http://www.myhealth.myevive.com) or download the MyEvive app at Google Play or the Apple Store.
- Blue Cross Blue Shield offers convenient online tools and personalized telephone services that help support, inform and motivate individuals in their wellness efforts. All employees, spouses, and dependents covered under the BCBS PPO medical plan(s) can participate at no charge to you.

- Well onTarget®** is a program that can give you the support you need to make healthy choices while rewarding you for your hard work. Employees can access Well onTarget® through Blue Access for Members or [www.myhealth.myevive.com](http://www.myhealth.myevive.com).
- Blue Points** is a program that rewards you for engaging in healthy activities including filling out a Health Assessment, syncing a fitness device, and more.
- Join the low cost **Fitness Program** with access to more than 10,000 fitness locations nationwide.
- Member Rewards** is a program that offers cash rewards when an in-network, high-quality, lower cost provider is selected. This program helps you minimize your out-of-pocket costs and offers a cash reward based on the provider you choose.
- MDLIVE** is available at **877.245.5681** or download the EVIVE app to access MDLIVE and connect with a board certified doctor 24/7 (Virtual Visit). You will pay your portion of the Virtual Visit based on your medical plan provisions.
- Express Scripts manages the prescription drug benefit for the Village of Bensenville. Retail and mail-order prescription services for the medical programs are administered through Express Scripts.
- Express Scripts member service representatives can be reached at **800.294.7041**, 24 hours a day, 365 days a year (except Thanksgiving and Christmas). Contact Express Scripts for questions regarding orders, account information, or to refill prescriptions.
- Or you can visit Express Scripts online at [www.express-scripts.com](http://www.express-scripts.com) to order refills, check order status, compare medication costs, find potential lower-cost options, receive time-sensitive alerts and reminders, print forms, and much more. If you are a first time visitor to our site, take a moment to register. Please have your member ID number and a recent prescription number available.
- Express Scripts Smart90 Program**  
If you take maintenance medications (long-term medications), be sure to obtain a 90-day/3-month supply from Walgreens, CVS, or through Express Scripts home delivery to avoid paying the full cost of the prescription. Call **800.294.7041** or visit [express-scripts.com/90day](http://express-scripts.com/90day) for more information.
- The Standard is the life insurance carrier for your Basic employer-paid life insurance benefits. The Standard Customer Service Representatives can be reached at **866.851.5505** between 8:30 a.m. to 5:00 p.m., CST Monday through Friday.
- Delta Dental is the claims administrator of dental benefits for you and your family. Delta Dental offers both telephonic and web access to your personal information to assist you in managing your dental benefits.
- Telephonic: A Delta Dental Customer Service Representative can be reached at **800.323.1743** between 7 a.m. to 7 p.m., CST Monday through Thursday and 7 a.m. to 6 p.m., CST Friday or the automated system is available 24 hours a day, seven days a week. Here you can verify eligibility status, review plan benefits, check on the status of a claim, and get claim forms.
- Web: Employees can access their benefits at [www.deltadentalil.com](http://www.deltadentalil.com). This website offers you the ability to view claim status and eligibility information, view a summary of your dental benefits, as well as locate a dentist in our area.

## Medical Plans – All Employees

Benefits	Blue Cross Blue Shield of Illinois PPO – P15985	Blue Cross Blue Shield of Illinois HMO – H15093
<b>Major Medical Coverage</b>		
<b>Deductible</b>		
Network	\$500 individual / \$1,000 family	
Non-Network	\$500 individual / \$1,000 family	N/A
<b>Out-of-Pocket (includes deductible)</b>		
Network	\$2,000 individual / \$4,000 family	\$1,500 individual / \$3,000 family
Non-Network	\$4,000 individual / \$8,000 family	N/A
<b>Outpatient Surgery &amp; Diagnostic</b>		
Network	90%*	100%
Non-Network	70%*	N/A
<b>Hospital Care – Inpatient</b>		
Network	90%*	100%
Non-Network	70%*	N/A
<b>Hospital Care – Outpatient</b>		
Network	90%*	100%
Non-Network	70%*	N/A
<b>Hospital Emergency Care</b>		
Network	90%**	\$50 copay; waived if admitted
Non-Network		
<b>Physician Services</b>		
Network	90%*	100%
Non-Network	70%*	N/A
<b>Office Visits</b>		
Network	\$15 copay, then 100%	\$10 copay
Non-Network	70%*	N/A
<b>Other Covered Services</b>		
Network	90%*	100%
Non-Network	70%*	N/A
<b>Preventive Services</b>		
Network	100%	100%
Non-Network	70%	N/A
<b>Vision</b>		
Network	Children's eye exam – No charge Limited to one exam every 12 months Children's glasses – No charge Over age 19: \$150 allowance every 12 months. Under the age of 19: Allow coverage at 100% per benefit year of one pair of glasses (lenses and frames) and one pair of contacts. Not covered	100% up to \$150 every 12 months
Non-Network		
<b>Prescription Drug</b>		
Retail (30-day supply)	\$10 generic / \$45 brand name formulary / \$45 non-formulary	\$3 generic / \$8 brand name formulary / \$23 non-formulary
Mail Order (90-day supply)	\$25 generic / \$112.50 brand name formulary / \$112.50 non-formulary	\$6 generic / \$16 brand name formulary / \$46 non-formulary
Prescription Drug Out-of-Pocket Maximum (network)	\$5,150 individual / \$10,300 family	\$5,650 individual / \$11,300 family

\*Deductible applies

\*\*Accidental injury and follow-up care received within 90 days of accident paid at 100%, up to \$500, then subject to deductible/coinsurance level.

This benefit schedule is for illustrative purposes only; please consult benefits booklet for more information. This exhibit in no way replaces the plan document of coverage, which outlines all the plan provisions and legally governs the operation of the plans.

The Village complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Village does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

## Dental Plans

Access to the two network levels is determined by your dentist's membership.

	Delta Dental of Illinois		
	PPO Network	Premier Network	Out-of-Network
<b>Annual Deductible</b>			
Individual	No deductible	No deductible	\$50
Family	No deductible	No deductible	\$150
<b>Annual Benefit Maximum</b>	\$2,000 / person	\$2,000 / person	\$2,000 / person
<b>Preventive/Diagnostic</b> (Cleanings, fluoride treatment, exams, x-rays, sealants)	Reimbursed at 100%*	Reimbursed at 100%**	100% of MPA***
<b>Basic</b> (Amalgam fillings, oral surgery, periodontics, endodontics)	Reimbursed at 80%*	Reimbursed at 80%**	80% of MPA***
<b>Major</b> (Cast restorations (inlays, onlays, crowns) partial/full dentures, repair of fixed partial dentures, bridgework, stainless steel crowns, denture reline/repair, recementation of crowns, inlays, onlays, bridges)	Reimbursed at 50%*	Reimbursed at 50%**	50% of MPA***
<b>Orthodontia</b> (for dependent children under age 19)	Reimbursed at 50%*	Reimbursed at 50%**	50% of MPA***
<b>Lifetime Orthodontia Maximum</b>	\$1,500 / person	\$1,500 / person	\$1,500 / person

\*You will not be balance billed for charges exceeding Delta Dental's allowed PPO fees.

\*\*You will not be balance billed for charges exceeding Delta Dental's maximum plan allowances (MPAs).

\*\*\*You are responsible for charges exceeding Delta Dental's MPAs.

### To Locate Participating Dental Providers

- Visit [www.deltadentalil.com/smartmouth](http://www.deltadentalil.com/smartmouth), select "Find a Provider," and complete your location or name.
- Select the Delta Dental PPO network for the highest level of benefits, and follow the on-screen instructions.

*Delta Dental Premier\* is a safety net for our Delta Dental PPO network. You will pay more out-of-pocket with a Delta Dental Premier dentist compared to a Delta Dental PPO dentist. However, you may save more money with a Delta Dental Premier dentist compared to a non-network dentist. Delta Dental Premier Dentists agree to our maximum plan allowances at payment in full, which may be lower than what a dentist would typically charge.*



# EMPLOYEE RATE SHEET

| PLAN YEAR 2022-2023

The Village of Bensenville offers a series of health coverage options. Choosing a health coverage option is an important decision. Please review the applicable insurance benefit premium rates for the period of July 1, 2022 to June 30, 2023 below. Once you have made a selection of benefits and the corresponding tier, please complete and return the Benefit Enrollment Change Form to Human Resources.

**How to use this chart:** First, choose your medical plan, PPO or HMO. Next, see the dental plan offered. Then, choose the corresponding tier or level of coverage that best meets your needs (employee only, plus spouse, children, or family) to determine the premium deduction per pay period.

## BENEFIT PREMIUM RATES – JULY 1, 2022 to JUNE 30, 2023

	TOTAL PREMIUM	EMPLOYEE PORTION	EMPLOYEE PER PAY PERIOD	VILLAGE PORTION	VILLAGE PER PAY PERIOD
<b>BCBS PPO</b>					
Employee	\$ 845.88	\$ 126.88	\$ 63.44	\$ 719.00	\$ 359.50
Employee/Spouse	\$ 1,776.35	\$ 266.45	\$ 133.23	\$ 1,509.90	\$ 754.95
Employee/Child	\$ 1,607.17	\$ 241.08	\$ 120.54	\$ 1,366.09	\$ 683.05
Family	\$ 2,511.58	\$ 376.74	\$ 188.37	\$ 2,134.84	\$ 1,067.42
Medicare/Single	\$ 677.25	\$ 101.59	\$ 50.79	\$ 575.66	\$ 287.83
Medicare EE & Non Medicare	\$ 1,523.13	\$ 228.47	\$ 114.23	\$ 1,294.66	\$ 647.33
<b>BCBS HMO</b>					
Employee	\$ 648.54	\$ 97.28	\$ 48.64	\$ 551.26	\$ 275.63
Employee/Spouse	\$ 1,361.94	\$ 204.29	\$ 102.15	\$ 1,157.65	\$ 578.82
Employee/Child	\$ 1,232.23	\$ 184.83	\$ 92.42	\$ 1,047.40	\$ 523.70
Family	\$ 1,868.61	\$ 280.29	\$ 140.15	\$ 1,588.32	\$ 794.16
Medicare Employee	\$ 490.97	\$ 73.65	\$ 36.82	\$ 417.32	\$ 208.66
Medicare EE & Non Medicare	\$ 1,139.51	\$ 170.93	\$ 85.46	\$ 968.58	\$ 484.29
<b>DELTA DENTAL OF IL - PPO</b>					
Employee	\$ 37.54	\$ -	\$ -	\$ 37.54	\$ 18.77
Employee/Spouse	\$ 75.08	\$ 37.54	\$ 18.77	\$ 37.54	\$ 18.77
Employee/Child	\$ 85.22	\$ 47.68	\$ 23.84	\$ 37.54	\$ 18.77
Family	\$ 128.14	\$ 90.60	\$ 45.30	\$ 37.54	\$ 18.77

For questions, please contact Marisol Leyva, Human Resources Manager at 630-350-3401 or via email at [mleyva@bensenville.il.us](mailto:mleyva@bensenville.il.us).