Monthly Contributions

The College Insurance Program (CIP) shares the cost of health coverage with you. While CIP covers the majority of the cost, you must make monthly contributions based upon the health plan you select.

Type of Participant	Type of Plan	Not Medicare Primary	Not Medicare Primary	Not Medicare Primary	Medicare Primary*
		Under Age 26	Age 26-64	Age 65 and Older	All Ages
Benefit	Managed Care Plan (OAP and HMO)	\$153.97	\$384.93	\$575.04	\$129.41
Recipient	College Choice Health Plan (CCHP)	\$192.86	\$482.16	\$727.62	\$164.25
Dependent	Managed Care Plan (OAP and HMO) College Choice Health Plan (CCHP)	\$615.89	\$1,539.73	\$2,300.17	\$517.66
Beneficiary		\$771.45	\$1,928.63	\$2,910.49	\$657.02

^{*} This rate applies to benefit recipients enrolled in Medicare Part A only and whose Part B benefits are reduced. If you, or your dependent is actively working and eligible for Medicare, or you have additional questions about this requirement, contact the CMS Group Insurance Division, Medicare Coordination of Benefits (COB) Unit (see page 8).

Enrollment Opportunities

After the Benefit Choice Period ends, you will only be able to change your benefits if you have an enrollment opportunity.

You must report an enrollment opportunity at MyBenefits.illinois.gov within 60 days of the event to be eligible to make benefit changes outside of the Benefit Choice Period. Also note that it is required to report important events to the MyBenefits Service Center, including, a change in Medicare status, marriage, or divorce. To report a financial or medical power of attorney, contact your retirement system.

Please note: Members becoming Medicare-eligible will have a separate enrollment opportunity prior to their 65th birthday. Details can be found on Page 8.

Terminating CIP Coverage

To terminate coverage at any time, contact the MyBenefits Service Center by calling (toll-free) 844-251-1777. The cancellation of coverage will be effective the first of the month following receipt of the request. Benefit recipients and dependent beneficiaries who terminate from CIP may re-enroll during an open enrollment period or other qualifying enrollment opportunity. Please refer to the College Insurance Program (CIP) Handbook for other qualifying enrollment opportunities.

Transition of Care after Health Plan Change

Benefit recipients and their dependents who elect to change health plans and are then hospitalized prior to July 1, 2024 and discharged on or after July 1, 2024, should contact both the current and future health plan administrators and primary care physicians as soon as possible to coordinate the transition of services.

Benefit recipients or dependents who are involved in an ongoing course of treatment or have entered the third trimester of pregnancy, should contact their new plan administrator before July 1, 2024, to coordinate the transition of services for treatment.

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