



## Advantage Plan: A Consumer Driven Health Plan (CDHP) with a Health Reimbursement Account (HRA)

### Active Employees Frequently Asked Questions

*This document is intended as an outline of coverage available and is not intended to be a legal contract. If a discrepancy exists between this document and the various summary plans, contracts and agreements, the provisions of the actual service agreements and/or contracts will prevail.*

The City of Colorado Springs offers a consumer driven health plan with an employer funded Health Reimbursement Account for eligible employees. A health reimbursement account (HRA) is funded solely by the City of Colorado Springs. You may be reimbursed, tax free, for qualified health expenses. Refer to the HRA Plan document for more details. You must be enrolled in the City of Colorado Springs Advantage Plan in order to receive the HRA funding. The HRA funding available is based on your enrollment coverage level. Please see chart below for details.

Coverage Level	HRA Annual Funding
Employee Only	\$500
Employee + Spouse	\$750
Employee + Children	\$750
Employee + Family	\$750

### **Advantage Plan FAQs**

#### **What is a Consumer Driven Health Plan?**

- A plan where employees are financially motivated to be active participants in health care consumption.
  - So what does this mean?
    - It's a high deductible plan
    - Employees pay for the cost of the care until the deductible is met. Therefore, they can be wise consumers on deciding what they want to have performed and then how to pay for it.
    - Thus employees assume more of a financial risk at time of service until the deductible is met, in return for a reduced monthly premium.

### **What medical care and services are covered on the Advantage Plan?**

- The same medical care and services covered on the Premier plan are provided on the Advantage plan, it just how it's paid for that is different.

### **How is preventive care services covered on the Advantage Plan?**

- Preventive care services are covered at 100% just like on the Premier plan, no deductible is must be met.

### **Which providers and hospitals can I use on the Advantage Plan?**

- Anthem Blue Cross Blue Shield provides the network of doctors for the Advantage Plan just like the Premier plan. You may visit Anthem's website at [www.anthem.com](http://www.anthem.com) or log into [www.myameriben.com](http://www.myameriben.com) to view in-network providers and facilities. You may also call Ameriben at 1-866-955-1482 for assistance in finding an in-network provider or facility.

### **Can I see an out of network provider on the Advantage Plan?**

- Yes, there is out of network coverage available on the Advantage Plan, however, you will be responsible for greater out of pocket costs such as larger deductibles and less co-insurance if you choose to see an out of network provider.

### **How are prescriptions covered on the Advantage Plan?**

- Prescription coverage is the same for the Premier and Advantage plans. You pay the same co-pays and the formularies are the same, as well use of the City Employee Pharmacy and Maxor Retail Network Pharmacies.

### **How can I find out the cost of a procedure or office visit?**

- There is a cost estimator tool available on the Anthem website at [www.anthem.com](http://www.anthem.com). You will need to log in as a member to gain access to the tool. Additional web links to cost and quality tools are available on the Benefits & Wellness website.

### **Can I use the City Employee Medical Clinic if I am enrolled on the Advantage Plan?**

- Yes – you and your dependents enrolled on the Advantage Plan may use the City Employee Medical Clinic.

### **Can I use the City Employee Pharmacy if I am enrolled on the Advantage Plan?**

- Yes, you and your dependents enrolled on the Advantage Plan may use the City Employee Pharmacy.

### **How can I determine which plan choice is best for me?**

- A plan cost comparison tool is available on the Benefits & Wellness website. This tool will model average costs for typical services, calculate your premiums and out of pocket expenses to provide you with a side by side comparison. Both the Advantage Plan and Premier Plan cover the same services and use the same provider network and facilities. It's how you want to pay for it – lower premiums but higher deductible, or higher premiums and lower deductibles.

## **Health Reimbursement Account FAQs**

### **Is there an employee premium for the HRA?**

- No, but you must be enrolled in the Advantage plan to receive the HRA funding.

### **When is the HRA funding available?**

- As an active employee, on Jan. 1, you will have access to the full amount in your HRA account to pay for out-of-pocket health expenses that qualify for reimbursement.

### **What expenses are reimbursable under the HRA?**

- Qualified expenses are defined under the IRC Section 213 not payable by the existing health plan include out-of-pocket health expenses such as co-pays, co-insurance, deductibles and prescribed over-the-counter medications. Visit [www.asiflex.com](http://www.asiflex.com) for a complete listing of eligible expenses or the HRA Plan document.

### **Who processes the HRA reimbursements?**

- New in 2015 – ASIFlex will be the City’s FSA and HRA administrator. You must submit all reimbursement requests to ASIFlex starting January 1, 2015, even for services rendered in 2014.

### **How do I get reimbursed for a qualified expense?**

- To be reimbursed for an eligible expense from your HRA account, you will need to complete a claim form and submit to ASIFlex. Claims may also be submitted by mail, fax or by mobile application. Claims are processed weekly. Claim forms are available on the Benefits & Wellness website ASIFlex’s web-site [www.asiflex.com](http://www.asiflex.com) also has forms available and information on how to download the mobile application is available. See the FSA Tool Kit for further details.

### **Can I have a HRA and a healthcare spending account (HCSA)?**

- Yes. If you elected to contribute to a HCSA and elected to enroll the Advantage Plan, you will then have access to a HCSA and a HRA at the beginning of the plan year. Claims are first deducted from your HCSA and then from your HRA.

### **What happens to my HRA balance at the end of the year?**

- Unused HRA balances roll over into the following year for reimbursement, so long as you are an active employee and are enrolled in the Advantage medical plan. If you waive medical coverage for the following plan year or select another City medical plan, you forfeit your HRA balance.

### **What is the deadline for filing reimbursement claims?**

- Claims for the current plan year must be filed by March 31 of the following plan year.

### **What if my employment is terminated?**

- Under a normal separation, you forfeit any unused HRA amounts left in your account, per IRS guidelines. The HRA is subject to COBRA.

Use the Plan Cost Comparison Tool available on the Benefits & Wellness website to help you decide which plan is best for you needs.

*Plan documents for the Health Reimbursement Account and Medical Plan coverage can be found on the Benefits & Wellness webpage on [www.springsgov.com](http://www.springsgov.com). Contact Benefits & Wellness at 385-5125 or [citybenefitshelp@springsgov.com](mailto:citybenefitshelp@springsgov.com) to request a paper copy.*