

Atlas Air, Inc.

OPEN ACCESS PLUS IN-NETWORK
MEDICAL BENEFITS

Atlas Ground

EFFECTIVE DATE: January 1, 2017

ASO113
3212280

This document printed in December, 2016 takes the place of any documents previously issued to you which described your benefits.

Printed in U.S.A.

Table of Contents

Important Information	5
Special Plan Provisions.....	7
Important Notices	8
Important Information	8
How To File Your Claim	9
Eligibility - Effective Date	9
Employee Insurance	9
Waiting Period.....	9
Dependent Insurance	10
Important Information About Your Medical Plan.....	10
Open Access Plus In-Network Medical Benefits	11
The Schedule	11
Prior Authorization/Pre-Authorized	22
Covered Expenses	22
Prescription Drug Benefits.....	31
The Schedule	31
Covered Expenses	34
Limitations.....	35
Your Payments	36
Exclusions	36
Reimbursement/Filing a Claim.....	37
Exclusions, Expenses Not Covered and General Limitations.....	37
Coordination of Benefits.....	40
Expenses For Which A Third Party May Be Responsible	42
Payment of Benefits	44
Termination of Insurance.....	44
Employees	44
Dependents	44
Rescissions	45
Federal Requirements	45
Notice of Provider Directory/Networks.....	45
Qualified Medical Child Support Order (QMCSO)	45
Special Enrollment Rights Under the Health Insurance Portability & Accountability Act (HIPAA)	46
Effect of Section 125 Tax Regulations on This Plan.....	47
Eligibility for Coverage for Adopted Children.....	48
Coverage for Maternity Hospital Stay	48
Women's Health and Cancer Rights Act (WHCRA)	48
Group Plan Coverage Instead of Medicaid.....	48