

As a regular volunteer blood donor and a member of the Donor Difference program, you can receive Family Blood Plan coverage for your family or any family you designate with each donation to the San Diego Blood Bank.

100% supplemental coverage

Patients covered by the Family Blood Plan have 100% supplemental coverage to their health insurance for ALL standard blood services.

- This includes all basic blood components, as well as routine costs for Autologous Donations and Directed Donations.
- Benefits apply to patients in hospitals affiliated with the San Diego Blood Bank.

Patients using blood in hospitals not affiliated with the San Diego Blood Bank are considered on a case-by-case basis.

Immediate family is covered

The individual named on the plan, his/her spouse and all dependents legally listed on the family's Federal Income Tax return are eligible for Family Blood Plan coverage.

Easy to manage

As a donor, you get the benefit of being covered immediately, and the San Diego Blood Bank automatically extends your coverage one year from your most recent donation.

- No 90-day waiting period for coverage to take effect.
- No specific time-frame for plan renewal.

Cover yourself and a friend too!

As a donor you can cover yourself AND replace blood in a patient's name.

- You receive complete supplemental coverage.
- You can donate in any patient's name to replenish the community blood supply, ensuring blood for anyone who needs it

Donors and Super Donors can cover those who cannot donate:

- You can enroll a friend or family member in the Family Blood Plan who is unable to donate.
- You will be given a special Family Blood Plan gift card to let whomever you enroll know that you have provided coverage for them.
- Some Super Donors can give Family Blood Plans to a maximum of 24 families in one year!

Family Blood Plan Explained

Exclusions from coverage:

- Persons who have hemophilia, leukemia, aplastic anemia, melanoma, chronic liver disease, renal failure or test positive for antibodies to the probable causative agent of AIDS are not eligible for coverage under the plan.
- Persons with a history of heart disease or solid tumor malignancies will not be covered for the use of blood directly attributed to the existing condition, but will be covered for all other blood needs.
- Donors who are diagnosed with any of the above conditions after establishing a Family Blood Plan will retain benefits until the end of the 12-month period following the most recent qualifying donation. Thereafter, another person may provide continuing coverage for the patient and their family by donating in their name to the Family Blood Plan Gift Program.
- Autologous and Directed Donations do not provide Family Blood Plan coverage to donors.

Reimbursement for fees is easy:

It is easy to obtain reimbursement from the San Diego Blood Bank for blood processing and special handling fees when you have Family Blood Plan coverage. The patient must first bill his or her insurance company. Then he or she should submit both the insurance company's explanation of benefits and a copy of the itemized hospital bill to the Blood Bank. Once this information is received, the San Diego Blood Bank will issue a check directly to the patient for any blood component fees not covered by the patient's insurance. If the covered service is provided directly to the patient by the San Diego Blood Bank, then the patient's account with the San Diego Blood Bank will be reduced for covered services in lieu of sending a check to the patient.

If you donate as part of a group or organization, you will also receive recognition.

- Groups will continue to receive donor activity reports of blood given in the name of the group.
- Group chairmen may collect Family Blood Plan gift cards from their members who donate. Then these cards can be given to those in the organization who can not donate and/or who have used blood.

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