

Check out your 2020

# BENEFITS



# WELCOME TO THE TEAM!

## You've got benefits choices to make.

Making culture a competitive advantage and living out our American Why means providing you with health and well-being options, programs and services that help you be your best self – whether you're caring for our customers or team members, or spending time with your friends and family.

Find out everything you need to know to choose your benefits with a little help from this guide and the resources available on [my.aa.com](https://my.aa.com).

**You must enroll within 60 days of your hire date to get the benefits you want for 2020!**

On the cover, clockwise from top right: 1. **Dona Cunningham**, AAdvantage Member Services Supervisor with husband Jody and daughter Kendra, 2. **Thessly Mesa**, Customer Service Agent, 3. **Nefertiti Bautista-Buckingham**, IT Applications Senior Administrator, 4. **Lambrini Karnava**, Flight Attendant, with husband Konstantinos and daughter Ismini-Danaë, 5. **Brian Murphy**, Pilot, and son Jake, 6. **Mike Kuzlik**, Flight Attendant





**Troy Muenzer**  
Flight Attendant

# Welcome aboard!

Enroll within 60 days of your hire date to choose the benefits that work best for you and your family.

Choose carefully. **You can enroll in any plan within your first 60 days.** If you don't enroll, you'll be automatically enrolled in Core medical coverage for you only, plus basic life insurance. Once your enrollment window ends, you won't be able to make any changes during 2020 unless you have a qualifying life event, such as having a baby or getting married.

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# ELIGIBILITY

## Who is eligible

As a U.S.-based team member, you are eligible for a wide array of benefits. You may also enroll your eligible dependents, including your:

- Spouse
- Dependent children up to age 26, or to any age if considered a disabled dependent.<sup>1</sup>

For **Core** option coverage, as well as dental, vision, and life and accident insurance, you may enroll your eligible domestic partner and domestic partner's children up to age 26, or to any age if considered a disabled dependent.<sup>1</sup>

You will be asked to provide documentation for any newly enrolled dependents before their coverage can begin.

## Are you married to another American team member?

You can enroll in medical, dental and vision coverage separately or as a dependent. Be sure to compare costs. It will cost more to be enrolled as a spouse than if you enroll as a team member. If you're already covered under your American spouse's coverage and want to be covered as a team member, call the Benefits Service Center at **888-860-6178**.

<sup>1</sup> Refer to your [Summary Plan Description](#) for the details.

# HEALTH CARE

**Johnny Guzman**

AACU Member Services  
Representative, with husband  
Adam, son Dardo, and Peanut



# Medical

You have these options to choose from.

## PPO 80



### Lower paycheck contributions

The lowest paycheck contributions of the PPOs, with the highest deductible and out-of-pocket maximum. For non-emergency hospital care, the plan pays 80% after the deductible until you reach the out-of-pocket maximum. Copays continue even after the out-of-pocket maximum is reached.

## PPO 90



### Middle of the road

Higher paycheck contributions balanced by a moderate deductible and out-of-pocket maximum. For non-emergency hospital care, the plan pays 90% after the deductible until you reach the out-of-pocket maximum. Copays continue even after the out-of-pocket maximum is reached.

## PPO 100



### Lowest out-of-pocket costs

The highest paycheck contributions, with a moderate deductible and lowest out-of-pocket maximum. Copays continue even after the out-of-pocket maximum is reached.

## CORE



### Comes with an HSA and offers domestic partner coverage

You'll pay the lowest paycheck contributions for this option, and it's the only one that comes with a tax-advantaged health savings account (HSA). In this option, you can cover an eligible domestic partner.

## DFW CONNECTEDCARE

(Available only in DFW area)



### Predictable costs and integrated care

There's no deductible with this plan, and you pay copays for most care and prescriptions. Your expenses are more predictable, but you must use in-network providers.

DFW ConnectedCare is available only in the Dallas-Fort Worth area. Check the [eligibility map](#) to see if this plan is available to you.





**Rebecca Trujillo**, IT Senior Project Manager, with **Kaitlin Trujillo**, Revenue Accounting Specialist

## FEATURES

# But wait, there's more

### Accolade<sup>1</sup>

Find personalized help for health care decision-making, including finding quality doctors and understanding your medical coverage.

### Advance Medical<sup>2</sup>

This expert second opinion program gives you access to some of the best medical minds to help you make a decision when facing a serious medical condition.

### Doctor On Demand<sup>3</sup>

Connect with a doctor 24/7 using your camera-enabled smartphone, tablet or computer.

### Onsite Clinics

Convenient, affordable access to clinics for team members with health practitioners at several major locations.

### Naturally Slim

Naturally Slim is an online program that helps you change how and when you eat instead of what you eat.

### Optum Employee Assistance Program (EAP)

Find confidential help managing stress, life changes, financial issues and more. Work with a counselor over the phone or in person.

### Optum WorkLife Convenience Services

Trust your "personal assistant" to research and provide resource options for a variety of services, including home and car repairs, travel, loan consolidation and lawn care.

<sup>1</sup> Accolade is not available for DFW ConnectedCare members, but that plan offers a similar service.

<sup>2</sup> Advance Medical is available to American Medical Plan participants in the American-sponsored medical options, including those enrolled in HMO options.

<sup>3</sup> Doctor On Demand is available only to American Medical Plan participants. This does not include HMO options.

# DFW ConnectedCare

We've partnered with Baylor Scott & White Quality Alliance (BSWQA) — an integrated health care network that is part of Baylor Scott & White Health (BSWH) — to offer you a new kind of health care plan **only available in the Dallas-Fort Worth (DFW) area.**

**DFW ConnectedCare** exclusively uses the BSWQA network of more than 5,000 primary and specialty care providers, 50 hospitals, and 95 facilities and laboratory and imaging service providers — all conveniently located throughout the DFW area. In addition, BSWQA partners with select providers and facilities from Methodist Health System, Cook Children's Health Care System and Children's Health.

Your coordinated care is delivered exclusively by this network, and your primary care physician (PCP) acts as a quarterback for your care. But they're not a gatekeeper. Your PCP and all of your other BSWQA health care providers and facilities work together to understand your health care needs.

With this unique understanding of you, your care team is empowered to deliver coordinated care and robust in-network resources to help ensure you get the right care at the right time. Check to see if your preferred providers are in-network by visiting [dfwconnectedcare.com](https://dfwconnectedcare.com).

As you decide whether this option is right for you and your family, read more details on [page 10](#) and in the plan's Summary Plan Description (SPD) on [my.aa.com](https://my.aa.com).

## PLAN FEATURES

### A lot to love

#### No deductible

You won't have to pay a large out-of-pocket expense before the plan starts sharing your costs.

#### Copays when you need care

With copays, you'll know how much you'll spend for most care.

#### Choice of providers

The BSWQA network has a sizable footprint, with its more than 5,000 conveniently located medical providers. Nearly 95% of team members living in the Dallas-Fort Worth area will have access to a PCP within 10 miles of their home.

#### Faster access

Take advantage of same-day appointments, extended hours and onsite lab and imaging services. Also, Baylor Scott & White Health (BSWH) providers have appointment spots slated just for patients enrolled in DFW ConnectedCare.

#### Navigation and support

Through the DFW ConnectedCare Center and the MyBSWHealth mobile app, dedicated health care coordinators are available to assist you with appointment scheduling, provider searches, where to go for care and billing questions.

#### Convenient care

Manage your health care needs, review your medical records, make appointments and see a doctor through Video Visits or eVisits, all with the MyBSWHealth mobile app.



# Medical comparison

## What you pay

		PPO 80		PPO 90		PPO 100		Core		DFW ConnectedCare (Learn more on page 10)
		In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network	Only in-network coverage
Deductible	You Only	\$450	\$900	\$225	\$450	\$225	\$450	\$1,500	\$4,000	\$0
	Family	\$900	\$1,800	\$450	\$900	\$450	\$900	\$3,000 <sup>1</sup>	\$8,000 <sup>1</sup>	\$0
Out-of-pocket maximum	You Only	\$3,000 (includes deductible)	\$6,000 (includes deductible)	\$1,500 (includes deductible)	\$3,000 (includes deductible)	\$225 (includes deductible)	\$3,000 (includes deductible)	\$4,000 (includes deductible)	\$12,000 (includes deductible)	\$3,500
	Family	\$6,000 (includes deductible)	\$12,000 (includes deductible)	\$3,000 (includes deductible)	\$6,000 (includes deductible)	\$450 (includes deductible)	\$6,000 (includes deductible)	\$8,000 <sup>2</sup> (includes deductible)	\$24,000 (includes deductible)	\$7,000
Preventive care		\$25 <sup>3</sup> no deductible	Not covered	\$25 <sup>3</sup> no deductible	Not covered	\$25 <sup>3</sup> no deductible	Not covered	\$0 no deductible	40% after deductible	\$0
Onsite clinic		\$20 <sup>3</sup> no deductible	N/A	\$20 <sup>3</sup> no deductible	N/A	\$20 <sup>3</sup> no deductible	N/A	20% <sup>4</sup> after deductible	N/A	\$20 <sup>5</sup>
Telemedicine		\$20 <sup>3</sup> no deductible	N/A	\$20 <sup>3</sup> no deductible	N/A	\$20 <sup>3</sup> no deductible	N/A	20% <sup>6</sup> after deductible	N/A	\$10 <sup>5</sup>
PCP visit		\$25 <sup>3</sup> no deductible	40% after deductible	\$25 <sup>3</sup> no deductible	30% after deductible	\$25 <sup>3</sup> no deductible	20% after deductible	20% after deductible	40% after deductible	\$15 <sup>5</sup>
Specialist visit		\$40 <sup>3</sup> no deductible	40% after deductible	\$40 <sup>3</sup> no deductible	30% after deductible	\$40 <sup>3</sup> no deductible	20% after deductible	20% after deductible	40% after deductible	\$50 <sup>5</sup>
Outpatient hospitalization		20% after deductible	40% after deductible	10% after deductible	30% after deductible	\$0 after deductible	20% after deductible	20% after deductible	40% after deductible	\$300 <sup>5</sup>
Inpatient hospitalization		20% after deductible	40% after deductible	10% after deductible	30% after deductible	\$0 after deductible	20% after deductible	20% after deductible	40% after deductible	\$500 <sup>5</sup> /day, \$1,500 <sup>5,7</sup> max
Urgent care		\$40 <sup>3</sup> no deductible	40% after deductible	\$40 <sup>3</sup> no deductible	30% after deductible	\$40 <sup>3</sup> no deductible	20% after deductible	20% after deductible	40% after deductible	\$75 <sup>5,8</sup>
Emergency room		\$100 <sup>3,9</sup> no deductible	\$100 <sup>3,9</sup> no deductible	\$100 <sup>3,9</sup> no deductible	\$100 <sup>3,9</sup> no deductible	\$100 <sup>3,9</sup> no deductible	\$100 <sup>3,9</sup> no deductible	20% after deductible	20% after deductible	\$300 <sup>5,9,10</sup>

<sup>1</sup> If more than one person is covered, the family deductible must be met.

<sup>2</sup> There is an individual out-of-pocket maximum of \$6,850.

<sup>3</sup> Copays do not count toward the deductible and continue after you meet your out-of-pocket maximum.

<sup>4</sup> Before meeting the deductible, Core participants will pay \$40.

<sup>5</sup> Copays count toward the out-of-pocket maximum.

<sup>6</sup> Before meeting the deductible, Core participants will pay \$59.

<sup>7</sup> Inpatient maximum is \$1,500 per hospitalization occurrence.

<sup>8</sup> Copay at a Baylor Scott & White urgent care center is \$15.

<sup>9</sup> Copay waived if admitted.

<sup>10</sup> If a non-emergency, you'll pay \$300 + 40%.

Your monthly cost of coverage (full time)	PPO 80	PPO 90	PPO 100	Core <sup>1</sup>	DFW ConnectedCare*
You Only	\$35.60	\$106.90	\$241.07	\$67.69	\$97.90
You + Spouse	\$71.21	\$213.77	\$481.07	\$176.00	\$254.56
You + Child(ren)	\$69.32	\$208.01	\$473.68	\$121.85	\$176.23
You + Family	\$120.38	\$361.82	\$823.66	\$236.92	\$342.68

<sup>1</sup> You can enroll your spouse or your domestic partner for coverage in the Core option.

## \* FYI: DFW ConnectedCare

Before choosing this plan, consider these details.

### Dallas-Fort Worth area only

Covered care is offered only by the BSWQA network in the DFW area.

If you have covered dependents at college or living outside the metroplex, this option probably isn't right for you.

### Traveling

If you are traveling outside of the Dallas-Fort Worth area, but are within the United States, you'll have convenient access to urgent and emergent care facilities through the **Aetna Signature Administrators Network**. Only urgent and emergent care while traveling outside the DFW area will be covered. If you are traveling outside the U.S., emergencies are always covered as they would be in-network.

### Network

In the DFW area, there is no coverage outside the BSWQA network unless you use an emergency room for a true emergency. If you or one of your dependents is under the care of a provider outside the BSWQA network and no other provider can lead that care, this option may not be for you. To find providers in the BSWQA network, visit [dfwconnectedcare.com](http://dfwconnectedcare.com).

### Network and claims administrators

In the **Core** and **PPO 80/90/100** options, BlueCross BlueShield or UMR is your network and claims administrator. In the **DFW ConnectedCare** option, your network administrator is BSWQA and your claims administrator is WebTPA.

### For part-time team members

Find monthly paycheck contributions on [my.aa.com](http://my.aa.com).

### LOOKING FOR HMO INFORMATION?

Go to [my.aa.com](http://my.aa.com).

# Prescription drug comparison (Express Scripts)

## What you pay

		PPO 80		PPO 90		PPO 100		Core <sup>1</sup>		DFW ConnectedCare
		In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network	In-network	Out-of-network	Only in-network coverage
Retail (up to 30 days)	Generic	\$15 <sup>2,3</sup> no deductible	Not covered	\$15 <sup>2,3</sup> no deductible	Not covered	\$15 <sup>2,3</sup> no deductible	Not covered	20% <sup>3</sup> after deductible	40% after deductible	\$20 <sup>3,4</sup>
	Preferred	\$30 <sup>2,3,5</sup> no deductible	Not covered	\$30 <sup>2,3,5</sup> no deductible	Not covered	\$30 <sup>2,3,5</sup> no deductible	Not covered	20% <sup>3,5</sup> after deductible	40% after deductible	\$50 <sup>3,4</sup>
	Non-Preferred	\$50 <sup>2,3,5</sup> no deductible	Not covered	\$50 <sup>2,3,5</sup> no deductible	Not covered	\$50 <sup>2,3,5</sup> no deductible	Not covered	20% <sup>3,5</sup> after deductible	40% after deductible	\$100 <sup>3,4</sup>
Smart90 and Mail (up to 90 days)	Generic	\$30 <sup>2,3</sup> no deductible	Not covered	\$30 <sup>2,3</sup> no deductible	Not covered	\$30 <sup>2,3</sup> no deductible	Not covered	20% <sup>3</sup> after deductible	Not covered	\$40 <sup>3,4</sup>
	Preferred	\$60 <sup>2,3,5</sup> no deductible	Not covered	\$60 <sup>2,3,5</sup> no deductible	Not covered	\$60 <sup>2,3,5</sup> no deductible	Not covered	20% <sup>3,5</sup> after deductible	Not covered	\$100 <sup>3,4</sup>
	Non-Preferred	\$100 <sup>2,3,5</sup> no deductible	Not covered	\$100 <sup>2,3,5</sup> no deductible	Not covered	\$100 <sup>2,3,5</sup> no deductible	Not covered	20% <sup>3,5</sup> after deductible	Not covered	\$200 <sup>3,4</sup>

**NOTE:** You pay the lesser of the copay/coinsurance or full cost for all prescription purchases.

<sup>1</sup> In the Core option, you are responsible for the full cost of prescriptions until you reach your deductible.

<sup>2</sup> Copays do not count toward the deductible and continue after you meet your out-of-pocket maximum.

<sup>3</sup> To avoid a penalty, you must use mail order or a Baylor Scott & White (in DFW), CVS or Safeway-owned retail pharmacy for maintenance and long-term prescriptions after the first three fills.

<sup>4</sup> Copays count toward the out-of-pocket maximum.

<sup>5</sup> If you select a brand-name when a generic is available, you pay the generic coinsurance plus the difference between the generic and the brand-name price.



# Three ways to save

## 1

### Sign up for low- to no-cost prescriptions for certain conditions

StayWell Rx, part of your Express Scripts prescription drug benefits, helps you save on eligible medications for diabetes, high blood pressure and asthma, as well as certain supplies such as test strips and inhalers.

When you enroll in StayWell Rx, you'll receive 90-day supplies of generic medications for **free** and brand-name medications for **only \$15**. Learn how to enroll on [my.aa.com](https://my.aa.com).

## 2

### Find in-network pharmacies

You can save money by using in-network pharmacies, which offer medications at negotiated (discounted) rates. Find one on the Express Scripts website through [my.aa.com](https://my.aa.com).

## 3

### Choose generics

You'll generally pay less for generics than for brand-name drugs. Ask your provider if a lower-cost option is available for your medication.

### WANT MORE DETAILS?

Go to the Plan Guides page of [my.aa.com](https://my.aa.com).



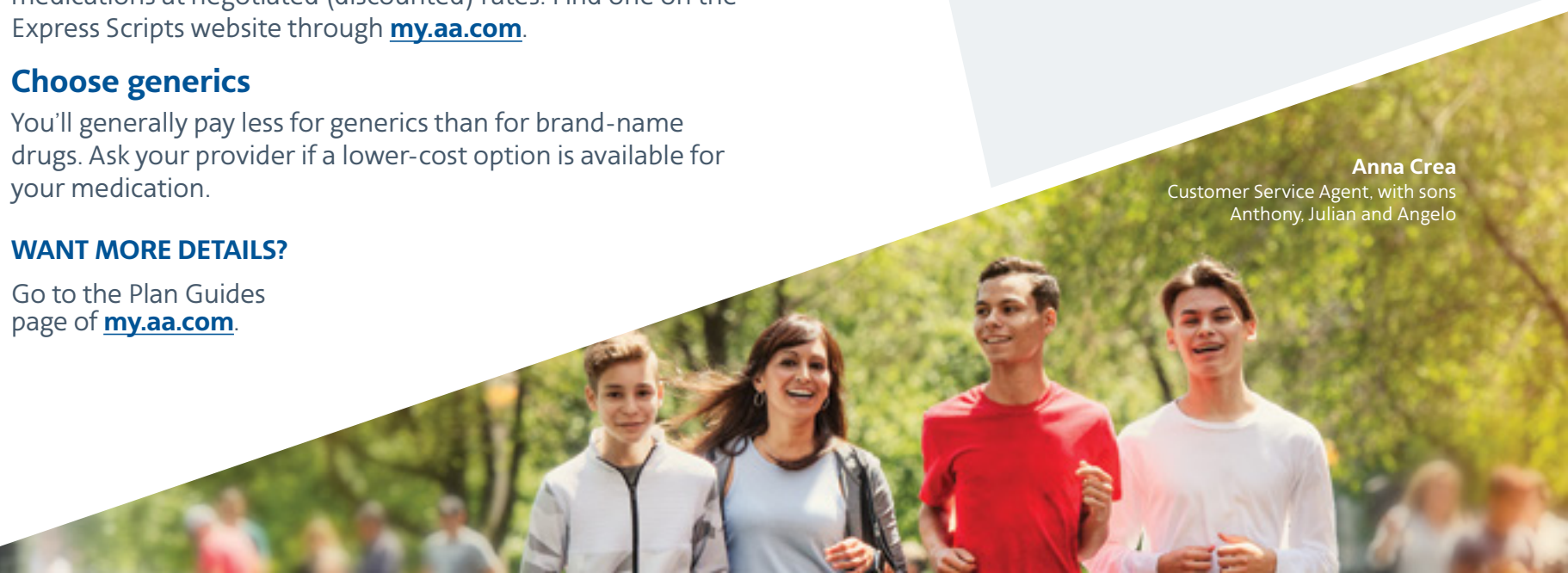
### Pay less for 90-day prescriptions

For the lowest costs on long-term medications, fill your 90-day prescriptions by mail order or at one of these locations:

- CVS (freestanding or located in Target).
- Safeway-owned pharmacies, including at any Safeway-owned chains, such as Tom Thumb, Randalls and Vons.
- Baylor Scott & White pharmacies (in DFW).

**Anna Crea**

Customer Service Agent, with sons  
Anthony, Julian and Angelo



# Dental (MetLife)

	Dental PPO		
	In-network	Out-of-network	
Deductible	None	\$50 per person	\$100 per family
Annual maximum benefit Preventive, basic and major care	\$1,500 per person	\$1,000 per person	
Lifetime maximum benefit Orthodontic care	\$2,000 per adult and child	\$2,000 per adult and child	

## What you pay

Preventive care	0% no deductible	20% after deductible
Basic care	20% no deductible	50% after deductible
Major care	50% no deductible	50% after deductible
Orthodontic care	50% no deductible	50% no deductible
Your monthly cost of coverage Full time	\$3.09 You Only	<b>For part-time team members</b> Find monthly paycheck contributions on <a href="http://my.aa.com">my.aa.com</a> .
	\$5.93 You + Spouse/Domestic Partner	
	\$5.74 You + Child(ren)	
	\$10.07 You + Family	



### Stay in-network or spend a lot more

You will spend a lot more money if you see an out-of-network dentist. In-network dentists offer services at negotiated rates. Avoid expensive surprises and find a network provider on the MetLife website through [my.aa.com](http://my.aa.com).

# Vision

(EyeMed)

		Vision plan	
		In-network (what you pay)	Out-of-network (what the plan reimburses)
Eye exam <sup>1</sup>		\$10	Up to \$40
Eyeglass frames <sup>1</sup>		\$0, up to \$140 allowance; 20% discount on amount more than \$140	Up to \$45
Eyeglass lenses <sup>2</sup>	Single vision	\$25	Up to \$40
	Bifocal	\$25	Up to \$60
	Trifocal	\$25	Up to \$80
	Standard progressive	\$25	Up to \$60
	Standard anti-reflective coating	\$40	Up to \$3
	UV treatment or tint, or standard plastic anti-scratch coating	\$0	Up to \$8
	Photocromatic/transitions	\$65	Up to \$5
Contact lenses <sup>2</sup>	Standard fitting	\$0, up to \$55 allowance	Not covered
	Conventional	\$0, up to \$150 allowance; 15% discount on amount more than \$150	Up to \$150
	Disposable	\$0, up to \$150 allowance	Up to \$150
Laser vision correction		15% discount on retail amount or 5% off promotional price at U.S. Laser Network	Not covered
Your monthly cost of coverage		\$5.28 You Only	
		\$10.24 You + Spouse/Domestic Partner	
		\$10.05 You + Child(ren)	
		\$14.37 You + Family	



## Save money

You save money if you use EyeMed in-network providers, including LensCrafters, Pearle Vision and Target Optical. Go to [my.aa.com](https://my.aa.com) to find a network provider near you.

<sup>1</sup> Covered once per calendar year.

<sup>2</sup> Either eyeglasses or contact lenses are included once per calendar year.



# HEALTH ACCOUNTS

You can contribute pre-tax dollars to one of these accounts to pay for eligible medical, prescription drug, dental and vision expenses.

**Christopher Lester and Demetrius Lester**  
IT Operations Help Desk Associate Analyst and Customer Relations Representative



American offers several accounts you can use to pay for eligible health care expenses on a pre-tax basis, all administered by Smart-Choice Accounts.

	HSA (Health Savings Account)	Limited Purpose FSA <sup>1</sup> (Flexible Spending Account)	HRA (Health Reimbursement Account)	Health Care FSA <sup>1</sup> (Flexible Spending Account)
What medical option is eligible?	Core	Core	All except Core	All except Core
What can it be used for?	Medical, prescription, dental and vision expenses <sup>2</sup>	Dental and vision expenses <sup>2</sup>	Medical, prescription, dental and vision expenses <sup>2</sup>	Medical, prescription, dental and vision expenses <sup>2</sup>
How is it funded?	You can contribute on a pre-tax basis or from <b>Well-Being Rewards</b>	You can contribute on a pre-tax basis	<b>Well-Being Rewards</b>	You can contribute on a pre-tax basis
What's the maximum annual contribution?	<b>\$3,550</b> (You Only) <b>\$7,100</b> (Family) <b>+\$1,000</b> (If over 55) Includes earned Well-Being Rewards	<b>\$2,700</b>	N/A	<b>\$2,700</b>
Which account pays first?	Your HSA will automatically pay medical expenses first. Your Limited Purpose FSA, if you have one, will automatically pay dental and vision expenses first		Your Health Care FSA will pay first, if you have one	
Do my contributions carry over?	Yes, unused HSA funds are always yours to keep	Up to <b>\$500</b> carries over to the following year; the rest is lost	Yes, as long as you remain enrolled in <b>PPO 80/90/100</b> or <b>DFW ConnectedCare</b>	Up to <b>\$500</b> carries over to the following year; the rest is lost
If I leave American, do I lose it?	Never	You may submit claims for eligible expenses incurred only through the last day of your employment, unless you continue coverage under COBRA		

<sup>1</sup> If you are hired during November or December, you may not participate in the FSA during the current year, but may enroll for the following calendar year.

<sup>2</sup> See IRS Publications **502** and **969** for details.



## Why consider the Core with HSA?

**Tax savings.** An HSA is a tax-free health savings vehicle. You won't pay taxes on your HSA contributions, including earnings and interest, as long as you use your HSA for eligible expenses.


**HSA is yours forever.** You never lose the money in your HSA. The funds roll over each year, and you can continue to use them for eligible expenses, even if you leave American or retire.

**Dollars on day one.** When you enroll in the **Core** option and elect an HSA, we'll make all or part of your goal amount available to pay eligible expenses before your HSA is built up. The money is available starting on your coverage effective date. Want to learn more? Visit [my.aa.com](https://my.aa.com).

- **You Only:** Up to \$1,000 of what you choose to contribute
- **Family:** Up to \$2,000 of what you choose to contribute

**Pay less for coverage.** For You Only coverage, the **Core** option's paycheck contributions are 72% less than the **PPO 100** option and 37% less than the **PPO 90** option.

**Save for retiree health care.** Your HSA money goes with you into retirement, making it a smart long-term savings strategy.

A photograph of two women playing softball on a field. The woman on the left is wearing a white and black softball jersey with a red 'A' on the front, grey pants, and white sneakers. She is smiling and looking towards the camera. The woman on the right is wearing a red and black softball jersey, black pants, and black sneakers. She is wearing sunglasses and a softball glove, and is in the middle of a throwing motion. A yellow softball is visible in the air. In the background, there is a chain-link fence and some trees.

**Kathy Perla**, Revenue Accounting Specialist  
**Shirley Manzo**, IT Applications Senior Administrator



# WELL-BEING

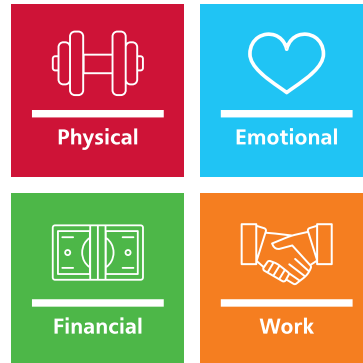
**Regina Webster**  
Flight Attendant

Our well-being programs help you reach your personal goals and earn rewards along the way.

# Journey to Well-Being

Our **Journey to Well-Being** program is designed to help you make lasting changes in **four key areas**:

Journey to Well-Being is available to all American team members and their covered family members age 18 or older. And if you're enrolled in an American medical option, you (and your covered spouse or domestic partner<sup>1</sup>) can each earn up to \$250 in Well-Being Rewards. Here's how:



- 1 Choose activities that speak to you, such as a biometric screening, running a 5K or creating a financial plan, to name a few.
- 2 Earn points for each activity you complete. As your points add up and you achieve new levels, you'll earn Well-Being Rewards (see below):

	Points earned	Rewards deposited <sup>2</sup>
Level 1: Learn	500	\$50
Level 2: Grow	1,000	\$50
Level 3: Achieve	1,500	\$50
Level 4: Inspire	2,500	\$100
Total Well-Being Rewards available		\$250

Learn more about earning rewards at [my.aa.com/journey](https://my.aa.com/journey).



## Well-Being Rewards pay off

Log in to the Journey to Well-Being website via [my.aa.com/journey](https://my.aa.com/journey) to get started. Your rewards will go into a health savings account (HSA) or health reimbursement account (HRA), depending on your medical option<sup>3</sup>.

You can use the money in your account for eligible medical, prescription, dental and vision expenses.

## The program supports you with:

- Dozens of activities to choose from
- Team and individual challenges
- Tools, information and educational content
- An easy-to-use well-being app
- Personalized coaching
- Social support


<sup>1</sup> Your domestic partner is eligible for Well-Being Rewards if enrolled in the Core option.

<sup>2</sup> Eligible team members and covered spouses or domestic partners only. You and your covered spouse or domestic partner can open an HSA if you are enrolled in the Core medical option. You will have an HRA if you're enrolled in any other eligible medical option.

<sup>3</sup> You'll have an HSA if you're enrolled in the Core medical option and an HRA if you're enrolled in any other eligible medical option.

Journey to Well-Being is powered by Limeade, an independent third party that American Airlines has contracted with to provide this service. Limeade is legally required to adhere to all of the terms and conditions of that contract, including compliance with HIPAA privacy and security rules and other state and federal privacy laws to safeguard your information and use it only for the purposes for which it was disclosed.



A photograph of a man and a woman walking on a wooden boardwalk in a rooftop garden. The man is pointing towards the city skyline in the background. The garden is filled with various plants and flowers, including purple ones. The skyline includes several tall buildings and a distinctive white, angular structure.

**Susan Pellettieri**, Flight Attendant,  
with husband Carl

# TAX SAVINGS



# Dependent Care FSA

You can set aside pre-tax money for eligible dependent day care expenses, up to:

- **\$5,000** per calendar year if you are single or married and filing your tax returns jointly, or
- **\$2,500** per calendar year if you are married and filing separately.

Money in your Dependent Care FSA<sup>1</sup> can be spent only on expenses necessary for you and your spouse to work or go to school full time. You can use your Dependent Care FSA for **dependents under age 13** whom you claim on your federal tax return (or for whom you are the custodial parent, if divorced) and/or **a spouse or dependent who is physically or mentally incapable of self-care** and lives in your home for more than half the year. For complete details, see [IRS Publication 503](#).

You may only be reimbursed up to the amount currently in your account at any time. If you leave American, you can submit claims for eligible expenses incurred through the last day of your employment. This account is administered by [Smart-Choice Accounts](#).

**Budget carefully!** You forfeit any amount you don't use by March 15, 2021.

<sup>1</sup> If you are hired during November or December, you may not participate in the FSA during the current year, but may enroll for the following calendar year.

# Transit Program

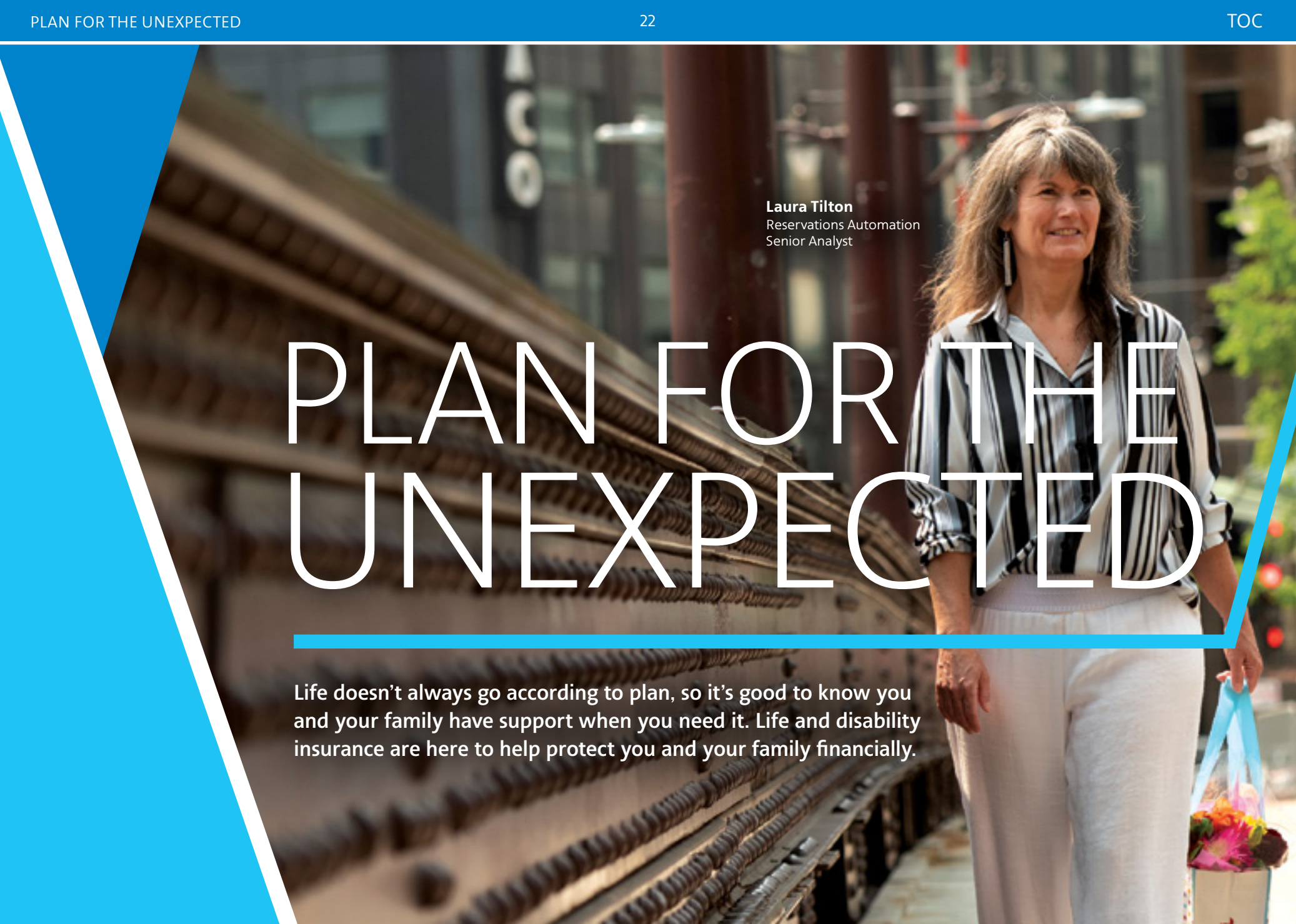
You can buy monthly commuter passes for bus and rail travel to and from work on a pre-tax basis. Participating in the Transit Program not only saves you money by lowering your taxable income, it helps the environment and buys you some 'me' time to listen to music or catch up on your reading.

The Transit Program is administered by Smart-Choice Accounts. Go to the [Benefits Service Center](#) and click on the "Transit Program" tile from the main page. Once there, click on "Let's Get Started" to order your Transit Products. You can manage or change orders on an ongoing basis — all online.



## Submitting FSA claims

Submit FSA claims to Smart-Choice Accounts [online](#) or through the Smart-Choice Mobile app. Download the app free from the [Apple App Store](#) or [Google Play](#).

A woman with long brown hair, wearing a black and white striped shirt and white pants, is walking on a city street. In the background, there is a large bridge with many lights. The woman is smiling and looking to the right. She is holding a blue bag with a floral pattern in her left hand.

**Laura Tilton**  
Reservations Automation  
Senior Analyst

# PLAN FOR THE UNEXPECTED

Life doesn't always go according to plan, so it's good to know you and your family have support when you need it. Life and disability insurance are here to help protect you and your family financially.

## Life and accident insurance

American provides basic life and accidental death & dismemberment (AD&D) insurance coverage to eligible team members. You can also purchase insurance for yourself and your dependents. AD&D pays for a covered accident that results in paralysis; a loss of life, speech, hearing or sight; and more.

As a newly eligible team member, you can elect up to the lower of three times your annual pay or \$500,000 in voluntary life insurance for you with no Statement of Health (SOH) required. Please refer to your Summary Plan Descriptions (SPDs) and certificates located on [my.aa.com](http://my.aa.com) for limitations.

## Child life insurance

If you are enrolling in child life insurance, you will be asked to designate your eligible child(ren). An eligible child is one of the following:

- Under the age of 26
- Deemed a disabled dependent (refer to the plan guides on [my.aa.com](http://my.aa.com))

## Disability insurance

American's disability insurance coverage replaces a portion of your income if you are unable to work for an extended period of time. You are eligible to elect long-term disability (LTD) coverage with American Airlines. Check your coverage options in the [Benefits Service Center](#) and make any needed changes to be sure you are protected in the event of disability.

When you enroll as a new hire, you do not need to provide an SOH. If you elect this coverage after your initial enrollment opportunity, you might be required to provide an SOH. New or increased coverage will be effective when MetLife approves your SOH.

### Salary-based benefit premium/coverage changes

Coverages and paycheck contributions for salary-based benefits, such as disability and life insurance, are subject to change throughout the year based on changes to your benefits salary (which, in most cases, is your base salary), seniority and/or age. If you wish to decrease or cancel your coverage due to an increase in paycheck contributions, please contact the [Benefits Service Center](#).

### Name your beneficiary(ies)

You can name your life and AD&D beneficiary in the [Benefits Service Center](#).

You can name your 401(k) beneficiary at [netbenefits.com/aa](http://netbenefits.com/aa).

# ADDED BENEFITS

These benefit elections roll over from year to year, so once you're enrolled, you'll keep this coverage until you cancel it.

**Tony Sapienza and Luis Ramirez**  
Fleet Service Clerks



## Extra coverage



### Hospital Indemnity Plan

Be ready for costs not covered by your medical options with hospitalization insurance from The Hartford. You'll be paid a fixed amount each day a covered person is hospitalized for a covered event (minimum \$1,000 for the first day and \$200 each following day). You and your family members are guaranteed to be accepted for coverage, with no statement of health required.

The payment is in addition to any other insurance you may have and is yours to spend as you wish. You pay contributions through payroll deduction.



**Benefits with this symbol can be added only within 60 days of your date of hire and during Annual Enrollment.**





## Critical Illness Insurance

Be prepared if critical illness strikes you or a dependent. This coverage from The Hartford can help safeguard your finances by providing a lump-sum payment when your family needs it most. Covered conditions include:

- Cancer
- Heart attack or stroke
- Coronary artery bypass
- End-stage renal disease
- Major organ transplant

The payment is in addition to any other insurance you may have and is yours to spend as you wish. You pay contributions through payroll deduction.



## Hyatt Legal Plan

Receive representation, unlimited phone advice and office consultations on personal legal matters, including:

- Estate planning
- Sale or purchase of your home, including refinancing
- Sale or purchase of your second or vacation home, including refinancing and home equity loans
- Family law, including contested adoption and contested guardianship or conservatorship
- Document review/preparation, including wills
- Assistance making insurance claims with your carrier
- Negotiation with creditors

You pay contributions through payroll deduction.

## Careington Dental Discount Program

You can enroll in the Dental Discount Program even if you don't enroll in MetLife dental coverage. This program is not insurance. It provides access to **20% to 60%** discounts at more than 70,000 dentists nationwide. If you think your expenses will exceed the maximum annual amount or won't be covered by your dental plan, you may want to consider both. About 30% of MetLife network dentists participate, so check the list of participating providers at [AAaddedbenefits.com](https://www.aaddedbenefits.com).

You pay your membership fees through payroll deduction.

# ADDED BENEFITS

## LifeLock Identity Theft Protection

Identity theft affects millions of Americans every year. The experts at LifeLock protect you before the damage is done. You pay premiums by credit card. Use promo code **AAEMP1** when you enroll to receive a discount of up to **40%**.

## Accident Insurance

The Hartford Accident Insurance provides a lump-sum payment if you experience a covered accident, such as a fracture, eye injury, concussion or burn. The payment is in addition to any other insurance you may have and is yours to spend as you wish. You pay contributions through payroll deduction.

## Auto and Home Insurance

Save on your coverage from three national carriers: Liberty Mutual, MetLife Auto & Home and Travelers. Auto coverage includes recreational vehicles, and home insurance also covers condo and renter's policies. You pay contributions through payroll deduction, electronic funds transfer (EFT) or direct bill.<sup>1</sup>

## Pet Insurance

Nationwide Pet Insurance covers a range of pet care services. You are free to visit any veterinarian. You pay premiums through payroll deduction, credit card or check.

<sup>1</sup> You may pay contributions through evenly distributed deductions from your paycheck, if you are eligible. A separate down payment is required in certain instances. Some carriers require a down payment and service fee associated with EFT or direct bill.

**Visit [Added Benefits](#) for contribution and provider details.**

**Sherrie Chatmon**  
Customer Service Agent

# ACCOLADE

## Personalized care

Accolade guides you through your health care experience with a dedicated, personal health assistant. They'll be there when you want to:

- **Find** quality doctors and services that can also save you money
- **Understand** your medical coverage or claim payments
- **Enroll** in StayWell Rx
- **Manage** your health and acute or chronic condition
- **Find** the right resources



**Phone**  
833-346-3929  
833-FIND-WAY



**Online**  
Access the Accolade member portal from [my.aa.com](https://my.aa.com) using your AA ID and password.



**App**  
Download the free Accolade app from the [Apple App Store](#) or [Google Play](#).

**NOTE:** You must be enrolled in the **PPO 80/90/100** or **Core** options to be eligible for Accolade's support.

# ENROLL

## Three steps to get the benefits you want for 2020

1

### Go

to [my.aa.com](https://my.aa.com) and type your question or a keyword(s) in the search bar to get the information you need quickly!

2

### Call

the **Benefits Service Center** at **888-860-6178**.

#### **Help is available**

Monday–Friday, 9 a.m.–6 p.m. CT.

3

### Enroll

**within 60 days of your date of hire.**

Go to the [New Hires tab](#) on [my.aa.com](https://my.aa.com) and click **Enroll Now** to make your health, life, accident and disability benefit choices.

Go to [Added Benefits](#) to make your added benefit elections.

## Helping you choose!

When you go online to the Benefits Service Center through [my.aa.com](https://my.aa.com) to enroll, you will have the option to enter your anticipated medical expenses for the rest of the year. The system will show you the estimated out-of-pocket cost for each plan to help you choose the best medical option for you.





**Kathleen  
Timotijevic**  
Flight  
Attendant

## If you enroll dependents

You will need to provide proof of dependent eligibility — such as marriage or birth certificates — for your spouse and children. You will receive a request for documentation from the [Benefits Service Center](#) and have 31 days to submit the required documentation.

Coverage for dependents won't be approved until your proof has been accepted. If you have questions about your dependents' proof of eligibility, call the Benefits Service Center at **888-860-6178**.

## If you are rehired

If you leave American and are then rehired within the same calendar year, you will be enrolled automatically in the benefits you had when you left. To change your elections, call **888-860-6178** within 60 days of your rehire date.



## If you don't enroll within 60 days of your date of hire

You will be enrolled automatically in:

- Core option medical coverage for you only
- Company-paid basic life insurance coverage

# LIFE HAPPENS

While you may make changes to most benefit elections during the year only if you experience a qualified life event, we know that life can change. If you have a qualifying life event, you will have up to **60 days** to make any needed changes to your benefits. You'll have 31 days after that to submit any required documentation. These events include:

- Having or adopting a child
- Getting married
- Gaining a domestic partner
- Having your spouse gain or lose benefits coverage
- Going on or returning from an unpaid leave of absence
- Getting divorced or legally separated

**For more qualifying life events, or to get started processing your change request, visit the [Life Events](#) page on Jetnet.**



**Matthew Parker**  
Sales Planning Analyst

Visit [my.aa.com](https://my.aa.com) for any other information.

# WHEN YOU NEED HELP

Call Accolade when you...

- Have questions related to your BlueCross BlueShield or UMR medical coverage
- Have claim payment questions
- Want to enroll in StayWell Rx
- Need assistance with managing your health
- Need help managing an acute or chronic condition
- Don't know who to call

**833-346-3929** (833-FIND-WAY)<sup>1</sup>  
Monday–Friday, 7 a.m.–10 p.m. CT

Call the Benefits Service Center when you...

- Have health spending account questions
- Have direct billing or benefits deduction questions
- Need dependent verification
- Need to enroll, or confirm or change who's covered

**888-860-6178**  
Monday–Friday, 9 a.m.–6 p.m. CT



Call these **resources directly** when you need specific help.

MetLife:	<b>866-838-1072</b>
EyeMed:	<b>844-714-5678</b>
Disability:	<b>800-638-6420</b>
Employee Assistance Program:	<b>800-363-7190</b>
Doctor On Demand:	<b>800-997-6196</b>
Journey to Well-Being:	<b>855-493-2582</b>
Advance Medical:	<b>855-212-1074</b>
Added Benefits through ABC:	<b>855-550-0706</b>

<sup>1</sup> If your need is urgent and after hours, call the same number to connect with the 24/7 nurseline. Of course, you should always call 911 in an emergency.

# Important notices

## Summary of Benefits and Coverage

American Airlines is required to provide you the Summary of Benefits and Coverage (SBC) and the Uniform Glossary (UG). We've created a separate SBC for each of the self-funded medical benefit options that are effective on Jan. 1, 2020, and the UG applies to all of these options. You can use the SBCs and the UG as quick references for what benefits are available in each option and an explanation of terms used in benefit plans.

You can access the SBCs and UG from [my.aa.com](https://my.aa.com).<sup>1</sup>

<sup>1</sup> If you would like to receive a paper copy of any of these documents, please contact the American Airlines Benefits Service Center at 888-860-6178, Monday–Friday, 9 a.m.–6 p.m. CT.

## Grandfathered plan status

The US Airways, Inc. Health Benefit Plan is comprised of the following medical plans: PPO 80/60, PPO 90/70, PPO 100/80, OOA 80, OOA 90, OOA 100 and Kaiser Permanente HMO. For purposes of this notice, the term “Plan” refers to all medical plan options listed above, except the Kaiser Permanente HMO.

The Plan is a “grandfathered health plan” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that the Plan is not required to include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits.

Questions regarding which protections apply and which protections do not apply to a grandfathered health plan, and what might cause a plan to change from grandfathered health plan status can be directed to **888-860-6178**.

You may also contact the Employee Benefits Security Administration, U.S. Department of Labor at **866-444-3272** or [dol.gov/ebsa/healthreform](https://dol.gov/ebsa/healthreform). This website has a table summarizing which protections do and do not apply to grandfathered health plans.

## About this overview

**DISCLAIMER:** This is an overview of your benefit options. The complete provisions of the plans are set forth in the plan documents, available for review on [my.aa.com](https://my.aa.com). If the information in this overview is inconsistent with the plan documents, the plan documents will govern. This overview is not intended as a contract of employment or a guarantee of current, past or future employment. The plan sponsor(s) reserves the right to amend or terminate each plan at any time.

# Welcome aboard!