

**Index of benefit plan information dated March 15, 2006:**  
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- I. [Technical Corrections to the Employee Benefits Guide](#)
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**NOTICE AND DOCUMENTATION OF TECHNICAL CORRECTIONS TO THE EMPLOYEE BENEFITS GUIDE FOR American Eagle Airlines, Inc, CORRECTIONS TO THE DECEMBER 15, 2005 SUMMARY OF MATERIAL MODIFICATIONS, AND TRIENNIAL HIPAA NOTICE OF PRIVACY PRACTICES (March 15, 2006)**

This document serves as notice to American Eagle Airlines, Inc. active and Leave-of-Absence employees of technical corrections and summary of material modifications made to your summary plan descriptions. This Notice and Summary of Material Modifications, together with the Employee Benefit Guide and Summaries of Material Modifications, make up the official plan documents and summary plan descriptions. **Please read this notice carefully, and place this notice with your summary plan description(s). The Summary Plan Descriptions are contained in the Employee Benefit Guide for American Eagle, Inc. (“EBG”).**

- Group Life and Health Benefits Plan for Employees of Participating AMR Corporation Subsidiaries (Plan 501, EIN #13-1502798)
- Supplemental Medical Plan for Employees of Participating AMR Corporation Subsidiaries (Plan 503, EIN #13-1502798)
- Long Term Care Insurance Plan for Employees of Participating AMR Corporation Subsidiaries (Plan 510- EIN #13-1502798)
- American Airlines Inc. Long Term Disability Plan ( Plan 509, EIN #13-1502798)

**Eagle Group Life and Health Benefits Plan**

**I. TECHNICAL CORRECTIONS TO THE EMPLOYEE BENEFIT GUIDE**

- All references to the “Benefits and Pay” page on Jetnet throughout the EBG are replaced with “Benefits”.
- Under “Medical Benefits Options” (page 5) first paragraph is revised as follows:  
**Some Medical Options are not offered in all locations. The PPO Options are offered in most locations, but if you live outside the UnitedHealthcare access area, you are not eligible for the PPO Options and may choose the Out of Area Option for medical coverage. The enrollment section on Jetnet will reflect which Options are available to you.**
- Under “Dependents of Deceased Employees” (page 16) the first sentence of the third paragraph is revised as follows:  
**Your Covered dependents can elect to continue Dental Benefits and certain other benefits (if applicable) under COBRA at the full COBRA rate, if they had Dental Benefits at the time of your death.**
- Under “Enrollment” section, “When Coverage Begins” (page 21) the first sentence of the first paragraph is revised as follows:  
**If you enroll by the enrollment deadline, your selected coverage (if different from default coverage) is retroactive to the date you are first eligible for benefits and your paycheck is adjusted as necessary.**
- Under “Taxation of Benefits” (page 24) change the last entry at the end of the chart is revised as follows:

Type of Benefits	Before Tax?	May Waive?
Long Term Care Insurance Plan	No	Yes

- Under “Benefit ID Card” (page 25) first sentence of the first paragraph is revised as follows:  
**If you have elected to participate in a Medical Benefits Option (other than an HMO), or if you are a new participant to a Medical Benefit Option, UnitedHealthcare will mail your benefit ID cards to you.**