



2019 International Health Plan

As an employee on an international assignment, you and your family are eligible for the International Health Plan. The plan provides medical and dental coverage in the U.S. and internationally, and also covers an annual eye exam.

If you are a current employee starting an international assignment, your medical coverage will automatically change to the International Health Plan on the date your international assignment starts.

If you are a new hire, you must enroll in the International Health Plan (and, if applicable, enroll in or update your domestic dental and vision coverage options) by logging in to your [personalized benefits account](#) within 31 days of your new hire date.

Medical coverage

While you are on an international assignment, you are eligible for medical coverage — in the U.S. and internationally — through the International Health Plan. The plan uses the Cigna network of health care providers in the U.S. Outside of the U.S., you can receive care from any international health care provider, at the U.S. in-network coverage level. The following chart describes the International Health Plan medical coverage.

International Health Plan: Medical Coverage		
Plan Feature	International and U.S. In-Network	U.S. Out-of-Network
Annual Deductible	\$400 employee only \$800 family	\$400 employee only \$800 family
Out-of-pocket Maximum	\$2,500 employee only \$5,000 family	\$5,000 employee only \$10,000 family
Preventive Services	Plan pays 100%	Plan pays 100%
General Coinsurance (after deductible)	Plan pays 90%, you pay 10%	Plan pays 70%, you pay 30%
Retail Prescription Drugs* (30-day supply)	International: Plan pays 80%, you pay 20% Generic U.S. In-Network: \$10 copay Preferred Brand U.S. In-Network: \$30 copay Non-Preferred Brand U.S. In-Network: \$50 copay	Plan pays 70%, you pay 30%
Mail Order Prescription Drugs* (90-day supply)	International: Not covered Generic U.S. In-Network: \$30 copay Preferred Brand U.S. In-Network: \$90 copay Non-Preferred Brand U.S. In-Network: \$150 copay	Not covered

*Only the cost of generic prescription drugs will be covered unless "Dispense as Written (DAW)" is indicated by the prescribing physician.

How the domestic PPO and international Cigna plans compare:

- **In-network and out-of-network coverage:** The domestic PPO medical plan options and the International Health Plan provide in-network and out-of-network coverage in the US. The International Health Plan *also* provides international coverage at the in-network deductible, out-of-pocket maximum and coinsurance.
- **Health Savings Account (HSA):** If you are enrolled in one of the HSA-compatible medical plan options (Bronze or Bronze Plus), you may participate in and contribute to an HSA. In the International Health Plan, you may use the funds in your HSA to pay for eligible health care expenses, but you will no longer be able to contribute to your HSA.
- **Flexible Spending Account (FSA):** Once you enroll in the International Health Plan, you will no longer be eligible for the Health Care FSA. Eligible services incurred before your assignment start date can be filed with Bank of America Merrill Lynch (BAML) and must be submitted no later than March 15 of the following plan year.
- **Deductibles and out-of-pocket maximums transfers:** You can transfer your deductible and out-of-pocket maximum when you move between an AECOM U.S. domestic plan and the International Health Plan. To initiate a transfer, you'll need to provide the carrier with an Explanation of Benefits (EOB) form showing any deductible and out-of-pocket maximum met in the other carrier's plan in that plan year.



Transferring prescriptions to the International Health Plan

To request prescriptions through the International Health Plan, please log in to CignaEnvoy.com (you will need to create an account first) or call Cigna at 1.800.441.2668 (Outside the U.S.: +1 302.797.3100).

Transitioning care to the International Health Plan

If you have an existing medical condition that will require coverage under the International Health Plan, fill out the Cigna Transition of Care form and submit it to Cigna. You can find the form in the Welcome Kit that you'll receive from Cigna after you enroll in the plan or email benefits@aecom.com to request a copy of the form.

Dental coverage

When you enroll in the International Health Plan, you'll automatically receive Cigna dental insurance which provides international and US dental coverage. If you will be travelling to the U.S. often or if you have dependents remaining in the U.S., you may also enroll in (or continue to participate in) one of the domestic dental plans available in the U.S.

	International Health Plan	U.S. Domestic Plan		
Plan Feature	International and U.S. Dental Coverage	Aetna DPO High In-Network/Out-of-Network	Aetna DPO Premier In-Network/Out-of-Network	Aetna DPO In-Network/Out-of-Network
Annual Deductible	\$50 individual / \$150 family	\$50/\$100 individual \$100/\$200 family	\$50/\$100 individual \$100/\$200 family	\$75/\$150 individual \$150/\$300 family
Preventive Services (no deductible)	No cost	No cost	No cost	No cost
Basic Services	You pay 20%	You pay 20%/40%	You pay 20%/40%	You pay 30%/50%
Major Services	You pay 50%	You pay 30%/50%*	You pay 40%/60%*	You pay 50%/60%*
Orthodontia	You pay 50% (child/adult) Plan pays up to \$1,500 per person per lifetime	You pay 50% (child/adult) Plan pays up to \$1,500 per person per lifetime	You pay 50% (child/adult) Plan pays up to \$1,500 per person per lifetime	Not Covered
Annual Calendar Year Maximum	\$1,500	\$2,000	\$1,500	\$1,250

*Surgical removal of an erupted or impacted tooth, occlusal guards, deep cleaning, incision and draining of abscess are all 20% (in-network) or 40% (out-of-network) in the DPO Premier Plan and 30% (in-network) or 50% (out-of-network) in the DPO Plan.

Vision coverage

When you enroll in the International Health Plan, you automatically receive coverage for an annual eye exam from Cigna at no cost to you. Eyewear is not covered. If you want coverage for eyewear (eyeglasses and/or contact lenses), travel to the U.S. often or have dependents remaining in the U.S., you may also enroll (or continue to participate in) the VSP Premier option offered in the U.S.

VSP Premier In-Network/Out-of-Network	
Exam	No cost/\$45 allowance
Lenses	Between \$10 and \$55 copay/between \$45 and \$125 allowance
Frames	\$10 copay, then \$150 allowance plus 20% off remaining balance/\$47 allowance
Contact Lenses Instead of Glasses	
Conventional/Disposable Medically Necessary	\$10 - \$60 copay, then \$120 allowance for contact lenses includes fitting and evaluation/\$105 allowance

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Can I keep my domestic medical coverage while I'm on an international assignment?

No. All employees on international assignment have one medical option available to them — the International Health Plan, which includes both international (outside of the U.S.) and U.S. coverage. In the U.S., you can receive care through the Cigna Envoy provider network.

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Can I keep my domestic dental coverage while I'm on international assignment?

Yes. The International Health Plan includes international and U.S. dental coverage. If you travel to the U.S. often or if you have dependents remaining in the U.S., you may also choose one of the domestic dental plan options for dental coverage in the U.S.

3

Can I keep my domestic vision coverage while I am on international assignment?

Yes. The International Health Plan includes coverage for an annual eye exam at no cost to you. If you require eyewear, travel to the U.S. often or have dependents remaining in the U.S., you may also choose one of the domestic vision plan options for vision coverage in the U.S.

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May I waive International Health Plan coverage?

Yes, you may waive International Health Plan coverage if you have coverage through a different medical plan. Please note that the AECOM Benefits Service Center may require that you attest to your other coverage upon enrollment.

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Questions?

Call the AECOM Benefits Service Center at 844.779.9567 (+ 1 312.843.5091 outside the U.S.), 8 a.m. to 8 p.m. CT, Monday through Friday.

Your cost for the International Health Plan

AECOM pays the majority of the cost for you and your family. You share in the cost through employee payroll contributions and when you receive services. For specific employee contribution amounts, log in to your [personalized benefits account](#).