



AutoNation's Medical Plan Blue Cross Blue Shield Medical Options

All three Blue Cross Blue Shield options cover the same services and prescription medications, but the amount you pay when you receive services and the amount you pay in contributions depends on the option you choose. To view your cost for each option, go to www.KnowYourBenefits.org and click on the Annual Enrollment tile.

You have three different Blue Cross Blue Shield medical options to choose from:

- A 60% option with a Health Savings Account (HSA)
- A 70% option with copays
- A 80% option with copays

In some areas of the country, Associates can also choose coverage through a Health Maintenance Organization (HMO).

		BLUE CROSS 60% WITH HSA (EPO)	BLUE CROSS 70% WITH COPAYS (EPO)	BLUE CROSS 80% WITH COPAYS (PPO) ¹
MEDICAL PLAN DESIGN	Deductible (Individual/Family)	\$2,800/\$5,600	\$1,500/\$3,000	\$750/\$1,500
	Coinsurance	60%	70%	80%
	Out-of-Pocket (OOP) Maximum (including deductible) (Individual/Family)	\$6,750/\$13,500	\$5,750/\$11,500	\$4,750/\$9,500
	Hospital Inpatient Copay/Coinsurance	60%	\$500 Copay (No Deductible) for Hospital Facility Services	80%
	Outpatient Surgery	60%	70%	80%
	Urgent Care	60%	\$50	\$45
	Primary Care (Includes Telemedicine)	60%	\$30	\$25
	Specialist (Includes Telemedicine)	60%	\$70	\$60
	Emergency Room	60%	70%	80%
	All Medical Services Tied to Out-of-Pocket Maximum	YES	YES	YES
RX PLAN DESIGN	Deductible (Individual/Family)	Included with Medical ²	\$125/\$250	\$100/\$200
	Retail: Generic 30 day supply	\$10	\$10	\$10
	Retail: Brand Formulary ⁵ 30 day supply	\$80	\$70	\$60
		\$25 insulin	\$25 insulin	\$25 insulin
	Retail: Brand Nonformulary 30 day supply	50%	60%	70%
	Mail Order: Generic 90 day supply	\$20	\$20	\$20
	Mail Order: Brand Formulary ⁵ 90 day supply	\$160	\$140	\$120
		\$75 insulin	\$75 insulin	\$75 insulin
	Mail Order: Brand Nonformulary 90 day supply	50%	60%	70%
	Specialty Drugs	50% (\$600 Max per script)	60% (\$550 Max per script)	70% (\$500 Max per script)
Health Savings Account Company Funding ⁴	Up to \$200 Individual/yr Up to \$400 Family/yr	n/a	n/a	
Optional Associate HSA Contribution ³	Up to \$3,350 Single Up to \$6,700 Family	n/a	n/a	

¹Out-of-Network deductible \$1,500 individual/\$3000 family; 60% coinsurance; out-of-pocket maximum \$9,500 individual, \$19,000 family

² The Blue Cross 60% with HSA option provides many preventive medications that are not subject to the deductible – you pay only the copay or coinsurance. Go to www.KnowYourBenefits.org and click on the Annual Enrollment tile.

³ Combined Associate and company funding subject to 2020 IRS maximums of \$3,550/\$7,100

⁴ Go to www.KnowYourBenefits.org and click the Health Savings Account section.

⁵ Using drugs on the formulary saves you money. Go to www.KnowYourBenefits.org for the 2020 formulary.