



AECOM Benefits

# For your world.

You're making your dreams a reality, enjoying the present and planning for the future.

**Choose benefits for *your* world.**

Make sure you have the coverage you and your family need to be well and thrive.

2023 Expatriate Benefits Guide for Employees on International Assignment

**2023 Benefits Open Enrollment is October 31 – November 18**

# 2023 International/Expatriate Health Plan

## Your health and well-being are important to AECOM

We're committed to providing benefits that support you and your family, wherever in the world you may be at any time. **This expatriate benefits guide provides an overview of the health care benefits available to our U.S. employees on international assignments and on U.S. payroll.**

As an employee on an international assignment, you and your family are eligible for the International/Expatriate Health Plan. The plan provides medical and dental coverage in the U.S. and internationally, and also covers an annual eye exam. The plan also includes referrals for up to 6 face-to-face sessions with a licensed professional through the IEAP (International Employee Assistance Plan) as well as global evacuation services and access to telehealth.

If you are a current employee starting an international assignment, you have the opportunity to elect the International/Expatriate Health Plan (and, if applicable, enroll in or update your domestic dental and vision coverage options) by logging in to your **personalized benefits account**. If you don't make an election, you will be enrolled in the same coverage level you currently are, including dependent elections. Your medical coverage will automatically change to the International/Expatriate Health Plan on the date your international assignment starts.

If you are a new hire, you must enroll in the International/Expatriate 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 receiving your enrollment email.

Visit **AECOMBenefits.com** to explore additional benefits available to you, including the GuidanceResources Employee Assistance Program (EAP), Kudos, myStrength and resources to help you be well.

### *No more physical ID card needed!*

Starting in 2023, you won't need a physical ID card to access your plan benefits, so you won't receive an ID card in the mail. Instead, you can access a digital ID card, file claims and speak with a customer service representative with the Cigna Envoy app. Some **countries** issue additional country-specific cards. Those cards will be sent to you at your home address of record.



# Medical coverage

While you are on an international assignment, you are eligible for medical coverage — in the U.S. and internationally — through the International/Expatriate 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/Expatriate Health Plan medical coverage.

International/Expatriate Health Plan: Medical Coverage			
Plan Feature	International	U.S. In-Network	U.S. Out-of-Network
<b>Annual Deductible</b>	\$100 employee only	\$800 employee only	\$800 employee only
	\$200 family	\$1,600 family	\$1,600 family
<b>Out-of-Pocket Maximum</b>	\$2,000 employee only	\$3,000 employee only	\$6,000 employee only
	\$4,000 family	\$6,000 family	\$12,000 family
<b>Preventive Services</b>	Plan pays 100%	Plan pays 100%	Plan pays 100%
<b>General Coinsurance</b> (after deductible)	Plan pays 90%, you pay 10%	Plan pays 80%, you pay 20%	Plan pays 60%, you pay 40%
<b>Retail Prescription Drugs*</b> (30-day supply)	Plan pays 90%, you pay 10%	Generic: \$10 copay	Plan pays 60%, you pay 40%
		Preferred Brand: \$30 copay	
		Non-Preferred Brand: \$50 copay	
<b>Mail Order Prescription Drugs*</b> (90-day supply)	Not covered	Generic: \$30 copay	Not covered
		Preferred Brand: \$90 copay	
		Non-Preferred Brand: \$150 copay	

### Certification Requirements — for services rendered inside the U.S.

- Pre-certification for inpatient and outpatient services received in the U.S. may be required.
- Providers must call our toll-free number, 800.441.2668 to pre-certify services.
  - You or your dependents are responsible for ensuring that out-of-network providers pre-certify services.
  - Failure to obtain pre-certification may affect out-of-pocket costs.
  - This is a summary only. Additional details can be found in the certificate booklet.

*\*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 International/Expatriate Health Plan provides international coverage abroad in addition to in-network and out-of-network coverage in the U.S. The international coverage has a lower deductible, out-of-pocket maximum and coinsurance levels than your U.S. coverage. Deductibles and out-of-pocket maximums for U.S. in- and out-of-network coverage are the same, but the in-network benefit provides a lower coinsurance cost share for employees. The deductibles and out-of-pocket maximums cross-accumulate between U.S. in-network, U.S. out-of-network and international coverage. U.S.-based PPO plans may also provide coverage outside the U.S.
- **Health Savings Account (HSA):** In the International/Expatriate 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/Expatriate 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/Expatriate Health Plan. To initiate a transfer, you'll need to provide the carrier with your final Explanation of Benefits (EOB) form showing any deductible and out-of-pocket maximum met in the other carrier's plan in that plan year. Contact customer service to provide the EOB, and the claims team will apply the accumulated deductible and out-of-pocket maximums to the plan you are moving to.



### Transferring prescriptions to the International/Expatriate Health Plan



To request prescriptions through the International/Expatriate Health Plan, please log in to [CignaEnvoy.com](https://CignaEnvoy.com) (you will need to create an account first) or call Cigna at 800.441.2668 (Outside the U.S.: +1 302.797.3100).

### Transitioning care to the International/Expatriate Health Plan

If you have an existing medical condition that will require coverage under the International/Expatriate Health Plan, fill out the Cigna Transition of Care form and submit it to Cigna.

## Dental coverage

When you enroll in the International/Expatriate Health Plan, you'll automatically receive Cigna dental insurance which provides international and U.S. 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 U.S. domestic dental plans shown below.

Plan Feature	International/Expatriate Health Plan	 Dental coverage is included with the cost of medical, on the International Plan, and will not appear as a separate plan on your benefit statement.  You may select an additional U.S.-based dental plan at an additional cost to you. 	U.S. Domestic Plan	
	International and U.S. Dental Coverage		Aetna DPO	Aetna DPO Premier
			In-Network/Out-of-Network	In-Network/Out-of-Network
<b>Annual Deductible</b>	\$50 individual \$150 family		\$75/\$150 individual \$150/\$300 family	\$50/\$100 individual \$100/\$200 family
<b>Preventive Services</b> (no deductible)	No cost		No cost	No cost
<b>Basic Services</b>	You pay 20%		You pay 30%/50%	You pay 20%/40%
<b>Major Services</b>	You pay 50%		You pay 50%/60%*	You pay 40%/60%*
<b>Orthodontia</b>	You pay 50% (child/adult) Plan pays up to \$1,500 per person per lifetime		Not covered	You pay 50% (child/adult) Plan pays up to \$1,500 per person per lifetime
<b>Annual Calendar Year Maximum</b>	\$1,500		\$1,250	\$1,500

\*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/Expatriate Health Plan, you automatically receive coverage for an annual eye exam at no cost to you. Eyewear is not covered.

If you want coverage for eyewear (eyeglasses and/or contact lenses) and you travel to the U.S. often or have dependents remaining in the U.S., you may also enroll (or continue to participate in) one of the U.S. domestic vision plans shown below.

	VSP Basic In-Network/Out-of-Network	VSP Premier In-Network/Out-of-Network
<b>Exam</b>	No cost/\$45 allowance	No cost/\$45 allowance
<b>Lenses</b>	No allowance	\$10 materials copay/\$45 – \$125 allowance
<b>Frames</b>	20% savings on complete pair of prescription glasses/no allowance	\$10 copay, then \$150 allowance plus 20% off remaining balance/\$47 allowance
<b>Contact Lenses Instead of Glasses</b>		
<b>Conventional/Disposable</b>	15% savings on a contact lens exam including fitting and evaluation, materials at usual & customary/no allowance	\$10 material copay + \$60 exam copay, then \$120 allowance/\$105 allowance
<b>Medically Necessary</b>	15% savings on a contact lens exam including fitting and evaluation, materials at usual & customary/no allowance	\$10 material copay + \$60 exam copay, then covered in full/\$210 allowance

### *Your costs for medical, dental and vision coverage*

AECOM pays the majority of the cost for you and your family (the full cost for the VSP Basic vision plan option). 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**.

## International Employee Assistance Program (IEAP)

The International/Expatriate Health Plan coverage through AECOM includes an IEAP that you can reach directly by calling one of these toll-free numbers: 888.851.7032 or 877.857.2952. There is also a reverse charge access number of +44 208.987.6230. These phone lines provide immediate access to confidential services for behavioral health concerns. Services include triage via telephone for crisis intervention and referrals to community support for ongoing needs. Coverage is available for referrals for up to 6 face-to-face sessions with a licensed behavioral professional where available. Currently, face-to-face options are available in 160 countries (subject to provider preference).

## Global Evacuation Plan

The International/Expatriate Health Plan includes evacuation for emergency medical scenarios. Approved services are covered at 100% with no deductible. In a case where the employee will remain hospitalized away from home for more than 7 days, the plan also includes round-trip airfare for one family member to travel to the employee. Airfare for dependent children to return to their country of residence due to medical situations is also covered at 100% for approved services. The evacuation services can be reached toll-free at 800.441.2668.



# Life and AD&D insurance benefits

***Life and accidental death and dismemberment (AD&D) insurance helps your family members maintain their standard of living if you die or experience certain accidental injuries.***

How much insurance you need depends on your personal situation — other income sources, monthly expenses and short- and long-term debt such as credit card or mortgage expenses, etc.

Life and AD&D insurance is administered by The Hartford. If you are enrolled in Triple-S Medical, you also receive a life insurance benefit of \$10,000 through Triple-S.

## Basic Life and AD&D Insurance

- AECOM provides you with basic life and AD&D insurance in the amount of 1x your base annual salary, up to \$2 million.
- AECOM pays the full cost for this coverage.
- Basic coverage is automatic — you don't need to enroll in it.

## Supplemental Life and AD&D Insurance

- You can purchase supplemental life and AD&D insurance for yourself, your spouse/domestic partner and your child(ren).
- Coverage is available in amounts from 1x – 8x your base annual salary, up to \$2.5 million.
- You pay the full cost of coverage. You can find specific cost information at [myAECOMbenefits.com](https://myAECOMbenefits.com).
  - For life insurance: The cost depends on the amount of coverage you choose and your age (and your spouse/domestic partner's age, if applicable). If you're enrolled, your rates will automatically increase as you or your spouse/domestic partner enters a new age bracket. The AECOM Benefits Service Center will notify you of the increase one month before your or your spouse/domestic partner's birthday. Your payroll contributions will increase automatically the month following that birthday.
- Evidence of insurability (EOI) may be required for certain amounts of life insurance.

*This information is a summary of coverage only. Refer to your summary plan description (SPD) or certificate of coverage for more details.*

### ***Life and AD&D insurance benefits decrease at age 65***

The original amount of your basic and supplemental life and AD&D insurance benefits will reduce by 35% when you turn 65. At age 70, the original benefit will reduce by 50%. All amounts are rounded to the next higher \$1,000.



### ***Protect your loved ones by updating your beneficiaries***

When enrolling in life insurance, you'll be prompted to designate your beneficiary(ies) — the person or persons you want to receive your life insurance benefit if you die. You can change beneficiaries at any time and, in fact, it's a good idea to review and update your beneficiary information to make sure all the information is complete and up to date. If you die and have no beneficiaries on file or if your beneficiary information is outdated, there could be a significant delay in payment (or no payment at all) during an already challenging time for your loved ones. You can review and update your beneficiary information at [myAECOMbenefits.com](https://myAECOMbenefits.com).



# Disability insurance benefits

***Disability insurance provides financial protection to you and your family if you become disabled and unable to work.***

AECOM's disability insurance program is administered by The Hartford.

## Short-Term Disability (STD) insurance

- AECOM provides basic STD insurance to you automatically and pays the full cost.
- If you have a qualifying disability, benefits begin after seven consecutive days and may continue up to 26 weeks from the date of disability.
- The STD benefit provides 100% of your base weekly earnings for up to six weeks.
- After six weeks, the STD benefit provides 66.67% of your base weekly earnings for the remainder of the approved STD period.

## Long-Term Disability (LTD) insurance

- If you want additional coverage, you can elect LTD — we'll pay 50% of the cost.
- The LTD benefit is 60% of base annual earnings, up to \$15,000 per month.
- A buy-up option to increase coverage to 66.67%, up to \$15,000 per month, is available at an additional cost.
- LTD benefits begin after 180 days and may be payable up to your Social Security normal retirement age.



### ***Special Enrollment Opportunity***

Evidence of insurability (EOI) is not required during this Benefits Open Enrollment (for new enrollments and buy ups). Take advantage of this special opportunity to enroll in or increase your LTD coverage.

# FAQs about your health care options

1

## **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/Expatriate 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.

2

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

Yes. The International/Expatriate 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/Expatriate 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.

4

## **May I waive International/Expatriate Health Plan coverage?**

Yes, you may waive International/Expatriate Health Plan coverage if you have coverage through a different medical plan. The health plan may not be another U.S.-based health plan. Please note that the AECOM Benefits Service Center may require that you attest to your other coverage upon enrollment.

5

## **What happens to my benefits if I come back to the U.S. to work?**

If you return to the U.S. and you continue to be eligible for AECOM benefits, you must enroll in AECOM domestic benefits or waive coverage. The option to enroll in a domestic plan will be available to you upon a repatriation action on your Workday profile. If you are no longer benefits-eligible, you may be eligible for the COBRA International/Expatriate Health Plan. If you don't take action, you will default into no coverage.

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## **Other 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.

This Guide is a Summary of Material Modifications (SMM) providing information on various AECOM benefit plans and outlining changes that take effect in 2023. It is intended to provide an overview of changes and information about some of the benefit plans you are eligible for as an employee of AECOM. If any information in this Guide conflicts with the plan documents and insurance policies, those plan documents and policies will govern. AECOM reserves the right to amend, modify or terminate these plans at any time. This Guide does not constitute a contract of employment.

Legal notices related to your 2023 benefits are available at [myAECOMbenefits.com](https://myAECOMbenefits.com). You can request a hard copy by calling the AECOM Benefits Service Center at 844.779.9567 (+ 1 312.843.5091 outside the U.S.).