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ARTICLE 16

BENEFITS


- 16.01 Except as specifically provided in this Article 16, no change shall be made in the terms of the existing plans, programs, and policies which are referenced in this Article or their successor Plans which would reduce or diminish the benefits or privileges provided thereunder as they apply to employees represented by the Union without the consent of the Union.

The means for fulfilling the terms of this Article may be the Company's adoption of its own plan(s) and associated plan document(s) or participation in equivalent plan(s) having plan document(s) that include, for bargained-for employees, the benefits agreed to be provided pursuant to this Article and substantially the terms, provisions and conditions under which such benefits are to be provided.

The sole remedy for issues with respect to the validity or amount of any claim for benefits is the claim and appeal process as defined in the individual benefits plans and programs. The Parties agree to the plans and programs described below. Copies of the plan documents, Summary Plan Descriptions ("SPDs") and Summary of Material Modifications ("SMMs") of these plans, policies and programs have been provided to the Union. If there is any difference between these SPDs and the ERISA plans or programs (including amendments thereto), the plan texts shall govern.

For purposes of this Article only, including Attachment A (applicable to AT&T Midwest) and B (applicable to AT&T National):

- The term "IBEW Core Bargained Employees" includes AT&T Midwest and AT&T National employees covered by this Agreement as well as job titles in Appendix C;
- IBEW Core Bargained Employees hired/rehired on or before August 8, 2009 shall be referred to as "Current Employees";
- IBEW Core Bargained Employees hired/rehired or transferred into the 2009 Collective Bargaining Agreement ("2009 CBA") (including transfers to a job title under Appendix C) after August 8, 2009 and on or before June 22, 2013 shall be referred to as "2009 New Hires". "2009 New Hires" shall also include individuals who were classified as Temporary or Regular Limited Term Employees as of August 8, 2009 and who were subsequently reclassified to Regular Employee status during the term of the 2009 CBA. In addition, any Employees hired/rehired or transferred into the Sales Consultant title on or before June 22, 2013 shall be referred to as "2009 New Hires";
- IBEW Core Bargained Employees hired/rehired or transferred into the 2013 Collective Bargaining Agreement ("2013 CBA") (including transfers to a job title under Appendix C) after June 22, 2013 and on or before June 24, 2017 shall be referred to as "2013 New Hires";


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- IBEW Core Bargained Employees hired/rehired or transferred into the 2017 Collective Bargaining Agreement (“2017 CBA”) or the 2022 Collective Bargaining Agreement (“2022 CBA”) (including transfers to a job title under Appendix C) after June 24, 2017 shall be referred to as “2017 New Hires”;
- Current Employees who are laid off, excluding Employees in titles under Appendix C, who are recalled and whose service is immediately bridged will be treated as Current Employees. 2009 New Hires who are laid off, excluding Employees in titles under Appendix C, who are recalled and whose service is immediately bridged will be treated as 2009 New Hires; 2013 New Hires who are laid off, excluding Employees in titles under Appendix C, who are recalled and whose service is immediately bridged will be treated as 2013 New Hires;
- Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires shall be referred to collectively as “Employees”; and
- Employees who terminate employment during the term of this Agreement and who meet the applicable requirements to be eligible for post-retirement benefits are referred to as “Eligible Retired Employees”.

The Memorandum of Agreement – Benefits Rules for Movement (Memorandum) provides specific rules regarding benefits for Employees who move among job titles. The provisions of the Memorandum take precedence over the provisions of this Article 16 with respect to Employees addressed in the Memorandum.

1. **HEALTH AND WELFARE BENEFIT PLANS**

- (A) Effective January 1, 2023, Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires shall be eligible to participate in the benefit plans, programs and policies identified in the chart below by an X, with the plan terms, conditions and provisions which were in effect on June 25, 2022, as described in the applicable SPDs and SMMs, except as noted herein.


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i. AT&T Midwest

Plan/Program/Policy	Current Employees & 2009 New Hires	2013 New Hires	2017 New Hires
AT&T Midwest Medical Program (IBEW)	X	X	X
AT&T Dental Program (Bargained Employees)	X	X	X
AT&T Vision Program (Bargained Employees)	X	X	X
AT&T CarePlus – A Supplemental Benefit Program	X	X	X
AT&T Group Life Insurance Program for Active Employees ¹	X	X	X
AT&T Consolidated Long-Term Care Insurance Plan (closed to new entrants as of 5/1/2012)	X		
AT&T Flexible Spending Account Plan	X	X	X
AT&T Health Reimbursement Account Program	X		
AT&T Midwest Disability Benefits Program	X	X	
AT&T Disability Income Program			X
Midwest Leaves of Absence Policy	X	X	X
AT&T Commuter Benefit Policy	X	X	X
AT&T Adoption Reimbursement Policy	X	X	X
AT&T Employee Assistance Program	X	X	X
AT&T Ancillary Benefits Program and AT&T Voluntary Benefits Platform	X	X	X

¹This program includes Supplemental Life Insurance and Dependent Life Insurance provisions

ii. AT&T National

Plan/Program/Policy	Current Employees & 2009 New Hires	2013 New Hires	2017 New Hires
AT&T Corp. Medical Program	X	X	X
AT&T Dental Program (Bargained Employees)	X	X	X
AT&T Vision Program (Bargained Employees)	X	X	X
AT&T CarePlus – A Supplemental Benefit Program	X	X	X
AT&T Group Life Insurance Program for Active Employees ¹	X	X	X
AT&T Consolidated Long-Term Care Insurance Plan (closed to new entrants as of 5/1/2012)	X		
AT&T Flexible Spending Account Plan	X	X	X
AT&T Health Reimbursement Account Program	X		
Legacy AT&T Disability Benefits Program	X	X	
AT&T Disability Income Program			X
AT&T Commuter Benefit Policy	X	X	X



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AT&T Adoption Reimbursement Policy	X	X	X
AT&T Employee Assistance Program	X	X	X
AT&T Ancillary Benefits Program and AT&T Voluntary Benefits Platform	X	X	X

This program includes Supplemental Life Insurance and Dependent Life Insurance provisions.

- (B) Employees, including newly eligible Employees, and Eligible Retired Employees (as provided for in Article 16.01(1)(D)) shall continue to participate in the same benefit plans, programs and policies on the same terms and conditions which were in effect on June, 25, 2022, until the benefits identified in Article 16.01(1)(A) above become effective, subject to changes to benefits resulting from the operation of existing plan provisions and amendments necessary to comply with changes in the law.
- (C) The Company may unilaterally modify or discontinue AT&T Consolidated Long-Term Care Insurance Plan and the AT&T Ancillary Benefits Program and AT&T Voluntary Benefits Platform without further discussions with the Union.
- (D) Employees who terminate employment with the Company during the term of this Agreement and are eligible for post-retirement medical coverage under the terms of the medical program the Employee was eligible for as an active Employee as of the date of termination, will be eligible, during the term of this Agreement, for coverage listed below as applicable:
 - i. For AT&T Midwest: Medical, dental, vision, supplemental medical and life insurance coverage subject to any exceptions identified in Attachment A for Eligible Retired Employees and any changes to benefits resulting from the operation of existing plan provisions and amendments necessary to comply with changes in the law; or
 - ii. For AT&T National: Medical, dental, vision, supplemental medical and life insurance coverage subject to any exceptions identified in Attachment B for Eligible Retired Employees and any changes to benefits resulting from the operation of existing plan provisions and amendments necessary to comply with changes in the law.

Nothing in this Article 16.01(1)(D) shall be construed to provide benefits for any period subsequent to the term of this Agreement or for any employee other than those referenced above who terminate employment during the term of this Agreement.

- (E) Attachment A and Attachment B provide a summary of certain plan, program and/or policy terms, conditions and provisions, including any which are exceptions to terms, conditions and provisions described in the applicable SPDs and SMMs as well as any which differ among groups of employees eligible to participate in a particular plan, program or policy, such as the applicable deductible or copayment amount. If there are discrepancies between the specific information provided in Attachment A or Attachment B, and the plan documents, SPDs or SMMs, the information provided in Attachment A or Attachment B, as applicable will govern.

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- (F) It is understood that certain benefits are subject to change to comply with implementation or modifications of PPACA and any associated legislation, regulations and agency guidance. The Company will notify the Union of the changes the Company makes to conform the benefits under this Agreement with final regulations and guidance under PPACA and any amendment determined to be necessary due to changes in the law. Should any of these changes require bargaining, all other terms and provisions of the 2022 CBA will remain in effect through expiration.

2. PENSION AND SAVINGS BENEFIT PLANS

- (A) Current Employees, excluding those working in Appendix C,

Except as provided in this Article, Current Employees, but excluding those working in Appendix C, shall continue to participate in the following pension and savings benefit plans, programs, and policies on the same terms and conditions which were in effect on June 25, 2022:

i. AT&T Midwest



a. Midwest Program (the "Midwest Program") of the AT&T Pension Benefit Plan

- I. Current Employees who continue to participate in the Midwest Program will be eligible for the following pension band increases:

- 1.0% effective January 1, 2023
- 1.0% effective January 1, 2024
- 1.0% effective January 1, 2025
- 1.0% effective January 1, 2026
- 1.0% effective January 1, 2027

b. AT&T Retirement Savings Plan ("ARSP")

Effective January 1, 2023, Current Employees shall continue to be eligible to participate in the ARSP. The Company will match employee contributions in the ARSP at a rate of 80% of Basic contributions in Company stock.

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ii. AT&T National

a. AT&T Legacy Bargained Program (the "ALB Program") of the AT&T Pension Benefit Plan

I. Current Employees who continue to participate in the ALB Program will be eligible for the following to the Pension Band Monthly Benefit Tables as well as the Pension Band Credit Table used for the cash balance feature:

- 1.0% effective January 1, 2023
- 1.0% effective January 1, 2024
- 1.0% effective January 1, 2025
- 1.0% effective January 1, 2026
- 1.0% effective January 1, 2027

b. AT&T Retirement Savings Plan

(B) Current Employees working in Appendix C job titles, 2009 New Hires, 2013 New Hires, and 2017 New Hires

Except as provided below, Current Employees working in Appendix C job titles classified as Regular Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires (excluding 2009 New Hires, 2013 New Hires and 2017 New Hires working in Appendix C job titles but not classified as Regular Employees) shall continue to participate in the following pension and savings benefit plans, programs and policies on the same terms and conditions which were in effect on June 25, 2022.

i. AT&T Midwest

iii. a. Bargained Cash Balance Program #2 of the AT&T Pension Benefit Plan

I. The Age Credit factor remains unchanged and shall be as follows:

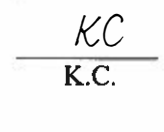
Age	Age Credit Factor
Less than 30	1.77%
30-36	2.27%
37-43	2.78%
44-49	3.28%
50 and older	4.04%

iv. b. AT&T Retirement Savings Plan

ii. AT&T National

a. Bargained Cash Balance Program #2 of the AT&T Pension Benefit Plan


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I. The Age Credit factor remains unchanged and shall be as follows:

Age	Age Credit Factor
Less than 30	1.77%
30-36	2.27%
37-43	2.78%
44-49	3.28%
50 and older	4.04%

b. AT&T Retirement Savings Plan

- 16.02 Unless the Parties mutually agree, there shall be no negotiations concerning changes in the Plans during the period of this Agreement. Such negotiations shall not extend more than thirty (30) days following such mutual agreement.
- 16.03 Neither the Benefit Plans, their administration nor the terms of a proposed change in the plans are subject to the grievance or arbitration procedures of this Agreement.
- 16.04 Disputes involving the true intent and meaning of this Article may be submitted to the grievance and arbitration procedures of this Agreement.
- 16.05 The Company will provide the Union with another copy of the Benefit Plans upon execution of this Agreement.

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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																																																																								
Active Employees	AT&T Midwest; AT&T Corp. Employees covered by Appendices D, E, F & G																																																																								
Effective Date(s)	Health & Welfare: 1/1/2023																																																																								
Eligibility	<p>For Medical, Dental, Vision, CarePlus, and Life Insurance (unless otherwise specified)</p> <p>2013 New Hires, 2009 New Hires and Current Employees Follow provisions of the applicable program: Medical – AT&T Midwest Medical Program (IBEW) Dental – AT&T Dental Program (Bargained Employees) Vision – AT&T Vision Program (Bargained Employees) Disability – AT&T Midwest Disability Benefits Program CarePlus – AT&T CarePlus - A Supplemental Benefit Program Life Insurance – AT&T Group Life Insurance Program for Active Employees*</p> <p>2017 New Hires Follow provisions of the applicable program: Medical – AT&T Midwest Medical Program (IBEW) Dental – AT&T Dental Program (Bargained Employees) Vision – AT&T Vision Program (Bargained Employees) Disability – AT&T Disability Income Program CarePlus – AT&T CarePlus - A Supplemental Benefit Program Life Insurance – AT&T Group Life Insurance Program for Active Employees*</p> <p>*includes Supplemental Life and Dependent Life provisions.</p>																																																																								
Health Reimbursement Account (HRAs)																																																																									
	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees None.</p> <p>Note: No additional Company crediting. Current Employees and 2009 New Hires who have remaining account balances will continue to have access to those account balances subject to provisions of the Program.</p>																																																																								
Medical																																																																									
Program	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Midwest Medical Program (IBEW)</p> <p>The Company will continue to provide fully insured coverage options such as HMOs at the discretion of the Company.</p> <p>No change from current program except as provided below:</p>																																																																								
Dependent Eligibility	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>No change from current program.</p>																																																																								
Eligibility for Company Subsidy	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>Eligibility for company subsidy begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.</p>																																																																								
Active (Full-Time) Monthly Contributions	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="6">Monthly Contribution Amounts</th> </tr> <tr> <th>Option 1</th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$168</td> <td>\$176</td> <td>\$185</td> <td>\$195</td> <td>\$204</td> </tr> <tr> <td>Family</td> <td>\$441</td> <td>\$460</td> <td>\$484</td> <td>\$510</td> <td>\$536</td> </tr> </tbody> </table> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="6">Monthly Contribution Amounts</th> </tr> <tr> <th>Option 2</th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$117</td> <td>\$125</td> <td>\$134</td> <td>\$144</td> <td>\$153</td> </tr> <tr> <td>Family</td> <td>\$306</td> <td>\$327</td> <td>\$351</td> <td>\$376</td> <td>\$402</td> </tr> </tbody> </table> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="6">Monthly Contribution Amounts</th> </tr> <tr> <th>Option 3</th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>N/A</td> <td>\$61</td> <td>\$68</td> <td>\$77</td> <td>\$86</td> </tr> <tr> <td>Family</td> <td>N/A</td> <td>\$159</td> <td>\$179</td> <td>\$201</td> <td>\$224</td> </tr> </tbody> </table>	Monthly Contribution Amounts						Option 1	2023	2024	2025	2026	2027	Individual	\$168	\$176	\$185	\$195	\$204	Family	\$441	\$460	\$484	\$510	\$536	Monthly Contribution Amounts						Option 2	2023	2024	2025	2026	2027	Individual	\$117	\$125	\$134	\$144	\$153	Family	\$306	\$327	\$351	\$376	\$402	Monthly Contribution Amounts						Option 3	2023	2024	2025	2026	2027	Individual	N/A	\$61	\$68	\$77	\$86	Family	N/A	\$159	\$179	\$201	\$224
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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																																																																																																																																	
Tobacco Use Contribution	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p><u>Tobacco Use Additional Medical Contribution:</u> Employees and/or spouses/Partners who use tobacco, are enrolled in AT&T-sponsored medical coverage (within either self-insured or fully insured programs) and who choose not to participate in a designated Tobacco Cessation program will pay an additional monthly contribution toward their cost of coverage. The employee and/or spouse/Partner must attest to no tobacco usage or engage in a Company-sponsored Tobacco Cessation program in the time defined during Annual Enrollment otherwise the additional monthly contribution will be applied. Engagement is currently defined as enrollment, participation and completion. A tobacco user is currently defined as someone who has used tobacco products once a month or more, on average. Tobacco products include cigarettes, cigars, pipes, e-cigarettes, vaporizers and smokeless tobacco. The definitions of engagement, tobacco user and tobacco products and the terms of the Company-sponsored Tobacco Cessation program may change from time to time, at the sole discretion of the Company. The monthly contribution is shown below.</p> <p>Additional Monthly Medical Contribution for each employee or spouse/partner:</p> <table border="1"> <thead> <tr> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>\$0</td> <td>\$75</td> <td>\$75</td> <td>\$75</td> <td>\$75</td> </tr> </tbody> </table>	2023	2024	2025	2026	2027	\$0	\$75	\$75	\$75	\$75																																																																																																																							
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Annual Deductibles	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>Option 1:</p> <table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">2023</th> <th colspan="2">2024</th> <th colspan="2">2025</th> <th colspan="2">2026</th> <th colspan="2">2027</th> </tr> <tr> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>\$900</td> <td>\$2,700</td> <td>\$ 950</td> <td>\$2,850</td> <td>\$1,000</td> <td>\$3,000</td> <td>\$1,050</td> <td>\$3,150</td> <td>\$1,100</td> <td>\$3,300</td> </tr> <tr> <td>Fam</td> <td>\$1,800</td> <td>\$5,400</td> <td>\$1,900</td> <td>\$5,700</td> <td>\$2,000</td> <td>\$6,000</td> <td>\$2,100</td> <td>\$6,300</td> <td>\$2,200</td> <td>\$6,600</td> </tr> </tbody> </table> <p>Annual Deductible Provisions: No change from current program.</p> <p>Note: The Annual Deductibles will be included in the Out-Of-Pocket Maximums</p> <p>Option 2:</p> <table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">2023</th> <th colspan="2">2024</th> <th colspan="2">2025</th> <th colspan="2">2026</th> <th colspan="2">2027</th> </tr> <tr> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>\$1,700</td> <td>\$5,100</td> <td>\$1,750</td> <td>\$5,250</td> <td>\$1,800</td> <td>\$5,400</td> <td>\$1,850</td> <td>\$5,550</td> <td>\$1,900</td> <td>\$5,700</td> </tr> <tr> <td>Fam</td> <td>\$3,400</td> <td>\$10,200</td> <td>\$3,500</td> <td>\$10,500</td> <td>\$3,600</td> <td>\$10,800</td> <td>\$3,700</td> <td>\$11,100</td> <td>\$3,800</td> <td>\$11,400</td> </tr> </tbody> </table> <p>Annual Deductible Provisions: No change from current program, except as provided below:</p> <ul style="list-style-type: none"> If the coverage tier is Family, no individual can receive benefits until the Family Annual Deductible is met. The Family Annual Deductible can be met by one or a combination of covered family members. The following costs paid by the participant also apply toward the applicable Network/PPO/ONA or Non-Network/Non-PPO Deductible amounts: <ul style="list-style-type: none"> Outpatient prescription drug allowable charges of eligible expenses <p>Note: The Annual Deductibles will be included in the Out-Of-Pocket Maximums</p> <p>Option 3:</p> <table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">2023</th> <th colspan="2">2024</th> <th colspan="2">2025</th> <th colspan="2">2026</th> <th colspan="2">2027</th> </tr> <tr> <th>Network/ PPO/ ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> <th>Network/ PPO/ONA</th> <th>Non- Network/ Non-PPO</th> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>N/A</td> <td>N/A</td> <td>\$3,075</td> <td>\$9,225</td> <td>\$3,150</td> <td>\$9,450</td> <td>\$3,225</td> <td>\$9,675</td> <td>\$3,300</td> <td>\$9,900</td> </tr> <tr> <td>Fam</td> <td>N/A</td> <td>N/A</td> <td>\$6,150</td> <td>\$18,450</td> <td>\$6,300</td> <td>\$18,900</td> <td>\$6,450</td> <td>\$19,350</td> <td>\$6,600</td> <td>\$19,800</td> </tr> </tbody> </table> <p>Annual Deductible Provisions: Follow Option 2</p>		2023		2024		2025		2026		2027		Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Ind	\$900	\$2,700	\$ 950	\$2,850	\$1,000	\$3,000	\$1,050	\$3,150	\$1,100	\$3,300	Fam	\$1,800	\$5,400	\$1,900	\$5,700	\$2,000	\$6,000	\$2,100	\$6,300	\$2,200	\$6,600		2023		2024		2025		2026		2027		Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Ind	\$1,700	\$5,100	\$1,750	\$5,250	\$1,800	\$5,400	\$1,850	\$5,550	\$1,900	\$5,700	Fam	\$3,400	\$10,200	\$3,500	\$10,500	\$3,600	\$10,800	\$3,700	\$11,100	\$3,800	\$11,400		2023		2024		2025		2026		2027		Network/ PPO/ ONA	Non- Network/ Non-PPO	Network/ PPO/ ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Network/ PPO/ONA	Non- Network/ Non-PPO	Ind	N/A	N/A	\$3,075	\$9,225	\$3,150	\$9,450	\$3,225	\$9,675	\$3,300	\$9,900	Fam	N/A	N/A	\$6,150	\$18,450	\$6,300	\$18,900	\$6,450	\$19,350	\$6,600	\$19,800
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IBEW System Council T-3 Benefits Outline Summary

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IBEW System Council T-3 Benefits Outline Summary

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Mental Health/Substance Abuse (MH/SA) Copay / Coinsurance	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Option 1 and Option 2: <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">2023-2027</th> </tr> <tr> <th style="width: 30%;"></th> <th style="width: 35%;">Network/ PPO/ONA</th> <th style="width: 35%;">Non- Network/ Non-PPO</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>\$0 / 0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>\$0 / 10% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table> Option 3: <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">2024-2027</th> </tr> <tr> <th style="width: 30%;"></th> <th style="width: 35%;">Network/ PPO/ONA</th> <th style="width: 35%;">Non- Network/ Non-PPO</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>\$0 / 0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>\$0 / 30% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table>	2023-2027				Network/ PPO/ONA	Non- Network/ Non-PPO	Preventive	\$0 / 0% Ded waived	No Benefit	Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded	2024-2027				Network/ PPO/ONA	Non- Network/ Non-PPO	Preventive	\$0 / 0% Ded waived	No Benefit	Sickness/Illness	\$0 / 30% After Ded	\$0 / 50% After Ded
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Fertility Services	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees The Company will provide medical and prescription drug fertility services on the same terms and conditions available under management's medical program as they may change from time to time, subject to applicable cost-sharing provisions under this Agreement.																								

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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																																																																																																																																				
Annual Out-of-Pocket Maximums (OOP)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Option 1: <p style="text-align: center;">Out-of-Pocket Maximum Amounts (including Annual Deductible)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th colspan="2">2023</th> <th colspan="2">2024</th> <th colspan="2">2025</th> <th colspan="2">2026</th> <th colspan="2">2027</th> </tr> <tr> <th></th> <th>Network/ PPO/ ONA</th> <th>Non- Network/ Non- PPO</th> <th>Network/ PPO/ ONA</th> <th>Non- Network/ Non- PPO</th> <th>Network/ PPO/ ONA</th> <th>Non- Network/ Non- PPO</th> <th>Network/ PPO/ ONA</th> <th>Non- Network/ Non- PPO</th> <th>Network/ PPO/ ONA</th> <th>Non- Network/ Non- PPO</th> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>\$3,750</td> <td>\$11,250</td> <td>\$4,000</td> <td>\$12,000</td> <td>\$4,200</td> <td>\$12,600</td> <td>\$4,400</td> <td>\$13,200</td> <td>\$4,600</td> <td>\$13,800</td> </tr> <tr> <td>Family</td> <td>\$7,500</td> <td>\$22,500</td> <td>\$8,000</td> <td>\$24,000</td> <td>\$8,400</td> <td>\$25,200</td> <td>\$8,800</td> <td>\$26,400</td> <td>\$9,200</td> <td>\$27,600</td> </tr> </tbody> </table> <p>(Integrated Med/Surg, MH/SA) Out-of-Pocket Maximum provisions: No change from current program, except as provided below:</p> <p>The following additional costs paid by the participant apply toward the applicable Network/PPO/ONA or Non-Network/Non-PPO Out-of-Pocket Maximum amounts:</p> <ul style="list-style-type: none"> • Deductibles • Coinsurance Option 2: <p style="text-align: center;">Out-of-Pocket Maximum Amounts (including Annual Deductible)</p> <table border="1" style="width: 100%; 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		2023		2024		2025		2026		2027																																																																																																																											
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Family	N/A	N/A	\$14,200	\$42,600	\$14,400	\$43,200	\$14,600	\$43,800	\$14,800	\$44,400																																																																																																																											

J.I.  KC
 K.C.

IBEW System Council T-3 Benefits Outline Summary

Prescription Drug Program (Rx)

2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees

Option 1:

Deductible:
None

Out-of-Pocket Maximum:

	2023	2024	2025	2026	2027
Ind	\$1,700	\$1,700	\$1,800	\$1,800	\$1,900
Fam	\$3,400	\$3,400	\$3,600	\$3,600	\$3,800

Retail - Network Copays:

(Up to 30-day supply, limited to 2 fills for maintenance)

	2023	2024	2025	2026	2027
Generic	\$10	\$10	\$10	\$10	\$10
Preferred	\$40	\$45	\$45	\$45	\$50
Non-Preferred	\$80	\$90	\$90	\$90	\$100

Retail - Non-Network Copays:

Participant pays the greater of the applicable Network copay or balance remaining after the program pays 75% of network retail cost.

Mail Order Copays:

(Up to 90-day supply)

	2023	2024	2025	2026	2027
Generic	\$20	\$20	\$20	\$20	\$20
Preferred	\$80	\$90	\$90	\$90	\$100
Non-Preferred	\$160	\$180	\$180	\$180	\$200

Option 2:

Deductible:

Integrated with Med/Surg, MH/SA, CarePlus

Out-of-Pocket Maximum:

Integrated with Med/Surg, MH/SA, CarePlus

Retail - Network Copays:

(Up to 30-day supply, limited to 2 fills for maintenance)

	2023	2024	2025	2026	2027
Generic	\$10	\$10	\$10	\$10	\$10
Preferred	\$40	\$45	\$45	\$45	\$50
Non-Preferred	\$80	\$90	\$90	\$90	\$100

Mail Order Copays:

(Up to 90-day supply)

	2023	2024	2025	2026	2027
Generic	\$20	\$20	\$20	\$20	\$20
Preferred	\$80	\$90	\$90	\$90	\$100
Non-Preferred	\$160	\$180	\$180	\$180	\$200

Option 3:

Deductible:

Integrated with Med/Surg, MH/SA, CarePlus

Out-of-Pocket Maximum:

Integrated with Med/Surg, MH/SA, CarePlus

Retail - Network Copays:

(Up to 30-day supply, limited to 2 fills for maintenance)

	2023	2024	2025	2026	2027
Generic	N/A	\$10	\$10	\$10	\$10
Preferred	N/A	\$45	\$45	\$45	\$50
Non-Preferred	N/A	\$90	\$90	\$90	\$100

Mail Order Copays:

(Up to 90-day supply)

	2023	2024	2025	2026	2027
Generic	N/A	\$20	\$20	\$20	\$20
Preferred	N/A	\$90	\$90	\$90	\$100
Non-Preferred	N/A	\$180	\$180	\$180	\$200

J.J. *KC*
 J.J. K.C.

IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																								
	The following provisions will continue to apply to Option 1 and Option 2: <ul style="list-style-type: none"> • Mandatory mail order for maintenance Rx – Applies after second fill at retail. • Specialty pharmacy program • Personal Choice – 100% participant-paid • Mandatory Generic • Compound medication limitation • Advanced Control Specialty Formulary • Standard Prescription Drug Formulary • Generic Step Therapy Option 3: Follow Option 1 and Option 2 provisions																								
Employee Assistance Program (EAP)																									
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.																								
Visit Limit	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.																								
Disability																									
Program	2013 New Hires, 2009 New Hires and Current Employees No change from current program 2017 New Hires No change from current program																								
Short Term Disability (STD)	2013 New Hires, 2009 New Hires and Current Employees No change from current program 2017 New Hires No change from current program																								
Long-Term Disability (LTD)	2013 New Hires, 2009 New Hires and Current Employees No change from current program 2017 New Hires No change from current program																								
Leaves of Absence (LOAs)																									
Policy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Midwest Leaves of Absence Policy.																								
Types of LOAs	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.																								
Dental																									
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Dental Program (Bargained Employees) except as provided below. <ul style="list-style-type: none"> • Dental PPO • DHMO (available at the discretion of the Company) 																								
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for coverage begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.																								
Dependent Eligibility	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Effective Jan 1, 2023, dependent children will be eligible to participate in the AT&T Dental Program (Bargained Employees) until the end of the month in which the child reaches the age of 26 regardless of marital status.																								
Eligibility for Company Subsidy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for company subsidy begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.																								
Active (Full-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Contributions for Dental PPO or DHMO (if available): <table border="1" style="margin-left: 20px;"> <thead> <tr> <th></th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$9</td> <td>\$9</td> <td>\$9</td> <td>\$10</td> <td>\$10</td> </tr> <tr> <td>Individual+1</td> <td>\$19</td> <td>\$19</td> <td>\$19</td> <td>\$21</td> <td>\$21</td> </tr> <tr> <td>Family</td> <td>\$30</td> <td>\$30</td> <td>\$30</td> <td>\$33</td> <td>\$33</td> </tr> </tbody> </table>		2023	2024	2025	2026	2027	Individual	\$9	\$9	\$9	\$10	\$10	Individual+1	\$19	\$19	\$19	\$21	\$21	Family	\$30	\$30	\$30	\$33	\$33
	2023	2024	2025	2026	2027																				
Individual	\$9	\$9	\$9	\$10	\$10																				
Individual+1	\$19	\$19	\$19	\$21	\$21																				
Family	\$30	\$30	\$30	\$33	\$33																				



J.L.

K.C.

KC

IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Active (Part-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Based on Scheduled hours/week: • Greater than or equal to 20 hours = 50% of full cost of coverage*. • Less than 20 hours = 100% of full cost of coverage* with no Company subsidy. *Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.
Deductible	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Network and ONA: \$25 per individual per year Non-Network: \$50 per individual per year
Annual Maximum Benefit	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Network and ONA: \$1,750 per individual* Non-Network: \$1,300 per individual* *Not to exceed \$1,750 combined Network/Non-Network
Orthodontic Lifetime Maximum	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Network and ONA: \$2,000 per individual* Non-Network: \$1,400 per individual* *Not to exceed \$2,000 combined Network/Non-Network
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Dental PPO Coinsurance: Class I (Diagnostic/Preventive): Network and ONA*: 100%, deductible waived Non-Network**: 100%, deductible waived Class II (Basic restorative – fillings, extractions, periodontal treatment/maintenance): Network and ONA*: 90%, after deductible Non-Network**: 70%, after deductible Class III (Major restorative – crowns, dentures, bridgework): Network and ONA*: 80%, after deductible Non-Network**: 50%, after deductible Class IV (Orthodontia): Network and ONA*: 80%, after deductible Non-Network**: 50%, after deductible Notes: *For ONA, paid at Network contracted rate. **For Non-Network paid based on reasonable and customary amounts
Outside Network Area (ONA)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees • ONA benefit provided to employees who reside in a zip code which does not meet the network standards. • ONA benefits are equivalent to PPO Network benefits. • Enrollees who are in Network will be offered the PPO option only. • Enrollees who are located outside the Network zip code criteria will be offered the ONA option only
Vision	
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Vision Program (Bargained Employees) except as provided below.
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for coverage begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.
Dependent Eligibility	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Effective Jan 1, 2023, dependent children will be eligible to participate in the AT&T Vision Program (Bargained Employees) until the end of the month in which the child reaches the age of 26 regardless of marital status.
Eligibility for Company Subsidy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for company subsidy begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.

 J.J.
 KC
 K.C.

IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																								
Active (Full-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Contributions: <table border="1" style="margin-left: 20px;"> <thead> <tr> <th></th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$3.00</td> <td>\$3.00</td> <td>\$3.00</td> <td>\$3.50</td> <td>\$3.50</td> </tr> <tr> <td>Individual+1</td> <td>\$7.50</td> <td>\$7.50</td> <td>\$7.50</td> <td>\$9.50</td> <td>\$9.50</td> </tr> <tr> <td>Family</td> <td>\$12.50</td> <td>\$12.50</td> <td>\$12.50</td> <td>\$16.00</td> <td>\$16.00</td> </tr> </tbody> </table>		2023	2024	2025	2026	2027	Individual	\$3.00	\$3.00	\$3.00	\$3.50	\$3.50	Individual+1	\$7.50	\$7.50	\$7.50	\$9.50	\$9.50	Family	\$12.50	\$12.50	\$12.50	\$16.00	\$16.00
	2023	2024	2025	2026	2027																				
Individual	\$3.00	\$3.00	\$3.00	\$3.50	\$3.50																				
Individual+1	\$7.50	\$7.50	\$7.50	\$9.50	\$9.50																				
Family	\$12.50	\$12.50	\$12.50	\$16.00	\$16.00																				
Active (Part-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Based on Scheduled hours/week: • Greater than or equal to 20 hours = 50% of full cost of coverage*. • Less than 20 hours = 100% of full cost of coverage* with no Company subsidy. *Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.																								
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Exam: 1 exam per 12 months • Network: \$0 copay • Non-Network: \$28 allowance Frame Allowance: 1 pair per 12 months • Network: \$130 allowance • Non-Network: \$30 allowance Lenses Allowance: 1 set per 12 months • Network: \$0 copay/coinsurance Covers std. plastic lenses: Single, Bi-focal, Tri-focal, Lenticular, Progressive + Polycarbonate at 100% • Non-Network: \$30-\$80 allowance Contact Lenses Allowance: Allowance per 12 months • Network: \$150 allowance • Non-Network: \$150 allowance 2nd Pair Benefit: Allows for a 2 nd pair of glasses or contact lenses allowance after the first pair benefit is utilized, per 24 months.																								
Flexible Spending Account (FSA)																									
Plan	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Flexible Spending Account Plan No change from current plan, except those that are mandated by healthcare reform legislation (PPACA).																								
Contribution Minimum/Maximums	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current plan, except those that are mandated by healthcare reform legislation (PPACA) and to annually adjust the maximum contribution amount to that permitted by law for each calendar year for which the IRS issues timely guidance such that the Company can implement the change.																								
Supplemental Medical Benefits																									
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T CarePlus – A Supplemental Benefit Program No change from current program.																								
Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program. Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.																								
General Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA). Company continues to retain the unilateral right to change, modify, amend and discontinue benefits offered under CarePlus.																								



J.I. K.C.
K.C.

IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Life Insurance	
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees All Coverages: Eligibility for coverage begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.
Dependent Eligibility	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Effective Jan 1, 2023, dependent children will be eligible to participate in the AT&T Group Life Insurance Program for Active employees until the end of the month in which the child reaches the age of 26 regardless of marital status.
Active Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program. Note: Contributions amounts are subject to annual adjustment.
Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
Long-Term Care	
Plan	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Consolidated Long-Term Care Insurance Plan
Coverage	2017 New Hires and 2013 New Hires Not available; closed to new entrants as of 5/1/2012. 2009 New Hires and Current Employees No change from current plan, except that the Company has the unilateral right to change, modify, amend and discontinue the AT&T Consolidated Long-Term Care Insurance Plan.
Adoption Assistance	
Policy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Commuter	
Policy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Pre-tax deductions for parking and mass transit. Eligible expense and monthly limits follow IRS Code Section 132 Regulations. Note: Annual adjustments apply.

Provision	Eligible Retired Employees
Retiree Provisions	Effective 1/1/2023 AT&T Midwest; AT&T Corp. Eligible Retired Employees covered by Appendices D, E and F.* Applicable for the term of the Agreement to Eligible Retired Employees who terminate during the term of the Agreement. *Note: Appendix G Employees continue to not be eligible for post-employment benefits.
Medical	
Program	AT&T Midwest Eligible Former Bargained Employee Medical Program (IBEW) Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated active Employees except as noted in the sections below.
Eligible Retired Employees (Full-Time) Monthly Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program
Eligible Retired Employees (Part-Time) Monthly Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program
Medicare Part-B Premium Reimbursement	2017 New Hires, 2013 New Hires and 2009 New Hires Not Eligible. Current Employees No change from current plan.



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IBEW System Council T-3 Benefits Outline Summary

Provision	Eligible Retired Employees
Health Reimbursement Account (HRA)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees None. Note: No additional Company crediting. Current employees and 2009 New Hires who have remaining account balances will continue to have access to those account balances subject to provisions of the Program.
Supplemental Medical Benefits	
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Eligible Former Employee CarePlus – A Supplemental Benefit Program
Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program. Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.
General Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA). Company continues to retain the unilateral right to change, modify, amend and discontinue benefits offered under CarePlus.
Dental	
Program	AT&T Eligible Former Employee Dental Program (Bargained) Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated active Employees except as noted in the sections below.
Eligible Retired Employee (Full-Time) Monthly Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program
Eligible Retired Employees (Part-Time) Monthly Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current plan
Life Insurance	
Eligible Retired Employees Basic Life (Company Paid)	2017 New Hires, 2013 New Hires and 2009 New Hires \$15,000 Retiree Basic Life Current Employees 1X Annual Pay Note: For the purposes of Retiree Basic Life only, Annual Pay: Is the Employee's Rate of Pay as of 12/31/2009. Includes base wages, targeted commissions, team award, individual discretionary award, and miscellaneous pay, where applicable.
Supplemental Life (Retiree Paid)	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current plan.* * Contributions shall be the same as for a similarly situated active employee.
Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
Vision	
Eligible Retired Employees Vision Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligible Retired Employees shall be eligible to participate in the AT&T Eligible Former Employee Vision Program (formerly named the AT&T Retiree Vision Care Program)
Eligible Retired Employees Monthly Retiree Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program

Provision	Current Employees, 2009 New Hires, 2013 New Hires, 2017 New Hires and Eligible Retired Employees
Voluntary and Ancillary	
Discretionary Program	AT&T Voluntary Benefits Platform (products offered as they may change from time to time). AT&T Ancillary Benefits Program (products offered as they may change from time to time).



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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																																																																								
Active Employees	AT&T National																																																																								
Effective Date(s)	Health & Welfare: 1/1/2023																																																																								
Eligibility																																																																									
For Medical, Dental, Vision, CarePlus, and Life Insurance (unless otherwise specified)	<p>2013 New Hires, 2009 New Hires and Current Employees Follow provisions of the applicable program: Medical – AT&T Corp. Medical Program Dental – AT&T Dental Program (Bargained Employees) Vision – AT&T Vision Program (Bargained Employees) Disability – Legacy AT&T Disability Benefits Program CarePlus – AT&T CarePlus - A Supplemental Benefit Program Life Insurance – AT&T Group Life Insurance Program for Active Employees*</p> <p>2017 New Hires Follow provisions of the applicable program: Medical – AT&T Corp. Medical Program Dental – AT&T Dental Program (Bargained Employees) Vision – AT&T Vision Program (Bargained Employees) Disability – AT&T Disability Income Program CarePlus – AT&T CarePlus - A Supplemental Benefit Program Life Insurance – AT&T Group Life Insurance Program for Active Employees*</p> <p>*includes Supplemental Life and Dependent Life provisions.</p>																																																																								
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Program	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Corp. Medical Program</p> <p>The Company will continue to provide fully insured coverage options such as HMOs at the discretion of the Company.</p> <p>No change from current program except as provided below:</p>																																																																								
Dependent Eligibility	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>No change from current program.</p>																																																																								
Eligibility for Company Subsidy	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for company subsidy begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.</p>																																																																								
Active (Full-Time) Monthly Contributions	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="6" style="text-align: center;">Monthly Contribution Amounts</th> </tr> <tr> <th>Option 1</th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$168</td> <td>\$176</td> <td>\$185</td> <td>\$195</td> <td>\$204</td> </tr> <tr> <td>Family</td> <td>\$441</td> <td>\$460</td> <td>\$484</td> <td>\$510</td> <td>\$536</td> </tr> </tbody> </table> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="6" style="text-align: center;">Monthly Contribution Amounts</th> </tr> <tr> <th>Option 2</th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$117</td> <td>\$125</td> <td>\$134</td> <td>\$144</td> <td>\$153</td> </tr> <tr> <td>Family</td> <td>\$306</td> <td>\$327</td> <td>\$351</td> <td>\$376</td> <td>\$402</td> </tr> </tbody> </table> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th colspan="6" style="text-align: center;">Monthly Contribution Amounts</th> </tr> <tr> <th>Option 3</th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>N/A</td> <td>\$61</td> <td>\$68</td> <td>\$77</td> <td>\$86</td> </tr> <tr> <td>Family</td> <td>N/A</td> <td>\$159</td> <td>\$179</td> <td>\$201</td> <td>\$224</td> </tr> </tbody> </table>	Monthly Contribution Amounts						Option 1	2023	2024	2025	2026	2027	Individual	\$168	\$176	\$185	\$195	\$204	Family	\$441	\$460	\$484	\$510	\$536	Monthly Contribution Amounts						Option 2	2023	2024	2025	2026	2027	Individual	\$117	\$125	\$134	\$144	\$153	Family	\$306	\$327	\$351	\$376	\$402	Monthly Contribution Amounts						Option 3	2023	2024	2025	2026	2027	Individual	N/A	\$61	\$68	\$77	\$86	Family	N/A	\$159	\$179	\$201	\$224
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IBEW System Council T-3 Benefits Outline Summary

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Tobacco Use Contribution	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p><u>Tobacco Use Additional Medical Contribution:</u> Employees and/or spouses/Partners who use tobacco, are enrolled in AT&T-sponsored medical coverage (within either self-insured or fully insured programs) and who choose not to participate in a designated Tobacco Cessation program will pay an additional monthly contribution toward their cost of coverage. The employee and/or spouse/Partner must attest to no tobacco usage or engage in a Company-sponsored Tobacco Cessation program in the time defined during Annual Enrollment otherwise the additional monthly contribution will be applied. Engagement is currently defined as enrollment, participation and completion. A tobacco user is currently defined as someone who has used tobacco products once a month or more, on average. Tobacco products include cigarettes, cigars, pipes, e-cigarettes, vaporizers and smokeless tobacco. The definitions of engagement, tobacco user and tobacco products and the terms of the Company-sponsored Tobacco Cessation program may change from time to time, at the sole discretion of the Company. The monthly contribution is shown below.</p> <p>Additional Monthly Medical Contribution for each employee or spouse/partner:</p> <table border="1"> <tr> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> <tr> <td>\$0</td> <td>\$75</td> <td>\$75</td> <td>\$75</td> <td>\$75</td> </tr> </table>	2023	2024	2025	2026	2027	\$0	\$75	\$75	\$75	\$75																																																																																																																							
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The Family Annual Deductible can be met by one or a combination of covered family members. • The following costs paid by the participant also apply toward the applicable Network/PPO/ONA or Non-Network/Non-PPO Deductible amounts: <ul style="list-style-type: none"> • Outpatient prescription drug allowable charges of eligible expenses <p>Note: The Annual Deductibles will be included in the Out-Of-Pocket Maximums</p> <p>Option 3:</p> <table border="1"> <thead> <tr> <th rowspan="2"></th> <th colspan="2">2023</th> <th colspan="2">2024</th> <th colspan="2">2025</th> <th colspan="2">2026</th> <th colspan="2">2027</th> </tr> <tr> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>N/A</td> <td>N/A</td> <td>\$3,075</td> <td>\$9,225</td> <td>\$3,150</td> <td>\$9,450</td> <td>\$3,225</td> <td>\$9,675</td> <td>\$3,300</td> <td>\$9,900</td> </tr> <tr> <td>Fam</td> <td>N/A</td> <td>N/A</td> <td>\$6,150</td> <td>\$18,450</td> <td>\$6,300</td> <td>\$18,900</td> <td>\$6,450</td> <td>\$19,350</td> <td>\$6,600</td> <td>\$19,800</td> </tr> </tbody> </table> <p>Annual Deductible Provisions: Follow Option 2</p>		2023		2024		2025		2026		2027		Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Ind	\$900	\$2,700	\$950	\$2,850	\$1,000	\$3,000	\$1,050	\$3,150	\$1,100	\$3,300	Fam	\$1,800	\$5,400	\$1,900	\$5,700	\$2,000	\$6,000	\$2,100	\$6,300	\$2,200	\$6,600		2023		2024		2025		2026		2027		Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Ind	\$1,700	\$5,100	\$1,750	\$5,250	\$1,800	\$5,400	\$1,850	\$5,550	\$1,900	\$5,700	Fam	\$3,400	\$10,200	\$3,500	\$10,500	\$3,600	\$10,800	\$3,700	\$11,100	\$3,800	\$11,400		2023		2024		2025		2026		2027		Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Network	Ind	N/A	N/A	\$3,075	\$9,225	\$3,150	\$9,450	\$3,225	\$9,675	\$3,300	\$9,900	Fam	N/A	N/A	\$6,150	\$18,450	\$6,300	\$18,900	\$6,450	\$19,350	\$6,600	\$19,800
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IBEW System Council T-3 Benefits Outline Summary

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<p>Urgent Care Facility/Professional Services Copay / Coinsurance</p>	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>Option 1 and Option 2:</p> <table border="1"> <thead> <tr> <th colspan="2">2023-2027</th> </tr> <tr> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> </tr> </thead> <tbody> <tr> <td>\$0 / 10% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table> <p>Option 3:</p> <table border="1"> <thead> <tr> <th colspan="2">2024-2027</th> </tr> <tr> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> </tr> </thead> <tbody> <tr> <td>\$0 / 30% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table>	2023-2027		Network/ Traditional Indemnity	Non- Network	\$0 / 10% After Ded	\$0 / 50% After Ded	2024-2027		Network/ Traditional Indemnity	Non- Network	\$0 / 30% After Ded	\$0 / 50% After Ded												
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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																								
<p>Emergency Room Facility/Professional Services Copay / Coinsurance</p>	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>Option 1 and Option 2:</p> <table border="1"> <thead> <tr> <th colspan="2">2023-2027</th> </tr> <tr> <th>Network/ Traditional Indemnity</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>\$0 / 10% After Ded</td> <td>\$0 / 10% After Ded</td> </tr> </tbody> </table> <p>Option 3:</p> <table border="1"> <thead> <tr> <th colspan="2">2024-2027</th> </tr> <tr> <th>Network/ Traditional Indemnity</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>\$0 / 30% After Ded</td> <td>\$0 / 30% After Ded</td> </tr> </tbody> </table>	2023-2027		Network/ Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 10% After Ded	2024-2027		Network/ Traditional Indemnity	Non-Network	\$0 / 30% After Ded	\$0 / 30% After Ded												
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<p>Hospital Inpatient/Outpatient Facility/Professional Services Copay / Coinsurance</p>	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>Option 1 and Option 2:</p> <table border="1"> <thead> <tr> <th colspan="2">2023-2027</th> </tr> <tr> <th>Network/ Traditional Indemnity</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>\$0 / 10% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table> <p>Option 3:</p> <table border="1"> <thead> <tr> <th colspan="2">2024-2027</th> </tr> <tr> <th>Network/ Traditional Indemnity</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>\$0 / 30% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table>	2023-2027		Network/ Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded	2024-2027		Network/ Traditional Indemnity	Non-Network	\$0 / 30% After Ded	\$0 / 50% After Ded												
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<p>Tests (all tests including x-ray, radiology, lab test, etc) Copay / Coinsurance</p>	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>Option 1 and Option 2:</p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">2023-2027</th> </tr> <tr> <th></th> <th>Network/ Traditional Indemnity</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>\$0 / 0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>\$0 / 10% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table> <p>Option 3:</p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">2024-2027</th> </tr> <tr> <th></th> <th>Network/ Traditional Indemnity</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>\$0 / 0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>\$0 / 30% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table>		2023-2027			Network/ Traditional Indemnity	Non-Network	Preventive	\$0 / 0% Ded waived	No Benefit	Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded		2024-2027			Network/ Traditional Indemnity	Non-Network	Preventive	\$0 / 0% Ded waived	No Benefit	Sickness/Illness	\$0 / 30% After Ded	\$0 / 50% After Ded
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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																								
Mental Health/Substance Abuse (MH/SA) Copay / Coinsurance	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Option 1 and Option 2: <table border="1" style="margin-left: 20px;"> <thead> <tr> <th colspan="3">2023-2027</th> </tr> <tr> <th></th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>\$0 / 0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>\$0 / 10% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table> Option 3: <table border="1" style="margin-left: 20px;"> <thead> <tr> <th colspan="3">2024-2027</th> </tr> <tr> <th></th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>\$0 / 0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>\$0 / 30% After Ded</td> <td>\$0 / 50% After Ded</td> </tr> </tbody> </table>	2023-2027				Network/ Traditional Indemnity	Non- Network	Preventive	\$0 / 0% Ded waived	No Benefit	Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded	2024-2027				Network/ Traditional Indemnity	Non- Network	Preventive	\$0 / 0% Ded waived	No Benefit	Sickness/Illness	\$0 / 30% After Ded	\$0 / 50% After Ded
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Sickness/Illness	\$0 / 30% After Ded	\$0 / 50% After Ded																							
Fertility Services	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees The Company will provide medical and prescription drug fertility services on the same terms and conditions available under management's medical program as they may change from time to time, subject to applicable cost-sharing provisions under this Agreement.																								

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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																																																																																																																																				
<p>Annual Out-of-Pocket Maximums (OOP)</p>	<p>2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees</p> <p>Option 1:</p> <p style="text-align: center;">Out-of-Pocket Maximum Amounts (including Annual Deductible)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th colspan="2">2023</th> <th colspan="2">2024</th> <th colspan="2">2025</th> <th colspan="2">2026</th> <th colspan="2">2027</th> </tr> <tr> <th></th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> <th>Network/ Traditional Indemnity</th> <th>Non- Network</th> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>\$3,750</td> <td>\$11,250</td> <td>\$4,000</td> <td>\$12,000</td> <td>\$4,200</td> <td>\$12,600</td> <td>\$4,400</td> <td>\$13,200</td> <td>\$4,600</td> <td>\$13,800</td> </tr> <tr> <td>Family</td> <td>\$7,500</td> <td>\$22,500</td> <td>\$8,000</td> <td>\$24,000</td> <td>\$8,400</td> <td>\$25,200</td> <td>\$8,800</td> <td>\$26,400</td> <td>\$9,200</td> <td>\$27,600</td> </tr> </tbody> </table> <p>(Integrated Med/Surg, MH/SA) Out-of-Pocket Maximum provisions: No change from current program, except as provided below:</p> <p>The following additional costs paid by the participant apply toward the applicable Network/Traditional Indemnity or Non-Network Out-of-Pocket Maximum amounts:</p> <ul style="list-style-type: none"> • Deductibles • Coinsurance <p>Option 2:</p> <p style="text-align: center;">Out-of-Pocket Maximum Amounts (including Annual Deductible)</p> <table border="1" style="width: 100%; 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IBEW System Council T-3 Benefits Outline Summary

Prescription Drug Program (Rx)

2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees

Option 1:

Deductible:
None

Out-of-Pocket Maximum:

	2023	2024	2025	2026	2027
Ind	\$1,700	\$1,700	\$1,800	\$1,800	\$1,900
Fam	\$3,400	\$3,400	\$3,600	\$3,600	\$3,800

Retail - Network Copays:
(Up to 30-day supply, limited to 2 fills for maintenance)

	2023	2024	2025	2026	2027
Generic	\$10	\$10	\$10	\$10	\$10
Preferred	\$40	\$45	\$45	\$45	\$50
Non-Preferred	\$80	\$90	\$90	\$90	\$100

Retail - Non-Network Copays:
Participant pays the greater of the applicable Network copay or balance remaining after the program pays 75% of network retail cost.

Mail Order Copays:
(Up to 90-day supply)

	2023	2024	2025	2026	2027
Generic	\$20	\$20	\$20	\$20	\$20
Preferred	\$80	\$90	\$90	\$90	\$100
Non-Preferred	\$160	\$180	\$180	\$180	\$200

Option 2:

Deductible:
Integrated with Med/Surg, MH/SA, CarePlus

Out-of-Pocket Maximum:
Integrated with Med/Surg, MH/SA, CarePlus

Retail - Network Copays:
(Up to 30-day supply, limited to 2 fills for maintenance)

	2023	2024	2025	2026	2027
Generic	\$10	\$10	\$10	\$10	\$10
Preferred	\$40	\$45	\$45	\$45	\$50
Non-Preferred	\$80	\$90	\$90	\$90	\$100

Mail Order Copays:
(Up to 90-day supply)

	2023	2024	2025	2026	2027
Generic	\$20	\$20	\$20	\$20	\$20
Preferred	\$80	\$90	\$90	\$90	\$100
Non-Preferred	\$160	\$180	\$180	\$180	\$200

Option 3:

Deductible: Integrated with Med/Surg, MH/SA, CarePlus

Out-of-Pocket Maximum: Integrated with Med/Surg, MH/SA, CarePlus

Retail - Network Copays

(Up to 30-day supply, limited to 2 fills for maintenance)

	2023	2024	2025	2026	2027
Generic	N/A	\$10	\$10	\$10	\$10
Preferred	N/A	\$45	\$45	\$45	\$50
Non-Preferred	N/A	\$90	\$90	\$90	\$100

Mail Order Copays:
(Up to 90-day supply)

	2023	2024	2025	2026	2027
Generic	N/A	\$20	\$20	\$20	\$20
Preferred	N/A	\$90	\$90	\$90	\$100
Non-Preferred	N/A	\$180	\$180	\$180	\$200

The following provisions will continue to apply to Option 1 and Option 2:



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IBEW System Council T-3 Benefits Outline Summary

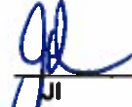
Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																								
	<ul style="list-style-type: none"> Mandatory mail order for maintenance Rx – Applies after second fill at retail. Specialty pharmacy program Personal Choice – 100% participant-paid Mandatory Generic Compound medication limitation Advanced Control Specialty Formulary Standard Prescription Drug Formulary Generic Step Therapy <p>Option 3: Follow Option 1 and Option 2 provisions</p>																								
Employee Assistance Program (EAP)																									
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.																								
Visit Limit	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.																								
Disability																									
Program	2013 New Hires, 2009 New Hires and Current Employees No change from current program 2017 New Hires No change from current program																								
Short Term Disability (STD)	2013 New Hires, 2009 New Hires and Current Employees No change from current program 2017 New Hires, No change from current program																								
Long-Term Disability (LTD)	2013 New Hires, 2009 New Hires and Current Employees No change from current program 2017 New Hires No change from current program																								
Dental																									
Program	2017 Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Dental Program (Bargained Employees) except as provided below. <ul style="list-style-type: none"> Dental PPO DHMO (available at the discretion of the Company) 																								
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for coverage begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.																								
Dependent Eligibility	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Effective Jan 1, 2023, dependent children will be eligible to participate in the AT&T Dental Program (Bargained Employees) until the end of the month in which the child reaches the age of 26 regardless of marital status.																								
Eligibility for Company Subsidy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for company subsidy begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.																								
Active (Full-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Contributions for Dental PPO or DHMO (if available): <table border="1" style="margin-left: 20px;"> <thead> <tr> <th></th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$9</td> <td>\$9</td> <td>\$9</td> <td>\$10</td> <td>\$10</td> </tr> <tr> <td>Individual+1</td> <td>\$19</td> <td>\$19</td> <td>\$19</td> <td>\$21</td> <td>\$21</td> </tr> <tr> <td>Family</td> <td>\$30</td> <td>\$30</td> <td>\$30</td> <td>\$33</td> <td>\$33</td> </tr> </tbody> </table>		2023	2024	2025	2026	2027	Individual	\$9	\$9	\$9	\$10	\$10	Individual+1	\$19	\$19	\$19	\$21	\$21	Family	\$30	\$30	\$30	\$33	\$33
	2023	2024	2025	2026	2027																				
Individual	\$9	\$9	\$9	\$10	\$10																				
Individual+1	\$19	\$19	\$19	\$21	\$21																				
Family	\$30	\$30	\$30	\$33	\$33																				
Active (Part-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Based on Scheduled hours/week: <ul style="list-style-type: none"> Greater than or equal to 20 hours = 50% of full cost of coverage* Less than 20 hours = 100% of full cost of coverage* with no Company subsidy. <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p>																								
Deductible	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Network and ONA: \$25 per individual per year Non-Network: \$50 per individual per year																								

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IBEW System Council T-3 Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires																								
Annual Maximum Benefit	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Network and ONA: \$1,750 per individual* Non-Network: \$1,300 per individual* *Not to exceed \$1,750 combined Network/Non-Network																								
Orthodontic Lifetime Maximum	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Network and ONA: \$2,000 per individual* Non-Network: \$1,400 per individual* *Not to exceed \$2,000 combined Network/Non-Network																								
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Dental PPO Coinsurance: Class I (Diagnostic/Preventive): Network and ONA*: 100%, deductible waived Non-Network**: 100%, deductible waived Class II (Basic restorative – fillings, extractions, periodontal treatment/maintenance): Network and ONA*: 90%, after deductible Non-Network**: 70%, after deductible Class III (Major restorative – crowns, dentures, bridgework): Network and ONA*: 80%, after deductible Non-Network**: 50%, after deductible Class IV (Orthodontia): Network and ONA*: 80%, after deductible Non-Network**: 50%, after deductible Notes: *For ONA, paid at Network contracted rate. **For Non-Network paid based on reasonable and customary amounts																								
Outside Network Area (ONA)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees <ul style="list-style-type: none"> • ONA benefit provided to employees who reside in a zip code which does not meet the network standards. • ONA benefits are equivalent to PPO Network benefits. • Enrollees who are in Network will be offered the PPO option only. • Enrollees who are located outside the Network zip code criteria will be offered the ONA option only 																								
Vision																									
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Vision Program (Bargained Employees) except as provided below.																								
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for coverage begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.																								
Dependent Eligibility	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Effective Jan 1, 2023, dependent children will be eligible to participate in the AT&T Vision Program (Bargained Employees) until the end of the month in which the child reaches the age of 26 regardless of marital status.																								
Eligibility for Company Subsidy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligibility for company subsidy begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.																								
Active (Full-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Contributions: <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th></th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> <th>2027</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$3.00</td> <td>\$3.00</td> <td>\$3.00</td> <td>\$3.50</td> <td>\$3.50</td> </tr> <tr> <td>Individual+1</td> <td>\$7.50</td> <td>\$7.50</td> <td>\$7.50</td> <td>\$9.50</td> <td>\$9.50</td> </tr> <tr> <td>Family</td> <td>\$12.50</td> <td>\$12.50</td> <td>\$12.50</td> <td>\$16.00</td> <td>\$16.00</td> </tr> </tbody> </table>		2023	2024	2025	2026	2027	Individual	\$3.00	\$3.00	\$3.00	\$3.50	\$3.50	Individual+1	\$7.50	\$7.50	\$7.50	\$9.50	\$9.50	Family	\$12.50	\$12.50	\$12.50	\$16.00	\$16.00
	2023	2024	2025	2026	2027																				
Individual	\$3.00	\$3.00	\$3.00	\$3.50	\$3.50																				
Individual+1	\$7.50	\$7.50	\$7.50	\$9.50	\$9.50																				
Family	\$12.50	\$12.50	\$12.50	\$16.00	\$16.00																				

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IBEW System Council T-3 Benefits Outline Summary

Provision		Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Active (Part-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Based on Scheduled hours/week: • Greater than or equal to 20 hours = 50% of full cost of coverage*. • Less than 20 hours = 100% of full cost of coverage* with no Company subsidy. *Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.	
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Exam: 1 exam per 12 months • Network: \$0 copay • Non-Network: \$28 allowance Frame Allowance: 1 pair per 12 months • Network: \$130 allowance • Non-Network: \$ 30 allowance Lenses Allowance: 1 set per 12 months • Network: \$0 copay/coinsurance Covers std. plastic lenses: Single, Bi-focal, Tri-focal, Lenticular, Progressive + Polycarbonate at 100% • Non-Network: \$30-\$80 allowance Contact Lenses Allowance: Allowance per 12 months • Network: \$150 allowance • Non-Network: \$150 allowance 2 nd Pair Benefit: Allows for a 2 nd pair of glasses or contact lenses allowance after the first pair benefit is utilized, per 24 months.	
Flexible Spending Account (FSA)		
Plan	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Flexible Spending Account Plan No change from current plan, except those that are mandated by healthcare reform legislation (PPACA).	
Contribution Minimum/Maximums	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current plan, except those that are mandated by healthcare reform legislation (PPACA) and to annually adjust the maximum contribution amount to that permitted by law for each calendar year for which the IRS issues timely guidance such that the Company can implement the change.	
Supplemental Medical Benefits		
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T CarePlus – A Supplemental Benefit Program No change from current program.	
Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program. Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.	
General Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA). Company continues to retain the unilateral right to change, modify, amend and discontinue benefits offered under CarePlus.	
Life Insurance		
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees	
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees All Coverages: Eligibility for coverage begins on the employee's date of hire, provided the employee enrolls within the 31-day enrollment period.	
Dependent Eligibility	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Effective Jan 1, 2023, dependent children will be eligible to participate in the AT&T Group Life Insurance Program for Active employees until the end of the month in which the child reaches the age of 26 regardless of marital status.	
Active Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program. Note: Contributions amounts are subject to annual adjustment.	
Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.	
Long-Term Care		

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IBEW System Council T-3 Benefits Outline Summary

Provision		Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Plan		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Consolidated Long-Term Care Insurance Plan
Coverage		2017 New Hires and 2013 New Hires Not available; closed to new entrants as of 5/1/2012. 2009 New Hires and Current Employees No change from current plan, except that the Company has the unilateral right to change, modify, amend and discontinue the AT&T Consolidated Long-Term Care Insurance Plan.
Adoption Assistance		
Policy		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Coverage		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Commuter		
Policy		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Coverage		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Pre-tax deductions for parking and mass transit. Eligible expense and monthly limits follow IRS Code Section 132 Regulations. Note: Annual adjustments apply.

Provision		Eligible Retired Employees
Retiree Provisions		Effective 1/1/2023 for AT&T National: Applicable for the term of the Agreement to Eligible Retired Employees who terminate during the term of the Agreement.
Medical		
Program		AT&T Corp. Eligible Former Bargained Employee Medical Program Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated active Employees except as noted in the sections below.
Eligible Retired Employees (Full-Time) Monthly Contributions		Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program
Eligible Retired Employees (Part-Time) Monthly Contributions		Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program
Medicare Part-B Premium Reimbursement		2017 New Hires, 2013 New Hires and 2009 New Hires Not Eligible. Current Employees No change from current plan.
Health Reimbursement Account (HRA)		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees None. Note: No additional Company crediting. Current employees and 2009 New Hires who have remaining account balances will continue to have access to those account balances subject to provisions of the Program.
Supplemental Medical Benefits		
Program		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Eligible Former Employee CarePlus – A Supplemental Benefit Program
Monthly Contributions		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program. Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.
General Benefits		2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA). Company continues to retain the unilateral right to change, modify, amend and discontinue benefits offered under CarePlus.



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IBEW System Council T-3 Benefits Outline Summary

Provision	Eligible Retired Employees
Dental	
Program	AT&T Eligible Former Employee Dental Program (Bargained) Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated active Employees except as noted in the sections below.
Eligible Retired Employee (Full-Time) Monthly Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program
Eligible Retired Employee (Part-Time) Monthly Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current plan
Life Insurance	
Eligible Retired Employees Basic Life (Company Paid)	2017 New Hires, 2013 New Hires and 2009 New Hires \$15,000 Retiree Basic Life Current Employees 1X Annual Pay Note: For the purposes of Retiree Basic Life only, Annual Pay is the Employee's Rate of Pay as of 12/31/2009. Includes base wages, targeted commissions, team award, individual discretionary award, and miscellaneous pay, where applicable.
Supplemental Life (Retiree Paid)	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current plan. *Contributions shall be the same as for a similarly situated active employee.
Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
Vision	
Eligible Retired Employees Vision Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligible Retired Employees shall be eligible to participate in the AT&T Eligible Former Employee Vision Program (formerly named the AT&T Retiree Vision Care Program)
Eligible Retired Employees Monthly Retiree Contributions	Current Employee, 2009 New Hires, 2013 New Hires and 2017 New Hires No change from current program

Provision	Current Employees, 2009 New Hires, 2013 New Hires, 2017 New Hires and Eligible Retired Employees
Voluntary and Ancillary	
Discretionary Program	AT&T Voluntary Benefits Platform (products offered as they may change from time to time). AT&T Ancillary Benefits Program (products offered as they may change from time to time).