



Salida Union School District Blue Shield PPO Plan Selection Form

Employees may choose between one of the following PPO plans. Please make your selection by checking the box and initialing the plan of your choice.

Individual/Family Deductible(s) → Prescription Drug Co-pay: → Generic/Brand	100-C Plan \$200/\$400 \$20.00 visit RX Participating Pharmacy \$7/\$25 Costco \$0/\$25 <input type="checkbox"/> — Initial Selection	80-G Plan \$500/\$1,000 \$30.00 visit RX Participating Pharmacy \$7/\$25 Costco Pharmacy \$0/\$25 <input type="checkbox"/> — Initial Selection
Individual/Family Deductible(s) → Prescription Drug Co-pay: → Generic/Brand	Minimum Value Plan \$5,000/\$10,000 30% coinsurance RX Participating Pharmacy \$9/\$35 Costco Pharmacy \$0/\$35 <input type="checkbox"/> — Initial Selection	HSA B Plan \$3000/\$5,200 10% coinsurance RX Participating Pharmacy \$9/\$35 Costco Pharmacy \$0/\$35 <input type="checkbox"/> — Initial Selection
Individual/Family Deductible(s) → Prescription Drug Co-pay: → Generic/Brand	2 Tier Bronze Plan \$5,000/\$10,000 30% coinsurance RX Participating Pharmacy \$9/\$35 Costco Pharmacy \$0/\$24 <input type="checkbox"/> — Initial Selection	

The Summary of Benefits and Coverage for each plan are available in the Payroll department at the District Office for your convenience.

*****YOU MUST MAKE A SELECTION FROM ONE OF THE PPO PLANS ABOVE*****
*****CHECK THE BOX AND INITIAL YOUR SELECTION.*****

The completed form must be returned to the PAYROLL DEPARTMENT before the end of the open enrollment period along with the Blue Shield PPO Enrollment Form.

I understand that the only time that I may change from one Blue Shield PPO plan to another plan is during the district's designated Open Enrollment Period. If I gain a new dependent (i.e. marriage, birth or adoption), I can add those dependents by completing a change form, but I cannot change from one PPO plan to another PPO plan at any time except during the Open Enrollment Period.

PRINT YOUR NAME CLEARLY

SIGNATURE

DATE