



IAM
DISTRICT 142

9633 S. 48th St. Ste. 100
Phoenix, Arizona 85044
(816) 982-6480
iamdl142@iamdl142.org
<https://atd142.org>

Date: June 17, 2026
File: QF – 2026

2026 – 124

IAM/Qantas Airways LAX Membership Update

Dear Sisters and Brothers:

Recently, the Company rolled out changes to your benefits for the upcoming plan year. Initial conversations while in negotiations gave the Union no indication of what those changes would entail. As you now know, those changes were significantly different than anything that has occurred in recent memory. Your IAM District 142 negotiating committee has performed a detailed analysis of the year-over-year changes and would like to highlight them for you in simple terms, which you can find on the attached pages with this bulletin.

As you can see, the Company has not made any meaningful changes to your benefit plans other than a drastic cost shift to all employees. For a Company touting its billion-dollar profit goals, this is a truly major level of disrespect not only for our IAM membership but for every US-based employee. Whatever raise the Company has given has just been erased.

Your negotiating committee is very familiar with changes of this nature, has already held discussions and generated proposals to prevent these drastic changes, and is prepared to present them at the bargaining table. While we question the Company's motives for these changes, they will occur until a new Collective Bargaining Agreement (CBA) is in place.

This is EVERYONE'S wake-up call to get involved. Another webinar will be held soon, and EVERYONE should participate. Discussions with and among District 142 leadership are occurring about upcoming membership/leadership engagement opportunities. Your solidarity and support will be instrumental in achieving an agreement worthy of your consideration.

Please remember, the ONLY official and correct sources of information regarding these negotiations and any other involvement of the Union with the Company are the official District 142 website, email and text bulletins, and official social media pages. If you are not currently signed up for email and text updates from District 142, you need to do so immediately. Go to www.atd142.org, and click on the boxes at the top of the homepage to "Join Our Email List" and "Sign up for Text Messages."

Your support and solidarity are crucial at this stage in the negotiations process. If you have any questions or concerns, contact a Shop Steward, General Chair, or Negotiating Committee member.

Sincerely and fraternally,

John M. Coveny, Jr.
President/Directing General Chair

James M. Samuel
General Chair

Boris Kochanoff
General Chair

Edward Berg
IAM Union Consultant

Saneel Kumar
LAME/Qantas Airways LAX

Miguel Maldonado
SAME/Qantas Airways LAX

JMC/td

cc: R. Johnsen, General Vice-President, Air Transport Territory
E. Fraser, Chief of Staff, Air Transport Territory
J. Carlson, Airline Coordinator, Air Transport Territory
D142 Executive Board

FOLLOW US ON FACEBOOK:



POST ON ALL IAM BULLETIN BOARDS

We compared the 2025–26 benefits information against the 2026–27 Open Enrollment information. The biggest change is that medical moves from UnitedHealthcare to UMR using the UHC Choice Plus network, the California HMO plans are eliminated, and the new EPO is offered to all locations. Dental and vision largely stay the same.

Bottom Line

Worse overall

Subject	Grade (your pocketbook)
HMO/EPO replacement is materially worse for California HMO members.	Fail
Deductible goes from none to \$1,500 individual / \$3,000 family.	Fail
Out-of-pocket max increases from \$1,500 / \$3,000 to \$4,000 / \$8,000.	Fail
Office visit copays increase from \$20 / \$40 to \$30 / \$50.	Fail
Outpatient surgery goes from no charge to \$750 copay.	Fail
Inpatient hospital goes from no charge to 20% after deductible.	Fail
Prescriptions stay the same.	Pass
PPO benefits are worse even though PPO payroll cost drops.	Fail
In-network deductible goes from none to \$500 individual / \$1,000 family.	Fail
Office visits worsen from \$15 / \$30 to \$25 / \$40.	Fail
Inpatient hospital changes from \$500 copay to 10% after deductible.	Fail
Out-of-network lab appears worse: 2026 says lab not covered / 50%, where 2025 showed 50% after deductible for out-of-network diagnostic services.	As Yet Unknown
HSA deductible increases slightly.	Fail
In-network deductible goes from \$3,300 / \$6,600 to \$3,400 / \$6,800.	Fail
HSA out-of-pocket max stays \$4,000 / \$8,000 in-network.	No Effect
Qantas HSA contribution stays \$500 employee-only / \$750 family or employee + dependent(s).	No Effect
EPO is now available to all locations, not just California, which is better for employees outside California who want an in-network-only lower-cost option.	No Effect
FSA limits improve.	No Effect
Health Care FSA increases from \$3,300 to \$3,400.	No Effect
Dependent Care FSA increases from \$5,000 to \$7,500.	No Effect
HSA IRS contribution limits improve.	No Effect
Employee-only limit increases from \$4,300 to \$4,400.	No Effect
Family / employee + dependents limit increases from \$8,550 to \$8,750.	No Effect
Catch-up remains \$1,000.	No Effect
Dental and vision benefits stay the same.	No Effect
Dental remains with UnitedHealthcare.	No Effect
Vision remains with UnitedHealthcare.	No Effect
Company continues paying 100% of vision cost.	No Effect

Medical benefit changes	2025–26	2026–27	Better or Worse
Carrier / administrator	UnitedHealthcare	UMR using UHC Choice Plus Network	Neutral, but employees should verify doctors
CA HMO	Available	Eliminated	Worse for CA HMO members
EPO	Not generally available; HMO was CA-only	EPO available to all locations	Better access for non-CA employees
EPO/HMO deductible	None	\$1,500 / \$3,000	Worse
EPO/HMO OOP max	\$1,500 / \$3,000	\$4,000 / \$8,000	Worse
EPO/HMO office visit	\$20 / \$40	\$30 / \$50	Worse
EPO/HMO inpatient hospital	No charge	20% after deductible	Worse
EPO/HMO outpatient surgery	No charge	\$750 copay	Worse
PPO in-network deductible	None	\$500 / \$1,000	Worse
PPO office visit	\$15 / \$30	\$25 / \$40	Worse
PPO OOP max	\$2,500 / \$5,000	\$2,500 / \$5,000	Same
HSA deductible	\$3,300 / \$6,600	\$3,400 / \$6,800	Slightly worse
HSA OOP max	\$4,000 / \$8,000	\$4,000 / \$8,000	Same
HSA employer contribution	\$500 / \$750	\$500 / \$750	Same
Prescription drugs	Mostly unchanged	Mostly unchanged	Same

The strongest negative change is the loss of the no-deductible HMO design. The new EPO has the same “in-network only” structure, but financially it is not equivalent to the old HMO. It has a deductible, a much higher out-of-pocket maximum, higher office copays, and new hospital/surgery cost exposure.

Cost changes — medical, biweekly payroll cost

PPO: cost improves, but benefits worsen

Coverage tier	2025–26 Select Plus PPO	2026–27 UMR PPO	Change
Employee only	\$81.21	\$70.38	(\$10.83)
Employee + spouse/RDP	\$249.81	\$216.49	(\$33.32)
Employee + child(ren)	\$216.91	\$187.98	(\$28.93)
Employee + family	\$438.96	\$380.42	(\$58.54)

So the PPO payroll deduction decreases, but the plan design is worse because a new deductible is added and some services shift to deductible/coinsurance.

HSA: cost increases slightly			
Coverage tier	2025–26 Select Plus HSA	2026–27 UMR HSA	Change
Employee only	\$33.60	\$37.13	\$3.53
Employee + spouse/RDP	\$138.84	\$153.41	\$14.57
Employee + child(ren)	\$103.76	\$114.65	\$10.89
Employee + family	\$237.66	\$262.61	\$24.95
The HSA is modestly more expensive, and the deductible also increases slightly.			
EPO compared with current CA HMO options			
The new EPO replaces the discontinued HMO structure, but the cost comparison depends on which CA HMO someone currently has.			
Coverage tier	2025–26 SignatureValueAdvantage HMO	2026–27 EPO	Change
Employee only	\$25.28	\$32.57	\$7.29
Employee + spouse/RDP	\$101.12	\$130.29	\$29.17
Employee + child(ren)	\$63.20	\$81.43	\$18.23
Employee + family	\$159.26	\$205.21	\$45.95
Coverage tier	2025–26 SignatureValue HMO	2026–27 EPO	Change
Employee only	\$36.79	\$32.57	(\$4.22)
Employee + spouse/RDP	\$137.27	\$130.29	(\$6.98)
Employee + child(ren)	\$97.19	\$81.43	(\$15.76)
Employee + family	\$222.93	\$205.21	(\$17.72)
For someone in the lower-cost SignatureValueAdvantage HMO, the EPO costs more and covers less. For someone in the higher-cost SignatureValue HMO, the EPO costs a little less but covers less.			
Dental and vision cost changes			
Dental benefits and rates are stated as unchanged. The 2026–27 biweekly dental costs are			
Coverage tier	DHMO	DPPO	
Employee only	\$2.67	\$6.81	
Employee + spouse/RDP	\$6.99	\$12.86	
Employee + child(ren)	\$4.93	\$9.52	
Employee + family	\$9.45	\$14.29	
The 2025–26 document shows the same dental per-pay-period rates, so I do not see a dental cost increase.			
Vision			
Vision remains \$0.00 for all tiers, and the 2026–27 presentation says the company will continue to pay 100% of vision costs.			
Other benefit changes worth flagging			
Open enrollment is mandatory for 2026–27. Everyone must log in to Paylocity to confirm, elect, or change benefits.			
Voluntary spouse life maximum may be lower. The 2025 guide states spouse/RDP supplemental life can go up to the lesser of 100% of employee life or \$500,000; the 2026 presentation shows spouse coverage up to the lesser of 100% of employee benefits or \$250,000. That appears worse, but I would confirm against the official SPD or carrier materials before treating it as final.			
Long-term disability wording changed. The 2025 guide says maximum benefit duration is to Social Security Retirement Age / reducing benefit duration, while the 2026 presentation says 24 months for own occupation. That may be a change in how the benefit is summarized, not necessarily the full maximum benefit duration, so it needs SPD confirmation.			
Overall Impression			
The company presentation calls this a “similar” plan design, but for employees currently in the CA HMO, the change is not minor. It is a meaningful cost-shift to employees because deductible, out-of-pocket exposure, hospital cost exposure, and office visit copays all increase. For PPO users, the payroll cost drops, but the plan itself is weaker because it adds an in-network deductible and higher office visit copays. For HSA users, the plan is mostly similar, but slightly more expensive with a slightly higher deductible.			