

AmericanAirlines®

# Everyday Guide to Using Your Medical Benefits

Value Option with HIA

2013

[Get Started](#)

# Make smart, informed decisions every day

You take the time to learn the ins and outs when you buy a car, a house or something with a significant investment. You want to make sure you know how to use it right and get your money's worth. The same is true when it comes to using your medical benefits.

The Value Option with HIA:

- Is **new** for 2013
- Offers **lower out-of-pocket costs** for higher monthly contributions
- Comes with a **Health Incentive Account (HIA)**

It provides you with a choice about how you pay for care and helps you manage your health care costs. You have the power to take charge of your health and health care.

So, get smart about how you use your medical option. Understand that your choices matter. And know that American provides resources like this guide to help you make those choices. Review it today and come back to it throughout the year to make sure you get the right medical care, save money and make a healthy difference in your life every day.

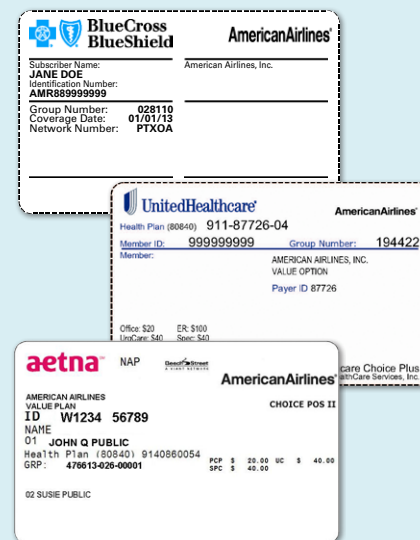


## About this guide

This guide is designed for online viewing, allowing you to click between sections and link to a variety of resources.

Want to read offline? You can do that, too. Simply print a single page or the whole guide.

You'll find references to tools and resources from [BlueCross BlueShield](#), [UnitedHealthcare](#) and [Aetna](#) throughout this guide. If you're not sure which administrator you have, see your ID card.



# Contents



## Your Online Resources

### Know Before You Go

- Find the right doctor
- Prepare for your doctor visit
- Know what to ask your doctor
- Know what to do after your visit
- Be a smart health care shopper
- Know where to get the right care

### How You Pay for Care

- Meet your deductible
- Know when your deductible applies
- Pay for prescription drugs
- Get 100%-paid preventive care
- Use your HIA
- Understand your out-of-pocket maximum

### Living Well

- Get a health coach
- Sign up for Maternity Matters
- Save money with StayWell Rx
- Get help with a serious health condition
- Earn \$250 in Healthmatters Rewards

### Learn More

- Make benefits changes
- Understand key terms
- Use helpful tools
- Find out more

## Your Online Resources

# Your Online Resources

American Airlines provides a one-stop shop for all you need to know about your benefits. You can access it from the [Benefits page of Jetnet](#). Your family can also see this information by visiting [My.AA.com](#). Visit often to keep up with the latest updates.

The screenshot shows the My.AA.com website interface. At the top left is the logo "My.AA.com For where life takes you". To the right is a search bar. Below the logo is a navigation bar with tabs: HOME, BENEFITS, \$UPER \$AVER 401(k), HEALTHMATTERS, NEWS, and a Quick Links dropdown. The main content area features a large banner image of two women with the text "EXPLORE WHAT'S NEW FOR 2013 A NEW YEAR FOR AMERICAN AND YOUR BENEFITS >". To the right of the banner is a sidebar with several news items, including "Start scheduling your 2013 Quest Screening December 1, 2012" and "Health Spending Accounts available January 1, 2013". Below the banner are four content blocks: "WELCOME ABOARD" (Learn about the different benefit options that are available for you and your family), "MEDICAL OPTIONS" (View a comparison of medical options on an easy to read chart), "HEALTHMATTERS" (See how to earn your Healthmatters Rewards for 2013), and "EILEEN ASKS..." (Deductibles and Out-of-Pocket Max). Each block has a "LEARN MORE" or "CHECK IT OUT!" button.

Under the **Benefits** tab, you'll find information about:

- Medical Options
- Health Spending Accounts
- Flexible Spending Accounts
- Resources
- My Benefits Cost Estimator
- Dental
- Vision
- Additional Benefits

The **Healthmatters** tab shows you how to live a healthier lifestyle — and earn rewards while doing it:

- Programs
- Activities
- Quest Screenings
- StayWell Rx

### **Super Saver 401(k)**

will get you on track for retirement:

- Super Saver Features
- Who's Eligible
- When Participation Begins
- How to Enroll
- Contributions
- Investments
- Distributions
- Withdrawals and Loans

## Know Before You Go

Find the right doctor

Prepare for your doctor visit

Know what to ask your doctor

Know what to do after your visit

Be a smart health care shopper

Know where to get the right care

## Find the right doctor

The best time to find a doctor is before you get sick. You have time to make an informed choice, get your paperwork in order and schedule a 100%-paid preventive exam. A primary care physician (PCP) is good for you and your family because you get:

- Efficient care because your doctor knows you, your family and your medical history
- Help navigating the health care system, including finding a specialist if you need one
- Good advice because you've built a relationship and feel comfortable speaking openly

To find a PCP, visit your administrator at:

- [UnitedHealthcare](#)
- [Aetna](#)
- [BlueCross BlueShield](#)

You and your family can also link to your administrator from the Resources page of [My.AA.com](#).

### Did you know ...

People who have an ongoing relationship with a primary care physician (PCP) have better overall health, live longer and have lower health care costs.

(Source: Centers for Disease Control)

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## Know Before You Go

(continued)

Find the right doctor

**Prepare for your doctor visit**

Know what to ask your doctor

Know what to do after your visit

Be a smart health care shopper

Know where to get the right care

# Prepare for your doctor visit

Going to the doctor for the first time when enrolled in a new medical option can be a little intimidating. What do you need to bring with you? What questions do you ask? Are you going to have to pay something up front? Take a little time to prepare for your visit by using these tips.

- **Make a list of the things you want to discuss.** Going to the doctor unprepared is like showing up for a test you haven't studied for. With a list, you can be sure to cover everything you need to and you'll be better able to answer your doctor's questions. Here are some suggestions:
  - Any symptoms you are having
  - Smoking, eating, drinking and exercising habits
  - Your health history
  - Your heredity
- **Confirm whether the doctor is in- or out-of-network.** Whether you are in the market for a [primary care physician \(PCP\)](#) or have been going to the same doctor for many years, make sure you're being a smart shopper by using doctors within your network to save money. [Click here](#) to find an in-network doctor or facility contracted with your administrator.
- **Bring a list of all medications, allergies and other doctors you see.** This is not the time to be bashful. The more your doctor knows about your current health regimen, the better he or she can get a grasp on your health needs. Include over-the-counter products (vitamins, herbal remedies, aspirin, etc.) so you can avoid interactions or side effects due to mixing medications.
- **Bring your medical ID card.** The doctor's office will need your medical option information. Having your medical ID card on hand proves that you're covered and makes the office assistant's job a little bit easier.



### Did you know ...

You can access your medical ID card right from your smartphone. All you have to do is download your administrator's app:

- [UnitedHealthcare](#)
- [Aetna](#)
- [BlueCross BlueShield](#)

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## Know Before You Go (continued)

Find the right doctor

Prepare for your doctor visit

**Know what to ask your doctor**

Know what to do after your visit

Be a smart health care shopper

Know where to get the right care

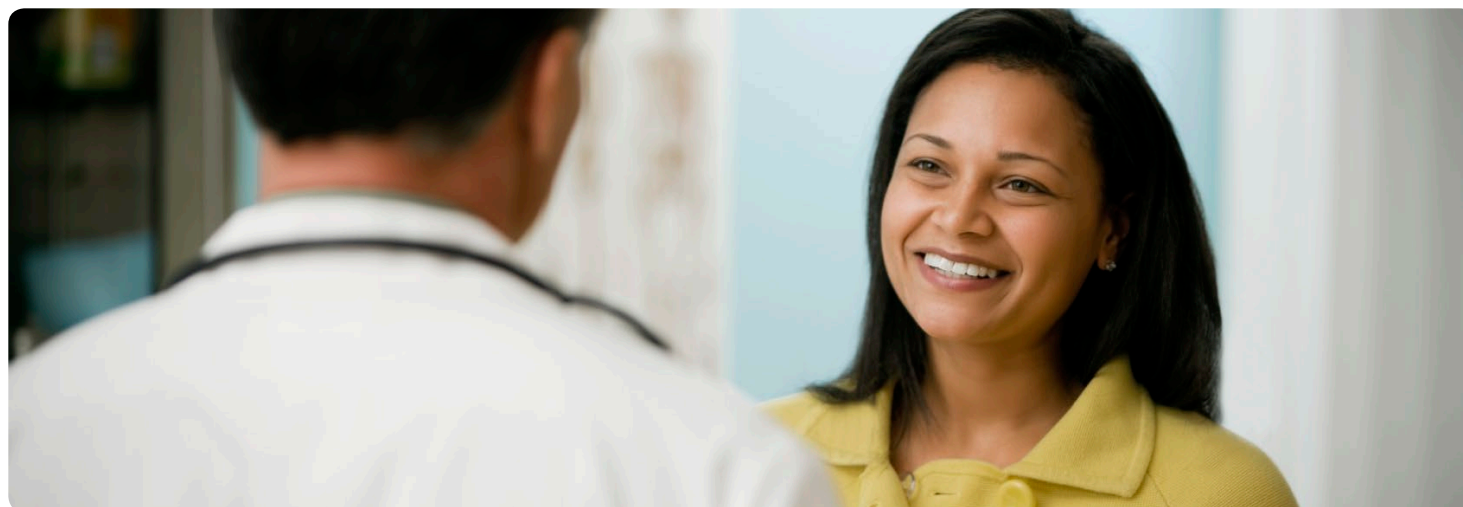
# Know what to ask your doctor

Did you know that most doctor visits are only 18 minutes long? So, make the most of your time together by taking an active role in the conversation. After all, it really is all about you.

(Source: Archives of Internal Medicine, 2008)

- **Tell your doctor your medical history.** Be honest with the doctor. If you have allergies or have experienced a reaction to a specific drug in the past, be sure your doctor is aware of it. If the doctor is your primary care physician (PCP), they may already have this information from prior visits. If not, consider selecting a trusted PCP so you'll be treated by someone familiar with your medical history each time you go to the doctor.
- **Make sure you understand the reason for any medical tests and treatment options** that the doctor orders. Ask your doctor to review any medical terms you are unfamiliar with or test results. There's no such thing as a dumb question when it comes to your health. **Tip:** Have tests performed in the doctor's office or at an in-network lab/imaging center to receive 100% coverage.
- **Ask your doctor about his or her experience**, or about seeing another doctor for a second opinion. You are the customer, so there's nothing wrong with making sure you are comfortable.
- **Ask about any prescriptions being ordered.** Find out if they're necessary for your recovery or just nice to have. Ask if a generic drug or over-the-counter equivalent is available. They may work just as well and cost less. Finally, be sure to ask about dosage and any potential drug/food interactions.

Unsure what else to ask your doctor? [Click here](#) for a list of questions.



*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

Find the right doctor

Prepare for your doctor visit

**Know what to ask your doctor**

Know what to do after your visit

Be a smart health care shopper

Know where to get the right care

## Questions to ask

You may have specific questions for your doctor according to the reasons for your visit. But, here are some general questions to get you started.

1. What screening tests am I receiving at this visit? Is there anything I should be aware of with these tests?
2. Do I need any vaccinations or booster shots?
3. Am I at risk for any particular medical condition?
4. What should I do to prevent or monitor the risk?
5. What are my biometric measurements, like blood pressure, cholesterol and blood sugar levels?
6. Are there any other preventive exams I should look into?
7. What should I know about my medications?
8. What should I do if I have any questions or concerns after this appointment?
9. What are the most important things I need to remember when I leave the office today?
10. Is precertification or preauthorization required for any recommended procedures? *Before you schedule a recommended procedure, check with your administrator for any precertification/preauthorization requirements.*

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*



## Know Before You Go

(continued)

Find the right doctor

Prepare for your doctor visit

Know what to ask your doctor

Know what to do after your visit

Be a smart health care shopper

Know where to get the right care

## Know what to do after your visit

You have a Band-Aid on your arm and a prescription in hand. Now what? Knowing what to do next can save you time and money. Try these tips.

- **Check out.** Visiting your PCP? You'll pay a \$20 co-pay. Seeing a specialist? You'll pay a \$40 co-pay. Your in-network provider will automatically file a claim for you. [Click here](#) to see how to use your HIA to pay.
- **Get any prescriptions filled.** Make sure that you use an in-network pharmacy or the Express Scripts/Medco by Mail mail order program to save you time and money. You pay only a \$10 co-pay for generic drugs or your co-insurance for brand name drugs at the pharmacy. There are no claims to file as long as you use a network pharmacy or mail order.
- **Follow your doctor's treatment plan carefully.** Over 40% of people do not stick to their treatment and end up getting sicker or being hospitalized — don't let that happen to you.
- **Call your doctor with questions.** It's your health. Give it the attention it deserves.
- **Review your Explanation of Benefits (EOB)** from your administrator. The EOB shows what American pays and what you owe the doctor. Check to ensure that all listed services were received and coded correctly. If not, contact your [administrator](#).

**Remember:** In-network preventive care is covered at 100%.

### Important Contacts

#### BlueCross BlueShield

phone: 1-877-235-9258

web: [www.bcbstx.com](http://www.bcbstx.com)

#### UnitedHealthcare

phone: 1-800-955-8095

web: [www.myuhc.com](http://www.myuhc.com)

#### Aetna

phone: 1-800-572-2908

web: [www.aetnavigators.com](http://www.aetnavigators.com)

#### Express Scripts/Medco (Prescriptions)

phone: 1-800-988-4125

web: [www.express-scripts.com](http://www.express-scripts.com)

#### MetLife (Dental)

phone: 1-866-838-1072

web: [MetLife \(Jetnet required\)](#)

#### Spectera (Vision)

phone: 1-800-217-0094

web: [www.myspectera.com](http://www.myspectera.com)

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## Know Before You Go

(continued)

Find the right doctor

Prepare for your doctor visit

Know what to ask your doctor

Know what to do after your visit

**Be a smart health care shopper**

Know where to get the right care

# Be a smart health care shopper

You shop smart to find the best deals in your everyday life; shouldn't you do the same when it comes to health care? Here are a few money-saving tips to keep you and your wallet healthy:

- **Know before you go with cost estimators.** Don't be surprised by the cost of your hospital stay. Cost estimators provide personalized cost estimates based on your location, your medical option and whether or not you've met your deductible. You can even compare nearby doctors, medical facilities and hospitals based on the price you will pay and quality of care.

Click below to log in and access your administrator's tool:

- [UnitedHealthcare](#)
- [Aetna](#)
- [BlueCross BlueShield](#)

- **Stay in-network.** You have the option of using in-network or out-of-network doctors and facilities each time you receive care. You'll pay less when you visit doctors, medical facilities and hospitals who participate in the network. BlueCross BlueShield, UnitedHealthcare and Aetna have pre-negotiated rates with them.
- **Urgencies may not be emergencies.** Urgent care centers and walk-in clinics are a good alternative when you can't see your regular doctor and want care right away. These centers offer lower-cost walk-in care than emergency rooms (ERs) and help you avoid long wait times in the ER. Find one on your administrator's website. Remember — there is a \$100 co-pay (plus deductible and co-insurance) for emergency room visits.
- **Participate in Healthmatters.** You and your covered spouse or domestic partner can earn up to \$250 each in [Healthmatters Rewards](#) for completing healthy activities, such as the Health Assessment, a Quest Screening and health coaching. You'll receive the money in your HIA and can use it to reimburse yourself for your medical deductible, and medical/prescription co-insurance and co-pays.

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

### Don't pay for diagnostic testing.

Eligible lab tests, X-rays, MRIs and CT scans are covered at 100% if performed at your network doctor's office or non-hospital lab or imaging center.



**Know Before You Go**  
(continued)

Find the right doctor

Prepare for your doctor visit

Know what to ask your doctor

Know what to do after your visit

Be a smart health care shopper

**Know where to get the right care**

# Know where to get the right care

## Healthmatters Nurseline is available 24/7

Is it a cold, or flu? Rash, or chicken pox? Mild fever, or more serious? Don't worry — you have access to quality and confidential medical advice anytime, anywhere. **Licensed nurses are available 24/7/365** to answer any health question or issue, big or small.

Call **1-888-227-6598** to speak to a registered nurse who can give you advice and help you decide on the right place for care.

### Did you know?

A study of claims data for treating 700 cases for ear infection, sore throat and urinary tract infections (UTI) showed that where you are treated affects how much you pay. According to the study, here's the cost of care for each of these conditions at different locations:

Emergency Room	Urgent Care Center	Retail Clinic
\$570	\$156*	\$110

\*Remember, you'll pay only a \$40 co-pay for in-network urgent care services.

Saves you money	Usually costs more
Visit with primary care physician	Visit with specialist (for non-specialist care)
Urgent care center	Emergency room
Free-standing MRI center	MRI in a hospital

**Remember — you save the most when you use in-network providers.**

The Healthmatters Nurseline can help you navigate the health care system, including:

- Finding a doctor or hospital
- Understanding treatment options that you can discuss with your doctor
- Finding answers to medication questions
- Locating available resources

Whenever you need care that is not for an emergency — like an ear infection, back pain or a sprained ankle — you will save time and money by going to your doctor or an urgent care center.

### Do you have 4 hours to wait in the ER?

According to the Press Ganey's Pulse Report 2010, the average length of stay in a U.S. emergency room is **4 hours, 7 minutes.**

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## How You Pay for Care

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

## Meet your deductible

Your deductible applies to inpatient hospital stays, ER visits, outpatient surgery in the hospital or surgi-center. That means you must meet your deductible before American pays a portion of these charges. So, if you go to the hospital for an MRI or day surgery, you'll need to meet your deductible before American begins to cover part of the cost. The deductible doesn't apply to preventive care, co-pays, prescriptions and non-hospital lab/imaging charges.

### In-network deductible

<b>Individual</b>	<b>\$300</b>
<b>Family</b>	<b>\$900</b>

**Not every covered family member has to meet this amount.** Once a family member meets his or her \$300 individual deductible, that family member will begin paying co-insurance. When three covered people have met the deductible, the entire covered family begins paying co-insurance.

*For example:*

You have family coverage, including you, your spouse and your three children.

You would begin paying co-insurance after you meet your \$300 deductible. Your spouse and one other covered child would continue paying the full cost of care until they each meet their \$300 deductible. Once all three of you have met the \$300 individual deductible, the other two covered children would also begin paying co-insurance because the family deductible is now met.

### Preventive Care

American Pays  
**100%**

### Care for Treatment of an Illness or Injury

You Pay  
Co-pays for certain services  
**100%**  
up to Deductible for others

You  
Meet the  
Deductible  
Then ...

You Pay  
Co-pays  
or  
**20%**  
Co-  
insurance

American Pays  
**80%**

You Meet  
the  
Out-of-  
Pocket  
Maximum  
Then ...

American Pays  
**100%**

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

### Remember ...

You'll pay a co-pay (\$20 for doctor visit, \$40 for specialist) and a \$100 ER co-pay for each visit. Co-pays do not count toward your deductible.

## How You Pay for Care

(continued)

Meet your deductible

**Know when your deductible applies**

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

# Know when your deductible applies

The deductible is the amount you pay for medical services before American Airlines will begin to share the cost of care. Use this chart as a guide to understand when your deductible applies.

Service Type	Deductible Applies	Deductible Does Not Apply
Preventive care (In-network only)		✓ Covered at 100%
PCP visit for illness or injury		✓ \$20 co-pay does not count toward deductible
Prescriptions		✓
Lab charges for test associated with in-network visit		✓ Covered 100% if part of office visit or at an independent facility
Outpatient surgery in hospital or surgi-center	✓	
Emergency room visits	✓ \$100 co-pay does not apply toward deductible	
Inpatient hospital stays	✓	

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## How You Pay for Care (continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

# Pay for prescription drugs

You've visited your doctor — and a medication has been prescribed for you. You have two options for filling that prescription:

## Retail: When you need it right away

Get your prescription filled at one of thousands of Express Scripts/Medco in-network pharmacies.

## Mail Order: For prescriptions you take regularly (maintenance medications)

You can conveniently manage your prescriptions online while saving time and money when you sign up for mail order prescriptions with Express Scripts/Medco by Mail. Call Express Scripts/Medco at **1-800-988-4125** or go online to [www.express-scripts.com](http://www.express-scripts.com) to get started.

### Save money on prescriptions

- **Use the mail order pharmacy.** Receive up to a 90-day supply of long-term medication (such as cholesterol-lowering drugs) and enjoy the convenience of having your prescription delivered to you. After your initial purchase plus two refills at a retail pharmacy, you will pay 50% of the drug cost for long-term (maintenance) medications if you don't move your prescription to mail order.
- **Save big with StayWell Rx.** You'll pay less for 90-day supplies of eligible diabetes and high blood pressure medications — free if generic, \$15 if brand name. Call **1-888-227-6598** to enroll before you order your medication.
- **Go generic.** Generic drugs are only \$10 per fill, and work just as well. Remember, if you select a brand drug when a generic is available, you pay the generic co-pay plus the cost difference between generic and brand prices. Visit [Express Scripts/Medco](http://Express Scripts/Medco) to see what you could be saving.
- **Use preferred brands when you need a brand-name drug.** Your cost for preferred brand drugs is lower than for non-preferred drugs. You can ask your doctor to prescribe a preferred brand drug. Visit [Express Scripts/Medco](http://Express Scripts/Medco) to find a preferred brand alternative.
- **Speak up.** Ask your doctor if he or she has any free samples of the medication being prescribed.
- **Get smart.** Use your smartphone or tablet to check a prescription cost at [www.express-scripts.com](http://www.express-scripts.com). Ask your doctor for a lower-cost alternative if the cost is high.

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

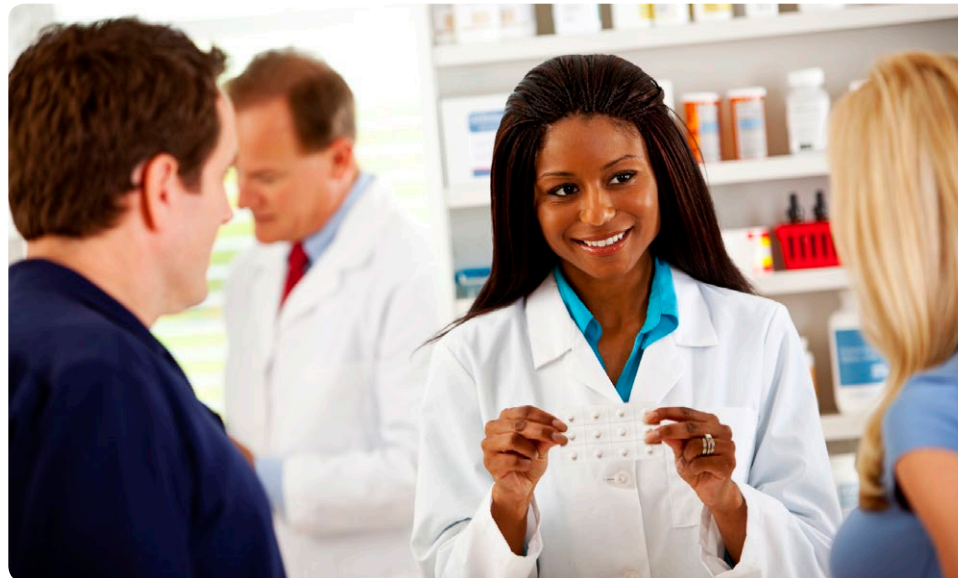
Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

### Filling your prescription at a retail pharmacy

<b>1</b>	Present your Express Scripts/Medco prescription card when dropping off your prescription. Remember, your prescription card is separate from your medical card.
<b>2</b>	You will pay a co-pay for generics or co-insurance (a percentage of the drug cost) for your brand-name medications right at the pharmacy. The co-pay or co-insurance rate for prescriptions is available to you immediately — you do not have to meet your deductible and there are no claims to file.
<b>3</b>	Remember, you can use your <a href="#">HIA or HCFSAs</a> to reimburse yourself later.



#### Did you know ...

With the Worry Free Fill Program, your prescriptions will automatically ship to you before you run out. Call Express Scripts/Medco at **1-800-988-4125** to find out more.

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

**How You Pay for Care**  
(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

**Get 100%-paid preventive care**

Use your HIA

Understand your out-of-pocket maximum

# Get 100%-paid preventive care

It's easy to put off getting an annual check up. But when it's covered at 100%, why wait?

Your medical option covers **in-network preventive care and screenings at 100%**, so take advantage of the benefit and get your preventive care — for you and your covered family members — without sacrificing your wallet.

## What is preventive care?

Preventive care helps identify potential health problems early when they may be easier and less costly to treat. Guidelines are based on your age and gender. The table below lists common preventive services. For a complete list, visit your [administrator's website](#).

**Did you know ...**

As many as **30,000 lives** could be **saved EACH YEAR** with **preventive screenings**.

Source: [www.cdc.gov](http://www.cdc.gov)

Children	Female	Male
<ul style="list-style-type: none"> <li>■ Well-baby care</li> <li>■ Annual physicals</li> <li>■ Immunizations</li> <li>■ Medical/family history</li> <li>■ Blood pressure checks</li> <li>■ Cholesterol checks</li> </ul>	<ul style="list-style-type: none"> <li>■ Pap tests</li> <li>■ Mammograms</li> <li>■ Osteoporosis test</li> <li>■ Annual physicals</li> <li>■ Immunizations</li> <li>■ Medical/family history</li> <li>■ Blood pressure checks</li> <li>■ Cholesterol checks</li> <li>■ Diabetes mellitus: baseline for high-risk individuals</li> <li>■ Colonoscopy</li> </ul>	<ul style="list-style-type: none"> <li>■ Colonoscopy</li> <li>■ Prostate cancer screening</li> <li>■ Annual physicals</li> <li>■ Immunizations</li> <li>■ Medical/family history</li> <li>■ Blood pressure checks</li> <li>■ Cholesterol checks</li> <li>■ Diabetes mellitus: baseline for high-risk individuals</li> <li>■ Osteoporosis test</li> </ul>

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*



## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

### Don't forget about preventive dental

American Airlines offers the coverage you need to keep your pearly whites healthy. Visit the [MetLife](#) website or call **1-800-638-6420** to learn more about your dental benefits.



### Did you know ...

Oral health is a key indicator of overall health. Research has shown that there is a connection between periodontal diseases and other chronic inflammatory conditions, such as diabetes, cardiovascular disease and Alzheimer's disease. But just like with other diseases, many oral diseases are treatable if caught in the early stages — making routine dental checkups much more important.

### See clearly with Spectera

If you enroll in the Spectera vision plan, you can get an annual vision exam for a set copay of \$10, when you visit an in-network provider. Log on to [www.myspectera.com](http://www.myspectera.com) or call Spectera at **1-800-217-0094** for details.



*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

## Your healthy checklist

Don't just think about your health when you're sick. Just print this page and use it to keep track of your health status all year long.



\_\_\_\_\_ 's Healthy Checklist

(Write Your Name)

- Schedule yourself and your enrolled family members for annual exams and preventive screenings
- Get your flu shot      Date: \_\_\_\_\_
- Get your annual eye exam      Date: \_\_\_\_\_
- Visit your dentist      Date: \_\_\_\_\_  
(2 cleanings per year)
- Know your numbers (get a Quest Screening)

Blood Pressure: \_\_\_\_\_

A1C: \_\_\_\_\_

LDL Cholesterol: \_\_\_\_\_

HDL Cholesterol: \_\_\_\_\_

Triglycerides: \_\_\_\_\_

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Know your blood type: \_\_\_\_\_

List your current medications (name and dosage):  
\_\_\_\_\_  
\_\_\_\_\_

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

### Healthy Quick Tips

- Drink fresh water and as much water as you can. **Water flushes unwanted toxins from your body** and keeps your brain sharp.
- The **best way to stay healthy is through prevention**. Our medical plans cover in-network preventive care services at 100% with no deductible.
- Like nutrition and diet, **sleep plays an important role in well-being**. Ideal adult snooze time = 7 – 9 hours/night.
- Keep moving to keep a strong healthy body and weight. **Thirty minutes a day, four to five times a week** of exercise does a body good.
- What you eat affects both your physical and mental health. So, skip the fast food and **fill up on fresh fruit, vegetables, grains, fish and lean proteins**.

## How You Pay for Care (continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

**Use your HIA**

Understand your out-of-pocket maximum

## Use your HIA

Wondering how to use your HIA to pay for that doctor visit or trip to the pharmacy? Here's how it works.

### First, your HIA is funded

Money goes into your HIA when you complete Healthmatters activities. Funds must be in the account before you can use them.

#### Earn 2013 Healthmatters Rewards

Up to \$250 for you and  
Up to \$250 for your covered spouse/domestic partner

### Then, you can use it to pay for care

You can use your HIA to pay for eligible medical and prescription out-of-pocket expenses for you and covered family members. [Click here](#) to review a detailed list.

Your doctor will automatically file any in-network claims for you. If you go out-of-network, you'll need to file a claim with your administrator and then send the bill and EOB to PayFlex to get reimbursed. The way your claim gets reimbursed depends on if you selected auto- or manual reimbursement and whether or not you have a Health Care Flexible Spending Account (HCFSA). You can change your reimbursement method at any time.

Remember, it's your choice how and when you use your funds. Any unused HIA funds roll over from year to year as long as you stay in the Value Option.

See the next page for details.

continued

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

[PayFlex](#) is your account administrator. Go online to check your account balance and view expenses. There are also **user-friendly tools** like a Savings Calculator to determine your medical expenses for the year.

You can also download the [PayFlex mobile app](#) to your **smartphone** so you can check your account balances and submit expenses on the go.

## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

### If you have an HIA and an HCFSA

- Health care claims are paid from the HCFSA first, since it has a “use it or lose it” rule.
- When your HCFSA funds run out, your medical and prescription drug expenses are paid from your HIA.

**Remember:** You can't pay dental and vision expenses with your HIA. To use your HCFSA for dental and vision expenses, you may consider manual reimbursement, as explained below. This lets you save your HCFSA funds for dental and vision costs, before paying medical and prescription expenses.

### How do I access my money to pay for eligible medical and prescription out-of-pocket expenses?

There are two ways to get reimbursed for your eligible in-network medical expenses with the money in your HIA. You get to choose either the auto-reimbursement or the manual method:

- **Auto-reimbursement** — Your administrator will send your in-network claim directly to PayFlex who will pay the claim automatically with money from your HIA or HCFSA. Remember, your claims will be paid first from your HCFSA if you have one with available funds.
- **Manual reimbursement** — You will receive an email or text alert (your choice) from Payflex advising you have a claim awaiting payment. Access your account and choose when to pay your claim.

continued

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

#### Learn More

- [Change your reimbursement method](#)
- [Manage your account preferences](#)
- [Out-of-network claims](#)

## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

### Want to change your reimbursement method?

1. Go to the [PayFlex](#) website.
2. Click on “Financial Center” at the top of the page.
3. Once you’re on the Financial Center page, select “Health Plan Activity” from the drop down menu.
4. Click on “Health Plan Activity Options” from the menu on the left.
5. Select “Yes” for the expense/s (Medical, Dental, Prescription, Vision) under each account that you would like to have automatically reimbursed or “No” for those you would like to manually reimburse.
6. Click “Save” when you have completed selecting your reimbursement methods.

#### Processing your out-of-network claim

Keep your receipt after you pay for treatment and send it to your administrator. Once you receive your EOB, you can go to [PayFlex](#) and upload an electronic copy of your EOB. You will be given additional instructions — follow them to complete your manual reimbursement.

#### Manage your account preferences

Go to PayFlex and click on the Settings tab. From there you can:

- Manage your notification settings
  - Auto- or manual reimbursement
- Manage your claim reimbursement preference
  - Direct deposit or check

continued

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

## Your HIA in Action: How the HIA and HCFSA Work Together

### The Details

**Coverage:** Employee Only

**Spending accounts:** HIA and HCFSA

**Contributions:**

Healthmatters Rewards earned: \$250

**Total HIA** **\$250**

**Your HCFSA annual contribution:** **\$150**

**Reimbursement option:** Auto-reimbursement, email alerts

### The scenario

*Let's say you pay for \$100 for a test at the hospital. This amount will be paid back to you from your HCFSA.*

- Your claim goes to your PayFlex account and the amount is deducted from your HCFSA.
- You will receive \$100 by check or direct deposit into your bank account.
- After the payment, you have \$50 left in the HCFSA.

*Then, you pay \$100 for additional hospital services.*

- Your claim goes to your PayFlex account and \$50 is deducted from your HCFSA.
- The remaining \$50 is deducted from your HIA.
- You will receive \$100 by check or direct deposit into your bank account.
- After the payment, your HCFSA balance is \$0 and your HIA balance is \$200.

### The math

HCFSA beginning balance	\$150
HIA beginning balance	\$250
<i>Hospital test</i>	
HCFSA	– \$100
HCFSA balance	\$50
<i>Additional services</i>	
HCFSA	– \$50
HIA	– \$50
<b>HCFSA balance</b>	<b>\$0</b>
<b>HIA balance</b>	<b>\$200</b>

continued

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

### Learn more



This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.

## Your HIA in Action: How it Works

### The Details

**Coverage:** Employee Only

**Spending account:** HIA

#### Contributions:

Healthmatters Rewards earned: \$250

**Total HIA** **\$250**

**Reimbursement option:** Auto-reimbursement

### The scenario

*Let's say you pay for \$100 for a test at the hospital. This amount will be paid back to you from your HIA.*

- Your claim goes to your PayFlex account and the amount is deducted from your HIA.
- You will receive \$100 by check or direct deposit into your bank account.
- After the claim, you have \$150 left in the HIA.

*You pick up some prescriptions the doctor prescribed and pay \$75 while at the pharmacy.*

- Your claim goes to your PayFlex account and the amount is deducted from your HIA.
- You will receive \$75 by check or direct deposit into your bank account
- After the payment, you have \$75 left in the HIA.

*Then, you pay \$100 for additional hospital services.*

- Your claim goes to your PayFlex account and the amount is deducted from your HIA.
- You will receive \$75 by check or direct deposit into your bank account
- The remaining \$25 will not be reimbursed.
- Your HIA balance is \$0.

### The math

HIA beginning balance	\$250
<i>Hospital test</i>	
HIA	– \$100
HIA balance	\$150
<i>Prescriptions</i>	
HIA	– \$75
HIA balance	\$75
<i>Additional services</i>	
HIA	– \$75
Out-of-pocket cost	– \$25
<b>HIA balance</b>	<b>\$0</b>

## How You Pay for Care

(continued)

Meet your deductible

Know when your deductible applies

Pay for prescription drugs

Get 100%-paid preventive care

Use your HIA

Understand your out-of-pocket maximum

# Understand your out-of-pocket maximum

Your out-of-pocket maximum is the most you pay in co-insurance each year for certain medical and Rx services. Remember, you must meet your deductible for certain medical expenses before your co-insurance applies. Also, co-pays do not count toward your out-of-pocket maximum or deductible. Once you meet it, American pays 100% for covered services for the rest of the year (except for co-pays and certain prescription expenses). In-network and out-of-network maximums must be met separately.



### Learn more

Click [here](#) for an example of how your out-of-pocket maximum works.

### Remember...

Once you have met the out-of-pocket maximum, you'll continue to pay:

- Co-pays
- The cost difference between brand and generic drugs if you purchase a brand-name drug when a generic equivalent is available
- 50% of the cost of long-term medications if you don't use mail order after your third fill

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*



## Living Well

Get a health coach

Sign up for Maternity Matters

Save money with StayWell Rx

Get help with a serious health condition

Earn \$250 in Healthmatters Rewards



*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

# Get support from Healthmatters

Healthmatters, American's award-winning wellness program, can help you get active, eat healthier and live well all year long. Here's a look at some of the resources, programs and support available to you and your family. Call Healthmatters at **1-888-227-6598** to find out more.

### Active Lifestyle Coach

Coaching is available whenever you need extra support to achieve your health goals — online or by phone.

Online programs are available to help you lose weight, quit smoking, reduce stress, lower your blood pressure, or manage diabetes.

Coaches are also available by phone to give you personal encouragement when you need it the most.

### Enhanced Case Management

Serious or complex medical conditions need special attention. Enhanced Case Management helps you navigate through health care services, including doctor's visits, treatment programs and hospital admissions. Work with your personal nurse to help you understand your condition and your care options.

### MaternityMatters

You'll have a personal nurse to work with you throughout your pregnancy and provide support after your baby is born. Call Healthmatters to enroll.

### Informed Care Management

Work one-on-one with a personal nurse. Get help with serious chronic illnesses, such as heart disease, cancer, asthma, or pulmonary disease from a personal registered nurse. Call Healthmatters to get started. You may also receive a call or letter from ActiveHealth inviting you to participate in the program.

### StayWell Rx

Save money on diabetes and high blood pressure medications. Enroll in the StayWell Rx program and get a 90-day supply of eligible generic medications at no cost to you and brand-name medications for \$15.

Three easy steps to start saving:

1. Call Healthmatters to confirm that your medication is eligible and enroll in the StayWell Rx program.
2. Chat with your Health Advocate Team member and learn about ways to keep your condition under control.
3. Fill your eligible high blood pressure or diabetes prescription medications through Express Scripts/Medco by Mail.

To keep saving — chat with your Health Advocate Team member every 90 days to keep your discount.

**Living Well**  
(continued)

Get a health coach

Sign up for Maternity Matters

Save money with StayWell Rx

Get help with a serious health condition

**Earn \$250 in Healthmatters Rewards**



# Earn up to \$250 in Healthmatters Rewards

Better health is its own reward. But at American, you can earn real dollars in your HIA.

You and your covered spouse or domestic partner can each earn up to \$250 — that’s up to \$500 — for completing these goals between January 1, 2013 and October 31, 2013. The sooner you complete the goals, the quicker the money will be in your HIA. Here’s how to get started.

Goal	Actions
<b>First ...</b>	
<b>Health Assessment \$100</b>	Complete your <a href="#">Health Assessment</a> and review with a Health Advocate to earn any 2013 Healthmatters Rewards.  <b>You must complete this goal to receive any Healthmatters Rewards.</b>
<b>Then ...</b>	
<b>Quest Screening \$75 or \$150</b>	<ul style="list-style-type: none"> <li>■ Complete a Quest Screening — Earn \$75</li> <li>■ Meet at least 4 of the 5 results — Earn \$75</li> </ul>
<b>Get Coaching \$75</b>	<ul style="list-style-type: none"> <li>■ Complete one of the following other activities:                             <ul style="list-style-type: none"> <li>– Online health coaching</li> <li>or</li> <li>– Two calls with a nurse or health coach</li> </ul> </li> </ul>



*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## Learn More

Make benefits changes

Understand key terms

Use helpful tools

Find out more

# Make benefits changes

## Life events

Annual Benefits Enrollment is the time to enroll in or change your benefits elections for the upcoming year; however, you can make certain changes if you experience a life event during the year:

- Birth or adoption of child
- Change in day care provider
- Common law marriage
- Declare a domestic partner
- Divorce
- Domestic partner relationship ends
- Eligible for a state premium assistance program
- Going on leave of absence
- Legal guardianship of special dependent
- Legal separation
- Loss of Medicaid or CHIP coverage
- Loss of dependent eligibility
- Marriage
- Return to work
- Spouse/Domestic Partner change of job or benefit status

Your change in coverage must be consistent with your life event change and **must be made within 60 days** of the life event. Go to the Benefits page of Jetnet to process a life event change.

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## Learn More (continued)

Make benefits changes

Understand key terms

Use helpful tools

Find out more

# Understand key terms

## Co-insurance

The percentage you and American Airlines each pay for most covered services and supplies.

## Co-pay

The flat dollar amount you pay when you receive certain covered services or supplies. You pay co-pays even after you meet your deductible or have reached the out-of-pocket maximum.

## Deductible

Amount you pay out of your pocket for covered medical expenses during the plan year before you and American share the costs. In-network and out-of-network deductibles must be met separately.

## In-network

Refers to doctors or health care facilities that are part of your administrator's network and charge pre-negotiated rates for care. Your deductible, co-insurance and out-of-pocket maximums are lower for in-network care compared to out-of-network care. Visit [www.My.AA.com](http://www.My.AA.com) to search your area for an in-network doctor or health care facility.

## Generic drug

A prescription drug with the same active ingredient(s) that is just as safe and effective as its brand-name counterpart, but costs less.

## Primary care physician (PCP)

An internist, general practitioner, family practitioner, pediatrician or gynecologist who helps coordinate all of your medical care.

## Preferred brand-name drugs

Brand-name drugs that generally save you money over non-preferred brand-name drugs because you pay less of the cost. Visit the Express Scripts/ Medco [preferred drug list](#).

## Non-preferred brand-name drugs

If you are taking a prescription drug that is non-preferred, you may wish to ask your doctor about an alternative that is on the preferred list. Typically, a drug is considered non-preferred when it has a generic equivalent or less expensive, equally effective brand-name drug alternative.

## Out-of-pocket maximum

The most you pay in a plan year in medical and Rx co-insurance. Once you meet it, American pays 100% for covered services for the rest of the year (except for co-pays and certain prescription expenses). In-network and out-of-network maximums must be met separately.

## Out-of-network

Refers to doctors or health care facilities that are not part of your administrator's network. Your deductible, co-insurance and out-of-pocket maximums are higher for out-of-network care compared to in-network care.

## Preventive care

Routine physical exams and health screenings (like routine blood tests, immunizations, Pap smears, prostate screenings and other age-appropriate health screenings), as defined by Health Care Reform, that are usually performed by your in-network PCP. Services coded by your doctor as preventive care are generally covered at 100% in-network. If the same tests are done to diagnose an illness or treat a known condition, they are not considered preventive care and your PCP co-pay or deductible and co-insurance apply.

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*

## Learn More (continued)

Make benefits changes

Understand key terms

Use helpful tools

Find out more

## Use helpful tools

### Aetna's, BlueCross BlueShield's and UHC's websites let you ...

- Search for doctors by location or specialty and compare quality first, then cost
- Locate health care facilities such as hospitals, urgent care facilities, labs/imaging centers, etc.
- Get real-time cost estimates
- Keep your medical history at your fingertips
- Check the status of your deductible
- Print ID cards
- Review your Explanation of Benefits (EOB)

Before you make an appointment for care, log into [www.bcbstx.com](http://www.bcbstx.com), [www.myuhc.com](http://www.myuhc.com) or [www.aetnavigators.com](http://www.aetnavigators.com) to use the tools to help make cost-saving decisions.

This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.

### PayFlex — Your Health Spending Account Assistant

Visit [PayFlex](#) to:

- Manage your accounts
- View your expenses
- Keep track of your claims and account activity — including checking your account balance
- Use the Savings Calculator tool

### Your Healthmatters Headquarters

Visit [MyActiveHealth](#) to:

- Track your Healthmatters Rewards
- Learn about health conditions, symptoms and treatment options
- Watch educational videos

## Learn More

(continued)

Make benefits changes

Understand key terms

Use helpful tools

Find out more

## Find out more

Administrator	Phone Number	Website
<b>Medical Benefit Options</b>		
<b>UnitedHealthcare</b>	1-800-955-8095	<a href="http://www.myuhc.com">www.myuhc.com</a> Provider directory: <a href="http://americanairlines.welcometouhc.com/home">americanairlines.welcometouhc.com/home</a>
<b>Aetna</b>	1-800-572-2908	<a href="http://www.aetnanavigator.com">www.aetnanavigator.com</a> Provider directory: <a href="http://www.aetna.com/docfind/custom/americanairlines">www.aetna.com/docfind/custom/americanairlines</a>
<b>BlueCross BlueShield</b>	1-877-235-9258	<a href="http://www.bcbstx.com">www.bcbstx.com</a> Provider directory: <a href="http://www.bcbstx.com/americanairlines">www.bcbstx.com/americanairlines</a>
<b>Prescription Drug Benefit</b>		
<b>Express Scripts/Medco</b>	1-800-988-4125	<a href="http://www.express-scripts.com">www.express-scripts.com</a>
<b>Dental Benefit</b>		
<b>MetLife</b>	1-866-838-1072	<a href="#">MetLife</a> (Jetnet required)
<b>Vision Benefit</b>		
<b>Spectera</b>	1-800-217-0094	<a href="http://www.myspectera.com">www.myspectera.com</a>
<b>Healthmatters</b>		
<b>ActiveHealth Management</b>	1-888-227-6598	<a href="http://www.myactivehealth.com/healthmatters">www.myactivehealth.com/healthmatters</a>

### Get all the details

Click [here](#) to review a Summary of Benefit Coverage or [here](#) for a full Employee Benefits Guide.

*This guide provides an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [eHR Center](#) or HR Services. If the information in this guide is inconsistent with the plan documents, the plan documents will govern. This guide is not intended as a contract of employment or a guarantee of current or future employment. The plan sponsor(s) reserve the right to amend or terminate each plan at any time.*