

Retiree Frequently Asked Questions

Retiree: An employee who leaves the City of San Antonio with at least 20 years of service at any age or have five years of service and are 60 years of age.

Medical Plans- Pre-65

1. Am I eligible for health insurance?

You will have the same plans as active employees. The City will provide a subsidy based on years of service.

- If you were hired before 10/01/2007, the City will provide a subsidy based on years of service.
- If you were hired on or after 10/01/2007, you must work at least 10 years to get a subsidy. You will not get a subsidy if you work less than 10 years.

2. If eligible, what are my medical plan options?

You have two health options, Consumer Choice and New Value, same as active.

3. Where can I find in-network providers?

You can find in-network providers at www.bcbstx.com; or call BCBSTX at 1-800-521-2227.

4. If I am out of the country, does my insurance plan cover me should I become ill or injured? If not, what can I do to cover medical costs while traveling out of the United States?

BCBSTX does have coverage outside of the country; keep in mind that you will have to pay up front and submit for reimbursement. For additional questions regarding international coverage, call 800-810-2583.

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5. Does our insurance plan include a program that helps retirees to stop smoking?

BCBSTX offers a Tobacco Cessation Program, to enroll, call 866-412-8795.

6. Where can I access the prescription formulary for my plan?

You can access the prescription formulary at www.caremark.com or contact their Customer Care team at 800-552-8159, and request a copy be mailed to you.

7. Is Therapeutic Health Clinic or treatment fee covered under our insurance plans?

Please call BCBSTX at 1-800-521-2227 for plan specific coverage questions.

Health Savings Account / Flexible Spending Account

8. Can I take my FSA with me when I retire?

No. You may submit for reimbursement for claims incurred prior to your retirement.

9. Can I keep using my HSA money if I retire?

Yes. However, you will no longer be able to contribute in to your HSA account. The City will make a one-time contribution per year to your HSA account of \$500 for individual coverage or \$1,000 if you are covering one or more dependents, if you are on CDHP plan. (Annual amounts are subject to change)

10. Can I keep using my HSA money if I change plans?

Yes, the funds in your HSA account can be used to pay your out-of-pocket health care expenses provided you have money in your account.

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11. Can I take my HSA money when I retire?

Yes, this is your account. The funds belong to you and can be taken with you when you leave the City.

12. Can I participate in an HSA, if I'm not enrolled in the Consumer Choice Plan?

No, IRS regulations state that you are only eligible to open and fund an HSA if you are currently enrolled in a qualified High Deductible Health Plan, which is the Consumer Choice Plan.

13. Who decides the City's contribution to the HSA?

The City makes this determination during the budget process.

14. Can I roll over FSA dollars to an HSA?

No, effective January 1, 2012, the IRS no longer allows FSA to HSA rollovers.

15. What happens to the funds in my HSA if I switch plans next year?

The funds in your HSA will always be yours, even if you switch plans.

16. What happens if I use HSA dollars for non-health care-related expenses?

Any HSA funds used for non-health care-related expenses will be subject to income tax and a tax penalty.

Retiree Frequently Asked Questions

Eligibility

17. What happens if I retire and decide to opt-out of the City's medical plan?

Retirees have the option to waive coverage until a later date; however, you must submit evidence of continuous health insurance coverage. The continuous coverage can be a spouse's plan, employer plan, or individual plan. You may only enroll those dependents that were covered at the time you initially waived coverage.

18. What if I take the City's Retiree Medical Plan for 6 months and decides to go with another medical carrier?

If you enroll in the City's Retiree Medical Plan and then request to cancel that coverage, you will not be allowed to re-enroll again at a later date.

19. Are the dental and vision benefits the same when I retire?

Yes, regardless of which medical plan you chose. You have the same options of dental and vision. There are 2 dental plans available: DHMO (same as civilian) and the Dental PPO (same as civilian, but no orthodontia coverage). These are the same cost difference depending on the plan chosen. The vision plan is the same as offered to civilians and also at the same cost.

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Post-65

20. What medical plans are offered once I turn age 65?

Medicare retirees have three options to choose between, Medicare Advantage PPO, Medicare Advantage Plus, and Pharmacy-only.

21. Will my premiums change once I enroll with Aetna?

Yes, your premiums will decrease and will continue to be based on years of service with the City.

22. When will Aetna send me a packet?

Aetna will send you a packet 60 days prior to your 65th birthday.

23. What will happen to my dependent when I enroll with Aetna?

Any dependent under the age of 65 will remain on the Pre-65 medical plan. If they are over 65, they must enroll in Aetna plan when they turn 65.

24. What if I qualify for Medicare before my 65th birthday due to disability?

You must notify Employee Benefits as soon as possible. Employee Benefits will send your eligibility information to Aetna and an enrollment packet will be mailed to you. If we are not notified, we will continue to deduct your Pre-65 medical premiums.

25. If I am out of the country, does my insurance plan cover me should I become ill or injured? If not, what can I do to cover medical costs while traveling out of the United States?

Aetna will only cover emergency services; you must pay up front and submit for reimbursement. Please call Aetna or BCBSTX if additional information is needed.

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26. Is Therapeutic Health Clinic or treatment feed covered under our insurance plans?

Please call Aetna at 1-800-842-1306 for plan specific coverage questions.

27. Does our insurance plan include a program that helps retirees to stop smoking?

Aetna covers smoking cessation when billed as part of a routine preventive service. Over the counter nicotine products are not covered. For additional information, call Aetna at 1-800-842-1306.

28. Where can I access the prescription formulary for my plan?

For Aetna retirees you can access the prescription formulary at www.aetna.com or call 800-842-1306.

If you have questions, contact Human Resources Customer Service at 210-207-8705

Si prefiere comunicarse en español, comuníquese con recursos humanos al 210-207-8705.