Choose the Right Plan for You

How do you know which type of plan is right for you?

That will depend on your personal preferences, family situation, and budget.



FSD Medical Overview 2024 – 2025 Plan Year

Check out these tips first.

CHECK THE NETWORK –

Do you prefer specific doctors or hospitals? Visit the plan's website to find out if the doctors and hospitals are in- network. If not, you'll pay a bigger share of the cost.

EVALUATE YOUR NEEDS –

Do you... visit a chiropractor? ...have frequent doctor or urgent care visits? ...get ongoing tests? ...take medications? ...have surgery planned? Compare the deductible, copays, coinsurance under each plan.

EVALUATE COST OF COVERAGE –

How much is the premium? Is there a deductible? Can you offset expenses with a tax- free account such as an HSA or FSA? Each of these factors can affect your true cost of healthcare.

Plan Options

Here's an overview of how each type of plan works.

Health Maintenance Organization (HMO)

An HMO gives you more predictable costs but less flexibility. You pay a copay for most services, but all care must be received within the HMO network. Out-of-network care is not covered except in an emergency. You must choose a primary care physician (PCP) to manage routine care, referrals, and hospital stays. **Note:** Kaiser plans are unique in that you do not have to select a PCP, and you must receive all care at Kaiser facilities.

- Kaiser Traditional HMO 15
- Kaiser Traditional HMO 30
- Blue Shield Trio HMO TRIO Network
- Blue Shield HMO 10 Full Network
- Blue Shield HMO 30 Full Network

Preferred Provider Organization (PPO)

A PPO plan gives you the freedom to see providers in and out-of-network. You pay less out-of-pocket for medical care if you use providers that belong to the plan's network. You can use doctors, hospitals, and providers outside of the network, but your costs will be higher and you may need to file a claim.

Blue Shield PPO

Fullerton School District offers different Self-Insured Schools of California (SISC) medical plans for different needs and budgets.



Click to play the All About Medical Plans video

High Deductible Health Plan (HDHP) PPO

A HDHP plan gives you the freedom to see providers in and out-of-network. The monthly premium is usually lower, but you pay more health care costs yourself (your deductible) before the insurance company starts to pay its share. Only the HDHP plan allows you to open a tax-free Health Savings Account (HSA), allowing you to pay for certain medical expenses with money free from federal taxes.

- Blue Shield High Deductible PPO
 - Members automatically enrolled in accident insurance plan
 - See the cost of coverage page for District HSA contribution
- Blue Shield 2-Tier MEC 9000
 - Minimum Essential Coverage

Understanding Plan Types

Key:

= Yes \bigcirc = Maybe



Click to play video	Pros	Cons		
HMO	No deductible More predictable costs	 Less flexibility No out-of-network coverage May have to select Primary Care Physician 		
PPO	You can go anywhere, whether in-network or out-of-network	You pay more for out-of- network providers		
HIGIOUCIBLE	 A PPO with a high deductible, but with the advantage of a taxfree Health Savings Account Auto enrolled in accident insurance plan. If you or a covered family member suffers an accident, this plan will pay you a lump-sum benefit. 	More responsibility for out-of- pocket costs until the deductible is met		



Plan Year: 10/1/2024-9/30/2025