

2014 Open Enrollment Frequently Asked Questions

	OPEN ENROLLMENT
1	When is the annual open enrollment period?
	Open enrollment for active and inactive employees, as well as retirees and survivors, is from November 6 through November 27, 2013 at 11:59 p.m. Eastern time. This is the only opportunity for eligible employees and retirees to choose their 2014 benefits.
2	What resources are available to help me understand the benefit options available and to make the best decision for me and my family?
***************************************	The Health Plan Evaluator is available on October 16 to active and inactive employees. The tool provides a "side-by-side" comparison of the medical options you are eligible for. Also, all of the following materials are available to active and inactive employees, retirees and survivors on the 2014 Open Enrollment Headquarters site on DeltaNet.
	These guides provide information and benefit summaries for the options offered by Delta:
	Delta's open enrollment magazine, BENEFITS ENROLLMENT ON THE HORIZON, is a comprehensive enrollment guide that explains changes that are occurring for the upcoming plan year, information about the continued effects of Healthcare Reform, changes to the Delta Health Rewards program, as well as enhancements to certain programs and services.
	The Delta Healthcare Benefits Handbook (2014 Summary Plan Description) offers detailed descriptions of each medical, dental, flexible spending account, and vision coverage options available to you.
	In addition, there is a schedule of several on-site meetings and an online webinar relevant to active and inactive employees that you can plan to attend to learn more about the changes for next year. There are additional side-by-side comparisons, plan summaries, premium charts, FAQ's and a number of other resources. Go to the 2014 Open Enrollment Headquarters site on DeltaNet to view this information.
3	How do I enroll?
	ENROLL ONLINE VIA BENEFITS DIRECT
	Enrolling for your 2014 benefits is easy. Just follow these steps:
	 Access DeltaNet from any computer with Internet access by entering the address http://dlnet.delta.com To log on to DeltaNet, you will need your Delta Passport ID (PPR) and a valid Delta Passport password.
	2. Click on the "Enroll Now" button on the DeltaNet home page and select "I Agree", if applicable, to access Self-Service.
	3. Click on the link in the 2014 Open Enrollment Action Square, or click on the Open Enrollment Headquarters link to access the 2014 Open Enrollment Headquarters. Review your enrollment resources, such as the applicable Benefits Handbook (Summary Plan Description or SPD), planning tools, and premium information. Use this information to review your options and determine which benefits best meet your needs.
	4. Click on "Enroll Now" to make your elections by 11:59 p.m. Eastern Time on November 27, 2013.

5. Be sure to click "Submit Changes" once you complete your enrollment to ensure that any

- changes you have made are received by Delta.
- 6. Review the online confirmation statement to be sure you have selected your desired preferences. Confirmation statements will not be mailed so be sure to print a copy of your confirmation statement when you complete your enrollment. You may print one at any time from Benefits Direct.

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.

4 My spouse and I both work for Delta and elect separate coverage. Can we both enroll our child(ren) as dependents?

Medical / Dental / Vision Coverage

Employees, retirees and survivors and their dependents (spouses, same-sex domestic partners and eligible children) are only permitted to be enrolled once in the Delta Account-Based Healthcare Plan, regardless of marital status or relationship to other Delta employees (or retirees).

If both you and your spouse, same-sex domestic partner or child are eligible for the Delta Account-Based Healthcare Plan or Delta Family-Care Medical Plan, you cannot be covered under those Plans as both an employee, retiree or survivor (a "primary plan member") and a dependent of another primary plan member. Your coverage options are:

- Be covered individually as the primary plan member only, or
- Be covered as the primary plan member with your spouse, eligible child or same-sex domestic partner covered as your dependent (or vice versa)

In the event you and your spouse or same-sex domestic partner (or ex-spouse or ex-same-sex domestic partner) have children eligible for medical coverage, only one parent (or step-parent) may cover the child as a dependent.

Dependent Life and Group Accident Insurance

If you and your spouse or same-sex domestic partner (or ex-spouse or ex-same sex-domestic partner) are both eligible to enroll in Dependent Life and/or Group Accident Insurance and are the parents of the same child(ren), only one parent (or step-parent) may cover the child(ren). Eligibility for Dependent Life and Group Accident Insurance is determined at the time of death. Paying premiums does not constitute eligibility. Even if premiums are collected from both parents (or step-parent), only one claim will be paid to one parent.

- 5 Will a confirmation statement be mailed to me once Open Enrollment ends?
 - No, confirmation statements will not be mailed so be sure to print a copy of your confirmation statement when you complete your enrollment. You may also print one at any time from Benefits Direct.
 - If I don't make a new election for 2014 coverage, will my current election roll over to next year?

 Generally, yes. Employees will default to their current coverage, or the plan most similar to what they have today, at 2014 premium costs, if they do not make an active election during Open Enrollment. Flight attendants and ground employees (active only) enrolled in a flexible spending account or a health savings account must elect a new contribution amount since these elections do not automatically continue and must be elected each year. Also, eligible employees are encouraged to consider the federal tax penalties that start to apply in 2014 to those who do not maintain health insurance before deciding to opt out of Delta's health coverage.
- 7 Can I make changes to my election until the last day of Open Enrollment?

Yes, enrollment changes can take place anytime during the enrollment period. The enrollment period for active and inactive employees, retirees and survivors will end at 11:59 p.m. Eastern time on

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	November 27, 2013. The election you have in effect at that time will be binding for the 2014 plan
	year, unless you later have a qualified life event that permits you to make changes.
8	What happens if I have a qualified life event next year? Can I make changes to my benefits?
	If you have a qualified life event during the year, such as your spouse losing their job and health care
	coverage or the birth or adoption of a new child, you will be able to make benefit enrollment changes
	specific to your life event within 60 days after the event.
	HEALTHCARE
9	What kinds of changes can we expect to our health plans for 2014?
	In 2014, the combination of healthcare reform and annual healthcare inflation will add nearly \$100 million in costs to our plan. Delta is self-insured – we cover the cost for all medical claims togetherso cost increases like this ultimately affect us all. Despite this significant increase, Delta will absorb around 85% of these additional costs. The remaining portion of the cost increase will be shared among U.S based health plan participants in 2014 through some small changes to our healthcare plans and marginal premium increases in our account-based plans. Delta will absorb the vast majority of the cost increase in 2014, but the remainder will be shared by health plan participants through premium increases and some relatively small changes to our plans. Changes will fall into three
	categories:
	1. In 2014, active employee premiums in the Delta Account-Based Healthcare Plan (Gold, Silver, Diamond and Ruby options) will increase between \$3 and \$22 per month depending on the coverage tier and option chosen.
	There will be some plan design changes including some enhancements to the Silver option and other relatively small changes to coinsurance levels and non-network benefits for some other options.
	3. As we announced last fall, in order to create the financial incentives for the Delta Health Rewards program, there will be changes to the account-based medical options in 2014. The annual HRA allocation in the Gold and Silver options will reduce by \$250 per each employee and spouse/same-sex domestic partner (however any unused HRA balance will still rollover to 2014), and the 2014 HSA deductible in the Diamond and Ruby options will increase by \$250 per each employee and spouse/same-sex domestic partner.
	At the same time, each employee and covered spouse or same-sex domestic partner has had the opportunity to earn up to \$300 each in Delta Health Rewards during the period that started October 1, 2012 and ends September 30, 2013. See important information below about the extension of the 2012-13 measurement period. We will be expanding the Delta Health Rewards program beginning on October 1st.
10	Why is healthcare reform adding so much additional cost to our health plan?
10	With the implementation of additional policies required by the Patient Protection and Affordable Care Act, otherwise known as healthcare reform, come additional costs associated with offering healthcare by large employers in 2014. These expenses are made up of additional fees and taxes required by the law, the anticipated effect of the individual mandate as well as the end of the Early Retiree Reinsurance Program, a component of healthcare reform from which we previously received funds to help minimize healthcare cost increases for 2013. These costs are in addition to normal healthcare inflation, which for 2014 is about \$40 million.
11	Are there significant changes to any of the 2014 medical plan options?
11	As announced last fall, to create the incentives for the Delta Health Rewards program, the amount that Delta allocates to the Health Reimbursement Accounts (HRAs) for the Gold and Silver HRA Medical Options will be reduced. Any rollover balance you have at the end of 2013 will continue to be available for use toward 2014 medical expenses. There are some changes to the non-network deductibles and non-network coinsurance maximums for most of the account-based medical plan options. For detailed information refer to the BENEFITS ENROLLMENT ON THE HORIZON magazine
	located on the 2014 Open Enrollment Headquarters site on DeltaNet.
12	Will I receive new medical ID cards after open enrollment?

	UnitedHealthcare will print and mail a new medical ID card only to those who newly enroll and to current enrollees who change options or change their covered dependents for 2014.
13	Are there changes to the annual maximum contributions allowed in a Health Savings Account in 2014?
	Yes. Contribution maximums in 2014 have increased to \$3,300 annually for employee only coverage, and to \$6,550 annually for employee + spouse, employee + child(ren) or employee + family coverage, plus an additional \$1,000 if you are or will be at least age 55 by the end of 2014 and eligible to make catch-up contributions.
	DELTA HEALTH REWARDS (applies to active and inactive employees)
14	What is the Delta Health Rewards Program?
	Delta Health Rewards is a multi-year voluntary rewards program designed to provide financial incentives to encourage you to become more engaged in improving your health. Active and inactive employees and spouses/same-sex domestic partners enrolled in a Delta account-based medical option can earn dollars by completing certain health actions between October 1 and September 30 of each year. Retirees and COBRA participants are not eligible for Delta Health Rewards.
	Reward dollars earned during the previous measurement period, October 1, 2012 through September 30, 2013, will be added to health reimbursement accounts or Optum Bank heath savings accounts on January 1, 2014. If you enroll in the Diamond or Ruby HSA medical options for 2014 and you do not have a health savings account at Optum Bank, you'll need to open the Optum Bank HSA using this link.
	Reward dollars earned during the current measurement period, October 1, 2013 through September 30, 2014, will be added to your HRA or Optum Bank HSA on January 1, 2015, based on your 2015 medical option. See the separate Delta Health Rewards FAQ document located on the 2014 Open Enrollment Headquarters page beginning October 7, 2013.
15	Did Delta extend the 2012-2013 Delta Health Rewards measurement period? Yes, the period to earn your 2014 Delta Health Rewards dollars has been extended through December 31, 2013.
MARTIN	From October 1 through December 31, 2013, you and your spouse/same-sex domestic partner can complete any of the following health actions and still earn rewards for 2014: (1) completion of the online health assessment, (2) completion of a physical exam, and (3) indicating that you are not a tobacco user when asked on the health assessment (or alternatively completing the quit tobacco program). Rewards earned during the extension will be added to your 2014 HRA or Optum Bank HSA on April 1, 2014.
TO CHARLE TO THE REAL PROPERTY OF THE PARTY	Since your 2015 Delta Health Rewards dollars measurement period overlaps with this extension, participants (employees and their spouse/same-sex domestic partner) who complete their health actions between October 1 and December 31 will receive Delta Health Rewards dollars for both 2014 and 2015.
	For example, if you get a physical exam on November 15, 2013, you can receive rewards dollars for that health action for both 2014 and 2015. Rewards dollars for 2015 will be deposited on January 1, 2015. For more information, refer to the extension information on DeltaNet.
16	Why is Delta asking me to participate in Delta Health Rewards?
	Our people are our brand and drive our success, and we want to encourage everyone to become active participants in their health and take steps to prevent serious health issues from developing or getting worse. In addition, with more than 70% of health care costs generally associated with behavior and lifestyle choices, it's important that each of us takes the steps necessary to achieve and maintain a healthy lifestyle and help control rising health care costs. We are self-insured for health care, so what we all spend affects each of us – in the premiums we pay and in the impact on our profit

sharing. Delta is committed to providing our employees and their families with valuable tools and resources through our wellness programs that can help you achieve and maintain good health. Participation is voluntary, but those who choose to participate can expect to receive more financial assistance with the cost of their healthcare. I am not currently enrolled in a Delta account-based medical option. Am I out of luck or will I be able 17 to receive Delta Health Rewards if I enroll this fall for 2014? There is a one-time special allocation of Delta Health Rewards dollars for each employee and the employee's eligible spouse/same-sex domestic partner that will apply if either or both the employee and spouse/same-sex domestic partner is not covered under an HRA or HSA option for a year. For example, if you and your spouse opted out of Delta coverage in 2013, you were not able to participate in the Delta Health Rewards Program for the majority of the October 1 to September 30 measurement period. If you both enroll in the Diamond HSA option for 2014, then under the one-time special rule, your Optum Bank HSA will be credited with the maximum Delta Health Rewards dollars that you and your spouse could have earned in 2013 even if you did not earn all of those Delta Health Reward dollars. This special rule only applies one time. So if in a later year, you and/or your spouse/same-sex domestic partner choose again not to enroll in a Delta HRA or HSA option for a period of time and then return to one of those options in the future, you will not receive an automatic allocation of Delta Health Reward dollars. 18 When I complete the Health Assessment, who can see my information, and what are they doing with it? Your participation in Delta Health Rewards, including biometric screenings and online health assessments, is voluntary and confidential. Personal health information is protected by privacy laws. None of your individual health details will be shared with Delta - ever. The health assessment is a questionnaire that was created by health experts from the University of Michigan. All of the questions included are intended to create a health risk score for each individual based on the answers provided. This risk score is intended to help create awareness of the areas of an individual's personal health or lifestyle behaviors that might benefit from increased attention or proactive changes to live longer, healthier lives. Delta does not receive your answers to this health assessment. The answers go to United Healthcare who may use them to reach out to you through the Delta Health Direct program. This program is administered by UnitedHealthcare nurses, specialists and wellness coaches. There are many disease management and health improvement programs offered by this service and it is included in the fee we pay UnitedHealthcare. Since you pay for this service as part of your healthcare premium, Delta wants you and your spouse/same-sex domestic partner to have every opportunity to hear about and use these programs. You can be assured that the information provided through the health assessment is not used now, and will never be used, to deny coverage for any individual based on a chronic condition he/she may have, or may develop over time. Delta has never denied coverage for pre-existing conditions, and does not intend to start now (and could not do so in any event). This practice will not be allowed by any employer or health plan in the future as healthcare reform restricts this. 19 What are the latest results of the first year of the Delta Health Rewards program, and when will I know more about year 2? Company-wide results can be viewed on the Delta Health Rewards site located on DeltaNet. Results reported for employees and their spouses/same-sex domestic partners as of August 13 are: Visit your network doctor for an annual physical exam - 49% Complete the online health assessment on myHealthcareView.com - 41%

DENTAL

Direct quit tobacco program - 24%

Identify yourself as a non-tobacco user on the health assessment or complete the Delta Health

20	Are there any changes to the Comprehensive Dental Option, Preventive Dental Option, or DeCare
	Dental Option for 2014?
	No, there are no plan design changes to dental options for 2014.
21	Will premiums change for 2014 dental coverage?
	Premiums are increasing less than \$4.00 per month, depending on the option you enroll in and the
22	coverage tier you elect.
22	Will I receive a new dental ID card for 2013?
	Delta Dental of Minnesota and DeCare Dental will print and mail new dental ID cards only to
	employees who newly enroll in coverage or enroll in a different dental option for 2014. DISABILITY
23	When can I use my Certified Time
23	Currently, you can use your Certified Time beginning on your eighth day of your approved absence
	due to illness, injury or pregnancy. Beginning on April 1, 2014, you can use your banked Certified
	Time beginning on the first day of your approved absence as long as the absence is longer than 7
	calendar days. This policy change allows you to preserve other forms of paid time off like PPT and
	vacation in the event of extended illness.
24	What is the new Pre-Disability Earnings formula for flight attendants?
	Pre-Disability Earnings (PDE) for flight attendants will be calculated using your average daily earnings
	from the prior 12 months and adjusting it to reflect your current Flight Pay Rate. This new calculation
	method will more closely align a flight attendant's PDE with his or her pay as it grows through step
	increases or general pay raises - this is similar to how the ground employee PDE value increases
	through step increases or general pay raises.
25	What is the difference between the Short-Term Disability 30 Day Option and the Standard Option?
	Under the Standard Option, optional STD benefit payments begin after you have been absent for
	seven calendar days due to a non-work-related illness or injury, or pregnancy and your Certified Time
	balance has been exhausted.
	Under the 30 Day Option, optional STD benefit payments begin after the 30th day of your approved
	absence due to a non-work-related illness or injury, or pregnancy and after your Certified Time
	balance has been exhausted. Once your Certified Time is exhausted or if you have no available
	Certified Time, benefits under your optional STD coverage will begin no earlier than the 31st day of
	your approved absence.
26	Who is eligible to enroll in the 30 Day Short-Term Disability Option (30 Day Option)?
	Flight attendants and ground employees with less than 40 days of Certified Time are eligible to enroll
	in the 30 Day Option.
27	Why are employees with 40 or more days of Certified Time not eligible to enroll in the 30 Day
	Option?
	The 30 Day Option provides a less expensive premium because participants wait for 30 days for
	benefits to begin. Employees with 40 or more days of Certified Time already receive a reduction in
	their Optional STD premiums because their optional STD benefit payments will not begin until at
	least the 41st day of their approved disability absence – after their Certified Time is exhausted.
28	If I haven't enrolled in Optional STD coverage in the past, will I have to provide Evidence of
	Insurability (EOI) if I enroll this year?
	Eligible employees who have waived coverage previously and elect to enroll during this fall's Open
20	Enrollment will be required to provide EOI.
29	If I'm currently enrolled in the Standard Option, will I need to submit EOI to enroll in the 30 Day
	Option?
	Employees who are enrolled in the Standard Option will not be required to provide EOI if they elect
20	the 30 Day Option during an Open Enrollment period.
30	What if I switch from the 30 Day Option to the Standard Option during Open Enrollment?
	Employees who are enrolled in the 30 Day Option and elect to enroll in the Standard Option during
Page 6	this fall's Open Enrollment will be required to provide EOI. September 2013 WINNING TOGETHER

31	Why should I enroll in Optional STD coverage?
	Just as preventive care can help prevent future illness, disability coverage can help prevent financial hardship if you become disabled. If you become disabled due to a non-work-related injury or illness, or pregnancy, the first seven days of your absence may be covered by any available Paid Personal Time (PPT) and/or vacation. Beginning in April 2014, Certified Time, if available, may also be used beginning on the first day of your approved absence and is payable until exhausted. Without optional STD coverage, you will have no pay protection after your Certified Time is exhausted until long-term disability coverage begins after 26 weeks of your approved disability absence. Can you afford to go several months without pay protection? If you are not enrolled in Optional STD and decide to enroll during Open Enrollment, you will need to provide EOI.
	OPTIONAL LIFE INSURANCE AND GROUP ACCIDENT (AD&D) INSURANCE
32	Are there any changes to optional life insurance coverage for 2014? There are no changes to optional life insurance coverage for 2014. There are also no rate increases this year, but your premium for optional life insurance coverage will change in 2014 if your age bracket has changed. If your age on your birthday in 2014 ends in a zero or a five, you will be moving into a new five-year age bracket and your optional life premium will go up for 2014.
33	If I am unable to complete the online MetLife Statement of Health (SOH) during Open Enrollment, will I be able to complete a paper SOH form at a later date?
	We encourage you to complete the online MetLife SOH form during the Open Enrollment period as you may be immediately approved for your requested life insurance coverage increase; however, if you are unable to complete the online MetLife SOH during the Open Enrollment period, you can request a paper SOH form, also referred to as the MetLife EOI form, at the end of your enrollment period by calling 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. You must return the paper MetLife Statement of Health form to MetLife within 30 days from the date you receive the paper form.
34	What are the changes to group accident insurance (AD&D) and private pilots accident insurance for 2014?
	Beginning in 2014, ACE American Insurance Company (ACE) is the new carrier for group accident and private pilots accident insurance. ACE offers benefit enhancements, reduced employee premiums, and improved claims processing and customer service through its call center service provider, Administrative Concepts, Inc., (ACI).
35	If I want to change my beneficiary for group accident insurance and private pilots accident insurance, who should I notify?
	If you wish to change your beneficiary for group accident insurance and private pilots accident insurance to be effective immediately, you are encouraged to change it with Prudential. They can accept beneficiary information through December 31st. ACI, the new service administrator for this coverage, can accept new beneficiary designations during Open Enrollment, but those beneficiaries will not be effective until January 1st. Your beneficiary information currently on-file with Prudential or designated with Prudential as of December 31st will automatically be transferred to ACI.

The information in this publication is only a summary of the benefit plans and other employee programs offered to employees of Delta Air Lines. The eligibility rules of the plans and programs described vary and not all Delta employees and retirees may be eligible for the programs and plans described here. For a complete discussion of eligibility rules, please refer to the plan or program documents or the summary plan descriptions located on Benefits Direct. If any conflicts arise between this publication and any plan or program documents, the plan or program documents will control.