

# MEDICAL COVERAGE



## MEDICAL PLANS

### DEDUCTIBLE & OOP MAX



	PPO PLAN		CDHP WITH HSA		COPAY PLAN	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
	EMBEDDED DEDUCTIBLE		TRUE FAMILY DEDUCTIBLE		EMBEDDED DEDUCTIBLE	
<b>Hertz HSA Funding</b>						
Individual	Not available		\$250 deposited in January & July		Not available	
Employee + 1	Not available		\$500 deposited in January & July		Not available	
Family	Not available		\$500 deposited in January & July		Not available	
<b>Deductible</b>						
Individual	\$750	\$3,000	\$2,400	\$4,800	\$4,500	\$9,000
Employee + 1	\$1,500	\$6,000	\$4,800 maximum	\$9,600 maximum	\$9,000	\$18,000
Family	\$3,000	\$12,000	\$4,800 maximum	\$9,600 maximum	\$9,000	\$18,000
<b>Out-of-pocket Maximum</b>						
Individual	\$4,000	N/A	\$4,000	\$8,000	\$6,550	\$13,100
Employee + 1	\$8,000	N/A	\$8,000	\$16,000	\$13,100	\$26,200
Family	\$12,000	N/A	\$8,000	\$16,000	\$13,100	\$26,200
<b>Benefits</b>						
PCP office visit	\$35 copay	50% after deductible	\$30 copay after deductible	50% after deductible	\$40 copay	50% after deductible
Specialist office visit	\$50 copay	50% after deductible	\$50 copay after deductible	50% after deductible	\$80 copay	50% after deductible
Emergency Room	\$250 copay and 80% after deductible		After deductible, \$250 copay and 80%		\$300 copay	
Other services	80% after deductible	50% after deductible	80% after deductible	50% after deductible	70% after deductible	50% after deductible

\*The Hertz HSA contribution structure for calendar year 2024 will be communicated during the November 2023 open enrollment.



Depending on your employment classification or if you are covered by a collective bargaining agreement some of the benefits listed here may not apply to you. Please refer to your labor agreement or contact your Human Resource Business Partner for further information about the benefits available to you and any limitations or restrictions on eligibility.