DFW

2026 Retiree Guide to Benefits

Contents

Enrollment Highlights 3

Eligibility 4

Qualifying Life Events 5

Resources – Cigna 6

Medical Coverage 8

Medical Plans Overview 10

Virtual Doctor Visits 11

Health Care Options 12

Smart Ways to Save on Health Care 13

Prescription Coverage 14

Vision Coverage 15

Vision Overview 17

Medical Supplement Plan 18

DFW LiveWell 20

Medical Rates 21

Important Contacts 23

Welcome to Your Benefits!

The information on the following pages will help you explore DFWs health and wellness benefits known as Total Rewards.

DFW is committed to a comprehensive Total Rewards program that helps our retirees stay healthy and feel secure. Total Rewards is the sum of retirement and benefits DFW Airport provides to its retirees.


Enrollment Highlights

Annual Benefits Enrollment Nov. 1-30, 2025

The annual benefits enrollment is 'passive', meaning you do not have to return your enrollment form unless you want to make a change or cancel your coverage. Once you remove yourself or a dependent from the medical and/or vision coverage, you may not re-enroll later. The last day to make a change to your benefit selections is Nov. 30, 2025.

Updates for 2026

The Cigna Open Access Plus (OAP) plan is closing to new enrollments for 2026. If you're currently enrolled in the OAP plan, you'll be automatically re-enrolled unless you change your medical coverage during Open Enrollment. If you switch plans, you won't be able to return to the OAP plan in the future. Be sure to review your options — premiums and deductibles are increasing.

Cigna ID cards are digital for all members.

Accessing your digital ID card is easy:

- Log in to **mycigna.com** or the myCigna App, click or tap "ID Cards."
- View your card(s), as well as any dependents' card(s).
- Email cards directly to doctors.
- Save your digital ID cards in your digital Wallet.
- Request ID cards by mail. **If you have an ID card, your ID card still works.*

All contribution rates have been moved to the back of this guide for easy reference. See page 21 for more information.

Enrollment Process and Decisions

Process for Current and New Retirees

Cushion Employer Services will mail enrollment material to your home that will include information regarding benefit elections and payment options.

Plan Options

The medical and vision plans available to retirees not yet 65 years of age are the same plans offered to active employees. Retirees age 65 or older who want to remain on a DFW Airport medical plan must select the Medicare Supplement Plan.

Dental coverage is not available under the retiree benefits program. If dental benefits are desired, coverage must be elected through COBRA at termination of employment.

All medical and vision plan features are reviewed each year and are subject to change. Notification of plan changes will occur during annual open enrollment or as otherwise necessary.

Making Changes During The Year

The benefit choices you make during the enrollment period will go into effect on Jan. 1, 2026, or on the first day of the month following your separation, if you are eligible for retirement benefits. Your benefit choices will stay in effect until Dec. 31, 2026. You will be able to change your choices during next year's open enrollment.

You must be continuously enrolled in a DFW Airport medical and/or vision plan to maintain coverage. If you and/or your dependents elect to terminate coverage during the year, you may not re-enroll later.

Medical Subsidy Credits

Retirees who terminated their employment after Jan. 1, 2003, are eligible for medical subsidy credits. Participation requires a minimum of 10 years of employment with DFW Airport. The medical subsidy is available until the retiree reaches age 65.

Regardless of the amount of the credit, a retiree's minimum monthly premium will be equal to or greater than that of an active employee of DFW Airport. The subsidy is calculated as $20 per completed year of service up to a maximum monthly credit of $400.

Credits are applied to the premiums of the retiree's DFW Airport medical plan option (High Deductible Health Plan, Health Reimbursement Account, Open Access Plus In-Network, Open Access Plus) and cannot be applied to premiums for the Medicare Supplement Plan.

Eligibility Requirements

Who Is Eligible For Coverage Under DFW Airport's Retiree Health And Wellness Plans

Once you leave employment with DFW Airport you are eligible to participate in the Airport's retiree medical and/or vision plans, even if you do not immediately draw your pension/retirement benefits, provided you meet the eligibility requirements below.

1. You were enrolled in one of the medical and/or vision plans offered by the Airport immediately prior to your separation.
2. You are at least 55 years of age and completed at least five consecutive years of service with DFW, measured from your date of hire, at the time of your separation.
   OR
   You are eligible for an early retirement benefit as defined in the DPS Pension Plan.
3. You were not receiving any long-term disability benefits under a plan offered by the Airport at the time of your separation.

Dependents on your Airport active medical and vision plans at the time you retire are eligible for coverage under the Airport retiree medical and vision plans.

The retiree and qualified dependents must be on the same medical plan if all members are under the age of 65. If the retiree and/or spouse reaches age 65 and elects to continue coverage through DFW Airport's Medicare Supplement plan, the other covered family members may remain on the under 65 retiree medical plan in which they are currently enrolled.

If the retiree and/or spouse is eligible for Medicare because of a disability or reaching age 65, Medicare Part A and Part B will pay as the primary coverage for the Medicare eligible person. The DFW Airport plan will pay after Medicare, and there are no guarantees that all costs will be paid by the plan.

You are permitted to remove dependents from your plan during the year, but you are not allowed to add them.

Who Is An Eligible Dependent?

Spouse

Your legal spouse.

Children

Your child under the age of 26, or any age if mentally or physically incapacitated, upon DFW Airport approval.

"Child" must be one of the following:

- Natural Child
- Stepchild
- Legally adopted child
- Child placed for legal adoption
- Foster child placed with you by an authorized placement agency or court order
- Child by legal guardianship

Who Is Not An Eligible Dependent?

- Former spouse
- Domestic Partner/Domestic Partner Children
- Parents
- Grandparents
- Grandchildren (without legal guardianship)

DFW Human Resources

972-973-1124

retirees@dfwairport.com

Resources – Cigna

We understand that completing benefits enrollment may be challenging. While it's important to choose benefits that best meet your needs, it is equally important that you know how they work and how you'll use them throughout the year.

Mycigna.com

Mycigna.com is your secure member portal from Cigna that provides you immediate online access to personalized health and wellness information. Once you become a member, visit **mycigna.com** to register. You will have access to the following:

- Locate a network doctor, hospital or other health care provider.
- View, print or request additional member ID cards.
- Order and refill prescriptions.
- Check the status of a claim and your claims history.
- View and print an Explanation of Benefits statement.

Health Care Advocacy

DFW Airport's employee advocacy program is provided by ***Cigna One Guide***. Advocacy services provide peace of mind, education and issue resolution to employees and their families struggling with complicated health care questions. Call a Cigna One Guide representative at 888-806-5042. See more ways they can help you.

- Easily understand the basics of health coverage.
- Check if your doctors, dentists or hospitals are in-network.
- Get cost estimates for care or upcoming procedure.
- Resolve health care issues.

Health Information Line

Cigna's Health Information Line is personal, confidential, and available 24/7 for you to talk directly with a trained nurse professional even when your doctor's office is closed. Call the number on the back of your Cigna card to speak to a nurse.

Additional Benefits With Your Cigna Plan

Whether you've just received a diagnosis, are in active treatment, or navigating life after cancer, the ***Cancer Support Program*** is here to help. This free, confidential program offers personalized support to guide you through every stage — from diagnosis to remission and beyond.

Here's how it can help:

- 24/7 access to specialized nurses who understand what you're going through and are trained to support patients in remission.
- Ongoing outreach and guidance for those who've had cancer in the past and are still taking preventive treatments or medications.
- Tailored support plans for patients managing cancer alongside other health conditions like diabetes or chronic illnesses.

Take advantage of this valuable resource designed with your well-being in mind. Call Cigna at 800-244-6224 to get started.

Total Behavioral Health has a wealth of programs and resources to help with challenges to your mental well-being. Assistance is available to members 24/7/365. The following services are provided at no cost.

- Virtual Counseling (Veterans Support, Alma, Headspace).
- Coaching Support and Lifestyle Management Programs.
- Behavioral Awareness Series.
- Digital Tools (Happify, iPrevail).

To tap into these benefits, go to **mycigna.com** or contact Cigna at 800-244-6224.

Omada is a digital lifestyle change program designed to help you lose weight, gain energy, and reduce the risks of type 2 diabetes and heart disease. The program surrounds you with the tools and support you need to make lasting, meaningful changes to the way you eat, move, sleep, and manage stress—one small step at a time. This program is free for you and adult dependents on your medical plan who are at risk for type 2 diabetes or heart disease, and are accepted into the program. Contact Cigna at 800-244-6224 for more information.

Medical Coverage

There are four medical plan options for employees. An overview of each of the plans is included below.

- Cigna High Deductible Health Plan (HDHP)
- Cigna Health Reimbursement Account (HRA) plan
- Cigna Open Access Plus In-Network (OAPIN) plan
- Cigna Open Access Plus (OAP) plan

The ***Cigna HDHP**** is the lowest cost option for your health care coverage. It is paired with a Health Savings Account (HSA), that allows you to save money to pay for current and future out-of-pocket health care expenses tax-free. You and your dependents can receive care from any doctor, hospital or other health care provider and will pay less if you use in-network providers.

Eligibility	You cannot contribute to an HSA if you: – Are enrolled in any other plan including, Medicare (Parts A/B), TRICARE, or received VA benefits within the past 3 months. – You (or your spouse) have access to reimbursement or can contribute to a Health Care FSA.
Contributions	– The annual HSA contribution limit is $4,400 for Single and $8,750 for Family coverage for 2026. – The Airport will contribute to your account and your contributions are tax-free. Combined contributions will count toward the IRS maximums. – You can change your contributions any time throughout the year. – If you're age 55+, you can make additional catch up contributions up to $1,000 annually.
Eligible Expenses	– Medical, dental, vision expenses, and prescription drugs
Using Your Account	– It works like a bank account with a debit card. Reimbursement and usage are subject to your account balance. – Funds may be used for eligible expenses for your spouse or tax dependents even if they are not enrolled in your plan. – HSA investments may be made once your balance reaches $1,000.

HDHP Deductibles

The entire deductible must be met before the plan pays for eligible health care expenses, including non-preventive prescription drugs. **Please note:** The deductible is aggregated for family coverage and must be met by one or any combination of covered family members before the plan pays.

- **Exceptions:** In-network preventive care and certain medications classified as preventive in accordance with the approved prescription drug list will not apply to the deductible.

The ***Cigna HRA**** plan is a high deductible health plan that includes an HRA account, known as a "fund," to help pay your eligible medical and prescription costs. Each plan year, the Airport contributes to the fund based on your elected coverage level.

- » The fund automatically pays first before you begin paying towards the deductible.

The plan offers tax-free benefits as the fund doesn't count as taxable income. That means you can cover some health care costs with tax-free dollars.

The ***Cigna OAPIN**** plan is a copay-based plan that requires you to use in-network providers only — there's no need to designate a primary care doctor or get referrals, but you'll be responsible for the full cost of any out-of-network care unless it's an emergency. When you choose the Cigna Open Access Plus In-Network (OAPIN) plan, you're choosing to use in-network providers and hospitals with Cigna's Open Access Plus (OAP) network. Most office visits and services require a copayment before the plan pays for coverage without deductibles. It's an easy way to budget your health care expenses.

- » Copayments are required at time of service.
- » No Primary Care Physician or referrals are required.
- » Benefits are only payable for in-network services. You're 100% responsible for services provided outside of the network, except in the case of an emergency. An emergency is defined as a sickness or injury so severe that failure to get immediate medical attention could cause serious bodily harm or put a person's life in danger.

The ***Cigna OAP**** plan allows you and your family to receive care from any provider or hospital, and you must first pay a deductible before the plan pays. **NOTE: This plan is closing to new enrollments for the 2026 plan year. If you're currently enrolled in the OAP plan, you can stay in the plan without taking any action — re-enrollment in this plan is passive this year.**

* No claim forms are required for in-network visits. (You may be required to pay in full at the time of service for out-of-network visits and may require claim forms.) In addition, preauthorization may be required prior to certain procedures, and you could be billed for the balance not payable by the plan. Please refer to the Preauthorization section of your Summary Plan Description for full list of services.

Medical Plans Overview

Plan Feature	Cigna HDHP		Cigna HRA		Cigna OAPIN	Cigna OAP**	
	NETWORK	NON-NETWORK	NETWORK	NON-NETWORK	NETWORK	NETWORK	NON-NETWORK
DFW Contributions							
Per Individual	$800 (prorated ER contribution)		$500 (prorated ER contribution)		N/A	N/A	
Per Family	$1,600 (prorated ER contribution)		$1,000 (prorated ER contribution)		N/A	N/A	
Annual Deductible (Excludes Prescription Copayments)							
Per Individual	$1,700	$3,400	$1,500	$3,000	N/A	$600	$1,200
Per Family	$3,400	$6,800	$3,000	$6,000	N/A	$1,200	$2,400
Annual Out-of-Pocket Limit (Includes the Deductible, Copays, and Coinsurance)							
Per Individual	$3,500	$7,000	$3,500	$7,000	$2,500	$2,600	$5,200
Per Family	$7,000	$14,000	$7,000	$14,000	$5,000	$5,200	$10,400
Coinsurance/Copayments							
Preventive Care (1 exam per calendar year) Includes routine adult and routine child physical exams, lab tests, immunizations and routine cancer screenings	100% covered	40%*	100% covered	40%*	100% covered	100% covered	40%*
LW Clinic Visit	$25 copayment	N/A	100% covered	N/A	100% covered	100% covered	N/A
Office Visits	20%*	40%*	20%*	40%*	$30 copayment	20%*	40%*
Specialist Office Visits	20%*	40%*	20%*	40%*	$60 copayment	20%*	40%*
Outpatient Surgery	20%*	40%*	20%*	40%*	Office visit copayment if performed in physician's office; $200 copayment if performed in hospital or outpatient facility, then covered 100%	20%*	40%*
Hospitalization and Inpatient Surgery	20%*	40%*	20%*	40%*	$500 copayment per admission, then covered 100%	20%*	40%*
Mental Health – Inpatient – Outpatient	20%*	40%*	20%*	40%*	**Inpatient**: $500 copayment per admission, then covered 100% **Outpatient:** $30 copayment per visit	20%*	40%*
Virtual visits powered by MDLive Medical and Behavioral Mental Health	$0 copayment	N/A	$0 copayment	N/A	$0 copayment	$0 copayment	N/A
Urgent Care Facility	20%*	40%*	20%*	40%*	$75 copayment	20%*	40%*
Emergency Room	20%*	20%*	20%*	20%*	$150 copayment; waived if admitted to a hospital or outpatient facility	20%*	20%*
Ambulance	20%*	20%*	20%*	20%*	$150 copayment	20%*	20%*

* After deductible

** New enrollments are not allowed for the 2026 plan year. If you're currently enrolled in the OAP plan, you can keep your coverage for 2026 — your enrollment will automatically carry over unless you make a change.

Virtual Doctor Visits

Virtual visits powered by MDLive allow you to consult a doctor or behavioral health provider for non-emergency situations. This benefit is a convenient way to meet with a physician at little to no cost to you regardless of the plan selected. Please refer to page 10 showing the Medical Plan Overview.

Visit With a Doctor Remotely

With virtual visits, the doctor is always in. Get care from a board certified doctor 24/7. Schedule appointments at a time that works best for you.

- Get care via online video, mobile app or telephone instead of going to the emergency room or urgent care.
- Providers can send prescriptions to your local pharmacy, if medically necessary.

Doctors can treat a variety of health conditions, including:

- Allergies
- Ear problems (age 12+)
- Pink Eye
- Asthma
- Fever (age 3+)
- Rash
- Cold/flu
- Nausea
- Sinus infections
- Dermatological conditions

Behavioral Health Counseling

Speak with a licensed therapist from the privacy and comfort of your own home. MDLive's behavioral health therapy sessions are safe, private and confidential. You can choose who you want to work with for issues such as:

- Loss or relationship problems
- Post-traumatic Stress Disorder
- Substance abuse
- Panic attacks
- Anxiety
- Depression
- Trauma

How To Access MDLive

You'll need your Cigna member ID number to register. If already registered, you don't have to register again.

- **mycigna.com**
- Call MDLive 888-680-8646
- myCigna app
- Download the MDLive app from the App Store or Google Play

Health Care Options

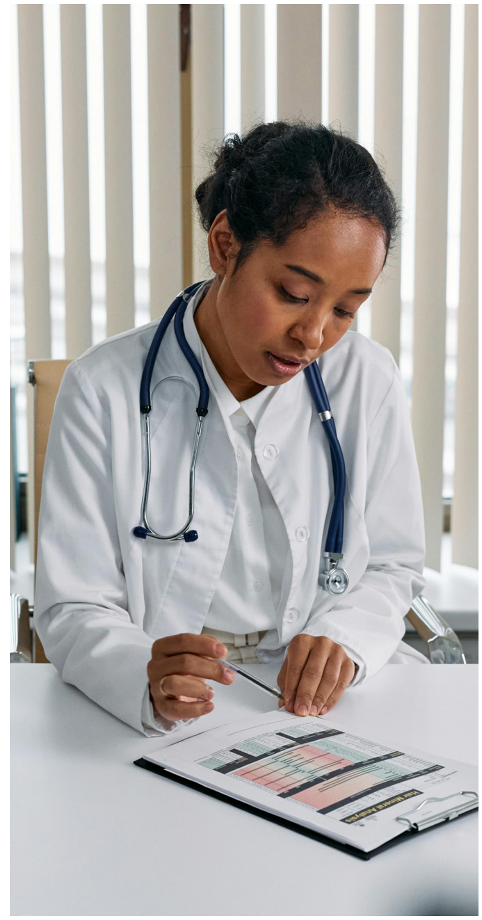
Becoming familiar with your options for medical care can save you time and money.

Health Care Provider		Symptoms	Average Cost	Average Wait
Non-Emergency Care				
Virtual Visits/ Telemedicine	Access to care via phone, online video or mobile app whether you are home, work or traveling; medications can be prescribed **24 hours a day, 7 days a week** **No cost for MDLive visits**	– Allergies – Cough/cold/flu – Rash – Stomachache	**$**	**2-5 minutes**
Doctor's Office	Generally, the best place for routine preventive care; established relationship; able to treat based on medical history **Office hours vary**	– Infections – Sore and strep throat – Vaccinations – Minor injuries, sprains and strains	**$**	**15-20 minutes with appointment**
Retail Clinic	Usually lower out-of-pocket cost than urgent care; when you can't see your doctor; located in stores and pharmacies **Hours vary based on store hours**	– Common infections – Minor injuries – Pregnancy tests – Vaccinations	**$**	**15 minutes**
Urgent Care	When you need immediate attention; walk-in basis is usually accepted **Generally includes evening, weekend and holiday hours**	– Sprains and strains – Minor broken bones – Small cuts that may require stitches – Minor burns and infections	**$$**	**15-30 minutes**
Emergency Care				
Hospital ER	Life-threatening or critical conditions; trauma treatment; multiple bills for doctor and facility **24 hours a day, 7 days a week**	– Chest pain – Difficulty breathing – Severe bleeding – Blurred or sudden loss of vision – Major broken bones	**$$$$**	**4+ hours**
Freestanding ER	Services do not include trauma care; can look similar to an urgent care center, but medical bills may be 10 times higher **24 hours a day, 7 days a week**	– Most major injuries except trauma – Severe pain	**$$$$$$**	**20-40 minutes**

Note: Examples of symptoms are not inclusive of all health issues. Wait times described are only estimates. This information is not intended as medical advice. If you have questions, please call the phone number on the back of your medical ID card.

Smart Ways to Save on Health Care

Taking the time to understand your health care options — and how to use them — can make a big difference for your wallet. Here are some simple but effective ways to keep your costs down without sacrificing the care you need.



1 Stay In-Network

Providers who are part of your plan's network have agreed to discounted rates. When you see an in-network doctor, specialist, or facility, you'll pay less than if you go out-of-network. Even for something as small as a lab test or imaging, in-network savings can add up quickly. Before scheduling care, double-check that both the provider and the facility are in-network.

2 Get Your Preventive Exams

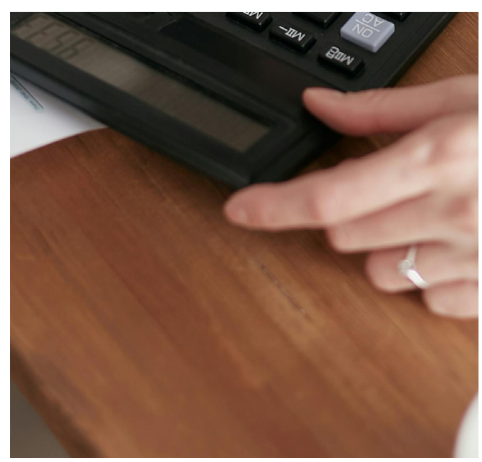
Our medical plans cover preventive care — like annual physicals, screenings, and immunizations — at no cost to you. These visits help catch health issues early, when they're easier and less expensive to treat. Make sure you schedule your preventive exam each year and take advantage of any other screenings you qualify for.

3 Understand Your Plan and Costs

Each type of health plan works a little differently. Some have higher premiums but lower costs when you get care, while others have lower premiums but higher costs at the doctor's office. Understanding your plan's deductible, copays, and coinsurance helps you avoid surprises. If you're choosing between plans, think about how often you typically use health care and what you value most — lower monthly premiums or lower costs at the point of care.

4 Use an HSA with the Cigna HDHP Medical Plan

If you enroll in the HDHP, you can use an HSA to pay for qualified medical expenses. Contributions are made with after-tax dollars, but the money in your HSA still grows tax-free and can be withdrawn tax-free when used for eligible health care costs. Any unused funds stay in your account year after year, giving you a way to manage ongoing and future medical expenses. You can continue using your HSA in retirement to help cover ongoing health care costs.



5 Ask About Generic Medications and Mail Order

Generic prescriptions contain the same active ingredients as brand-name drugs, but they typically cost much less. If your provider prescribes a brand-name medication, ask if there's a generic option. For maintenance medications you take regularly, consider using your plan's mail-order service — it's often more convenient and less expensive than picking up refills at the pharmacy.

Prescription Coverage

Prescription drug coverage is included with all four DFW Airport medical plans. This benefit is administered by Cigna and its pharmacy vendor, Express Scripts.

Prescription Drugs – Mandatory Generic*	You Pay
Retail Rx (up to 30-day supply)	
Tier 1 Generic Drugs	$5 copayment
Tier 2 Brand-name drugs (on the Preferred Drug List)	$30 copayment
Tier 3 Brand-name drugs (not on the Preferred Drug List)	$60 copayment
Tier 4 Specialty retail drugs (injection, infused or oral)	$100 copayment (30-day supply)
Mail Order Rx (31 to 90-day supply)	
Tier 1 Generic Drugs	$10 copayment
Tier 2 Brand-name drugs (on the Preferred Drug List)	$60 copayment
Tier 3 Brand-name drugs (not on the Preferred Drug List)	$120 copayment
Tier 4 Specialty mail order drugs (injection, infused or oral)	$100 copayment (30-day supply)

* DFW's plan is a mandatory generic plan. If you choose a brand-name drug when a generic is available, you will pay the difference in cost between the generic and brand-name drug plus the applicable brand copayment.

If you enroll in the HDHP, you pay the full negotiated rate for prescription drug costs then the copay after your deductible has been met. Preventive drug costs may be $0 cost to you. See the Prescription Drug Lists on **myCigna.com** for more information.

Prescription Drug Terms to Know

Maintenance Medications: Prescribed for chronic, long-term conditions and are taken on a regular, recurring basis.

Generic Medications: FDA-approved equivalent drugs that are effectively the same as a brand-name drug.

Preferred Drug List: This list will help you determine the tier and the corresponding copayment for any medications you take.

Preventive Medication List: This list includes the most commonly prescribed generic and preferred brand medications that are part of Cigna's preventive program.

Where Should I Fill My Prescription?

Retail Pharmacy: Use this benefit to purchase short-term, 30-day or up to 90-day maintenance medications at a Cigna preferred pharmacy. Go to **mycigna.com** to locate a Cigna preferred pharmacy.

Mail-Order: Use this benefit for maintenance medications that will continue for at least three months at a time. Medications are delivered to your home in three-month quantities which may save you time and money. Mail-order benefits are through Express Scripts Pharmacy. Go to **mycigna.com** or the myCigna app to access mail order benefits.

Specialty Pharmacy: Specialty medications are required for some complex conditions. These drugs may be injected, infused or taken orally and typically require storage under special conditions or refrigeration. These types of prescriptions may be filled through Accredo. Go to **mycigna.com**, **accredo.com** or call 877-826-7657.

Prescription Drug Programs

Preventive Medication Program: Medications covered in this program are used to treat chronic health conditions such as asthma, diabetes, high blood pressure, depression, anxiety, and high cholesterol and are available to members at a $0 copayment.

Prior Authorization Program: This program will require your doctor to submit a prior authorization request for coverage of certain medications.

Step Therapy Program: This program will require you to try a proven, cost-effective medication before "stepping-up" to a more costly treatment. Many drugs have less-expensive generic or brand alternatives that may be options for you.

To find out if your drug requires prior authorization or step therapy, check the Preferred Drug List or you can call the number on the back of your ID card.

Use Cigna's "Price a Medication" tool on **mycigna.com** or the myCigna app to see what drugs are covered and under which tier.

Vision Coverage

EyeMed is one of the nation's largest vision benefits companies that offers its members thousands of eye care providers nationwide. Visit **eyemed.com** to learn more about your vision plan and find a provider near you.

Benefits Through EyeMed
The Eye360 program through EyeMed offers $0 copays for eye exams and a $150 frame allowance. You will receive an additional $50 frame allowance when you use PLUS Providers. EyeMed has over 4,000 PLUS Providers nationwide, including independent, retail and online options.
EyeMed includes the Insight network. This is a diverse network of provider options with a mix of independent providers, plus popular national and regional providers like Oakley, LensCrafters, Pearle Vision, Target Optical, and Walmart, to name a few.
Your vision plan gives you the option to purchase glasses and contacts in the same year with one exception. You can use your full frame and contact allowances towards those purchases, but the lens copay does not apply. You will receive 20% off the total price of your lenses. You will also receive 40% off all additional purchases throughout the year.
The convenient online shopping tool allows you to choose from hundreds of brand-name frames and contacts from participating providers. Simply shop for the products you want, instantly apply your in-network benefits at checkout, and enjoy free shipping and returns on every purchase. EyeMed's online providers include LensCrafters, Target Optical, **glasses.com**, ContactsDirect or Ray-Ban.

Know Before You Go

With EyeMed's Know Before You Go out-of-pocket cost estimator, you can accurately estimate what you might pay before you even step foot into a store or doctor's office. The tool includes simple, clear definitions of common products and add-ons, all while calculating a range of costs with each click, so you can feel confident from check-in to check-out.

- 20% off any item not covered by the plan, including non-prescription sunglasses.
- EyeMed services members in 47 countries, so you can use their network during international travel in case of emergency to receive replacement lenses as quickly as possible.

Additional Savings:

LASIK surgery is discounted at 15% off the retail price, or 5% off a promotional price. Call 800-988-4221 for more information.

EyeMed also offers hearing care through the Amplifon Hearing Health Care network. Members receive up to 64% off hearing aids, a 3-year warranty including coverage for repairs, loss, or damages, and 2 years of free batteries shipped directly to your home. Call 877-203-0675 to find a hearing care provider near you and schedule a hearing exam.

Vision Overview

Vision care benefits are provided by EyeMed. To see a full list of copayments visit **www.eyemed.com**. You do not need to be enrolled in a DFW Airport medical plan to have vision coverage.

Vision Care Services		
	In-Network Member Cost	**Out-of-Network Member Reimbursement**
Exam Services		
Exam at PLUS Providers	$0 copay	Up to $40
Exam	$0 copay	Up to $40
Frame		
Any available frame at PLUS Providers	$0 copay; 20% off balance over $200 allowance	Up to $105
Frame	$0 copay; 20% off balance over $150 allowance	Up to $105
Contact Lenses		
Contacts - Conventional	$0 copay; 15% off balance over $150 allowance*	Up to $105
Contacts - Disposable	$0 copay; 100% of balance over $150 allowance*	Up to $105
Contacts - Medically Necessary	$0 copay; paid-in-full	Up to $300
Standard Plastic Lenses		
Single Vision	$10 copay	Up to $30
Bifocal	$10 copay	Up to $50
Trifocal	$10 copay	Up to $70
Lenticular	$10 copay	Up to $70
Progressive - Standard–Tier 4	$65/$95/$105/$120/$185 copay	Up to $50
Lens Options		
Anti-Reflective Coating - Standard–Tier 3	$45/$57/$68/$85 copay	Up to $23

Medicare Supplement Plan

Retirees 65 years of age and older are allowed by law to supplement their government-provided Medicare plan with additional coverage. DFW Airport offers a supplemental plan for retirees and all current retirees may continue their coverage in this plan. Retirees who were originally hired before Jan.1, 2012, are eligible to participate in the Medicare Supplement plan. The plan is not available to retirees who were originally hired as employees after Dec. 31, 2011.

Medicare Part C

Medicare Advantage Plan does not integrate with the DFW Medicare Supplement Plan.

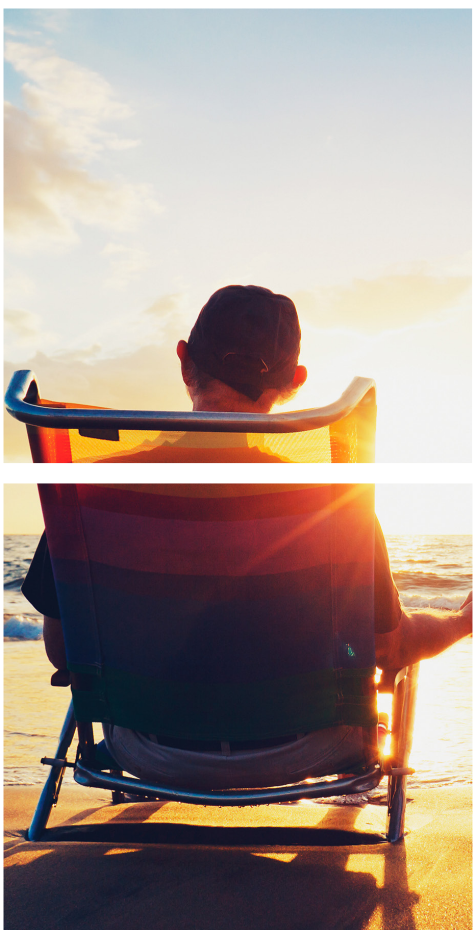
The plan provides medical coverage through the Cigna Post 65 Open Access Plan. Prescription drug coverage must be obtained through Medicare Part D or through a private insurance company.

Medicare Part A and Part B are primary and the DFW Airport plan coverage is secondary. Claims are filed with Medicare first. Remaining unpaid costs are submitted to Cigna. There is no guarantee that all costs will be paid by the plan.

Only you and your covered spouse are eligible to participate in the Medicare Supplement plan. Medical subsidy credits do not apply to the Medicare Supplement plan.

If the retiree or covered spouse elects to continue with DFW Airport's Medicare Supplement plan upon reaching 65 years of age, the other covered family members may remain in the plan in which they are currently enrolled. Medicare will pay claims as primary on the first day of the retiree's or covered spouse's 65th birth month.

In order to continue coverage for your dependents when you reach age 65, you must be enrolled in the Medicare Supplement plan. If you decline to participate in the Medicare Supplement plan, you may not enroll at a later time.



Medical Coverage for Retirees Age 65 and Older

Plan Feature	Preferred	Non-Preferred
	NETWORK	NON-NETWORK
	You Pay	You Pay
Annual Deductible Per Individual	$500	$1,000
Coinsurance*	20%	40%
Annual Out-of-Pocket Limit Per individual (includes annual deductible and coinsurance)	$1,500	$2,700
Preventive Care (one exam per calendar year) Includes routine adult physical exam, lab tests, immunizations, and routine cancer screenings	100% covered; deductible waived	40%*
Outpatient Surgery*	20%	40%
Hospitalization and Inpatient Surgery*	20%	40%
Mental Health* Inpatient/Outpatient	20%/20%	40%/40%
Urgent Care Facility*	20%	40%
Emergency Room and Ambulance*	20%	20%

* After annual deductible

Preauthorization is required for some services. Please refer to the Preauthorization Requirements section of your Summary Plan Description to see a list of services that require a preauthorization. If you have questions, please call the Cigna customer service number listed on the back of your ID card.

DFW LiveWell

Wellness Program

DFW Airport cares about the health and well-being of all retirees and their families. That's why DFW continues to invest in LiveWell, our award-winning health and wellness programs. The program is your gateway to a host of resources and activities to help you and your family embrace a healthy lifestyle and make informed decisions about your and your family's total well-being.

LiveWell Center

The LiveWell Center provides the use of its facilities and equipment to all retirees, and dependents over age 18, at no cost. Access to the building has been upgraded for more security. Contact LiveWell to enter the building, to set an appointment, to receive an orientation and complete a waiver.

LiveWell Clinic

The LiveWell Health Clinic is available at no cost* and provides a convenient on-site opportunity for retirees** to receive a wide range of medical services, including preventive annual physicals, urgent care services for such issues as allergies and colds, immunizations (e.g., flu) and health coaching for hypertension and diabetes, among other services.

* If you enroll in the HDHP medical plan, you may be responsible for the cost of some services at the LiveWell Clinic.

** Retirees must be under age 65 and enrolled in a DFW retiree medical plan.

LIVEWELL CENTER

972-973-1612
LiveWell@dfwairport.com

LIVEWELL CLINIC

972-973-1621
LWHealthClinic@dfwairport.com

Facility Hours: Mon. - Thurs.: 6 a.m. to 7 p.m.; Fri.: 6 a.m. to 6 p.m.

Clinic Hours: Mon./Tues.: 8 a.m. to 5 p.m.; Wed. - Fri.: 6:15 a.m. to 3:15 p.m.

Medical Rates

	Monthly Premium
Cigna HDHP	
EE Only	$918.25
EE + Children	$1,926.15
EE + Spouse	$2,291.11
EE + Family	$3,311.26
Cigna HRA	
EE Only	$1,020.31
EE + Children	$2,140.25
EE + Spouse	$2,545.78
EE + Family	$3,679.31
Cigna OAPIN	
EE Only	$1,231.61
EE + Children	$2,586.70
EE + Spouse	$3,096.34
EE + Family	$4,438.03
Cigna OAP	
EE Only	$1,857.44
EE + Children	$3,788.42
EE + Spouse	$4,570.29
EE + Family	$6,524.44

Vision Rates

EyeMed	
	Monthly Premium
Retiree Only	$6.18
Retiree + Retiree Children	$13.00
Retiree + Retiree Spouse	$12.35
Retiree + Spouse + Retiree Children	$18.09

Medicare Supplement

Medicare Supplement – Age 65 And Over*	
MEDICAL COVERAGE ONLY	MONTHLY PREMIUM
Retiree Only	$315.00
Spouse Only	$315.00
Retiree + Spouse	$630.00

*Retiree medical subsidy no longer applies under this plan.

Notes

Important Contacts

Benefit	Carrier	Phone Number	Email/Web
Medical/Pharmacy	Cigna* Group #3339042 Medical/Pharmacy	800-244-6224	**cigna.com** or **mycigna.com**
	Mail Order Pharmacy – Express Scripts Pharmacy	800-835-3784	**mycigna.com** or **cigna.com/homedelivery**
	Specialty Pharmacy – Accredo	877-826-7657	**mycigna.com** or **accredo.com**
Virtual Doctor Visits	MDLive*	888-680-8646	**mycigna.com** or myCigna app
Health Care Advocacy	Cigna One Guide	888-806-5042	**mycigna.com** or myCigna app
Vision	EyeMed*	844-409-3401	**eyemed.com**
Medicare		800-MEDICARE	**medicare.gov**
Premium Payment	Cushion Employer Services	866-218-0614	**Cushionbenefitsportal.com**
DFW Human Resources	Total Rewards	972-973-1124	**retirees@dfwairport.com**
DFW LiveWell Program	LiveWell Program	972-973-1612	**LiveWell@dfwairport.com**
	LiveWell Health Clinic	972-973-1621	**LWHealthClinic@dfwairport.com**

* Mobile app available for this provider.

This benefits guide is intended to provide an overview only of certain benefits offered to eligible retirees by DFW Airport. Complete details about how the plans work are included in the policies, summaries of benefit coverage, summary plan descriptions, and plan documents, which are available by request. If there is any discrepancy or conflict between the plan documents and the information presented in this booklet, the plan documents will govern. DFW Airport reserves the right to change or discontinue the plans at anytime. Participation in the plans does not constitute an offer of employment, reemployment, or an employment contract.