

2024 Active FAQ

- 1. If I switch from HSA to HMO, can I use the Health Equity card for the remaining contributions toward my medical visits?**

Yes, you can. However, you will no longer be able to contribute to the HSA if you are not enrolled in a high deductible health plan.

- 2. Do you have an example of how the Saver's Choice co-insurance works?**

Yes, there is an example of the co-insurance on phoenix.gov/benefits or you can use this link to access the example. [Savers Choice Coinsurance](#)

- 3. Are the in-network providers identical between BCBS Saver's Choice and BCBS PPO?**

Yes, that is correct. Both plans share the same large network of providers.

- 4. If I switch from BCBS PPO to Banner Aetna, will there be a difference in the medications covered?**

There will be no difference, all of our plans share the same pharmacy coverage from Elixir and the same copays apply.

- 5. What is difference between the HMO performance network and broad network?**

Performance network is a list of our preferred providers covered at a lower cost such as Banner. Our Broad network is covered, but at a higher cost such as Mayo.

- 6. Are we able to visit the Health Clinic (1 North Central Ave) to do our Wellness check/biometrics to qualify for Wellness Incentive?**

You can use the Employee Healthcare Clinic for your annual PCP visit.

- 7. I'm contemplating changing from BCBS PPO to Saver's Choice. Since the City provides money for HSA, the deductible is comparable. So 10% coinsurance, but higher out of pocket, I always keep HSA money and may earn a few bucks investing it? Is that the upshot?**

That is correct. The money the City contributes and your personal contributions to your HSA are yours to keep. It even becomes part of your estate to be passed on to loved ones if you never use it.

- 8. Do we have to make elections? Or will our plans stay the same from what we have selected currently?**

It is always recommended to review your benefits election every year. However, with the exception of the FSA and HSA, if you do not plan to make any changes, you do not need to do anything.

- 9. Why was there such a drastic increase to the high deductible plan?**

Plan increases are set based on members utilization from the previous plan year and increased costs/inflation in the medical industry. We discuss this in the HR Podcast that will be posted eCHRIS in the OE section. Please watch for more on this topic.

- 10. For the Saver's Choice, do we still have to continue paying the 10% even after we reach the maximum out of pocket cost?**

No, once you reach the maximum out of pocket, you will be covered at 100% for covered medical services.

11. For the Saver's Choice family plan, the costs above the deductible \$3400, but below the \$6800 out of pocket maximum, is where the 10% is charged? So pay 100% for \$0-\$3400, and pay 10% for \$3401-\$6800?

Yes, that is correct for the Saver's Choice family plan.

12. Does the money (unused) from the old flex account roll over to FSA?

FSA money does not roll over at the end of the year. However, we do have a grace period. You have until March 15 to incur expenses using your 2023 funds and until March 31st to request reimbursement. Please review the benefits book for more information.

13. Why is the pharmacy saying there not contracted to fill my prescription?

If the medication is considered maintenance and have 3–30-day grace fills have been met, prescription must be filled for 3 months at Frys/Kroger, CVS/Target or Elixir Mail.

14. Where can I receive a COVID vaccine or booster shot?

At any Elixir contracted pharmacy including CVS, Frys, Target, Walmart, Walgreens, Costco, Bashas. Pharmacy locator is available by creating an Elixir member account, <https://member.elixirsolutions.com/> [member.elixirsolutions.com]