

Legacy T CWA Core Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires
Active Employees	
Effective Date(s)	Health & Welfare: 1/1/2020, unless noted otherwise
Eligibility	
For Medical, Dental, Vision, Disability, CarePlus, and Life Insurance (unless otherwise specified)	<p><u>Current Employees, 2009 New Hires & 2012 New Hires</u> Applicable programs: Medical - AT&T Corp. Employee 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><u>2015 New Hires & 2022 New Hires</u> Applicable programs: Medical - AT&T Corp. Employee 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 **Management provisions as described in the Summary Plan Description.</p>
Health Reimbursement Account (HRAs)	
	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> None.</p> <p>Note: No additional Company crediting. Employees who have remaining account balances will continue to have access to those account balances subject to provisions of the Program.</p>
Medical	
Program	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T Corp. Employee Medical Program</p> <p>No change from current program except as provided below, and including:</p> <ul style="list-style-type: none"> • Choice of Option 1 or Option 2 as defined below. <p>Fully-insured coverage options such as HMOs continue to be available at the discretion of the Company.</p>
Dependent Eligibility	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current program.</p>
Eligibility for Coverage	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No changes from current program.</p>
Eligibility for Company Subsidy	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current program except as provided below.</p> <p>Individual Coverage: Company subsidy for Employees enrolled in Company sponsored Individual medical coverage (including fully insured coverage options, if available) will continue to begin on the first day of the month in which 90 days of net credited service (NCS) is attained (also referred to as term of employment (TOE)). Employees with less than 90 days of NCS will be eligible to enroll in Company-sponsored medical coverage (including fully insured coverage options, if available) but are required to pay 100% of the cost of coverage.</p> <p>Family Coverage: Company subsidy for Employees enrolled in Company sponsored medical coverage other than Individual coverage will continue to begin on the first day of the month in which 6 months of net credited service (NCS) is attained (also referred to as term of employment (TOE)). Employees with less than 91 days of NCS may enroll in Company-sponsored medical coverage (including fully insured coverage options, if available) but are required to pay 100% of the cost of coverage. Employees with more than 90 days of NCS and less than 6 months of NCS may enroll in Company-sponsored medical coverage (including fully insured coverage options, if available) but are required to pay 100% of the cost of coverage reduced by the company subsidy for the Individual coverage tier.</p>

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires															
Active (Full-Time) Monthly Contributions	Current Employees, 2009 New Hires, 2012 New Hires & 2015 New Hires have a choice between the following two options:															
	Option 1:															
	Monthly Contribution Amounts															
	<table border="1"> <tr><td></td><td>2020</td><td>2021</td><td>2022</td></tr> <tr><td>Individual</td><td>\$153</td><td>\$155</td><td>\$157</td></tr> <tr><td>Family</td><td>\$328</td><td>\$344</td><td>\$367</td></tr> </table>		2020	2021	2022	Individual	\$153	\$155	\$157	Family	\$328	\$344	\$367			
		2020	2021	2022												
	Individual	\$153	\$155	\$157												
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		2023	2024	2025	2026											
	Individual	\$157	\$159	\$161	\$163											
Family	\$367	\$382	\$405	\$429												
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Monthly Contribution Amounts																
<table border="1"> <tr><td></td><td>2020</td><td>2021</td><td>2022</td></tr> <tr><td>Individual</td><td>\$73</td><td>\$79</td><td>\$86</td></tr> <tr><td>Family</td><td>\$202</td><td>\$219</td><td>\$237</td></tr> </table>		2020	2021	2022	Individual	\$73	\$79	\$86	Family	\$202	\$219	\$237				
	2020	2021	2022													
Individual	\$73	\$79	\$86													
Family	\$202	\$219	\$237													
<table border="1"> <tr><td></td><td>2023</td><td>2024</td><td>2025</td><td>2026</td></tr> <tr><td>Individual</td><td>\$87</td><td>\$93</td><td>\$100</td><td>\$108</td></tr> <tr><td>Family</td><td>\$240</td><td>\$258</td><td>\$278</td><td>\$300</td></tr> </table>		2023	2024	2025	2026	Individual	\$87	\$93	\$100	\$108	Family	\$240	\$258	\$278	\$300	
	2023	2024	2025	2026												
Individual	\$87	\$93	\$100	\$108												
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2022 New Hires have a choice between the following two options:																
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	2023	2024	2025	2026												
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<table border="1"> <tr><td></td><td>2023</td><td>2024</td><td>2025</td><td>2026</td></tr> <tr><td>Individual</td><td>\$112</td><td>\$120</td><td>\$129</td><td>\$138</td></tr> <tr><td>Family</td><td>\$311</td><td>\$332</td><td>\$356</td><td>\$382</td></tr> </table>		2023	2024	2025	2026	Individual	\$112	\$120	\$129	\$138	Family	\$311	\$332	\$356	\$382	
	2023	2024	2025	2026												
Individual	\$112	\$120	\$129	\$138												
Family	\$311	\$332	\$356	\$382												
Active (Part-Time) Monthly Contributions	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires No change from current program.															
Working Spouse/LRP Contribution	<p>Current Employee, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</p> <p><u>Spouse/LRP Access to Medical Coverage Additional Medical Contribution:</u> Participants whose spouse/LRP enrolls in AT&T-sponsored medical coverage (within either self-insured or fully insured programs) but otherwise has access to medical coverage through their employer, excluding AT&T, will pay an additional monthly contribution toward their cost of coverage. The monthly additional contribution is shown below. The participant must attest that his or her spouse/LRP does not have access to medical coverage otherwise the additional contribution will be applied.</p> <p>Additional Monthly Medical Contribution:</p> <table style="margin-left: 40px;"> <tr> <td><u>2020</u></td> <td><u>2021</u></td> <td><u>2022</u></td> <td><u>2023</u></td> <td><u>2024</u></td> <td><u>2025</u></td> <td><u>2026</u></td> </tr> <tr> <td>\$0</td> <td>\$100</td> <td>\$100</td> <td>\$110</td> <td>\$115</td> <td>\$120</td> <td>\$125</td> </tr> </table>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	\$0	\$100	\$100	\$110	\$115	\$120	\$125	
<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>										
\$0	\$100	\$100	\$110	\$115	\$120	\$125										

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires														
Tobacco Use Contribution	<p data-bbox="435 254 1235 275"><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u></p> <p data-bbox="435 300 841 321"><u>Tobacco Use Additional Medical Contribution:</u></p> <p data-bbox="435 323 1507 527">Employees and/or spouse/LRP 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/LRP 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, and participation. A tobacco user is currently defined as someone who has used tobacco products more than once a month 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.</p> <p data-bbox="435 552 792 573">Additional Monthly Medical Contribution:</p> <table data-bbox="529 596 1235 655"> <thead> <tr> <th data-bbox="529 596 581 617"><u>2020</u></th> <th data-bbox="639 596 691 617"><u>2021</u></th> <th data-bbox="750 596 802 617"><u>2022</u></th> <th data-bbox="860 596 912 617"><u>2023</u></th> <th data-bbox="971 596 1023 617"><u>2024</u></th> <th data-bbox="1081 596 1133 617"><u>2025</u></th> <th data-bbox="1192 596 1243 617"><u>2026</u></th> </tr> </thead> <tbody> <tr> <td data-bbox="529 632 581 653">\$50</td> <td data-bbox="639 632 691 653">\$60</td> <td data-bbox="750 632 802 653">\$65</td> <td data-bbox="860 632 912 653">\$70</td> <td data-bbox="971 632 1023 653">\$75</td> <td data-bbox="1081 632 1133 653">\$75</td> <td data-bbox="1192 632 1243 653">\$75</td> </tr> </tbody> </table>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>	\$50	\$60	\$65	\$70	\$75	\$75	\$75
<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	<u>2026</u>									
\$50	\$60	\$65	\$70	\$75	\$75	\$75									

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires								
Annual Deductibles	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires								
	Option 1:								
		2020		2021		2022			
		<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>		
	Ind	\$ 700	\$2,450	\$ 800	\$2,800	\$850	\$2,975		
	Family	\$1,400	\$4,900	\$1,600	\$5,600	\$1,700	\$5,950		
		2023		2024		2025		2026	
		<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>
	Ind	\$ 900	\$2,700	\$ 950	\$2,850	\$1,000	\$3,000	\$1,050	\$3,150
	Family	\$1,800	\$5,400	\$1,900	\$5,700	\$2,000	\$6,000	\$2,100	\$6,300
The following Annual Deductible Provisions will apply to Option 1:									
(Integrated with Med/Surg, MH/SA, CarePlus)									
<ul style="list-style-type: none"> • Applies to all covered health services, including mental health/substance abuse (MH/SA) under the program. • The Annual Deductibles are included in the Out-Of-Pocket Maximums. • For Family coverage, a covered person is eligible to receive benefits once their eligible/allowable expenses satisfy the Individual Deductible amount. The Family Deductible is met once any combination of covered persons' eligible/allowable expenses meet the Family Deductible amount. It is not necessary that any one individual reach the Individual Deductible but no one individual may contribute more than the Individual Deductible amount. 									
Option 2:									
	2020		2021		2022				
	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>			
Ind	\$1,550	\$4,650	\$1,600	\$4,800	\$1,650	\$4,950			
Family	\$3,100	\$9,300	\$3,200	\$9,600	\$3,300	\$9,900			
	2023		2024		2025		2026		
	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	<u>Network & Traditional Indemnity</u>	<u>Non-Network</u>	
Ind	\$1,700	\$ 5,100	\$1,750	\$ 5,250	\$1,800	\$ 5,400	\$1,850	\$ 5,550	
Family	\$3,400	\$10,200	\$3,500	\$10,500	\$3,600	\$10,800	\$3,700	\$11,100	
The following Annual Deductible Provisions will apply to Option 2:									
(Integrated with Med/Surg, Rx, MH/SA, CarePlus)									
<ul style="list-style-type: none"> • Applies to all covered health services, including mental health/substance abuse (MH/SA) and prescription drug (Rx) benefits under the program. • The Annual Deductibles are included in the Out-Of-Pocket Maximums. • For Family coverage, 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/Traditional Indemnity or Non-Network Deductible amounts: <ul style="list-style-type: none"> – All prescription drug allowable charges of eligible expenses. 									

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires												
General CoPay/Coinsurance	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires												
	Option1:												
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Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded											
Note: Non-Network: The methodology for calculating the Allowable Charge for all categories of Non-Network expenses may be changed from time to time at the Company's discretion.													
Office Visit Copay / Coinsurance	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires												
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Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires												
Urgent Care Facility/Professional Services Copay / Coinsurance	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</p> <p>Option 1:</p> <table border="1" data-bbox="440 342 711 485"> <tr> <td colspan="2" style="text-align: center;">2020 – 2026</td> </tr> <tr> <td style="text-align: center;">Network & Traditional Indemnity</td> <td style="text-align: center;">Non-Network</td> </tr> <tr> <td style="text-align: center;">\$0 / 10% After Ded</td> <td style="text-align: center;">\$0 / 50% After Ded</td> </tr> </table> <p>Option 2:</p> <table border="1" data-bbox="440 554 711 697"> <tr> <td colspan="2" style="text-align: center;">2020 - 2026</td> </tr> <tr> <td style="text-align: center;">Network & Traditional Indemnity</td> <td style="text-align: center;">Non-Network</td> </tr> <tr> <td style="text-align: center;">\$0 / 10% After Ded</td> <td style="text-align: center;">\$0 / 50% After Ded</td> </tr> </table>	2020 – 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded	2020 - 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded
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Emergency Room Facility/Professional Services Copay / Coinsurance (Emergencies)	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</p> <p>Option 1:</p> <table border="1" data-bbox="440 837 711 980"> <tr> <td colspan="2" style="text-align: center;">2020 - 2026</td> </tr> <tr> <td style="text-align: center;">Network & Traditional Indemnity</td> <td style="text-align: center;">Non-Network</td> </tr> <tr> <td style="text-align: center;">\$0 / 10% After Ded</td> <td style="text-align: center;">\$0 / 10% After Ded</td> </tr> </table> <p>Option 2:</p> <table border="1" data-bbox="440 1050 711 1192"> <tr> <td colspan="2" style="text-align: center;">2020 - 2026</td> </tr> <tr> <td style="text-align: center;">Network & Traditional Indemnity</td> <td style="text-align: center;">Non-Network</td> </tr> <tr> <td style="text-align: center;">\$0 / 10% After Ded</td> <td style="text-align: center;">\$0 / 10% After Ded</td> </tr> </table>	2020 - 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 10% After Ded	2020 - 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 10% After Ded
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Hospital Inpatient/Outpatient Facility/Professional Services Copay / Coinsurance	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</p> <p>Option 1:</p> <table border="1" data-bbox="440 1283 711 1425"> <tr> <td colspan="2" style="text-align: center;">2020 - 2026</td> </tr> <tr> <td style="text-align: center;">Network & Traditional Indemnity</td> <td style="text-align: center;">Non-Network</td> </tr> <tr> <td style="text-align: center;">\$0 / 10% After Ded</td> <td style="text-align: center;">\$0 / 50% After Ded</td> </tr> </table> <p>Option 2:</p> <table border="1" data-bbox="440 1495 711 1638"> <tr> <td colspan="2" style="text-align: center;">2020 - 2026</td> </tr> <tr> <td style="text-align: center;">Network & Traditional Indemnity</td> <td style="text-align: center;">Non-Network</td> </tr> <tr> <td style="text-align: center;">\$0 / 10% After Ded</td> <td style="text-align: center;">\$0 / 50% After Ded</td> </tr> </table>	2020 - 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded	2020 - 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded
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Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires																								
Tests (all tests including x-ray, radiology, lab test, etc.) Copay/ Coinsurance	<p data-bbox="435 254 1230 275"><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u></p> <p data-bbox="435 321 526 342">Option 1:</p> <table border="1" data-bbox="435 365 889 554"> <thead> <tr> <th></th> <th colspan="2">2020 - 2026</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 data-bbox="435 600 526 621">Option 2:</p> <table border="1" data-bbox="435 644 889 833"> <thead> <tr> <th></th> <th colspan="2">2020 - 2026</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>		2020 - 2026			Network & Traditional Indemnity	Non-Network	Preventive	\$0 / 0% Ded Waived	No Benefit	Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded		2020 - 2026			Network & Traditional Indemnity	Non-Network	Preventive	\$0 / 0% Ded Waived	No Benefit	Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded
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Hearing Benefit	<p data-bbox="435 863 1230 884"><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u></p> <p data-bbox="435 909 526 930">Option 1:</p> <table border="1" data-bbox="435 953 711 1100"> <thead> <tr> <th colspan="2">2020 - 2026</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 data-bbox="435 1125 526 1146">Option 2:</p> <table border="1" data-bbox="435 1169 711 1316"> <thead> <tr> <th colspan="2">2020 - 2026</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>	2020 - 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded	2020 - 2026		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded												
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Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires									
Mental Health/Substance Abuse (MH/SA) Copay / Coinsurance	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u>									
	Option 1:									
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		Network & Traditional Indemnity	Non-Network							
Out Patient & In Patient	\$0 / 10% After Ded	\$0 / 50% After Ded								
Option 2:										
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Annual Out-of-Pocket Maximums (OOP)	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</p> <p style="text-align: center;">Out-of-Pocket Maximum Amounts (including Annual Deductible)</p> <p>Option 1:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th colspan="2">2020</th> <th colspan="2">2021</th> <th colspan="2">2022</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> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>\$3,500</td> <td>\$10,500</td> <td>\$3,500</td> <td>\$10,500</td> <td>\$3,500</td> <td>\$10,500</td> </tr> <tr> <td>Family</td> <td>\$7,000</td> <td>\$21,000</td> <td>\$7,000</td> <td>\$21,000</td> <td>\$7,000</td> <td>\$21,000</td> </tr> </tbody> </table> <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> </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> </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> </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> </tr> </tbody> </table> <p>The following Out-of-Pocket Maximum provisions will apply to Option 1:</p> <p>(Integrated with Med/Surg, MH/SA, CarePlus)</p> <p>If the coverage tier is Family, the Family Out-Of-Pocket Maximum must be met before the Program pays 100% of the Allowable Charges for Eligible Expenses, except that the Program will pay 100% of the Allowable Charges for Eligible Expenses for Network and Traditional Indemnity Services for an individual family member once the individual meets the applicable Individual Out-Of-Pocket Maximum, even if the Family Out-Of-Pocket Maximum has not been met.</p> <p>The following additional costs paid by the participant apply toward the applicable Network and Traditional Indemnity or Non-Network Out-of-Pocket Maximum amounts:</p> <ul style="list-style-type: none"> - Deductibles <p>Option 2:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th colspan="2">2020</th> <th colspan="2">2021</th> <th colspan="2">2022</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> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>\$ 6,650</td> <td>\$19,950</td> <td>\$ 6,650</td> <td>\$19,950</td> <td>\$ 6,650</td> <td>\$19,950</td> </tr> <tr> <td>Family</td> <td>\$13,300</td> <td>\$39,900</td> <td>\$13,300</td> <td>\$39,900</td> <td>\$13,300</td> <td>\$39,900</td> </tr> </tbody> </table> <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> </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> </tr> </thead> <tbody> <tr> <td>Ind</td> <td>\$ 6,750</td> <td>\$20,250</td> <td>\$ 6,850</td> <td>\$20,550</td> <td>\$ 6,950</td> <td>\$20,850</td> <td>\$ 7,050</td> <td>\$21,150</td> </tr> <tr> <td>Family</td> <td>\$13,500</td> <td>\$40,500</td> <td>\$13,700</td> <td>\$41,100</td> <td>\$13,900</td> <td>\$41,700</td> <td>\$14,100</td> <td>\$42,300</td> </tr> </tbody> </table> <p>The following Out-of-Pocket Maximum provisions will apply to Option 2:</p> <p>(Integrated with Med/Surg, Rx, MH/SA, CarePlus)</p> <p>If the coverage tier is Family, the Family Out-Of-Pocket Maximum must be met before the Program pays 100% of the Allowable Charges for Eligible Expenses, except that the Program will pay 100% of the Allowable Charges for Eligible Expenses for Network and Traditional Indemnity Services for an individual family member once the individual meets the applicable Individual Out-Of-Pocket Maximum, even if the Family Out-Of-Pocket Maximum has not been met.</p> <p>The following additional costs paid by the participant apply toward the applicable Network and Traditional Indemnity or Non-Network Out-of-Pocket Maximum amounts:</p> <ul style="list-style-type: none"> - Deductibles - Prescription drug copays 		2020		2021		2022			Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Ind	\$3,500	\$10,500	\$3,500	\$10,500	\$3,500	\$10,500	Family	\$7,000	\$21,000	\$7,000	\$21,000	\$7,000	\$21,000		2023		2024		2025		2026			Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Ind	\$3,750	\$11,250	\$4,000	\$12,000	\$4,200	\$12,600	\$4,400	\$13,200	Family	\$7,500	\$22,500	\$8,000	\$24,000	\$8,400	\$25,200	\$8,800	\$26,400		2020		2021		2022			Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Ind	\$ 6,650	\$19,950	\$ 6,650	\$19,950	\$ 6,650	\$19,950	Family	\$13,300	\$39,900	\$13,300	\$39,900	\$13,300	\$39,900		2023		2024		2025		2026			Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Ind	\$ 6,750	\$20,250	\$ 6,850	\$20,550	\$ 6,950	\$20,850	\$ 7,050	\$21,150	Family	\$13,500	\$40,500	\$13,700	\$41,100	\$13,900	\$41,700	\$14,100	\$42,300
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Prescription Drug Program (Rx)	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</p> <p>Option 1:</p> <p>Deductible:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>2020 – 2026</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$0</td> </tr> <tr> <td>Family</td> <td>\$0</td> </tr> </tbody> </table>		2020 – 2026	Individual	\$0	Family	\$0																																																																																																																										
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Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires			
	Out-of-Pocket Maximum:			
	<u>2020 - 2022</u>			
Individual	\$1,700			
Family	\$3,400			
	2023	2024	2025	2026
Individual	\$1,700	\$1,700	\$1,800	\$1,800
Family	\$3,400	\$3,400	\$3,600	\$3,600
	Retail – Network Copays: (Up to 30-day supply, limited to 2 fills for maintenance subject to Advanced Control Specialty Formulary provisions).			
	<u>2020-2022</u>			
Generic	\$10			
Preferred	\$40			
Non-Preferred	\$80			
	2023	2024	2025	2026
Generic	\$10	\$10	\$10	\$10
Preferred	\$40	\$45	\$45	\$45
Non-Preferred	\$80	\$90	\$90	\$90
	Retail – Non-Network Copays: Participant pays the greater of the applicable Network Copays or balance remaining after the program pays 75% of network retail cost.			
	Mail Order Copays: (Up to 90-day supply subject to Advanced Control Specialty Formulary provisions)			
	2020	2021	<u>2022</u>	
Generic	\$20	\$20	\$20	
Preferred	\$80	\$80	\$80	
Non-Preferred	\$160	\$160	\$160	
	2023	2024	2025	2026
Generic	\$20	\$20	\$20	\$20
Preferred	\$80	\$90	\$90	\$90
Non-Preferred	\$160	\$180	\$180	\$180
	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 subject to Advanced Control Specialty Formulary provisions)			
	<u>2020-2022</u>			
Generic	\$10			
Preferred	\$40			
Non-Preferred	\$80			
	2023	2024	2025	2026
Generic	\$10	\$10	\$10	\$10
Preferred	\$40	\$45	\$45	\$45
Non-Preferred	\$80	\$90	\$90	\$90
	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 subject to Advanced Control Specialty Formulary provisions)			
	2020	2021	<u>2022</u>	
Generic	\$20	\$20	\$20	
Preferred	\$80	\$80	\$80	
Non-Preferred	\$160	\$160	\$160	

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires																				
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	2023	2024	2025	2026																	
Generic	\$20	\$20	\$20	\$20																	
Preferred	\$80	\$90	\$90	\$90																	
Non-Preferred	\$160	\$180	\$180	\$180																	
Employee Assistance Program (EAP)																					
Program	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T Employee Assistance Program No change from current program.																				
Visit Limit	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Continues to provide up to 5 EAP visits per person per issue.																				
Disability																					
Program	<u>Current Employees, 2009 New Hires & 2012 New Hires</u> Legacy AT&T Disability Benefit Program No change from current program. <u>2015 New Hires & 2022 New Hires</u> AT&T Disability Income Program as described in the Summary Plan Description, except as provided below.																				
Short Term Disability (STD)	<u>Current Employees, 2009 New Hires & 2012 New Hires</u> Legacy AT&T Disability Benefit Program No change from current program. <u>2015 New Hires & 2022 New Hires</u> AT&T Disability Income Program as described in the Summary Plan Description. No change from current program.																				
Long-Term Disability (LTD)	<u>Current Employees, 2009 New Hires & 2012 New Hires,</u> Legacy AT&T Disability Benefit Program No change from current program. <u>2015 New Hires & 2022 New Hires</u> The AT&T Disability Income Program as described in the Summary Plan Description except that Temporary and Term employees are not eligible for LTD benefits. No change from current program.																				
Dental																					
Program	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> 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	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Eligibility for coverage continues to begin on first day of the month in which 6 months net credited service (NCS) is attained (also referred to as term of employment (TOE)).																				

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires																																								
Eligibility for Company Subsidy	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Company subsidy continues to begin on first day of the month in which 6 months net credited service (NCS) is attained (also referred to as term of employment (TOE)).																																								
Active (Full-Time) Monthly Contributions	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Dental PPO or DHMO (if available): <table border="1" style="margin-left: 20px;"> <thead> <tr> <th></th> <th colspan="7">Contribution Amounts</th> </tr> <tr> <th></th> <th>2020</th> <th>2021</th> <th>2022</th> <th>2023</th> <th>2024</th> <th>2025</th> <th>2026</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$7.00</td> <td>\$8.00</td> <td>\$8.00</td> <td>\$8.00</td> <td>\$8.00</td> <td>\$9.00</td> <td>\$9.00</td> </tr> <tr> <td>Ind+1</td> <td>\$14.00</td> <td>\$17.00</td> <td>\$17.00</td> <td>\$17.00</td> <td>\$17.00</td> <td>\$19.00</td> <td>\$19.00</td> </tr> <tr> <td>Family</td> <td>\$23.00</td> <td>\$27.00</td> <td>\$27.00</td> <td>\$27.00</td> <td>\$27.00</td> <td>\$30.00</td> <td>\$30.00</td> </tr> </tbody> </table>		Contribution Amounts								2020	2021	2022	2023	2024	2025	2026	Individual	\$7.00	\$8.00	\$8.00	\$8.00	\$8.00	\$9.00	\$9.00	Ind+1	\$14.00	\$17.00	\$17.00	\$17.00	\$17.00	\$19.00	\$19.00	Family	\$23.00	\$27.00	\$27.00	\$27.00	\$27.00	\$30.00	\$30.00
	Contribution Amounts																																								
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Ind+1	\$14.00	\$17.00	\$17.00	\$17.00	\$17.00	\$19.00	\$19.00																																		
Family	\$23.00	\$27.00	\$27.00	\$27.00	\$27.00	\$30.00	\$30.00																																		
Active (Part-Time) Monthly Contributions	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description. Note: Calculation of cost of coverage is subject to annual adjustment.																																								
Deductible	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description.																																								
Annual Maximum Benefit	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description.																																								
Orthodontic Lifetime Maximum	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description.																																								
Coverage Levels	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description.																																								
Outside Network Area (ONA)	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description.																																								
Vision																																									
Program	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> _AT&T Vision Program (Bargained Employees) except as provided below:																																								
Eligibility for Coverage	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Eligibility for coverage continues to begin on first day of the month in which 6 months net credited service (NCS) is attained (also referred to as term of employment (TOE)).																																								
Eligibility for Company Subsidy	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Eligibility for company subsidy continues to begin on first day of the month in which 6 months net credited service (NCS) is attained (also referred to as term of employment (TOE)).																																								
Active (Full-Time) Monthly Contributions	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Contributions as they change from time to time. <table border="1" style="margin-left: 20px;"> <thead> <tr> <th></th> <th>Contribution Amounts 2018*</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$2.50</td> </tr> <tr> <td>Ind+1</td> <td>\$4.50</td> </tr> <tr> <td>Family</td> <td>\$8.00</td> </tr> </tbody> </table> *The 2018 contributions shown above are for illustrative purposes only.		Contribution Amounts 2018*	Individual	\$2.50	Ind+1	\$4.50	Family	\$8.00																																
	Contribution Amounts 2018*																																								
Individual	\$2.50																																								
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Family	\$8.00																																								
Active (Part-Time) Monthly Contributions	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description.																																								

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires
Coverage Levels	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Provisions will apply as indicated in the Summary Plan Description.
Flexible Spending Account (FSA)	
Plan	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T Flexible Spending Account Plan No change from current plan.
Contribution Minimum/Maximums	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current plan, except 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 reasonably implement the change.
Supplemental Medical Benefits – CarePlus	
Program	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T CarePlus – A Supplemental Benefit Program No change from current program.
Monthly Contributions	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> 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	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from the current program, except those required to comply with healthcare reform legislation (PPACA). The Company continues to retain the unilateral right to change, modify, amend, and discontinue the benefits offered under CarePlus.
Life Insurance	
Program	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T Group Life Insurance Program for Active Employees No change from current program.
Active Benefits	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current program. * *Note: Contribution amounts are subject to annual adjustments.
Definition of Pay	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current program.
Long-Term Care	
Plan	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T Consolidated Long-Term Care Insurance Plan

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires
Coverage	<p><u>2012 New Hires, 2015 New Hires & 2022 New Hires</u></p> <p>Not available; closed to new entrants as of 5/1/2012.</p> <p><u>Current Employees and 2009 New Hires</u> No change from current program., except the Company has the unilateral right to change, modify, amend and discontinue the AT&T Consolidated Long-Term Care Insurance Plan.</p>
Adoption	
Policy	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T Adoption Reimbursement Policy</p> <p>No change from current policy.</p>
Coverage	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u></p> <p>No change from current policy.</p>
Commuter	
Policy	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> AT&T Commuter Benefits Policy</p> <p>No change from current policy, except as mandated by IRS Code Section 132 Regulations.</p>
Coverage	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u></p> <p>Pre-tax deductions for parking and mass transit.</p> <p>No change from current policy, except eligible expense and monthly limits updated annually as allowed by IRS Code Section 132 Regulations.</p>

Provision	Eligible Retired Employees
Retiree Provisions	<p>Effective 1/1/2020:</p> <p>Applicable for the term of the 2022 Extension Agreement to Eligible Retired Employees who terminate after April 9, 2022 but during the term of the 2022 Extension Agreement.</p>
Medical	
Program	<p>Eligible Retired Employees shall be eligible to participate in the same choice of program options and provisions as a similarly situated active Current Employee, 2009 New Hire, 2012 New Hire, 2015 New Hire or 2022 New Hires except as noted below.</p>
Eligible Retired Employees (Full-Time) Monthly Contributions	<p><u>2022 New Hires</u> Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</p> <p><u>2015 New Hires & 2012 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p><u>2009 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p><u>Current Employees</u> No change from current program, as follows: The contribution shall continue to be the same as for similarly situated active Current Employees.</p>

Provision	Eligible Retired Employees
Eligible Retired Employees (Part-Time) Monthly Contributions	<p><u>2022 New Hires</u> Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</p> <p><u>2015 New Hires & 2012 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p><u>2009 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p><u>Current Employees</u> No change from current program, as follows: The contribution shall continue to be the same as for similarly situated active Current Employees.</p>
Medicare Part-B Premium Reimbursement	<p><u>2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Not Eligible.</p> <p><u>Current Employees</u> No change from current program.</p>
Definition of Pay	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> Refer to the Summary Plan Description for the plan in which they were active participants.</p>
Health Reimbursement Account (HRAs)	
	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> None.</p> <p>Note: No additional Company crediting. Employees who have remaining balances will continue to have access to those account balances subject to provisions of the Program.</p>
Supplemental Medical Benefits - CarePlus	
Program	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current program.</p>
Monthly Contributions	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current program.</p> <p>Note: Contributions continue to be subject to change from time to time at the sole discretion of the Company.</p>
General Benefits	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u> No change from current program, except those required to comply with healthcare reform legislation (PPACA).</p> <p>The Company continues to retain the unilateral right to change, modify, amend, and discontinue the benefits offered under CarePlus.</p>
Dental	

Provision	Eligible Retired Employees
Program	Eligible Retired Employees shall be eligible to participate in the same provisions as similarly situated active Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires or 2022 New Hires except as noted in the sections below.
Eligible Retired Employees (Full-Time) Monthly Contributions	<p><u>2022 New Hires</u></p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible are ineligible for coverage. <p><u>2015 New Hires & 2012 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p><u>2009 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p><u>Current Employees</u> No change from current program, as follows: The contribution shall continue to be the same as for similarly situated active Current Employees.</p>
Eligible Retired Employees (Part-Time) Monthly Contributions	<p><u>2022 New Hires</u> Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</p> <p><u>2015 New Hires & 2012 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p><u>2009 New Hires</u> No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p>* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p><u>Current Employees</u> No change from current program, as follows: The contribution shall continue to be the same as for similarly situated active Current Employees.</p>
Life Insurance	
Eligible Retired Employees Basic Life (Company Paid)	<p><u>2022 New Hires</u> \$15,000 Retiree Basic Life These provisions will continue to apply:</p> <p><u>2015 New Hires, 2012 New Hires & 2009 New Hires</u> \$15,000 Retiree Basic Life</p> <p><u>Current Employees</u> 1X Annual Pay</p> <p>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.</p>

Provision	Eligible Retired Employees
<p>Eligible Retired Employees</p> <p>Supplemental Life (Retiree Paid)</p>	<p><u>2022 New Hires, 2015 New Hires, 2012 New Hires & 2009 New Hires</u></p> <p>Employees eligible for Supplemental Life coverage may add 1x annual pay to Supplemental Life coverage in effect at termination to replace the Basic Life coverage no longer available upon termination of employment.</p> <p><u>Current Employees</u></p> <p>No change from current program.</p>
<p>Definition of Pay</p>	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2022 New Hires</u></p> <p>No change from current program.</p>
Vision	
<p>Eligible Retired Employees</p> <p>Vision Program</p>	<p><u>2022 New Hires</u></p> <p>Eligible Retired Employees shall be eligible to participate in the AT&T Eligible Former Employee Vision Program.</p> <p><u>Current Employees, 2009 New Hires, 2012 New Hires, & 2015 New Hires</u></p> <p>Eligible Retired Employees shall continue to be eligible to participate in the AT&T Eligible Former Employee Vision Program.</p>
<p>Eligible Retired Employees Monthly Retiree Contributions</p>	<p><u>2022 New Hires</u></p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible are ineligible for coverage. <p><u>2015 New Hires & 2012 New Hires</u></p> <p>No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy. Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage. <p><u>Current Employees & 2009 New Hires</u></p> <p>No change from current program, as follows:</p> <ul style="list-style-type: none"> Eligible Retired Employees will continue to pay 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 sole discretion of the Company.</p>

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires, 2022 New Hires & Eligible Retired Employees
Voluntary	
<p>Discretionary Program</p>	<p>AT&T Voluntary Benefits Platform (products offered as they may change from time to time).</p>