



## EPO & PPO MEDICAL HEALTH PLAN DIFFERENCES

When it comes to medical health insurance provided by Anaheim Union High School District, you have the choice of two plan types. The two plan types offered are an Exclusive Provider Organization (EPO) and a Preferred Provider Organization (PPO). Here is a brief look at each and their advantages.

### **Understanding EPO Plans – Network: Anthem Blue Cross PPO Prudent Buyer large group**

An EPO gives you access to certain doctors and hospitals within its network. A network is made up of providers that have agreed to lower their rates for plan members and also meet quality standards; however, unlike other insurance plan types, service is covered only if you see a provider within that EPO’s selected network.

#### Some key points to consider when selecting an EPO plan:

- You can see the doctor or specialist you’d like without having to see a primary care physician (PCP) first.
- Referrals are not required when you see a specialist or have a special test done.
- If you opt to see a doctor outside of the EPO selected network, there is no coverage, meaning you will have to pay the entire cost of medical services.

### **Understanding PPO Plans - Network: Anthem Blue Cross PPO Prudent Buyer large group**

PPO plans provide more flexibility when picking a doctor or hospital. They also feature a network of providers, and there are fewer restrictions on seeing non-network providers. In addition, your PPO insurance will pay if you see a non-network provider, although it may be at a higher cost to you.

#### Some key points to consider when selecting a PPO plan:

- You can visit a doctor or specialist you’d like without having to see a PCP first.
- You can visit a doctor or go to a hospital outside the network and you may be covered; however, your benefits will be greater if you stay in the PPO network.
- PPO plans have a deductible that must be met before insurance pays on certain services.

### **Comparing an EPO and a PPO Plan**

EPOs tend to be more affordable, but you’ll usually get less coverage and more restrictions. PPOs are more flexible and provide greater coverage, but come with a higher out-of-pocket cost.

Key Comparison Points	EPO	PPO
<i>Access to a network of doctors, hospitals and other healthcare providers</i>	✓	✓
<i>Ability to see the doctor you want without a PCP to authorize treatment</i>	✓	✓
<i>Ability to see a specialist without referral from a PCP</i>	✓	✓
<i>Low or no deductible and generally lower premiums</i>	✓	
<i>Coverage for some medical expenses outside the plan’s network*</i>		✓

\*Out-of-network services generally available with higher out-of-pocket costs.

### **Deciding Between an EPO and a PPO**

When making a choice between these two types of plans you should consider you or your family’s medical needs, access and availability of your preferred medical provider, and your income. If you’re looking at an EPO, take a close look at the network to determine if the choice of doctors and medical facilities are enough to meet your needs. A PPO can give you more flexibility and control of your medical services, including the potential to be covered for medical bills outside the network, but your personal medical costs could be higher.



# 2019 MEDICAL PLANS COMPARISON

Both the EPO and PPO plan utilize the Anthem Blue Cross (Prudent Buyer) – Large Group network

Benefit	EPO Network Only	PPO	
		Network	Non-Network
<b>Lifetime Maximum</b>	Unlimited	Unlimited	
<b>Calendar Year Deductible</b>	None	\$275 Individual / \$1,100 Family	
<b>Calendar Year Out-of-Pocket Maximum (including deductible)</b>	\$2,000 Individual / \$4,000 Family	\$1,475/Individual	\$5,075/Individual
<b>Office Visit Physicians and Specialists</b>	\$20 copay	10% after deductible	40% after deductible
<b>Preventive Care Adult -annual physical, mammogram Children-immunizations, well-baby</b>	No charge No charge	No charge No charge	40% after deductible 40% after deductible
<b>Hospitalization</b>	No charge	10% after deductible	40% after deductible
<b>Outpatient Services</b>	No charge	10% after deductible	40% after deductible
<b>Emergency Room (copay waived if admitted)</b>	\$150 copay	\$100 copay + 10% after deductible	
<b>Rehabilitation Services (Chiropractic Care &amp; Physical Therapy listed below)</b>	\$20 copay  (Limited to a maximum of 60 days per illness/injury combined with Chiropractic visits & physical therapy)	10% after deductible	40% after deductible
<b>Chiropractic Care</b>	\$20 copay  (Limited to a maximum of 60 days per illness/ injury combined with rehabilitation services & physical therapy)	10% after deductible  Maximum 52 visits per calendar year	No coverage
<b>Physical Therapy</b>	\$20 copay  (Limited to a maximum of 60 days per illness/injury combined with rehabilitation services & chiropractic care)	10% after deductible	No coverage
<b>Mental Health &amp; Substance Use (serviced by The Holman Group) Inpatient Outpatient</b>	No charge \$20 copay	10% after deductible 10% after deductible	40% after deductible 40% after deductible
<b>Prescription Drugs – Express Scripts</b>	<b>Retail:</b> (34 day supply) <u>Copay:</u> Generic \$7 / Brand Name Formulary \$25/ Non-Formulary Brand \$50 <b>Mail Order:</b> (90 day supply) <u>Copay:</u> Generic \$14 / Brand Name Formulary \$50 / Non-Formulary Brand \$100 <b>Specialty Drugs:</b> (34-90 day supply) through Accredo Pharmacy. Network provider - Subject to the applicable copay as generic, formulary, or non-formulary – there is no out-of-network coverage.		