

Below are some features of the plans:

Plan Features	HMO	HRA	HSA
Preventive care is covered 100% if you visit a network provider (no deductible)	•	•	•
Some services are subject to a deductible	•	•	•
CIGNA automatically processes in-network claims	•	•	•
Lower premiums		•	•
Comprehensive medical coverage is available through the national CIGNA network		•	•
No referrals are required: You have the flexibility to see any provider in-network or out-of-network; however, you'll generally pay less if you visit Cigna network providers		•	•
You may file claims for out-of-network services		•	•
You receive money funded into the City's HRA to cover eligible <u>medical</u> expenses. HRA funds are available when you are an employee, continuing coverage under COBRA, or a retiree.		•	
You receive money deposited into your personal HSA bank account to cover your qualifying health expenses (<u>including dental/vision</u>). You may also contribute through pre-tax payroll contributions. If you leave employment, the bank account is still yours! You may use remaining funds for investment income accumulation, qualifying health expenses and to pay COBRA or Medicare premiums. Per IRS regulations, the City stops contributing additional funds after you leave employment or the medical plan with HSA, and you pay all banking fees.			•
Higher premiums	•		
You select a primary care provider (PCP) who coordinates and manages your care; network plan (almost exclusively in Arizona)	•		
Usually requires a referral from your PCP to see a specialist	•		