

Know your options

Picking your medical plan for 2025



How your benefits work together



Which plan is best for you?



Plan features and benefits



How your benefits work together

At GM, you have access to a complete benefits package to help you manage and improve your health and well-being. It's flexible health care coverage for you, your spouse and your family.

Your GM health benefits include:

Medical coverage for medical, behavioral health and substance use disorder services

Wellness programs to help you improve and maintain your health

Dental coverage for dental services, treatment and supplies

Vision coverage for eyecare services, treatment and supplies

Prescription coverage for medications prescribed by a doctor

Information on cost and quality for network doctors, hospitals and other health care providers with your Aetna® member website

If you have questions about your Aetna medical benefits, call your Aetna One® Advocate team at **1-800-233-7686 (TTY: 711)**.

Policies and plans are insured and/or administered by Aetna Life Insurance Company or its affiliates (Aetna).

Which plan is best for you?

GM offers you two medical plan options. When picking your plan, you should consider your total possible out-of-pocket expenses for the plan year. This is the sum of your monthly medical plan contributions, plus your out-of-pocket maximum.

Your medical plan has four key cost components:

1 Annual contribution The fixed yearly amount you pay to keep your health care coverage.	2 Deductible The amount you pay for covered health care services before GM starts to pay.	3 Coinsurance The amount you pay for covered health care services after you meet your deductible, usually a percentage.	4 Annual out-of-pocket maximum The most you'll pay in deductibles, coinsurance and pharmacy copays in one plan year.
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ConnectedCare option

	Annual contribution	In-network deductible	In-network coinsurance	In-network annual out-of-pocket maximum	Total out-of-pocket expenses possible
	1	2	3	4	1 + 4
Single	\$360	\$1,750	10% after deductible	\$2,550	\$2,790
Two Party	\$720	\$3,500*	10% after deductible	\$5,100	\$5,580
Family	\$1,080	\$4,150*	10% after deductible	\$6,250	\$6,970

Basic option

	Annual contribution	In-network deductible	In-network coinsurance	In-network annual out-of-pocket maximum	Total out-of-pocket expenses possible
	1	2	3	4	1 + 4
Single	\$780	\$2,050	10% after deductible	\$2,850	\$3,450
Two Party	\$1,560	\$4,000*	10% after deductible	\$5,600	\$6,800
Family	\$2,340	\$4,600*	10% after deductible	\$6,700	\$8,500

*Entire deductible must be met for Two Party and Family plans.

Refer to the *2025 Your GM Benefits Summary Plan Description* for cost-sharing information for out-of-network benefits.



Plan features and benefits

Both options have the same features and benefits that can simplify your life, keep you healthier and help control costs.

No copays	There are no copays for medical services with either of the plan options. (A copay is a fixed amount you pay for a covered health care service, usually at the time of service.)
No need for referrals	You'll never need referrals (but some visits or procedures may require preapproval).
Savings in network	You can keep your costs lower by choosing in-network providers. Use your Aetna® member website to shop for cost and quality of services. And click here to visit the GM-Aetna website to search for doctors and other health care providers participating in your area. Note: The ConnectedCare option features a local provider network with a dedicated care team, led by your primary care doctor. A focus on team-based care through technology and patient-centered records allows for highly coordinated care.
Preventive care	Routine care, such as annual physicals and flu shots, is covered 100% when you use in-network providers. Confirm whether procedures or tests are preventive. If they're diagnostic, you'll incur a cost. Your GM plan even covers some prescriptions at 100%. Click here for more information.
Extra dollars for completing your annual physical	It's easy to earn up to \$1,500 in wellness incentives. Take these steps: 1. Schedule your annual preventive physical with your doctor. 2. Attest that you have had your preventive physical via an online form at MyHealth.BankofAmerica.com/gm .

Consider a Health Savings Account (HSA) or Flexible Spending Account (FSA)

Your plan gives you cost-effective ways to help pay for your out-of-pocket medical expenses. An HSA lets you save for medical costs over your lifetime. You can also use a limited-purpose FSA with an HSA to pay for vision and dental care expenses. Or you can opt for an FSA on its own.

HSA and FSA offer you:

- Tax-free contributions
- Tax-free investment earnings
- Tax-free qualified distributions
- Easy-to-use debit card and other reimbursement options

To learn more about your HSA and FSA options, call the GM Benefits & Services Center at **1-800-489-4646**. Already have an account? Manage your HSA, FSA and LifeSteps Wellness Incentive at **MyHealth.BankofAmerica.com/gm**.

Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Refer to **Aetna.com** for more information about Aetna plans.

Dental, vision, HSA, FSA, pharmacy and Employee Assistance Program benefits are not administered by Aetna.