Medical Plans

We offer three medical plans with low, medium and high-deductible options to help you manage the total cost of your care. Preventive care is covered at 100% under all three plans when you use an in-network provider. Learn more about these plans at CoxEnterprises.com/Benefits. No login required.

| | | EMPLOYEE ONLY | EMPLOYEE + SPOUSE/DP ¹ | EMPLOYEE + CHILD | EMPLOYEE + CHILDREN | EMPLOYEE + FAMILY |
|--|---------------------------------------|------------------|--------------------------------------|---------------------|------------------------|----------------------|
| Low Deductible Meet your deductible faster; requires higher biweekly premiums. Co-pays for doctor visits and mail order prescriptions. ² Pair with a Healthcare Flexible Spending Account (FSA) for maximum pretax savings. | BIWEEKLY PREMIUM | \$53.75 | \$201.60 | \$111.20 | \$111.20 | \$259.05 |
| | FAMILY DEDUCTIBLE ³ | \$500 | \$1,000 | \$1,000 | \$1,500 | \$1,500 |
| | OUT-OF-POCKET MAXIMUM ⁴ | \$3,000 | \$6,000 | \$6,000 | \$9,000 | \$9,000 |
| Medium Deductible Offers a midrange deductible and biweekly premium. Co-pays for doctor visits and mail order prescriptions. ² Pair with a Healthcare FSA for maximum pretax savings. | BIWEEKLY PREMIUM | \$18.54 | \$141.29 | \$41.15 | \$41.15 | \$163.90 |
| | FAMILY DEDUCTIBLE ⁵ | \$1,000 | \$2,000 | \$2,000 | \$3,000 | \$3,000 |
| | OUT-OF-POCKET MAXIMUM ⁶ | \$3,500 | \$7,000 | \$7,000 | \$10,500 | \$10,500 |
| High Deductible You pay full price for non preventive care and prescriptions until you meet your deductible. Pair with a Health Savings Account (HSA) for maximum pretax savings. | BIWEEKLY PREMIUM | \$7.97 | \$90.68 | \$17.37 | \$17.37 | \$100.08 |
| | FAMILY DEDUCTIBLE ⁷ | \$2,000 | \$3,200 | \$3,200 | \$4,000 | \$4,000 |
| | OUT-OF-POCKET MAXIMUM [®] | \$4,000 | \$6,000 | \$6,000 | \$8,000 | \$8,000 |
| | COX CONTRIBUTION TO HSA | \$500 | \$750° | \$750 | \$750 | \$1,000° |

- 1. Coverage for domestic partners is offered post-tax.
- 2. \$30 copay for primary care physician, \$50 copay for specialist.
- 3. This plan has an individual deductible. You only need to meet your individual \$500 deductible before the plan pays based on your coinsurance (even if your family maximum hasn't been met). For your family, you pay the individual deductible multiplied by the number of dependents covered (up to a maximum of three or \$1,500).
- 4. This plan has an individual out-of-pocket maximum. You only need to meet your individual \$3,000 out-of-pocket maximum before the plan pays your covered network expenses at 100% (even if your family maximum hasn't been met). You pay a total family maximum (for up to three family members or \$9,000).
- 5. This plan has an individual deductible. You only need to meet your individual \$1,000 deductible before the plan pays based on your coinsurance (even if your family maximum hasn't been met). For your family, you pay the individual deductible multiplied by the number of dependents covered (up to a maximum of three or \$3,000).
- 6. This plan has an individual out-of-pocket maximum. You only need to meet your individual \$3,500 out-of-pocket maximum before the plan pays your covered network expenses at 100% (even if your family maximum hasn't been met). You pay a total family maximum (for up to three family members or \$10,500).
- 7. Keep in mind that the High Deductible Health Plan has true family deductibles, meaning that you must meet the deductible listed for your level of coverage before the plan pays network coinsurance for anyone in your family. For example, if you cover both you and your spouse, you must meet the \$3,200 deductible before the plan starts paying coinsurance for either you or your spouse.
- 8. You'll want to note that the High Deductible Health Plan has true family out-of-pocket maximums. You must meet the maximum costs listed for your level of coverage before the plan pays 100% of covered network services for anyone in your family. For example, if you cover both you and your spouse, you must meet the \$6,000 maximum before the plan pays 100% of covered network services for either you or your spouse.
- 9. Per IRS guidelines, HSA funds cannot be used for domestic partner expenses.

