

**MY CHOICES
MY BENEFIT**

**2009 DELTA BENEFITS GUIDE
FOR ACTIVE, INACTIVE, COBRA AND
CERTAIN RETIREE AND SURVIVOR
PARTICIPANTS**

October 2008

Take Great Care Of You & Your Family

 **DELTA**

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Introduction

Delta is committed to offering benefit programs that meet your needs and deliver value so that you can take great care of you and your family. You may participate in a wide array of benefits designed to improve your health, balance your life at work and at home, and plan for your financial future.

This guide summarizes the many valuable benefits, programs and services available to you as a Delta employee, and also provides important information about Annual Open Enrollment and 2009 benefit plan changes. Remember to keep this guide as a reference document so it is available throughout the year any time you want general information about your benefits.

This guide is not a summary plan description (SPD) and is not intended to provide full details of the plans and benefits described. Complete details can be found in the plan documents, policies or HRPM, which govern in all cases.

Who This Guide Is For

This guide is for active and inactive flight attendants, ground employees, pilots, individuals eligible for standard COBRA coverage, and any employees who retired on or after February 1, 2008. It also is for pilots who were on the seniority list on June 1, 2006, but have since been removed from the seniority list, for reasons such as retirement or reaching age 60.

Please note that each of the benefits described in this guide may not apply to all groups. For example, COBRA participants, inactive employees and retirees are not eligible to enroll in the disability benefits described in this guide.

Benefit Plan Details Are Available Online

This guide outlines Delta's benefit programs at a high level, as well as changes to expect in 2009.

For detailed SPDs of Delta's healthcare and disability benefits, refer to Delta's *Healthcare Benefit Handbook* and *Disability Benefit Handbook*. For more information on optional voluntary insurance coverage, refer to the optional life insurance, private pilots and group accident insurance brochures.

Note that the healthcare benefits SPD is effective as of January 1, 2008, so the 2009 changes detailed in this guide may not be outlined in that document. You can access Delta's SPDs and group insurance brochures on the [My Health & Insurance site](#) and the [Absence from Work site](#) located on Employee Connection.

BENEFIT ENROLLMENT PERIODS FOR ACTIVE AND INACTIVE EMPLOYEES AND COBRA PARTICIPANTS

The 2009 annual open enrollment period for active and inactive employees is October 22 – November 12, 2008. (COBRA participants' annual open enrollment period is November 3 – 28, 2008. Retirees and survivors should refer to page 4 of this guide for annual open enrollment dates.)

During this time, you can make your benefit elections online via Benefits Direct. You may make changes to your elections until midnight Eastern time on November 12, 2008 (or November 28 for COBRA participants).

Your elections will take effect January 1, 2009, and will continue for the entire year.

Changing Your Elections During the Year

Once your enrollment period ends, your healthcare and voluntary insurance benefit elections cannot be changed unless you experience a qualified life event, such as marriage, divorce or the birth of a child.

If you decide to waive coverage for yourself or your dependents because you have opted for health insurance coverage elsewhere and that coverage later ends for certain reasons, you may be able to enroll yourself or your dependents in Delta's healthcare plan during the year as long as your request for enrollment is within 30 days after your other coverage ends. In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll yourself or your dependents, provided your request for enrollment is within 30 days after the marriage, birth, adoption or placement for adoption.

Changing Stations? You May Be Eligible to Change Disability Coverage

While you can only enroll for optional disability benefits once a year during annual open enrollment, your disability coverage can change mid-year if your work location changes to a station based in a state that does not have a mandatory state disability plan. If this occurs, you will be eligible to enroll in optional disability benefits without having to provide Evidence of Insurability to demonstrate proof of good health. Alternatively, you may drop Delta's optional disability coverage if you move to a station based in a state that has a mandatory state disability plan.

If a change in work stations will result in you gaining or losing coverage in a mandatory state disability plan, you will be mailed an ongoing enrollment notification, and you can enroll via the Delta Extranet or the DeltaNet home page: <http://dlnet.delta.com>. (See the "How to Enroll" section of this guide for step-by-step details.)

If, during this enrollment opportunity, you elect or drop optional disability coverage, that disability coverage becomes effective or ends during the pay period on or following the effective date of your change in work stations.

New Hires and Employees Returning From a Leave of Absence After January 1, 2009

An Enrollment Notification will be mailed to your home address informing you of your enrollment deadline and guiding you to Benefits Direct, where you can view benefit options and make your elections.

After you enroll for benefits, your benefit elections become effective:

- *For new hires:* Generally, the first day of the pay period following 30 days of employment, unless your employment with Delta is terminated before then
- *For employees returning from a leave of absence:* The first day of the pay period following your enrollment deadline

You may not change your elections during the year unless you experience a qualified life event change.

Enrolling in 2009 Benefits After January 1?

Watch for an Enrollment Notification mailed to your home address. This notification informs you of your enrollment deadline and guides you to Benefits Direct, where you can view benefit options and make your elections.

If You Work in Massachusetts

If you are an active or inactive employee based in Massachusetts, and you decline medical coverage under the Delta Account-Based Healthcare Plan (DABHP) or the Delta Pilots Medical Plan (DPMP) at any time (during Annual Open Enrollment, as a new hire, or if you, for any reason, qualify for a mid-year change), Massachusetts state law requires you to complete and return a state Health Insurance Responsibility Disclosure (HIRD) form.

During Annual Open Enrollment, if you elect the "No Coverage" Option, Delta's Employee Service Center (ESC) will send you a Confirmation Statement and the HIRD form. Complete the form and return it to the ESC, where it will be kept on file as required. Be sure to keep a copy of the HIRD form for your records.

2009 OPEN ENROLLMENT FOR DABHP-ELIGIBLE RETIREES AND SURVIVORS

The 2009 annual open enrollment period for retirees and survivors is October 29 to November 19, 2008.

During this time, you may make your benefit elections online via Benefits Direct. You may change your benefit elections up until midnight Eastern time on November 19, 2008.

Your elections take effect January 1, 2009, and continue for the entire year.

2009 Healthcare Options and Eligibility

Delta's 2009 healthcare options for retirees and survivors described in this guide include the Delta Account-Based Healthcare Plan's (DABHP) Gold HRA Medical Option, Silver HRA Medical Option and Gold Out-of-Area HRA Medical Option, as well as the Ruby HSA Medical Option and the Diamond HSA Medical Option; the Delta Pilots Medical Plan (DPMP) if you are a pilot retiree or survivor; and an HMO (if you are an eligible resident of Hawaii or Puerto Rico). You also may choose not to enroll in a healthcare plan by selecting the "No Coverage" option. Eligibility for these Delta benefits varies based on many factors, including age and flight attendant & ground employee/pilot status.

- **Under Age 65:** Medical and dental benefits under the DABHP are available to you and/or your eligible dependents under age 65. If you are a pilot retiree or survivor, you also have the option of coverage under the DPMP. Other benefits include vision and voluntary insurance coverage
- **Age 65 or Older:** You and/or your eligible dependents age 65 or older are not eligible to enroll in the DABHP medical or dental coverage, or in Delta vision coverage.* Instead, if you are eligible, you may enroll for:
 - The Delta Pilots Medical Plan (DPMP) out-of-area option (*pilot retirees and survivors only*)
 - The voluntary insurance coverage described in this guide (*retirees only*)
- **COBRA participants:** The COBRA open enrollment period is November 3 – 28, 2008. COBRA participants may be eligible for either the DABHP or the DPMP, as noted in the 2009 COBRA Open Enrollment material they receive by mail from Ceridian, the COBRA administrator. If you are a COBRA participant and waive COBRA coverage during this enrollment period, your COBRA coverage cannot be reinstated in the future

* A retiree/survivor or spouse age 65 or older is not eligible for the DABHP. However, age 65 and older retirees, survivors and spouses are eligible for the **Delta Air Lines Retiree Committee's Medical Plan for Delta Retirees (DALRC Medical Plan)**. The DALRC Medical Plan is established and controlled by the DALRC, not by Delta Air Lines. This plan offers medical/prescription drug, dental and vision coverage. The DALRC Medical Plan election and enrollment process are separate and independent from coverage and enrollment available through Delta. Marsh & McLennan Company (Marsh) is the administrator of the DALRC Medical Plan. If you wish to enroll in those plans, you must follow the enrollment instructions provided in the DALRC enrollment package or contact Marsh directly at **877-DALRC65**. The Delta Employee Service Center (ESC) cannot enroll you in the DALRC Medical Plan or answer questions regarding the DALRC plan coverages. For details about the DALRC Medical Plan, refer to the materials that will be mailed to your home from the DALRC.

Changing Your Elections During the Year

After your enrollment period ends, you may elect to decrease or drop your voluntary insurance coverage at any time during the year by contacting the Delta Employee Service Center (ESC) at **1-800 MY DELTA (1-800-693-3582)**.

After your enrollment period ends, you may not make changes to your healthcare benefit elections unless you experience a qualified life event, such as marriage, divorce or the birth of a child. However, if you do not enroll yourself or your dependents during this enrollment period because of other healthcare coverage, you may be able to enroll yourself or your dependents in Delta's healthcare plan during the year provided your request for enrollment is within 30 days after your other coverage ends. In addition, if you have a new dependent as a result of marriage, birth, adoption or placement for adoption, you may be able to enroll your new dependent, provided that you are already covered under Delta's healthcare benefits, and you request enrollment within 30 days after the marriage, birth, adoption or placement for adoption.

Changing Your Elections Online

On Benefits Direct, click on the "Change Coverage" link to learn about or report a qualified life event change. If you are eligible, you can make benefit elections according to plan rules.

You may be asked to provide documentation confirming your dependents' eligibility for any events that you report online via Benefits Direct. Therefore, you should maintain all documentation as detailed on Benefits Direct. If you are unable to provide requested documentation, your life event change may be retroactively terminated, and you may be liable for claim costs paid by the Plans for the ineligible family members.

Step 1: Go to <http://dlnet.delta.com>; the Delta Extranet home page will be displayed

Step 2: Enter your 9-digit employee number (Username), along with your Delta Passport password to get to the DeltaNet home page

Step 3: Once on the DeltaNet home page, click the link for Employee Connection at the top of the page

Step 4: Locate "Manage My..." (in the left navigation area), then click on "Insurance, Disability & Retirement Benefits" on Benefits Direct. This site allows you to review your current coverage and dependents, and make your elections

It is your responsibility to maintain complete and accurate dependent data with Delta. Your failure to do so may result in the denial of eligibility and repayment of claims costs.

This online site/functionality described above is available to active and inactive employees as well as to retirees and survivors. International employees should contact the ESC by dialing **404-677-8000**.

YOUR 2009 BENEFITS: WHAT'S NEW

Delta's 2009 Benefit Enrollment Is Going Green

Delta is emphasizing "Green initiatives" in support of company-wide conservation efforts. These initiatives include eliminating paper — such as a printed version of your enrollment materials — and streamlining processes, such as Annual Open Enrollment. This means that you will enroll online for your 2009 Delta benefits.

Because you will enroll online, you need a Delta Passport password to access the system. (If you don't know your Passport password, go to <http://register.delta.com>.) Once you have set up your Delta Passport password, Delta encourages you to visit Employee Self-Service (ESS) to update your contact information and enter your e-mail address. (Do this by selecting the "Permanent Address" and "Other Information" link on Employee Self-Service.) Providing Delta with your e-mail address helps decrease paper waste and gets company communications to you faster.

By communicating with you electronically, the Delta family is doing our part to keep excess paper out of community landfills while giving you quicker, easier and real-time access to your benefit information. These paperless processes should save Delta approximately \$200,000 to \$300,000 per year — a cost savings that helps strengthen the company's ability to provide you with these benefits.

Medical

In 2008, Delta introduced a different approach to healthcare. Delta's account-based healthcare plan options have proven to be successful with Delta participants.

In fact, many HRA Medical Option participants have found their Delta-provided HRA account to be more than they needed for the entire year! During the first half of 2008, nearly 60% of participants used less than half of their health reimbursement account (HRA) balances. As you may know, unused HRA balances roll over from year to year, increasing your beginning balance for subsequent years. These great results indicate that Delta's covered participants are becoming engaged healthcare consumers who are learning the value of various medical services.

As you review the important plan changes outlined here, carefully consider which option best suits your needs. By choosing the right coverage for 2009 and ensuring that you make informed healthcare choices, you might save money. You also will be doing your part to keep the medical plan's costs down — and that benefits us all.

Delta Account-Based Healthcare Plan (DABHP)

Because of the successes described above, Delta is pleased to report that, for the fourth year in a row, active employees will not have a medical premium increase.

Changes have been made to both the HRA Medical Options and the HSA Medical Options. Read on for details.

What's New for 2009 HRA Medical Option Coverage

- If you live outside the UHC network, you will not only be offered the Gold Out-of-Area (OOA) HRA Medical Option during the enrollment period, but you also will have the choice to enroll in a network option (Gold HRA Medical Option, Silver HRA Medical Option, Diamond HSA Medical Option or Ruby HSA Medical Option). For details of the network healthcare coverage options, refer to the *Healthcare Benefit Handbook* available online at Benefits Direct. Also, verify that you have adequate access to network providers by visiting www.myuhc.com and selecting "Find A Doctor"
- *Non-network* preventive care services are no longer covered for participants in the Gold HRA Medical Option, Silver HRA Medical Option or Diamond HSA Medical Option. Preventive services received from a network provider continue to be covered at 100%
- Network hospice care (both inpatient and outpatient) is covered at 100% after the deductible has been met. Hospice care received from a non-network provider is covered at the non-network level
- The plan now covers eligible healthcare expenses incurred to treat and care for your enrolled dependent child's pregnancy

What's New for 2009 HRA Medical Option Pharmacy Coverage

- The pharmacy benefit now has a generic substitution program (referred to as "member-pays-the-difference") that requires medications to be dispensed as generic drugs rather than brand name drugs to be covered by the DABHP. If a therapeutically equivalent generic drug exists, it will be dispensed by your pharmacist according to state law and your physician's approval. If you choose to receive a brand-name drug when a generic is available, you will be required to pay the generic copay/coinsurance *plus* the difference in the cost of the two drugs. The "member-pays-the-difference" amount is not counted toward your out-of-pocket pharmacy maximum. Once you reach your pharmacy maximum, you are no longer required to pay the difference because all prescription drug amounts are covered by the Plan
- Some medications will be limited by quantity per prescription, but you may fill more than one prescription per month
- Specialty medications to treat certain chronic illness are only covered by the Specialty Pharmacy Program. Beginning April 1, 2009, the cost of injectable specialty medications will no longer be covered by the retail or mail order programs. A 90-day grace period (January 1, 2009 – March 31, 2009) gives you time to transfer your prescriptions into the program

The mandatory Specialty Pharmacy Program is designed to better manage the cost and quality of services available to users of these high-cost medications. If you currently use a specialty medication, UHC will notify you directly at the beginning of 2009 with details regarding this program

- All brand-name hypnotics (also known as sleeping medications) are now Tier 4 drugs. Generic hypnotics remain Tier 1 drugs
- Nexium[®] is no longer a covered drug. Alternative medications in this same category (proton pump inhibitors) include Prilosec OTC and omeprazole

What's New for 2009 HSA Medical Option Coverage

- For 2009, you have two HSA Medical Option choices:

– Diamond HSA Medical Option

This is the 2009 version of the current HSA Medical Option. Only the name has changed from 2008; costs and covered services have not changed. The deductible for 2009 becomes an individual deductible, meaning that one family member is no longer required to meet the overall family deductible

Ruby HSA Medical Option

The Ruby HSA Medical Option features a lower employee premium and higher out-of-pocket costs while providing the same covered services as the 2008 HSA Medical Option (now known as the Diamond HSA Medical Option). Due to its lower monthly cost, the Ruby HSA Medical Option may be an attractive choice for under-65 retirees.

The following chart shows the differences between the two HSA Medical Options. You can compare them to decide which one works better for you. The contributions on the chart below are for active employees. The retiree rates for these options can be found on the [My Health & Insurance site](#) located on Employee Connection.

2009 HSA Medical Options at a Glance			
Benefit Coverage Levels	Diamond HSA Medical Option		Ruby HSA Medical Option
	Network	Non-Network	
Annual Deductible			
Employee	\$2,300	\$4,600	\$2,400
Employee & Spouse <i>(Individual/Family)</i>	\$2,300/\$3,500	\$4,600/\$7,000	\$2,400/\$3,600
Employee & Child(ren) <i>(Individual/Family)</i>	\$2,300/\$3,500	\$4,600/\$7,000	\$2,400/\$3,600
Family <i>(Individual/Family)</i>	\$2,300/\$4,500	\$4,600/\$9,000	\$2,400/\$4,800
Annual Coinsurance Maximum <i>(includes deductible)</i>			
Employee	Maximum out-of-pocket is the deductible that must be met	\$9,200	\$5,700
Employee & Spouse		\$14,000	\$8,600
Employee & Child(ren)		\$14,000	\$8,600
Family		\$18,000	\$11,400
Coinsurance			
The percentage of costs the plan will pay after the deductible is met	100% after deductible	60% of 140% of the Medicare reimbursement rate* after deductible	70% covered after deductible R&C** applies for services provided by non-UHC participating providers

* The Medicare reimbursement rate is the fee Medicare sets as reasonable for a covered medical service. This is the amount a doctor or supplier is paid by Medicare. It may be less than the actual amount charged by the doctor or supplier. Expenses for services charged by a doctor or supplier over and above 140% of the Medicare reimbursement rates do not apply to an individual's deductible or coinsurance maximum and are not paid by the Plan. These charges can result in much higher costs than anticipated.

** Reasonable and customary. Expenses for services charged by a doctor or supplier over and above R&C do not apply to an individual's deductible or coinsurance maximum and are not paid by the Plan. These charges can result in much higher costs than anticipated.

2009 HSA Medical Options at a Glance			
Benefit Coverage Levels	Diamond HSA Medical Option		Ruby HSA Medical Option
	Network	Non-Network	
Preventive Care			
Received in line with U.S. Preventive Services Task Force Guidelines	100% covered; not subject to the deductible	No non-network coverage	100% covered; not subject to the deductible R&C** applies for services provided by non-UHC participating providers
Annual Pharmacy Maximum			
Pharmacy benefits are paid as part of the Delta medical benefit	Not applicable		
Pharmacy			
Retail (31-day) and mail order (90-day) prescriptions	Employee pays entire cost up to deductible; covered 100% after deductible is met	Employee pays entire cost, discounted at UHC network pharmacies, up to deductible; covered 60% after deductible is met	Employee pays entire cost, discounted at UHC network pharmacies, up to deductible; covered 70% after deductible is met
Active Employee Contribution (monthly premium)			
Employee	\$41		\$26
Employee & Spouse	\$88		\$55
Employee & Child(ren)	\$69		\$43
Family	\$115		\$71
Lifetime Maximum Benefit			
	\$5,000,000		

- The 2009 deductible for both the Diamond HSA Medical Option and the Ruby HSA Medical Option are individual deductibles rather than family deductibles. This means that, if you enroll in employee & spouse, employee & child(ren) or family coverage, one family member is no longer required to meet the overall family deductible

This is how you meet the 2009 HSA Medical Option deductible:

- For Diamond HSA Medical Option participants receiving network care, once an enrolled family member meets his or her individual network deductible of \$2,300, the plan begins to pay his or her eligible expenses at 100%, and continues paying at that level for the remainder of 2009. Then, deductible-eligible expenses paid by any combination of the other family members will accumulate to meet the combined family deductible
- For Diamond HSA Medical Option participants receiving non-network care, once an enrolled family member meets his or her individual non-network deductible of \$4,600, the plan begins to pay his or her eligible expenses at 60% of 140% of the Medicare reimbursement rate*. When this person's 2009 eligible out-of-pocket expenses reach \$9,200 (including his or her individual non-network deductible), the plan begins to pay his or her eligible expenses at 100% of the

* The Medicare reimbursement rate is the fee Medicare sets as reasonable for a covered medical service. This is the amount a doctor or supplier is paid by Medicare. It may be less than the actual amount charged by the doctor or supplier. Expenses for services charged by a doctor or supplier over and above 140% of the Medicare reimbursement rates do not apply to an individual's deductible or coinsurance maximum and are not paid by the Plan. These charges can result in much higher costs than anticipated.

** Reasonable and customary. Expenses for services charged by a doctor or supplier over and above R&C do not apply to an individual's deductible or coinsurance maximum and are not paid by the Plan. These charges can result in much higher costs than anticipated.

Medicare reimbursement rate, and continues paying at that level for the remainder of 2009. Then, deductible-eligible expenses paid by any combination of the other family members will accumulate to meet the combined family non-network deductible and combined family non-network coinsurance maximum

- *For Ruby HSA Medical Option participants*, once an enrolled family member meets his or her individual deductible of \$2,400, the plan begins to pay his or her covered expenses at 70% of R&C. When this person's 2009 eligible out-of-pocket expenses reach \$5,700 (including his or her individual deductible), the plan begins to pay his or her eligible expenses at 100%, and continues paying at that level for the remainder of 2009. Then, deductible-eligible expenses paid by any combination of the other family members will accumulate to meet the combined family deductible and combined family coinsurance maximum. Reasonable & customary charges apply when services are rendered by providers that do not participate in the UHC network

Changes to Contribution Amounts for Health Savings Accounts

If you are currently enrolled in the HSA Medical Option, or are considering enrolling in the Diamond HSA Medical Option or Ruby HSA Medical Option for 2009, you may be eligible to make tax-free contributions to a Health Savings Account (HSA).

If you are on active payroll status and set up a Health Savings Account with OptumHealth Bank (formerly called Exante Bank), you can make contributions through Delta pre-tax payroll deductions. When you enroll online through Benefits Direct, you have an opportunity to indicate your annual contribution amount, which will be divided into 24 equal pay period deductions.

The U.S. Department of Treasury has set the following 2009 maximum contribution limits that an eligible HSA participant may contribute on a tax-free basis:

- Up to \$3,000 annually for employee only coverage
- Up to \$5,950 annually for employee & spouse, employee & child(ren) or family coverage
- Up to an additional \$1,000 if you or your spouse is over age 55 and eligible for a catch-up contribution. If you are on active payroll status, you may contribute your catch-up contribution to your HSA through payroll deductions; however, your spouse's catch-up contribution must be made outside of Delta payroll to a separate HSA opened specifically for your spouse

Exante Bank changed its name to OptumHealth BankSM in March 2008. This name change should not cause you any disruptions in service, and no action on your part is required. Your Exante Bank card remains valid, and you should continue using Exante Bank checks until your supply is depleted. OptumHealth BankSM customer service representatives are available at **800-791-9361** to answer your questions.

Delta Community Credit Union (DCCU) also offers a Health Savings Account if you'd like to set up an account with them. The DCCU account offers tiered interest rates based on the dollar amount in the account. You also may arrange for direct deposit of contributions from your Delta paycheck; however, those contributions will be deposited on an **after-tax** basis. Contact DCCU for more information.

What's New for 2009 HSA Medical Option Pharmacy Coverage

- Some medications will be limited by quantity per prescription, but you may fill more than one prescription per month
- Specialty medications to treat certain chronic illness are only covered by the Specialty Pharmacy Program. Beginning April 1, 2009, the cost of injectable specialty medications will no longer be covered by the retail or mail order programs. A 90-day grace period (January 1 – March 31, 2009) gives you time to transfer your prescriptions into the program

The mandatory Specialty Pharmacy Program is designed to better manage the cost and quality of services available to users of these high-cost medications. If you currently use a specialty medication, UHC will provide you with details about this program at the beginning of 2009

- Nexium[®] is no longer a covered drug. Alternative medications in this same category (proton pump inhibitors) include Prilosec OTC and omeprazole

Delta Pilots Medical Plan (DPMP) and Flight Dispatchers Medical Option (FDMO)

Pilots and active and inactive flight dispatchers may choose to enroll in the DABHP or in the DPMP/FDMO. Unlike the DABHP, the DPMP and FDMO are medical/dental packages. Refer to the *Healthcare Benefit Handbook* for details about these options.

For 2009, Delta is not making any changes to the DPMP/FDMO with regard to covered services, coverage levels, copay amounts or coinsurance amounts, and there will be no increase to the medical premiums; however, premiums for the dental component of DPMP will have a very slight increase due to higher utilization of services.

Hawaii and Puerto Rico Medical Options*What's New for 2009 Health Plan Hawaii Coverage*

The 2009 changes include:

- Copays for retail brand prescriptions increase from \$10 to \$20 for both formulary and non-formulary drugs
- Copays for mail order brand prescriptions increase from \$20 to \$45 for a 90-day supply of formulary drugs
- Employee contributions (monthly premiums) increase 6.5% over 2008 levels

What's New for 2009 Humana Health Plan of Puerto Rico Coverage

No coverage or cost changes have been made for 2009.

What's New for 2009 Puerto Rico Out-of-Area Medical Option

No coverage or cost changes have been made for 2009.

Go Online for Coverage Details

For details on your healthcare coverage options, refer to the *Healthcare Benefit Handbook*, available on the [My Health & Insurance site](#) located on Employee Connection. You also may view coverage details for the DABHP, DPMP and FDMO at www.myuhc.com.

On Benefits Direct, you can view coverage details and compare your available medical options by using the Health Plan Evaluator. For more information about the Health Plan Evaluator and how it can help you make the best decision about which medical option is best for you, refer to the [Health Plan Evaluator section](#) of this guide.

Dental

Delta Account-Based Healthcare Plan Dental Options

DABHP participants continue to have a choice between enrolling in the Comprehensive Dental Option or the Preventive Dental Option, both administered by MetLife. Eligible participants have an additional choice of the CIGNA Dental Care Option, a dental HMO.

What's New for 2009 DABHP Comprehensive Dental Option Coverage

- The annual maximum benefit per participant is \$2,000, reduced from \$2,500
- The orthodontia lifetime maximum benefit per participant is \$2,000, reduced from \$2,500. Orthodontic treatments begun before January 1, 2009 continue to be eligible for the \$2,500 lifetime maximum
- Employee contributions for employee only coverage decrease slightly
- Employee contributions for employee & spouse, employee & child(ren) and family coverage rise slightly (\$1 per month for employee & spouse and employee & child(ren), and \$2 per month for family coverage). Retiree and survivor contributions increase slightly for 2009

What's New for 2009 DABHP Preventive Dental Option Coverage

- There are no coverage changes to the Preventive Dental Option
- Employee contributions for employee only coverage do not change
- Employee contributions for employee & spouse, employee & child(ren) and family coverage rise slightly (between \$2 and \$5 per month)
- Retiree and survivor costs increase slightly

What's New for 2009 CIGNA Dental Care Option Coverage

- There are coverage changes for certain procedures in the CIGNA Dental Care Option. The 2009 CIGNA Fee Schedule can be viewed on Benefits Direct
- Employee contributions for employee only, employee & spouse and family coverage do not change
- Employee contributions for employee & child(ren) rise slightly (\$3 per month)
- Retiree and survivor costs increase slightly [less than \$1 per month for retiree only and retiree & spouse, and \$11.77 per month for retiree & child(ren)]

DPMP/FDMO Dental Benefits

- No coverage changes have been made to the dental benefits that are provided as part of the DPMP/FDMO
- Active employees selecting the DPMP/FDMO medical/dental package experience a slight increase in their employee premiums due to an increase in the cost of the dental benefit
- Retirees and survivors have a slight decrease in the overall cost of the DPMP/FDMO medical/dental package

Flexible Spending Accounts

If you are an active employee, you may choose to enroll in a Healthcare or a Dependent Care Flexible Spending Account (FSA) administered by UHC. If you want to participate in an FSA, you must enroll in it each year, and you must specify the amount of money that you would like to contribute for 2009. You have until December 31, 2009 to incur eligible expenses and until March 31, 2010, to submit your claims for reimbursement. Employees who enroll in the Silver HSA Medical Option or the Ruby HSA Medical Option may only enroll in the Limited Purpose Healthcare FSA. This FSA is only available to reimburse eligible dental and vision expenses.

Disability Benefits for Flight Attendants and Ground Employees

Short-Term Disability (STD)

There are no plan changes to STD for 2009. Employee premiums increase 8%.

Long-Term Disability (LTD) Buy-Up

There are no plan or premium changes to LTD Buy-Up for 2009.

Life and Group Accident Insurances

Optional, Spouse and Child Life Insurance

Maximum employee optional, spouse and child coverage levels increase for 2009. You may now elect:

- Up to \$1,500,000 of Optional Life Insurance coverage for yourself. Amounts up to and including \$1,000,000 can be elected in \$25,000 increments; amounts in excess of \$1,000,000 can be elected in \$100,000 increments rather than in \$25,000 increments. Evidence of insurability (EOI) is required for any amount greater than a one-level increase for current participants. EOI is required for any level for new participants
- Up to \$250,000 in Spouse Life Insurance for your spouse or domestic partner/same sex spouse; amounts that you elect in excess of \$100,000 are in \$25,000 increments. EOI is required for any amount greater than a one-option level increase for current participants. EOI is required for any level for new participants
- Up to \$20,000 in Child Life Insurance for your eligible child(ren); a single premium covers all of your eligible children. EOI is not required for Child Life Insurance

Group Accident Insurance

There are no plan or premium changes to Group Accident Insurance coverage for 2009.

Private Pilots Accident Insurance

There are no plan or premium changes to Private Pilots Accident Insurance coverage for 2009.

Voluntary Group Long-Term Care Insurance

Long-Term Care Insurance

On September 1, 2008, Delta's Long-Term Care Insurance provider changed to The Prudential Insurance Company of America (Prudential).

You may enroll in Long-Term Care Insurance directly with Prudential at any time of year with proof of good health. However, if you are an active employee, a one-time guaranteed issue (proof of good health not required) election period coincides with Delta's 2009 annual open enrollment period: October 22 – November 12, 2008. Proof of good health is always required for family members, inactive employees, retirees and survivors.

You cannot enroll for Long-Term Care Insurance on Benefits Direct since this is not a Delta-sponsored benefit. To enroll, log on to www.prudential.com/gltcweb, using Group Name *deltaltc* and Access Code *airline* (both lowercase). If you have questions, call Prudential at **877-232-3561**.

ENROLLMENT RULES

Different rules apply when you enroll for benefits, depending on your employment status.

Active Employees

As an active employee, you have the option to enroll in or change benefit elections during the annual open enrollment period, in accordance with plan rules.

Newly Hired Employees

As a new hire, you may enroll in any of the benefit options for which you are eligible, such as medical, dental, vision, FSAs, short-term disability (ground only), long-term disability buy-up coverage (ground only), voluntary optional, spouse and child life insurances, voluntary group accident and private pilots accident insurance. Long-term care insurance also is available, but you do not enroll through Delta.*

New Hire Default Coverage

New hires who do not actively enroll during their new hire enrollment period will receive the following default coverage:

- Medical – Flight attendants and ground employees default to “No Coverage”; pilots default to the Silver HRA Medical Option
- Dental – Flight attendants and ground employees default to “No Coverage”; pilots default to the Comprehensive Dental Option
- Vision – No coverage option
- Healthcare FSA – No coverage option
- Dependent Care FSA – No coverage option
- Voluntary STD coverage** – No coverage option
- LTD Buy-Up coverage – No coverage option
- Voluntary Insurance – No coverage option

Default coverage may require premium contributions. If you wish to decline coverage and avoid incurring such costs, you must actively enroll in the “No Coverage” option.

* To enroll in Long-Term Care Insurance, log on to <http://www.prudential.com/gltcweb> using Group Name *deltaltc* and Access Code *airline* (both lowercase). If you have questions, call Prudential at 877-232-3561.

Prudential Long Term Care Insurance is issued by The Prudential Insurance Company of America, 751 Broad Street, Newark, NJ 07102. (Contract series: 83500)

** Proof of Good Health for voluntary STD coverage is not needed during your new hire enrollment period only. If you choose to enroll in voluntary STD coverage during a subsequent annual open enrollment period, you have to submit an Evidence of Insurability form to Sedgwick CMS.

New Hires: Before You Elect “No Coverage” for STD ...

If you are a new hire, you should be aware of the consequences of not enrolling in STD at your first opportunity.

If you elect “No Coverage” for STD when you enroll for Delta benefits for the first time, you will not be able to enroll for this coverage until the next annual open enrollment period, and you will be asked to provide Evidence of Insurability (EOI) at that time. This means that future coverage is not guaranteed.

Also, because new hires do not have Certified Time, if you waive STD coverage, you may not have any pay protection during a short-term absence (up to six months).

Inactive Employees

If you are an inactive employee enrolled in healthcare coverage, you may participate in annual open enrollment for healthcare coverage only.

If you choose the “No Coverage” option for medical, dental and/or vision coverage while on inactive status (such as on disability or a leave of absence), there are certain consequences. You won't be able to reinstate coverage until you return to active payroll status unless you or your dependent(s) experience a qualified life event known as a Health Insurance Portability and Accountability Act (HIPAA) special enrollment event (for medical and dental coverage only), and you act within 30 days of the event. However, if you retire or die while on inactive status and are eligible for medical/dental benefits, you or your survivors will be given an opportunity to enroll in Delta coverage at the time of your retirement or death (for survivors). Also, if you elect “No Coverage” and you lose other coverage as a result of a HIPAA-qualifying event, you may reinstate Delta medical or dental coverage if you properly report the event to the ESC within 30 days of the event. See the “Life Events” section of your *Healthcare Benefits Handbook* for information about HIPAA special enrollment events.

Retirees and Survivors

As an eligible Delta retiree or survivor, you have the opportunity to enroll in or change your medical, dental, vision and optional voluntary insurance coverage elections during the annual open enrollment period, in accordance with plan rules.

HOW TO ENROLL

STEP 1: ENROLL ONLINE VIA BENEFITS DIRECT

Enrolling is easy! Go online to <http://dlnet.delta.com>. You can use any computer with Internet access. You will need a valid Delta Passport password. (If you can access TravelNet or if you have home access to DeltaNet, you have a valid Passport password.) If you do not know your Passport password, go to <http://register.delta.com>.

After going to <http://dlnet.delta.com>, the Delta Extranet home page will be displayed. Enter your 9-digit employee number (Username), along with your Delta Passport password, to get to the DeltaNet home page. Once on the DeltaNet home page, go to Employee Connection at the top of the page. Select "Self-Service" from the drop-down menu. In the left navigation area, look for Benefits Direct under HR Applications.

If you have questions about online enrollment, or if you experience difficulty enrolling, contact the Delta Employee Service Center (ESC) at **1-800 MY DELTA (1-800-693-3582)** Monday through Friday – 8 a.m. to 5 p.m. Eastern time. International callers should dial **404-677-8000**.

STEP 2: REVIEW YOUR OPTIONS

Details about your benefit options, coverage levels and plan costs are available on Benefits Direct. There, you can review your current coverage on the online Enrollment Worksheet to make sure you are signed up for the options that best meet your needs. Be sure to look at the online Enrollment Worksheet to see the coverage you will receive if you don't make any elections during Annual Open Enrollment. Default coverage may require you to pay employee contributions, so review your options carefully.

Health Plan Evaluator

Review your 2009 medical options with the Health Plan Evaluator. Through this interactive online tool, you can identify coverage features, out-of-pocket costs and other factors that are important to you. If you are currently enrolled in a Delta health plan administered by UHC, your claims information from June 1, 2007 through May 31, 2008 automatically appears in the tool.

With the Health Plan Evaluator, you can:

- Compare your medical options side-by-side
- Use your claims history to help estimate your medical expenses for 2009
- Revise your claims costs to account for any anticipated healthcare needs or change in health status
- Calculate your cost of the eligible expenses that can be reimbursed by an FSA or HSA

Active and inactive employees can access the Health Plan Evaluator via Benefits Direct. To get to Benefits Direct, follow the instructions described in Step 1.

Provider Web Sites

The [My Health & Insurance site](#) on Employee Connection also features links to plan administrator Web sites, making it easy to learn if your doctor or provider is in the plan's network. Remember, using network providers typically saves you money.

STEP 3: UPDATE YOUR ELECTIONS

Once you have determined which benefits are available and best meet your needs, make your elections by midnight Eastern time on:

- November 12, 2008, for Annual Open Enrollment if you are an active or inactive employee; or
- November 19, 2008, for Annual Open Enrollment if you are a retiree or survivor; or
- November 28, 2008, for COBRA Open Enrollment; or
- The last day of the enrollment period indicated on your Enrollment Notification if you are a new hire, you are returning from a leave of absence or you are retiring during the year

You will not have another opportunity to change your elections until the next annual open enrollment period, unless you experience a qualified life event. If you are currently enrolled but wish to decline coverage and have no deductions for 2009, you must actively enroll in the “No Coverage” option.

STEP 4: SUBMIT ELECTIONS

After you have updated your elections, click “Submit Changes” to ensure that any changes you have made are received by Delta. **If you do not see a message confirming that your elections have been saved, your changes will not be effective.**

STEP 5: CONFIRM, REVISE IF NEEDED

Be sure to print the online confirmation page so you have a record of the elections you have made.

If you want to change those elections before the end of the enrollment period, go back to the enrollment area of Benefits Direct and make new elections. When you are done, click “Submit Changes” and reprint your confirmation page. Remember, when you make a change, you should print your confirmation page so you have a record of your 2009 elections.

No Additional Enrollment Opportunity or Opportunity to Change Elections

You must make your 2009 benefit elections during the annual open enrollment period or by the end of the election period noted on your Enrollment Notification. There will **not** be an additional enrollment opportunity or any opportunity for you to correct or change your 2009 elections before your coverage becomes effective. You will not be able to enroll or make any changes after your enrollment deadline unless you experience a qualified life event.

Making No Benefit Elections During Open Enrollment

If you are eligible to enroll for benefits during this annual open enrollment period but you do not enroll, your current medical, dental, vision, STD and LTD Buy-Up benefit elections, if applicable, continue in effect for 2009 without any action on your part. All applicable 2009 premiums will apply.

If you are eligible for and want to participate in the Flexible Spending Accounts or OptumHealth Bank Health Savings Account, you need to actively enroll and designate your annual contribution amounts for these accounts.

BENEFIT SUMMARY

At Delta, you are the difference. That's why Delta offers comprehensive benefit programs that recognize your individual needs.

Look on Employee Connection for details about the benefit programs and services described below.

Corporate Recognition & Incentive Programs

Profit Sharing Program

In years that targets are met, the Profit Sharing Program pays eligible employees at least 15% of Delta's annual pre-tax profit, beginning with the first dollar of profit. Individual awards are based on your individual compensation as a percentage of total compensation for all eligible employees.

Eligibility for participation in this program begins on your first day of employment.

Shared Reward Program

Your actions determine how Delta performs. In recognition of this, the Shared Rewards Program has been designed to pay you dividends for your good work.

Shared Rewards pays up to \$100 per month when we work together to achieve top-tier performance. The program provides you with monthly incentive payouts based on achievement of the following company-wide goals: on-time arrivals, completion factor and baggage performance. Shared Rewards provides a payout of \$25 for meeting or exceeding one goal, \$75 for two and \$100 for three. You are eligible to participate in this program on your first day of employment.

MyDeltaRewards (MDR)

We can all help shape a work life that is purposeful and motivating — for ourselves and our colleagues. We have great people whose hard work and dedication make Delta a great company.

MDR is the online platform that supports all formal, and most informal, recognition and reward programs at Delta. Any time you observe above-and-beyond behavior, you can nominate a fellow Delta employee through the corporate recognition program, Gaining Altitude. And, when you are nominated through Gaining Altitude (or a variety of other recognition programs), you can earn points that can be redeemed online at the MDR Universal Rewards Mall — containing more than five million items. Register at www.mydeltarewards.com. For details, e-mail mydeltarewards@diamondh.com or call 800-318-9596.

Planning for Your Future

Delta Family-Care Savings Plan Delta Pilots Defined Contribution Plan Delta Pilots Savings Plan

Delta provides a 401(k) Plan to help you meet your long-term financial goals for retirement.

The Savings Plan offers a variety of investment options for you to save for retirement. Delta provides generous fixed and matching contributions (company contributions). Access plan information by visiting Fidelity NetBenefits® at www.401k.com or by calling the Fidelity Phone Line at **800-554-0262**.

To learn more about your projected retirement benefits from the frozen Delta Retirement Plan defined benefit plan, if eligible, use the Retirement Modeler located on Employee Connection on DeltaNet. Look for the link to Benefits Direct.

Health and Insurance

Medical Benefits

Delta Account-Based Healthcare Plan (DABHP)

The DABHP was introduced in 2008 and offered to all active, inactive and eligible retired employees and survivors. The DABHP, administered by UnitedHealthcare (UHC), provides comprehensive healthcare coverage, while continuing to offer choice, affordability and flexibility. Each of the medical options has an account, either funded by Delta or by you, to help offset out-of-pocket expenses.

Through this account-based plan, you have more visibility to healthcare costs and are empowered to make more choices about your health benefits — and pay according to how you use them. You have out-of-pocket protection during years when you have high healthcare costs. When you are healthy and have unused healthcare dollars in your account, you may roll over these healthcare dollars to use during future years.

You may be offered the following choices in the DABHP:

- Gold Health Reimbursement Account (HRA) Medical Option
- Silver Health Reimbursement Account (HRA) Medical Option
- Diamond Health Savings Account (HSA) Medical Option (formerly known as the “HSA Medical Option”)
- **NEW!** Ruby Health Savings Account (HSA) Medical Option

If you live outside the UHC network, you will not only be offered the Gold Out-of-Area (OOA) HRA Medical Option during your enrollment period, but you also have the choice to enroll in a network option (Gold HRA Medical Option, Silver HRA Medical Option, Diamond HSA Medical Option or Ruby HSA Medical Option). For details of the network healthcare coverage options, refer to the *Healthcare Benefit Handbook* available online at Benefits Direct. Also, verify that you have adequate access to network providers by visiting www.myuhc.com and selecting “Find A Doctor.”

For full coverage details on DABHP medical options, refer to Delta's *Healthcare Benefit Handbook* and the Frequently Asked Questions about HRAs and HSAs on the [My Health & Insurance site](#) located on Employee Connection.

Smart Healthcare Consumer Checklist

The following tips may help you get the most out of your healthcare dollars.

- Seek services from providers and pharmacies in the UHC network
- Call the NurseLine **(877-912-1820)** with medical questions
- Learn the cost of medical services with the Treatment Cost Calculator on Employee Connection
- Use emergency rooms only for emergencies
- Choose generic drugs
- Use the mail order pharmacy
- Ask your doctor for a sample supply of medication
- Consider over-the-counter (OTC) drugs
- Explore less expensive medication options with My Rx Choices on www.myuhc.com
- Shop around for the best prescription drug prices
- See if your pharmacy offers free antibiotics

100% Coverage of Network Preventive Care

Preventing disease, and detecting disease early if it occurs, is important to living a healthy life. And the better your health, the lower your healthcare costs are likely to be. Following recommended guidelines, along with the advice of your doctor, can help you stay healthy.

Full network coverage is provided for preventive care in accordance with U.S. Preventive Services Task Force guidelines. A [summary](#) of these guidelines can be found on the [My Health & Insurance site](#) of Employee Connection. Routine physicals, mammograms, immunizations and well baby/well child visits, among other preventive care services, performed by network providers continue to be covered at 100% with no deductibles or copays for participants in the Delta Account-Based Healthcare Plan options.

Health Maintenance Organization (HMO) Options

HMOs are available in Hawaii and Puerto Rico only.

Dental Benefits

The dental options you may choose include:

- **Preventive Dental Option** — This option is administered by MetLife and provides 100% of reasonable and customary charges for certain preventive procedures with an annual plan maximum of \$200 per individual. Restorative services, oral surgery and orthodontia are not covered
- **Comprehensive Dental Option** — This option also is administered by MetLife. It requires an annual deductible and covers certain preventive, basic restorative, major restorative and orthodontia services, with a \$2,000 annual plan maximum per individual and \$2,000 lifetime orthodontia maximum. Preventive services are covered at 100% and are not subject to the annual deductible
- **CIGNA Dental Care (CDC) Option** — This option is a dental HMO and is available only to employees whose residential ZIP code falls within a CDC service area. To participate in this option, you must select or be assigned a dentist from CDC's list of participating dentists, and all of your dental care must be provided by this dentist. Covered services are generally subject to a fixed patient charge. The 2009 CIGNA Fee Schedule can be viewed on Benefits Direct

Delta Pilots Medical Plan (DPMP) and Flight Dispatchers Medical Option (FDMO)

As provided through the current working agreements, pilots and flight dispatchers may choose to enroll in the DABHP or in the DPMP/FDMO. Unlike the DABHP, the DPMP and FDMO are medical/dental packages — enrollment in the DPMP or FDMO requires enrollment in the DPMP/FDMO dental option.

The DPMP/FDMO medical options are administered by UnitedHealthcare (UHC) and have network and non-network benefits for choice and flexibility. The DPMP/FDMO dental option is administered by MetLife. Refer to the *Healthcare Benefit Handbook* for details about these options.

Vision Benefits

The Davis Vision option is voluntary and requires you to pay a pre-tax premium for coverage (active employees only. Inactive employees and retirees and survivors pay an after-tax premium) . The plan features network and non-network benefits, including a \$10 network eye examination.

Key features of the vision plan:

- One eye exam every calendar year
- One pair of eyeglass lenses every calendar year
- One eyeglass frame every 24 months
- Contact lenses may be selected instead of a complete pair of eyeglasses; one pair every calendar year (disposable contact wearers receive a \$105 credit (network) or \$75 (non-network))

Flexible Spending Accounts (FSAs)

Delta's FSAs are administered by UHC and are available to active employees.

Full Purpose FSA — If you are enrolled in a Delta medical option other than an HSA medical option, you may contribute up to \$9,984 annually tax-free to a Full Purpose Healthcare FSA to reimburse yourself for eligible expenses such as medical and dental deductibles, copays, prescriptions, eligible over-the-counter medications, eyeglasses, contact lenses, orthodontia and laser eye surgery. The Full Purpose FSA is also available to active employees enrolled in the "No Coverage" option

Limited Purpose FSA — If you are enrolled in an HSA Medical Option, you may contribute up to \$9,984 annually tax-free to a Limited Purpose FSA to reimburse yourself for eligible dental and vision expenses only

Dependent Care FSA — You may contribute up to \$4,992 tax-free annually to a Dependent Care FSA to reimburse yourself for IRS-approved, work-related day care for dependents under age 13 or dependents of any age if incapable of self-care. Many working adults have day care expenses for children, an elderly parent, or a disabled spouse. If you need day care so you and your spouse can work, the Dependent Care FSA can help you budget and cover those expenses while saving on your tax dollars. Delta's Employee Assistance Program (EAP) provides resources to help you find day care and elder care facilities in your neighborhood. Visit Delta's [EAP Web site](#) located on Employee Connection on DeltaNet

Valuable Services Provided Through Delta's Medical Plan Options

Personal health support is available when you need it. Look into these no-additional-cost programs and services, which have been customized by UHC especially for Delta's medical plan participants.

NurseLine

Speak with a registered nurse anytime, day or night, weekends and holidays. Through the NurseLine, you can hear health tips, get answers to health questions, help choose appropriate medical care, and access recorded messages on thousands of health and wellness topics.

Call **877-912-1820** or the number on the back of your UHC ID card.

Treatment Decision Support

Connect with treatment decision support (TDS) by calling the NurseLine. If you have questions about a specific medical condition, if you have recently been diagnosed with an illness or disease, or you are facing a medical procedure, an experienced registered nurse can help. Call TDS to:

- Understand your treatment options
- Explore the risks and benefits of treatments
- Develop questions to ask your doctor
- Discover what to expect from surgery
- Prepare for a successful recovery
- Learn what kind of costs to expect

Just as with the NurseLine, TDS nurses are available 24 hours a day, seven days week, including weekends and holidays. Call **877-912-1820** or the number on the back of your UHC ID card.

Health Advocate Program

This voluntary program is available for participants with a chronic condition or complex healthcare need. If you have coronary artery disease, diabetes, heart failure, asthma or another serious chronic condition, a registered nurse may reach out to you.

Health Advocate nurses specialize in these conditions and can be a valuable personal support resource. They can help you learn about your diagnosis and your potential treatment options, as well as make sure that you are following your treatment plan.

For information about the Health Advocate Program, call the NurseLine at **877-912-1820** or the number on the back of your UHC ID card.

Healthy Pregnancy Program

Moms-to-be and spouses: The Healthy Pregnancy Program links you with important pregnancy-related healthcare information to ensure that you have everything you need to make healthy choices. This program is offered free of charge to expectant mothers who are enrolled in a UHC medical option.

The Healthy Pregnancy Program provides:

- High-risk assessments to help you deliver a healthy baby
- Access to self-help tools to help you make important decisions
- Access to health news and links to community resources
- Online tools to help you find healthcare providers in your plan's network and compare hospitals and physicians in your area
- Follow-up by a nurse after you deliver your baby

You can learn more about this program by visiting <http://www.healthy-pregnancy.com/> or calling UHC at **800-411-7984** and selecting option 1.

Transplant and Heart Disease Support

Register online with United Resource Network for transplant services and treatment of congenital heart disease. Access the nation's leading transplant network of 183 carefully selected transplant programs in 72 medical centers throughout the country. If you have a serious medical need, specialized programs and nurse consulting are available through UHC Transplant Centers of Excellence network programs. Log on to www.urnweb.com or call the NurseLine at **877-912-1820** for information.

Cancer Resource Services

Cancer Resource Services (CRS) gives you access to UnitedHealth Premium Network cancer programs and facilities. CRS also offers access to cancer nurses who can help you understand your diagnosis and potential treatment options, as well as provide information to help you maintain your health and well-being during treatment and recovery. If you have a serious medical need, specialized programs and nurse consulting are available through UHC Cancer Centers of Excellence network programs. For information about CRS, call **800-847-2050** or the number on the back of your UHC ID card.

Free & Clear[®] Quit For Life Program[™]

Studies show that smokers who receive both counseling and medication are more likely to quit for life compared to those trying to quit on their own. The Free & Clear[®] Quit for Life[™] program offers these services to UHC members and dependents (age 18 and older). If you are not a UHC member, you'll be referred to tobacco cessation programs in your community.

The Free & Clear Quit For Life Program is a confidential, eight-week treatment program tailored to your needs. Quit for Life components include a personalized quit plan, telephone counseling sessions with a quit coach and home-delivered nicotine replacement therapy (such as patches or gum), all at no cost to you.

To enroll, call **866-QUIT-4-LIFE (866-784-8454)** or log on to www.freeclear.com/delta. A registration specialist will verify your eligibility and send you a Quit Kit that will help you become tobacco free.

International Medical Assistance

International SOS (SOS) provides you with global medical assistance while you are traveling internationally on company business outside your home country of record. Free of charge to you, the program provides medical advice, referrals, case management and evacuation, if necessary.

Contact SOS before you seek medical attention (if possible) by calling collect **215-245-4707**. For more information, go to www.internationalsos.com and enter Delta's Corporate Medical Membership number: 11BCMA000044.

Travel tip: If you travel internationally on company business, print an SOS wallet card and carry it with you at all times. Select the "print a wallet card" link by following this path on DeltaNet: Employee Connection → Health At Work → Air Crew & Passenger Health Services.

Travel Health Vaccinations

Delta provides designated flight attendants and pilots with company-paid yellow fever vaccinations and the prescription medication Malarone for malaria prevention. Non-crew employees traveling on international business may obtain similar company-paid travel vaccinations. Company Business travelers may contact Air Crew & Passenger Health Services (ACPHS) for itinerary-specific travel health recommendations.

Employees enrolled in the DABHP who travel for personal reasons may take advantage of 100% fully covered travel health vaccinations when administered by a UHC network provider. Malarone is subject to the DABHP pharmacy coinsurance. To find a UHC provider who administers vaccinations, visit www.myuhc.com and select "Find A Doctor." You can find more information about Travel Health Vaccinations on the [My Health & Insurance site](#) of Employee Connection.

Life, Group Accident and Disability Insurances

Life Insurance

Delta provides active flight attendants and ground employees with \$50,000 in Basic Life Insurance coverage to provide some financial protection for your family in the event of your death. Through Delta, you also may be eligible to participate in voluntary life insurance and group accident insurance benefits, including optional life insurance (for employees and dependents), group accident insurance and private pilots insurance. Because the amount of coverage you might need is based on several factors, you may want to use MetLife's online life insurance calculator (www.metlife.com) to help determine the amount that is right for you and your family.

Remember, you must provide Evidence of Insurability (EOI) if you want to newly enroll in optional life insurance coverage or if you wish to increase your existing coverage by more than one coverage level. For details, see "Evidence of Insurability (EOI)" on the next page.

Inactive employees cannot newly enroll in or increase Optional Life Insurance coverage until they return to active status.

Evidence of Insurability (EOI)

You may decrease your coverage amounts to any level during Annual Open Enrollment. However, in most cases, you may only increase your Optional and Spouse Life Insurance coverage by one level without the need to submit EOI, also known as Proof of Good Health.

If you have previously waived Optional or Spouse Life Insurance coverage, you must submit EOI for any level of coverage you elect. New hires may elect up to \$250,000 of Optional Life Insurance coverage and up to \$50,000 of Spouse Life Insurance coverage without the need to submit EOI. Evidence of Insurability is not required for Child Life Insurance coverage.

If you elect an Optional Life Insurance benefit amount that requires EOI, you will receive a Statement of Health form with your Confirmation Statement. Complete the form and, within 30 days, return it to MetLife at the address on the form. Until your request is approved (or denied), or if you do not return the form within 30 days, you will be covered for the highest level of coverage for which you are eligible without approval.

Group Accident Insurance

Because accidents can happen to anyone at any time, we should have a plan for coping with them. If a serious accident were to severely injure or kill you, Group Accident Insurance (administered by The Hartford) could provide your family with financial protection.

For coverage information, review the brochures available on the [My Health & Insurance site](#) of Employee Connection.

Private Pilots Accident Insurance

Private Pilots Accident Insurance, administered by The Hartford, can provide accidental death and dismemberment coverage if you are injured or killed while operating private or military aircraft or performing the duties of a pilot in such aircraft.

For more information, review the brochures available on the [My Health & Insurance site](#) of Employee Connection.

Long-Term Care Insurance

If you one day suffer from a chronic illness or disability, and need help performing activities of daily living (such as dressing and eating), or have a severe cognitive impairment (such as Alzheimer's disease), you may need long-term care. Among people turning age 65 today, 69% will need some form of long-term care, whether in the community or in a residential care facility. This type of care can extend over a long period, and can be expensive.

Long-Term Care Insurance, issued by Prudential, can help pay for costs associated with long-term care services. Prudential underwrites and administers this program. It is not sponsored by Delta.

Prudential Long Term Care Insurance is issued by The Prudential Insurance Company of America, 751 Broad Street, Newark, NJ 07102. (Contract series: 83500)

Disability Benefits for Flight Attendants and Ground Employees

Just as routine preventive care can help you prevent future illness, disability coverage can prevent financial hardship if you become disabled and cannot work.

Being disabled and unable to provide an income for yourself and your family can be a serious threat to your financial security. When you are unable to perform your job due to illness, injury or pregnancy, you may be eligible for disability benefits under the Delta Family-Care Disability and Survivorship Plan. Delta offers several programs to help ease your concern about meeting your financial needs during an absence from work.

You have the option to purchase short-term disability (STD) and long-term disability (LTD) buy-up coverage. These coverage options are in addition to the basic 50% LTD coverage that Delta provides to you at no cost. Evidence of insurability may be required.

Optional 60% Short-Term Disability (60% STD)

If enrolled, 60% STD coverage provides you with 60% pay protection during your approved absence. This 60% STD coverage is an optional employee-paid benefit that begins after you exhaust any available Certified Time. If you do not enroll in 60% STD coverage, you may not be eligible for any pay protection during the 26-week STD period once your Certified Time is exhausted.

Company-Provided Benefits for a Work-Related Disability (66.67% OJI Pay)

If you suffer a work-related illness or injury, 66.67% OJI pay provides you with a supplement to your Workers' Compensation payments so that, together with those payments, you will be provided with 66.67% pay protection during your approved absence. Your company-provided 66.67% OJI pay begins after you exhaust any available Certified Time.

Company-Provided Certified Time

Certified Time, if available, provides you with 100% pay protection when you are unable to work due to illness, injury or pregnancy. As of April 1, 2006, employees no longer accumulate additional Certified Time.

Check your Certified Time balance online in Employee Self-Service. From the DeltaNet home page, select Employee Connection from the top navigation area and click on Self-Service from the drop-down menu. Once logged in, select view your personal information and click on the Certified Time balance tab.

Company-Provided Basic 50% Long-Term Disability (Basic 50% LTD)

If you continue to be disabled beyond the 26-week STD period, Basic 50% LTD provides you with 50% pay protection. Delta provides this coverage at no cost to you.

Optional 60% Long-Term Disability Buy-Up (60% LTD Buy-Up)

You may choose to purchase additional coverage that can increase your pay protection from 50% to 60% during your approved absence.

To learn more about Delta's disability benefits, view the *Disability Benefit Handbook* on the [Absence from Work site](#) located on Employee Connection.

How to Certify Your Absence

To receive disability benefits under the Delta Family-Care Disability and Survivorship Plan, your absence must be certified by Sedgwick CMS. It is your responsibility to call Sedgwick CMS at **877-67-DELTA (877-673-3582)** for both occupational and non-occupational absences as soon as you expect that your illness or injury will keep you out of work more than seven calendar days.

You also must notify Sedgwick CMS of pregnancy, planned surgeries or procedures that require a recuperation period longer than seven calendar days. You must follow these procedures even if you are not enrolled in voluntary STD coverage (or have no remaining Certified Time).

Time Off Benefits

Time away from work is important for everyone. We all need time to rest, recharge and refocus. Because Delta recognizes the need for a good work/life balance, the company offers you holidays, vacation and Paid Personal Time.

Eligibility for these options varies. To learn more about these Delta benefits, visit the [Absence from Work site](#) located on Employee Connection or refer to your duty manuals (flight attendants and pilots).

Travel Privileges

Delta's employee travel privileges are the envy of the industry. As a Delta employee, unlimited non-revenue travel on a space-available basis is available to you and your eligible family members for leisure, vacation and emergency travel. With these privileges, you are able to explore amazing destinations around the world.

Eligibility for non-revenue travel varies based on employee category. To learn more about these non-revenue travel benefits, visit the Pass Travel site located on Employee Connection.

Employee Assistance Program (EAP)

We all experience issues that can impact our ability to live and work well. Between work and family, relationship and financial pressures, it's easy to feel swamped. Delta's confidential EAP services are designed to provide you with the support to manage everything from basic, everyday issues like pulling together a budget, coping with your child going away to college, or wanting to create a better work/life balance — to more serious challenges such as going through a divorce, facing bankruptcy or coping with substance abuse.

Delta's EAP services can save you money. Consider using the EAP instead of spending your healthcare account dollars on psychologist visits. Also, consider using the EAP instead of consulting with a financial planner or attorney on your own.

Through Delta's EAP, you can get:

- Free, unlimited calls for personal concerns, with three face-to-face sessions per topic per year
- Free calls with professional financial advisors for up to an hour per financial issue per year
- Free legal or mediator counseling for up to 30 minutes per year, and a 25% discount on services thereafter

These services are provided at no cost to all Delta employees and their family members, and are available by calling **800-533-6939**, 24 hours a day, seven days a week. Additional information about the program is available on Delta's [EAP Web site](#) located on Employee Connection.

Other Delta Programs

Delta offers other programs and policies that focus on your total well-being.

Adoption Assistance Program

Delta's Adoption Assistance Program provides for the reimbursement of eligible adoption-related expenses, up to a maximum of \$1,500 per adopted child, with a lifetime maximum benefit of \$3,000 per eligible employee. You are eligible to participate in the Adoption Assistance Program on your first day of employment. For more information, visit Delta's [EAP Web site](#) on Employee Connection.

Delta Higher Education Award Program

Each year, Delta Higher Education Awards are available to eligible active Delta employees pursuing degrees. To be eligible, you must be an active Delta employee for at least six months and in good standing. You also must pursue an undergraduate degree in a field related to Delta's business, an MBA, or a graduate degree in the same field as your current position or in a commercial aviation program. The number and dollar amount of the awards varies each year. For more information, visit Employee Connection on DeltaNet.

Matching Gifts Program

The Matching Gifts Program matches 50 cents for every dollar of your charitable cash contributions, up to \$2,000 per year, made to accredited institutions of higher education, or their charitable funds or foundations. You are eligible to participate in this program on your first day of employment if you are a full-time employee. Part-time employees are not eligible to participate. For more information, visit Employee Connection on DeltaNet.

Other Programs and Services

Delta Community Credit Union (DCCU)

The Delta Community Credit Union was founded by Delta employees and continues to be managed by them today. The credit union offers a full line of deposit and loan products, including high-interest checking and savings accounts, credit cards, consumer loans and mortgage loans. The credit union is financially strong and conservatively managed. Because it is a nonprofit organization, DCCU is able to offer highly attractive rates and convenience services such as online banking and a growing network of branches and ATMs.

Delta Employee & Retiree Care Fund

Delta employees and retirees are doing great things for each other through the Delta Employee & Retiree Care Fund, a nonprofit 501(c)(3) charitable organization run by Delta people for the benefit of Delta people. The Care Fund provides assistance to eligible Delta individuals and families who suffer a severe financial hardship from an unforeseen and unavoidable crisis, including loss due to a catastrophic event. Employees experiencing any type of hardship are encouraged to contact the Employee Assistance Program for counseling and financial planning assistance.

You can help Delta people in crisis through tax-deductible payroll deductions. Employee recycling efforts benefiting this fund include office, household and cell phone recycling. The Fund's success and growth are dependent on financial support from Delta people. You can pledge a payroll deductible donation through ESS now and throughout the year. Planned giving options also are available by contacting the Care Fund office at **404-715-1726**. All donations are tax-deductible.

More than 70% of our competitors' employees are supporting their care fund. Although 7% of Delta employees are currently supporting our fund, up to 80% of our flight attendants in new hire and recurrent training classes have pledged their support with payroll deductions when learning about how we are helping Delta people in need. The RSW station and our Legal department also are contributing at this level. Delta's goal is for all areas to beat our competitors — each of us giving a small amount each paycheck will get us there quickly and keep us ready to help Delta people in crisis. For more information, visit the Care Fund site on Employee Connection.

United Way

Many Delta employees already support the United Way through payroll deductions. The United Way supports many nonprofit organizations in communities across the country benefiting people in need. To start or modify your payroll deductions, see ESS. You can call **211** at any time to identify agencies in your area that may be able to assist you or a loved one in need.

Delta Scholarship Fund

Delta employees and their eligible dependents pursuing higher education can apply for an award from Delta's nonprofit 501(c)(3) Scholarship Fund. Awards are based on various criteria including merit, leadership and financial need. The Scholarship Fund is in addition to Delta's Higher Education Award. The Fund's success and growth are dependent on financial support from Delta people. You can pledge a payroll deductible donation when you enroll through ESS now and throughout the year. Planned giving options also are available by contacting the Scholarship Fund office at **404-715-1726**. All donations are tax-deductible. Currently, 3% of Delta people are supporting the Scholarship Fund through payroll deductions. As this increases, we will be able to offer more scholarships to benefit Delta people. For more information, visit the Scholarship Fund site on Employee Connection.

Discounts

Your Delta benefits are not limited to the traditional "medical and dental" coverage. Delta has negotiated valuable discounts for you and your family. For more information on these programs, check out the Discounts page on Employee Connection.

Sparkfly Discounts

Delta has partnered with the Sparkfly employee discount program. To see the discounts, visit Sparkfly on the Discount page of Employee Connection. You and your family can save time and money when making travel reservations, searching for restaurants, shopping, buying movie and event tickets, and much more. And the best part ... there is no need to register. As a Delta employee, you are already a Sparkfly customer.

Sparkfly deals include:

- **Auto and Recreational Vehicle Purchases** — See a listing of dealerships that offer discounts to Delta employees
- **Computer Purchases** — Find discounts on Apple and Dell computers
- **Dining & Entertainment** — Get discounts on dining as well as discounted tickets to national theme parks, concerts and movies
- **Legal Services** — Learn about pre-paid legal services at group discount rates
- **Pet Insurance** — Consider a licensed insurance plan for your pets to better manage your veterinary costs
- **Shopping** — Receive discounts at major retailers for both online and in-store purchases
- **Travel & Accommodations** — Find discounted stays at hotels and resorts, as well as discounted car rentals

Travelers Auto and Home Insurance

Save money on your auto and home insurance. The Auto and Home Insurance Program from Travelers offers Delta employees and retirees quality protection at special group rates.

With no designated enrollment period, you may apply for auto and home insurance coverage at any time throughout the year. Take advantage of customized coverage options and convenient payments, including payroll deductions.

Contact Travelers at **877-754-0474** or www.travelers.com/delta for free coverage reviews and no-obligation quotes.

Weight Loss Programs

Are you ready to do something about those extra pounds you've been carrying around? Delta has partnered with two proven weight management programs that may be able to get you focused. Jenny Craig® and Weight Watchers® have each helped thousands of people take charge of unhealthy eating habits and transform them into success stories. Visit the Discounts page on Employee Connection for details.

Will Preparation Service

Will Preparation* connects eligible employees and their spouses or domestic partners/same sex spouses with a participating attorney who can prepare or update a will at no charge. When you choose a participating Hyatt Legal Plans attorney, the attorney's fees are fully covered and there are no claim forms to file. Contact Hyatt Legal Plans at **800-821-6400** or visit www.legalplans.com. Group Number: 300533

* Will Preparation is offered by Hyatt Legal Plans, Inc., Cleveland, Ohio. In certain states, legal services benefits are provided through insurance coverage underwritten by Metropolitan Property and Casualty Insurance Company and Affiliates, Warwick, Rhode Island. Will Preparation is subject to approval in certain states. Will Preparation is currently unavailable for New York-based employer groups and is not approved for Texas-based employer groups or Texas residents.

WHERE TO GET MORE INFORMATION

Benefits Contact Information			
Benefit	Provider	Phone	Web
Delta Benefit Eligibility	Employee Service Center (ESC)	1-800 MY DELTA (1-800-693-3582)	http://dlnet.delta.com
Delta Family-Care Savings Plan	Fidelity	800-554-0262	www.401k.com
Dental	Metropolitan Life Insurance Company (MetLife)	877-683-8555	www.metlife.com/dental
	CIGNA Dental Care	800-367-1037	www.mycigna.com
Disability	<i>Flight Attendants and Ground Employees:</i> Sedgwick CMS	877-67-DELTA (877-673-3582)	www.sedgwickcms.com
	<i>Pilots:</i> Harvey Watt & Co.	800-241-6103	www.harveywatt.com
Employee Assistance Program (EAP)	OptumHealth Behavioral Solutions	800-533-6939	www.liveandworkwell.com
Flexible Spending Accounts (FSAs)	UnitedHealthcare (UHC)	877-683-8555	www.myuhc.com
Group Accident & Private Pilots Accident Insurance	The Hartford Life and Accident Insurance Company (Hartford)	800-850-9146	www.thehartford.com
Life Insurance	Metropolitan Life Insurance Company (MetLife)	866-939-7409	www.metlife.com
Long-Term Care Insurance	The Prudential Insurance Company of America (Prudential)	877-232-3561	www.prudential.com/gltcweb Group Name: deltaltc Access Code: airline
Medical	UnitedHealthcare (UHC)	877-683-8555	www.myuhc.com
	Health Plan Hawaii	808-948-6372	www.hmsa.com
	Humana Health Plan of Puerto Rico	787-282-7900 ext. 5500	www.pr.humana.com
NurseLine	UnitedHealthcare (UHC)	877-912-1820	www.myuhc.com
Vision	Davis Vision	800-947-9955	www.davisvision.com

This guide provides summary highlights of some Delta benefit plans. In the event of a discrepancy between these highlights and the plan documents, the terms of the plan documents will govern. Delta reserves the right to amend, modify or terminate all or any part of its benefit plans in its sole discretion at any time, for any reason. Any such amendment, modification or termination may apply to active employees, inactive employees, retirees, disabled employees, COBRA participants, or employees on a leave of absence or furlough and their dependents and survivors. Any amendment or modification may be applied prospectively or retroactively and may be applied only to one group of participants, such as retirees, but not to other groups of participants. This guide is not a contract or guarantee of your benefits, nor is it a contract or guarantee of employment.

The Health Savings Account is not an employee benefit plan sponsored or maintained by Delta. An individual who participates in the Ruby HSA Medical Option or Diamond HSA Medical Option is participating in a high-deductible health plan sponsored by Delta, and accordingly, may be eligible to establish a Health Savings Account for his or her own benefit. The OptumHealth Bank HSA to which employee payroll deductions may be made, or any other HSA to which a participant contributes, is not a Delta-sponsored plan, but instead is an individual arrangement set up by the employee. The employee is responsible for monitoring all legal requirements associated with contributing to and seeking payments from his or her HSA. A participant in the Ruby HSA Medical Option or Diamond HSA Medical Option has the choice of any HSA product he or she wishes to use and is not required to set up an HSA with OptumHealth Bank or any other financial institution.