BlueCross BlueShield of Illinois

Plan Year 2027 Individual & Family Markets Products

Below are links to Summaries of Benefits and Coverage, Outlines of Coverage and Plan Comparison Charts for Blue Cross and Blue Shield of Illinois qualified health plans in the individual and family ACA market.

Comparison Charts and Medical Guide	Links to Charts
Plan Comparison Charts Combined	English • Spanish
Gold Plan Comparison Chart	English • Spanish
Silver Plan Comparison Chart	English • Spanish
Bronze Plan Comparison Chart	English • Spanish
Medical Plan Guide	English • Spanish

Key

Off-exchange plans

On-exchange "base" plans with no cost-sharing reductions (CSRs)

On-exchange plans with CSRs:

AI/AN Zero and AI/AN Limited plans are available to eligible American Indians and Alaska Natives. Plans with actuarial values of 73%, 87% and 94% are available to eligible consumers meeting household income requirements.

Gold Plans

Plan Name	Plan Variance	Link to SBC Document
Blue Precision Gold HMO℠ - Champion	Off-exchange Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Champion	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Champion	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Champion	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Secure	Off-exchange Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Secure	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Secure	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Secure	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Classic - Rx Copays	Off-exchange Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Classic - Rx Copays	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Classic - Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Gold HMO℠ - Classic - Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Gold - Classic℠ - Rx Copays with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Gold - Classic℠ - Rx Copays with Advocate	On-exchange "Base" Plan	Summary of Benefits
BlueCare Direct Gold - Classic℠ - Rx Copays with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,
a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

BlueCare Direct Gold - Classic℠ - Rx Copays with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Champion with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Champion with Advocate	On-exchange “Base” Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Champion with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Champion with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Secure with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Secure with Advocate	On-exchange “Base” Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Secure with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits
BlueCare Direct Gold HMO℠ - Secure with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Secure	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Secure	On-exchange “Base” Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Secure	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Secure	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Classic - Rx Copays	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Classic - Rx Copays	On-exchange “Base” Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Classic - Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Classic - Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Balance	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Balance	On-exchange “Base” Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Balance	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Choice Preferred Gold PPO℠ - Balance	On-exchange AI/AN Limited Plan	Summary of Benefits
MyBlue Plus Gold℠ - Champion	Off-exchange Plan	Summary of Benefits
MyBlue Plus Gold℠ - Champion	On-exchange “Base” Plan	Summary of Benefits
MyBlue Plus Gold℠ - Champion	On-exchange AI/AN Zero Plan	Summary of Benefits
MyBlue Plus Gold℠ - Champion	On-exchange AI/AN Limited Plan	Summary of Benefits
MyBlue Plus Gold℠ - Secure	Off-exchange Plan	Summary of Benefits
MyBlue Plus Gold℠ - Secure	On-exchange “Base” Plan	Summary of Benefits
MyBlue Plus Gold℠ - Secure	On-exchange AI/AN Zero Plan	Summary of Benefits
MyBlue Plus Gold℠ - Secure	On-exchange AI/AN Limited Plan	Summary of Benefits
MyBlue Plus Gold℠ - Classic - Rx Copays	Off-exchange Plan	Summary of Benefits
MyBlue Plus Gold℠ - Classic - Rx Copays	On-exchange “Base” Plan	Summary of Benefits
MyBlue Plus Gold℠ - Classic - Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
MyBlue Plus Gold℠ - Classic - Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits

Silver Plans

Plan Name	Plan Variance	Link to SBC Document
Blue Precision Silver℠ HMO - Champion	Off-exchange Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Champion	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Champion	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Champion	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Champion	On-exchange 73% AV CSR Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Champion	On-exchange 87% AV CSR Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Champion	On-exchange 94% AV CSR Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Signature	Off-exchange Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Classic - Select Rx Copays	Off-exchange Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Classic - Select Rx Copays	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Classic - Select Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Classic - Select Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Classic - Select Rx Copays	On-exchange 73% AV CSR Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Classic - Select Rx Copays	On-exchange 87% AV CSR Plan	Summary of Benefits
Blue Precision Silver℠ HMO - Classic - Select Rx Copays	On-exchange 94% AV CSR Plan	Summary of Benefits
BlueCare Direct Silver℠ - Classic - Select Rx Copays with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Silver℠ - Classic - Select Rx Copays with Advocate	On-exchange "Base" Plan	Summary of Benefits
BlueCare Direct Silver℠ - Classic - Select Rx Copays with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits
BlueCare Direct Silver℠ - Classic - Select Rx Copays with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Silver℠ - Classic - Select Rx Copays with Advocate	On-exchange 73% AV CSR Plan	Summary of Benefits
BlueCare Direct Silver℠ - Classic - Select Rx Copays with Advocate	On-exchange 87% AV CSR Plan	Summary of Benefits
BlueCare Direct Silver℠ - Classic - Select Rx Copays with Advocate	On-exchange 94% AV CSR Plan	Summary of Benefits
BlueCare Direct Silver℠ - Champion with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Silver℠ - Champion with Advocate	On-exchange "Base" Plan	Summary of Benefits
BlueCare Direct Silver℠ - Champion with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits
BlueCare Direct Silver℠ - Champion with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Silver℠ - Champion with Advocate	On-exchange 73% AV CSR Plan	Summary of Benefits
BlueCare Direct Silver℠ - Champion with Advocate	On-exchange 87% AV CSR Plan	Summary of Benefits
BlueCare Direct Silver℠ - Champion with Advocate	On-exchange 94% AV CSR Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Signature	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Classic - Select Rx Copays	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Classic - Select Rx Copays	On-exchange "Base" Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Classic - Select Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Classic - Select Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Classic - Select Rx Copays	On-exchange 73% AV CSR Plan	Summary of Benefits

Blue Choice Preferred Silver℠ PPO - Classic - Select Rx Copays	On-exchange 87% AV CSR Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Classic - Select Rx Copays	On-exchange 94% AV CSR Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Champion	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Champion	On-exchange "Base" Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Champion	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Champion	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Champion	On-exchange 73% AV CSR Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Champion	On-exchange 87% AV CSR Plan	Summary of Benefits
Blue Choice Preferred Silver℠ PPO - Champion	On-exchange 94% AV CSR Plan	Summary of Benefits
MyBlue Plus Silver℠ - Signature	Off-exchange Plan	Summary of Benefits
MyBlue Plus Silver℠ - Champion	Off-exchange Plan	Summary of Benefits
MyBlue Plus Silver℠ - Champion	On-exchange "Base" Plan	Summary of Benefits
MyBlue Plus Silver℠ - Champion	On-exchange AI/AN Zero Plan	Summary of Benefits
MyBlue Plus Silver℠ - Champion	On-exchange AI/AN Limited Plan	Summary of Benefits
MyBlue Plus Silver℠ - Champion	On-exchange 73% AV CSR Plan	Summary of Benefits
MyBlue Plus Silver℠ - Champion	On-exchange 87% AV CSR Plan	Summary of Benefits
MyBlue Plus Silver℠ - Champion	On-exchange 94% AV CSR Plan	Summary of Benefits
MyBlue Plus Silver℠ - Classic - Select Rx Copays	Off-exchange Plan	Summary of Benefits
MyBlue Plus Silver℠ - Classic - Select Rx Copays	On-exchange "Base" Plan	Summary of Benefits
MyBlue Plus Silver℠ - Classic - Select Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
MyBlue Plus Silver℠ - Classic - Select Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits
MyBlue Plus Silver℠ - Classic - Select Rx Copays	On-exchange 73% AV CSR Plan	Summary of Benefits
MyBlue Plus Silver℠ - Classic - Select Rx Copays	On-exchange 87% AV CSR Plan	Summary of Benefits
MyBlue Plus Silver℠ - Classic - Select Rx Copays	On-exchange 94% AV CSR Plan	Summary of Benefits

Bronze Plans

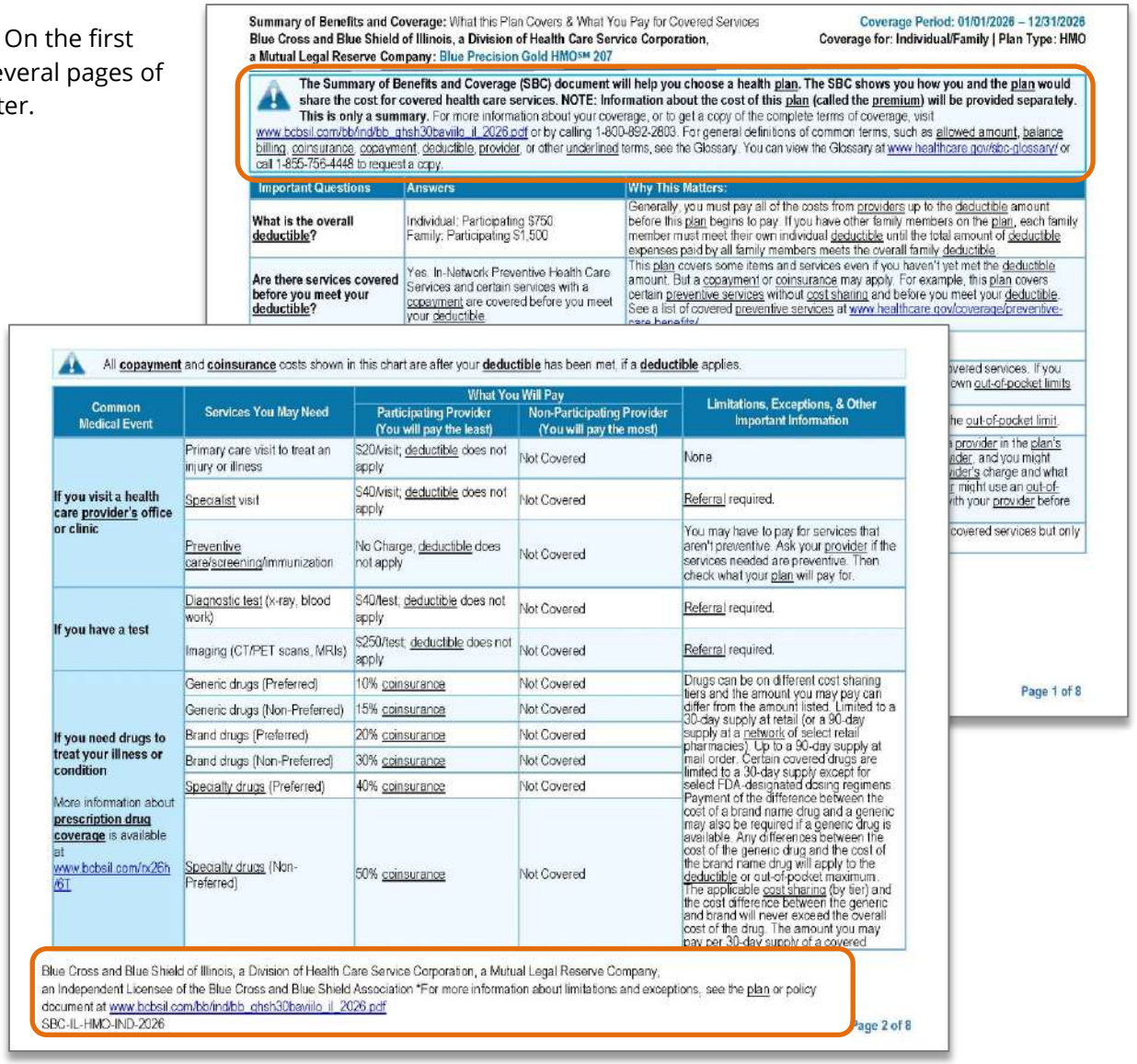
Plan Name	Plan Variance	Link to SBC Document
Blue Precision Bronze HMO℠ - Support HSA	Off-exchange Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Support HAS	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Support HSA	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Support HSA	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Secure HSA	Off-exchange Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Secure HSA	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Secure HSA	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Secure HSA	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Classic HSA - Select Rx Copays	Off-exchange Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Classic HSA - Select Rx Copays	On-exchange "Base" Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Classic HSA - Select Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Precision Bronze HMO℠ - Classic HSA - Select Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Classic HSA - Select Rx Copays with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Classic HSA - Select Rx Copays with Advocate	On-exchange "Base" Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Classic HSA - Select Rx Copays with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Classic HSA - Select Rx Copays with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Support HSA with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Support HSA with Advocate	On-exchange "Base" Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Support HSA with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits
BlueCare Direct Bronze℠- Support HSA with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Secure HSA with Advocate	Off-exchange Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Secure HSA with Advocate	On-exchange "Base" Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Secure HSA with Advocate	On-exchange AI/AN Zero Plan	Summary of Benefits
BlueCare Direct Bronze℠ - Secure HSA with Advocate	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Signature HSA	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Support HSA	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Support HSA	On-exchange "Base" Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Support HSA	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Support HSA	On-exchange AI/AN Limited Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Classic HSA - Select Rx Copays	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Classic HSA - Select Rx Copays	On-exchange "Base" Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Classic HSA - Select Rx Copays	On-exchange AI/AN Zero Plan	Summary of Benefits
Blue Choice Preferred Bronze PPO℠ - Classic HSA - Select Rx Copays	On-exchange AI/AN Limited Plan	Summary of Benefits

Catastrophic Plans

Plan Name	Plan Variance	Link to SBC Document
Blue Choice Preferred Security PPO℠ - HSA	Off-exchange Plan	Summary of Benefits
Blue Choice Preferred Security PPO℠ - HSA	On-exchange "Base" Plan	Summary of Benefits
MyBlue Plus Security℠ - HSA	Off-exchange Plan	Summary of Benefits
MyBlue Plus Security℠ - HSA	On-exchange "Base" Plan	Summary of Benefits

Accessing Policy Booklets

We link to a plan's policy booklet in every SBC document. On the first page of an SBC, it's the first link at the top. On the next several pages of an SBC, the link to the policy booklet is located in the footer.



Summary of Benefits and Coverage: What this Plan Covers & What You Pay for Covered Services
Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation,
a Mutual Legal Reserve Company: Blue Precision Gold HMO℠ 207

Coverage Period: 01/01/2026 – 12/31/2026
Coverage for: Individual/Family | Plan Type: HMO

The Summary of Benefits and Coverage (SBC) document will help you choose a health plan. The SBC shows you how you and the plan would share the cost for covered health care services. NOTE: Information about the cost of this plan (called the premium) will be provided separately. This is only a summary. For more information about your coverage, or to get a copy of the complete terms of coverage, visit www.bcbsil.com/bb/ind/bb_ghsh30bavillo_il_2026.pdf or by calling 1-800-892-2603. For general definitions of common terms, such as allowed amount, balance billing, coinsurance, copayment, deductible, provider, or other underlined terms, see the Glossary. You can view the Glossary at www.healthcare.gov/sbc-glossary/ or call 1-855-756-4448 to request a copy.

Important Questions	Answers	Why This Matters:
What is the overall deductible?	Individual: Participating $750 Family: Participating $1,500	Generally, you must pay all of the costs from providers up to the deductible amount before this plan begins to pay. If you have other family members on the plan, each family member must meet their own individual deductible until the total amount of deductible expenses paid by all family members meets the overall family deductible.
Are there services covered before you meet your deductible?	Yes. In-Network Preventive Health Care Services and certain services with a copayment are covered before you meet your deductible.	This plan covers some items and services even if you haven't yet met the deductible amount. But a copayment or coinsurance may apply. For example, this plan covers certain preventive services without cost sharing and before you meet your deductible. See a list of covered preventive services at www.healthcare.gov/coverage/preventive-care-benefits/

Page 1 of 8

All **copayment** and **coinsurance** costs shown in this chart are after your **deductible** has been met, if a **deductible** applies.

Common Medical Event	Services You May Need	What You Will Pay: Participating Provider (You will pay the least)	What You Will Pay: Non-Participating Provider (You will pay the most)	Limitations, Exceptions, & Other Important Information
If you visit a health care provider's office or clinic	Primary care visit to treat an injury or illness	$20/visit; deductible does not apply	Not Covered	None
	Specialist visit	$40/visit; deductible does not apply	Not Covered	Referral required.
	Preventive care/screening/immunization	No Charge; deductible does not apply	Not Covered	You may have to pay for services that aren't preventive. Ask your provider if the services needed are preventive. Then check what your plan will pay for.
If you have a test	Diagnostic test (x-ray, blood work)	$40/test; deductible does not apply	Not Covered	Referral required.
	Imaging (CT/PET scans, MRIs)	$250/test; deductible does not apply	Not Covered	Referral required.
If you need drugs to treat your illness or condition More information about **prescription drug coverage** is available at www.bcbsil.com/rx26h/61	Generic drugs (Preferred)	10% coinsurance	Not Covered	Drugs can be on different cost sharing tiers and the amount you may pay can differ from the amount listed. Limited to a 30-day supply at retail (or a 90-day supply at a network of select retail pharmacies). Up to a 90-day supply at mail order. Certain covered drugs are limited to a 30-day supply except for select FDA-designated dosing regimens. Payment of the difference between the cost of a brand name drug and a generic may also be required if a generic drug is available. Any differences between the cost of the generic drug and the cost of the brand name drug will apply to the deductible or out-of-pocket maximum. The applicable cost sharing (by tier) and the cost difference between the generic and brand will never exceed the overall cost of the drug. The amount you may pay per 30-day supply of a covered
	Generic drugs (Non-Preferred)	15% coinsurance	Not Covered	
	Brand drugs (Preferred)	20% coinsurance	Not Covered	
	Brand drugs (Non-Preferred)	30% coinsurance	Not Covered	
	Specialty drugs (Preferred)	40% coinsurance	Not Covered	
	Specialty drugs (Non-Preferred)	50% coinsurance	Not Covered	

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SBC-IL-HMO-IND-2026

Page 2 of 8