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## ARTICLE 16

### BENEFITS

16.01 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 and/or will be provided within a reasonable period of time to the Union upon reasonable request. If there is any difference between these SPDs and the ERISA plans or programs (including amendments thereto), the plan texts shall govern. No change shall be made in the terms of these plans, programs and policies, 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.

For purposes of this Article only, including Attachment A, the following definitions will apply:

- "Midwest Region Core Bargained Employees" includes employees covered by this Agreement as well as job titles in Appendix F.
- "Current Employees" includes:
  - Midwest Region Core Bargained Employees hired/rehired on or before August 8, 2009.
  - Such "Current Employees" who are laid off, excluding those in titles under Appendix F, who are recalled and whose service is immediately bridged will again be treated as Current Employees.
- "2009 New Hires" includes:
  - Midwest Region Core Bargained Employees hired/rehired or transferred into the 2009 Collective Bargaining Agreement (including transfers to a job title under Appendix F and transfers pursuant to the National Transfer Plan) after August 8, 2009 and on or before August 17, 2012;

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- individuals who were classified as Temporary or Regular Limited Term Employee as of August 8, 2009 and who were subsequently reclassified to Regular Employee status on or before August 17, 2012; and
- DIRECTV LLC (“DTV”) employees whose Term of Employment (TOE) as of January 1, 2017 was on or before August 17, 2012.
- Such “2009 New Hires” who are laid off, excluding Employees in titles under Appendix F, who are recalled and whose service is immediately bridged will again be treated as 2009 New Hires.
- “2012 New Hires” includes:
  - Midwest Region Core Bargained Employees hired/rehired or transferred into the 2012 Collective Bargaining Agreement (including transfers to a job title under Appendix F and transfers pursuant to the National Transfer Plan) after August 17, 2012 and on or before June 26, 2015; and
  - DTV employees whose TOE as of January 1, 2017 was after August 17, 2012 and on or before June 26, 2015.
  - Such “2012 New Hires” who are laid off, excluding Employees in titles under Appendix F, who are recalled and whose service is immediately bridged will again be treated as 2012 New Hires.
- “2015 New Hires” includes:
  - Midwest Region Core Bargained Employees hired/rehired or transferred into the 2015 or 2018 Collective Bargaining Agreements (including transfers to a job title under Appendix F and transfers pursuant to the National Transfer Plan) after June 26, 2015 and on or before April 9, 2022; and
  - DTV employees whose TOE as of January 1, 2017 was after June 26, 2015 or any DTV employee that was hired or rehired on or after January 1, 2017 and on or before August 5, 2019.
  - Such “2015 New Hires” who are laid off, excluding Employees in titles under Appendix F, who are recalled and whose service is immediately bridged will again be treated as 2015 New Hires.
- “2022 New Hires” includes:

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- Midwest Region Core Bargained Employees hired/rehired or transferred into the 2018 Collective Bargaining Agreement (including transfers to a job title under Appendix F and transfers pursuant to the National Transfer Plan) after April 9, 2022.
- “Employees” includes Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires.
- “Eligible Retired Employees” includes Employees who terminate employment after April 11, 2026 but during the term of this Agreement and who meet the applicable requirements to be eligible for post-retirement benefits.

The Memorandum of Agreement - Benefits Rules For Movement (Memorandum) provides specific rules regarding benefits for Employees who move among job titles or move pursuant to the National Transfer Plan. 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, 2027, Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 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 April 11, 2026, as described in the applicable SPDs and SMMs, except as noted herein.

Plan/Program/Policy	Current Employees & 2009 New Hires	2012 New Hires	2015 New Hires & 2022 New Hires
AT&T Bargained Employees Medical Program	X	X	X
AT&T Dental Program (Bargained Employees)	X	X	X
AT&T Vision Program (Bargained Employees)	X	X	X

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AT&T CarePlus – A Supplemental Benefit Program	X	X	X
AT&T Group Life Insurance Program for Active Employees*	X	X	X
AT&T Flexible Spending Account Plan	X	X	X
AT&T Health Reimbursement Account Program	X	X (SSP only)	
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 AT&T Surrogacy Reimbursement Policy AT&T Cryopreservation Reimbursement Policy	X	X	X
AT&T Employee Assistance Program	X	X	X
AT&T Ancillary Benefits Program**	X	X	X

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

\*\* The Company may unilaterally modify or discontinue the AT&T Ancillary Benefits Program from time-to-time without further discussions with the Union.

- (B) Employees, including newly eligible Employees, and Eligible Retired Employees (as provided for in Article 16.01(1)(C)) shall continue to participate in the same benefit plans, programs and policies on the same terms and conditions which were in effect on April 11, 2026 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) 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

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termination, will be eligible, during the term of this Agreement, for coverage under the AT&T Bargained Employees Medical Program, AT&T CarePlus – A Supplemental Benefit Program, AT&T Dental Program (Bargained Employees), AT&T Group Life Insurance Program for Former Bargained Employees and AT&T Eligible Former Employee Vision Program, subject to changes to benefits resulting from the operation of existing plan provisions and amendments necessary to comply with changes in the law, and with the exceptions identified in Attachment A. Nothing in this Article 16.01(1)(C) 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.

- (D) Attachment A provides 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 and the plan documents, SPDs or SMMs, the information provided in Attachment A will govern.
- (E) It is understood that certain benefits described in Attachment A are subject to change to comply with implementation of the Patient Protection and Affordable Care Act (PPACA) and associated 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 2026 Collective Bargaining Agreement will remain in effect through expiration.

## 2. PENSION AND SAVINGS BENEFIT PLANS

- (A) Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 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 April 11, 2026, as described in the applicable SPDs and SMMs, except as noted herein.

Plan/Program/Policy	Current Employees, Excluding Appendix F*	Current Employees in Appendix F*, 2009 New Hires, 2012 New Hires, 2015 New Hires, 2022 New Hires
AT&T Retirement Savings Plan	X	X
Midwest Program of the AT&T Pension Benefit Plan	X	

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Bargained Cash Balance Program #2 of the AT&T Pension Benefit Plan		X
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\* Unless a Surplus Appendix F Employee.

**(B) Current Employees**

Except as provided below, Current Employees, but excluding those working in Appendix F (other than Surplus Appendix F Employees as defined in MOA - Benefits Rules For Movement), who are classified as Regular or Regular Limited Term 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 April 11, 2026:

- AT&T Retirement Savings Plan (ARSP)
  - Effective October 1, 2026, Current Employees shall 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. In addition, these Employees will not be eligible to participate in the AT&T Savings and Security Plan and will have their prior AT&T Savings and Security Plan account balances transferred to the ARSP as soon as administratively feasible thereafter.
- Midwest Program of the AT&T Component Part of the AT&T Pension Benefit Plan (“Midwest Program”)
  - i. Current Employees who continue to participate in the Midwest Program will be eligible for the following pension band increases:
    - a. 1.0% effective January 1, 2027
    - b. 1.0% effective January 1, 2028
    - c. 1.0% effective January 1, 2029
    - d. 1.0% effective January 1, 2030

**(C) Current Employees working in Appendix F Job Titles, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires**

Except as provided below, Current Employees working in Appendix F (other than Surplus Appendix F Employees as defined in MOA - Benefits Rules For Movement) job titles classified as Regular Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires (excluding 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires working in Appendix F job titles but not classified as Regular Employees) shall

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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 April 11, 2026:

- AT&T Retirement Savings Plan
- Bargained Cash Balance Program #2 of the AT&T Component Part of the AT&T Pension Benefit Plan (“BCB#2 Program”)

### **General Provisions**

- 16.02 Except as set forth in this Article 16, no change shall be made in the terms of the plans identified in this Article or their successor plans and those other Benefits/Welfare related items, 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.
- 16.03 Any claim that such benefits or privileges have been diminished or reduced may be processed as provided for in the grievance procedure, and if not resolved thereunder by the Parties may be submitted to arbitration, but in any such case any decision or action of the Company shall be controlling unless shown to have been discriminatory or in bad faith and only the question of bad faith or discrimination shall be subject to the grievance and arbitration procedures of this Agreement.
- 16.04 Unless the Parties mutually agree, there shall be no negotiations concerning changes in the Plans during the period of this Agreement.
- 16.05 Neither the Benefit Plans, nor their administration shall be subject to the grievance or arbitration procedures of this Agreement.

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## Midwest CWA Core Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires
<b>Active Employees</b>	
<b>Effective Date(s)</b>	Health & Welfare: 1/1/2027, unless noted otherwise
<b>Eligibility</b>	<p><b>For Medical, Dental, Vision, CarePlus, Disability and Life Insurance (unless otherwise specified)</b></p> <p>Current Employees, 2009 New Hires, and 2012 New Hires Applicable programs</p> <p>Medical - AT&amp;T Bargained Employees Medical Program* Dental - AT&amp;T Dental Program (Bargained Employees) Vision - AT&amp;T Vision Program (Bargained Employees) Disability - AT&amp;T Midwest Disability Benefits Program AT&amp;T CarePlus - Supplemental Benefit Program Life Insurance - AT&amp;T Group Life Insurance Program for Active Employees**</p> <p>2022 New Hires and 2015 New Hires Applicable programs</p> <p>Medical - AT&amp;T Bargained Employees Medical Program* Dental - AT&amp;T Dental Program (Bargained Employees) Vision - AT&amp;T Vision Program (Bargained Employees) Disability - AT&amp;T Disability Income Program (management provisions, except as provided below) AT&amp;T CarePlus - Supplemental Benefit Program Life Insurance - AT&amp;T Group Life Insurance Program for Active Employees**</p> <p><small>*This document highlights key elements of program design. For complete program details, refer to the applicable Summary Plan Description (SPD) &amp; associated Summary of Material Modifications (SMMs) ** Includes Supplemental Life and Dependent Life provisions</small></p>
<b>Health Reimbursement Account (HRAs)</b>	
	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees 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>
<b>Medical</b>	
<b>Program</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>AT&amp;T Bargained Employees Medical Program</p> <ul style="list-style-type: none"> <li>• Choice of <ul style="list-style-type: none"> <li>◦ Option 1 – Broad or</li> <li>◦ Option 1 – Select or</li> <li>◦ Option 2 – Broad or</li> <li>◦ Option 2 – Select</li> </ul> </li> </ul> <p>Fully-insured coverage options such as HMOs continue to be available at the discretion of the Company</p>
<b>Dependent Eligibility</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees
	Provisions as described in the AT&T Bargained Employees Medical Program SPD
<b>Eligibility for Coverage</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees
	Provisions as described in the AT&T Bargained Employees Medical Program SPD.

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**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires																									
<b>Eligibility for Company Subsidy</b>	2022 New Hires, 2015 New Hires, 2012 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 Eligibility 31-day enrollment period.																									
<b>Wellbeing Incentives</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Employees will be eligible to earn incentives for participating in the AT&T sponsored wellbeing program following management provisions as they change from time to time, at the sole discretion of the Company.																									
<b>Wellbeing Choice Account</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Employees shall have access to the Wellbeing Choice Credit Account (Wellbeing Choice Account) for accumulating credits resulting from the employee and his or her spouse/partner, if applicable, completing certain wellbeing activities through the AT&T sponsored wellbeing program and to use after-tax accumulated credits to reimburse for eligible wellbeing expenses under the same conditions as management employees. No additional credits to the Wellbeing Choice Account shall be permissible, including, but not limited to employee contributions, company contributions, standard company contributions, and enhanced company contributions.																									
<b>Health Savings Account</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Employees who meet the legal requirements can continue to elect to make pre-tax payroll contributions to a HSA via the Section 125 Cafeteria Plan up to the HSA annual maximum set by the IRS.  The Company will provide a standard company contribution to Active Employees' HSA who meet the following criteria: <ul style="list-style-type: none"><li>• Enroll in an AT&amp;T medical option that meets IRS qualifications for pre-tax HSA contributions.</li><li>• Have or establish an HSA account with the Companies' HSA administrator.</li><li>• Provided the below options meet annual IRS criteria as HSA-qualified High Deductible Health Plans (HDHPs), the Company will match up to the below amounts for employees who elect to make payroll deduction contributions in an amount equal or greater than the minimum amounts, outlined below:</li></ul> <table border="1" data-bbox="425 1184 1445 1332"> <thead> <tr> <th>Option 2 – Broad, Option 2 – Select and Fully Insured HMOs considered to be a HDHP*</th> <th>2027</th> <th>2028</th> <th>2029</th> <th>2030</th> </tr> </thead> <tbody> <tr> <td>Individual</td> <td>\$1,000</td> <td>\$1,000</td> <td>\$1,000</td> <td>\$1,000</td> </tr> <tr> <td>Individual + Spouse/Partner</td> <td>\$2,000</td> <td>\$2,000</td> <td>\$2,000</td> <td>\$2,000</td> </tr> <tr> <td>Individual + Child(ren)</td> <td>\$2,000</td> <td>\$2,000</td> <td>\$2,000</td> <td>\$2,000</td> </tr> <tr> <td>Family</td> <td>\$2,000</td> <td>\$2,000</td> <td>\$2,000</td> <td>\$2,000</td> </tr> </tbody> </table> <p>* Fully-insured coverage options (such as HMOs) are available at the discretion of the Company.</p>	Option 2 – Broad, Option 2 – Select and Fully Insured HMOs considered to be a HDHP*	2027	2028	2029	2030	Individual	\$1,000	\$1,000	\$1,000	\$1,000	Individual + Spouse/Partner	\$2,000	\$2,000	\$2,000	\$2,000	Individual + Child(ren)	\$2,000	\$2,000	\$2,000	\$2,000	Family	\$2,000	\$2,000	\$2,000	\$2,000
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## Midwest CWA Core Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires																																																																																																																								
<b>Active (Full-Time) Monthly Contributions</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <table> <thead> <tr> <th colspan="5">Monthly Contribution Amounts</th> </tr> <tr> <th><b>Option 1 - Broad:</b></th><th>2027</th><th>2028</th><th>2029</th><th>2030</th></tr> </thead> <tbody> <tr> <td>Individual</td><td>\$178</td><td>\$184</td><td>\$197</td><td>\$211</td></tr> <tr> <td>Individual + Spouse/Partner</td><td>\$463</td><td>\$478</td><td>\$512</td><td>\$549</td></tr> <tr> <td>Individual + Child(ren)</td><td>\$303</td><td>\$312</td><td>\$335</td><td>\$359</td></tr> <tr> <td>Family</td><td>\$498</td><td>\$515</td><td>\$552</td><td>\$591</td></tr> </tbody> </table> <table> <thead> <tr> <th colspan="5">Monthly Contribution Amounts</th> </tr> <tr> <th><b>Option 1 - Select:</b></th><th>2027</th><th>2028</th><th>2029</th><th>2030</th></tr> </thead> <tbody> <tr> <td>Individual</td><td>\$157</td><td>\$162</td><td>\$174</td><td>\$187</td></tr> <tr> <td>Individual + Spouse/Partner</td><td>\$409</td><td>\$421</td><td>\$453</td><td>\$486</td></tr> <tr> <td>Individual + Child(ren)</td><td>\$267</td><td>\$275</td><td>\$296</td><td>\$318</td></tr> <tr> <td>Family</td><td>\$440</td><td>\$453</td><td>\$487</td><td>\$524</td></tr> </tbody> </table> <table> <thead> <tr> <th colspan="5">Monthly Contribution Amounts</th> </tr> <tr> <th><b>Option 2 - Broad:</b></th><th>2027</th><th>2028</th><th>2029</th><th>2030</th></tr> </thead> <tbody> <tr> <td>Individual</td><td>\$83</td><td>\$81</td><td>\$93</td><td>\$106</td></tr> <tr> <td>Individual + Spouse/Partner</td><td>\$231</td><td>\$228</td><td>\$261</td><td>\$296</td></tr> <tr> <td>Individual + Child(ren)</td><td>\$140</td><td>\$138</td><td>\$158</td><td>\$180</td></tr> <tr> <td>Family</td><td>\$248</td><td>\$244</td><td>\$280</td><td>\$318</td></tr> </tbody> </table> <table> <thead> <tr> <th colspan="5">Monthly Contribution Amounts</th> </tr> <tr> <th><b>Option 2 - Select:</b></th><th>2027</th><th>2028</th><th>2029</th><th>2030</th></tr> </thead> <tbody> <tr> <td>Individual</td><td>\$63</td><td>\$61</td><td>\$71</td><td>\$83</td></tr> <tr> <td>Individual + Spouse/Partner</td><td>\$176</td><td>\$170</td><td>\$200</td><td>\$232</td></tr> <tr> <td>Individual + Child(ren)</td><td>\$107</td><td>\$103</td><td>\$121</td><td>\$141</td></tr> <tr> <td>Family</td><td>\$188</td><td>\$182</td><td>\$214</td><td>\$249</td></tr> </tbody> </table>	Monthly Contribution Amounts					<b>Option 1 - Broad:</b>	2027	2028	2029	2030	Individual	\$178	\$184	\$197	\$211	Individual + Spouse/Partner	\$463	\$478	\$512	\$549	Individual + Child(ren)	\$303	\$312	\$335	\$359	Family	\$498	\$515	\$552	\$591	Monthly Contribution Amounts					<b>Option 1 - Select:</b>	2027	2028	2029	2030	Individual	\$157	\$162	\$174	\$187	Individual + Spouse/Partner	\$409	\$421	\$453	\$486	Individual + Child(ren)	\$267	\$275	\$296	\$318	Family	\$440	\$453	\$487	\$524	Monthly Contribution Amounts					<b>Option 2 - Broad:</b>	2027	2028	2029	2030	Individual	\$83	\$81	\$93	\$106	Individual + Spouse/Partner	\$231	\$228	\$261	\$296	Individual + Child(ren)	\$140	\$138	\$158	\$180	Family	\$248	\$244	\$280	\$318	Monthly Contribution Amounts					<b>Option 2 - Select:</b>	2027	2028	2029	2030	Individual	\$63	\$61	\$71	\$83	Individual + Spouse/Partner	\$176	\$170	\$200	\$232	Individual + Child(ren)	\$107	\$103	\$121	\$141	Family	\$188	\$182	\$214	\$249
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**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires								
<b>Working Spouse/Partner Contribution</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Spouse/Partner Access to Medical Coverage Additional Medical Contribution:</p> <p>Participants whose spouse/partner enrolls in AT&amp;T-sponsored medical coverage (within either self-insured or fully insured programs) but otherwise has access to medical coverage through their employer, excluding AT&amp;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/partner does not have access to medical coverage otherwise the additional contribution will be applied.</p> <p>Additional Monthly Medical Contribution:</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">2027</td> <td style="text-align: center;">2028</td> <td style="text-align: center;">2029</td> <td style="text-align: center;">2030</td> </tr> <tr> <td style="text-align: center;">\$130</td> <td style="text-align: center;">\$135</td> <td style="text-align: center;">\$140</td> <td style="text-align: center;">\$145</td> </tr> </table>	2027	2028	2029	2030	\$130	\$135	\$140	\$145
2027	2028	2029	2030						
\$130	\$135	\$140	\$145						
<b>Tobacco Use Contribution</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Tobacco Use Additional Medical Contribution:</p> <p>Employees and/or spouses/partner who use tobacco, are enrolled in AT&amp;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 and participation. 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.</p> <p>Additional Monthly Medical Contribution for each employee and/or spouse/partner:</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">2027</td> <td style="text-align: center;">2028</td> <td style="text-align: center;">2029</td> <td style="text-align: center;">2030</td> </tr> <tr> <td style="text-align: center;">\$75</td> <td style="text-align: center;">\$75</td> <td style="text-align: center;">\$75</td> <td style="text-align: center;">\$75</td> </tr> </table>	2027	2028	2029	2030	\$75	\$75	\$75	\$75
2027	2028	2029	2030						
\$75	\$75	\$75	\$75						

J.M.I C.H.

**Midwest CWA Core Benefits Outline Summary**

<b>Annual Deductibles</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees									
	<b>Option 1 - Broad:</b>		2027		2028		2029		2030	
	Network & ONA	Non-Network	Network & ONA	Non-Network	Network & ONA	Non-Network	Network & ONA	Non-Network		
Ind	\$ 1,000	\$ 3,000	\$ 1,100	\$ 3,300	\$ 1,100	\$ 3,300	\$ 1,100	\$ 3,300		
Ind+Sp	\$ 2,000	\$ 6,000	\$ 2,200	\$ 6,600	\$ 2,200	\$ 6,600	\$ 2,200	\$ 6,600		
Ind+Ch	\$ 2,000	\$ 6,000	\$ 2,200	\$ 6,600	\$ 2,200	\$ 6,600	\$ 2,200	\$ 6,600		
Family	\$ 2,000	\$ 6,000	\$ 2,200	\$ 6,600	\$ 2,200	\$ 6,600	\$ 2,200	\$ 6,600		
	<b>Option 1 - Select:</b>		2027		2028		2029		2030	
	Network	Non-Network	Network	Non-Network	Network	Non-Network	Network	Non-Network		
Ind	\$ 1,000	N/A	\$ 1,100	N/A	\$ 1,100	N/A	\$ 1,100	N/A		
Ind+Sp	\$ 2,000	N/A	\$ 2,200	N/A	\$ 2,200	N/A	\$ 2,200	N/A		
Ind+Ch	\$ 2,000	N/A	\$ 2,200	N/A	\$ 2,200	N/A	\$ 2,200	N/A		
Family	\$ 2,000	N/A	\$ 2,200	N/A	\$ 2,200	N/A	\$ 2,200	N/A		

**Option 1 – Broad, Option 1 – Select**

**Annual Deductible Provisions:**

- If the coverage tier is Individual + Child(ren), Individual + Spouse/Partner or Family, a covered person is eligible to receive benefits once their eligible/allowable expenses satisfy the Individual Deductible amount. The Individual + Child(ren), Individual + Spouse/Partner or Family Deductible is met once any combination of covered persons' eligible/allowable expenses meet the Individual + Child(ren), Individual + Spouse/Partner or Family 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.
- The following costs paid by the participant apply toward the applicable Network/ONA or Non-Network Deductible amounts:
  - All prescription drug allowable charges of eligible expenses.
- The following costs will never apply toward the Annual Deductible:
  - Copays for primary care, specialist and mental health/substance abuse office visits;
  - Any applicable coinsurance paid for preventive care drugs as permitted under section 223(c)(2)(C) of the Internal Revenue Code.

Note: The Annual Deductibles will be included in the Out-Of-Pocket Maximums

	<b>Option 2 - Broad:</b>		2027		2028		2029		2030	
	Network & ONA	Non-Network	Network & ONA	Non-Network	Network & ONA	Non-Network	Network & ONA	Non-Network		
Ind	\$ 3,000	\$ 9,000	\$ 3,300	\$ 9,900	\$ 3,300	\$ 9,900	\$ 3,300	\$ 9,900		
Ind+Sp	\$ 6,000	\$ 18,000	\$ 6,600	\$ 19,800	\$ 6,600	\$ 19,800	\$ 6,600	\$ 19,800		
Ind+Ch	\$ 6,000	\$ 18,000	\$ 6,600	\$ 19,800	\$ 6,600	\$ 19,800	\$ 6,600	\$ 19,800		
Family	\$ 6,000	\$ 18,000	\$ 6,600	\$ 19,800	\$ 6,600	\$ 19,800	\$ 6,600	\$ 19,800		

**Option 2 – Select:**

	2027		2028		2029		2030	
	Network	Non-Network	Network	Non-Network	Network	Non-Network	Network	Non-Network
Ind	\$ 3,000	N/A	\$ 3,300	N/A	\$ 3,300	N/A	\$ 3,300	N/A
Ind+Sp	\$ 6,000	N/A	\$ 6,600	N/A	\$ 6,600	N/A	\$ 6,600	N/A
Ind+Ch	\$ 6,000	N/A	\$ 6,600	N/A	\$ 6,600	N/A	\$ 6,600	N/A
Family	\$ 6,000	N/A	\$ 6,600	N/A	\$ 6,600	N/A	\$ 6,600	N/A

**Option 2 – Broad, Option 2 - Select**

**Annual Deductible Provisions:**

No change from current program except as provided below:

- If the coverage tier is Individual + Child(ren), Individual + Spouse/Partner or Family, no individual can receive benefits until the Individual + Child(ren), Individual + Spouse/Partner or Family Annual Deductible is met. The Individual + Child(ren), Individual + Spouse/Partner or 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 /ONA or Non- Deductible amounts:

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires																																																
	<p>- All prescription drug allowable charges of eligible expenses.</p> <p>The following costs will never apply toward the Annual Deductible</p> <ul style="list-style-type: none"> <li>• Any applicable coinsurance paid for preventive care drugs as permitted under section 223(c)(2)(C) of the Internal Revenue Code.</li> </ul>																																																
General Copay/Coinsurance	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p><b>Option 1 - Broad:</b></p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">2027 – 2030</th> </tr> <tr> <th></th> <th>Network &amp; ONA</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>10% After Ded</td> <td>50% After Ded</td> </tr> </tbody> </table> <p><b>Option 1 - Select:</b></p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">2027 – 2030</th> </tr> <tr> <th></th> <th>Network</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>0% Ded waived</td> <td>N/A</td> </tr> <tr> <td>Sickness/Illness</td> <td>10% After Ded</td> <td>N/A</td> </tr> </tbody> </table> <p><b>Option 2 - Broad:</b></p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">2027 - 2030</th> </tr> <tr> <th></th> <th>Network &amp; ONA</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>0% Ded waived</td> <td>No Benefit</td> </tr> <tr> <td>Sickness/Illness</td> <td>30% After Ded</td> <td>50% After Ded</td> </tr> </tbody> </table> <p><b>Option 2 - Select:</b></p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">2027 - 2030</th> </tr> <tr> <th></th> <th>Network</th> <th>Non-Network</th> </tr> </thead> <tbody> <tr> <td>Preventive</td> <td>0% Ded waived</td> <td>N/A</td> </tr> <tr> <td>Sickness/Illness</td> <td>30% After Ded</td> <td>N/A</td> </tr> </tbody> </table> <p>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.</p>		2027 – 2030			Network & ONA	Non-Network	Preventive	0% Ded waived	No Benefit	Sickness/Illness	10% After Ded	50% After Ded		2027 – 2030			Network	Non-Network	Preventive	0% Ded waived	N/A	Sickness/Illness	10% After Ded	N/A		2027 - 2030			Network & ONA	Non-Network	Preventive	0% Ded waived	No Benefit	Sickness/Illness	30% After Ded	50% After Ded		2027 - 2030			Network	Non-Network	Preventive	0% Ded waived	N/A	Sickness/Illness	30% After Ded	N/A
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J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires																				
Office Visit Copay / Coinsurance	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees																				
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J.M.I. C.H.

## Midwest CWA Core Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires								
<b>Urgent Care Facility/Professional Services Copay / Coinsurance</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees								
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2027 - 2030									
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2027 - 2030									
Network	Non-Network								
30%	N/A								
After Ded									
<b>Emergency Room Facility/Professional Services Copay / Coinsurance (Emergencies)</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees								
	<b>Option 1 – Broad and Select:</b> <table border="1"> <tr><th colspan="2">2027 - 2030</th></tr> <tr><td>Network &amp; ONA</td><td>Non-Network</td></tr> <tr><td>10%*</td><td>10%*</td></tr> <tr><td>After Ded</td><td>After Ded</td></tr> </table>	2027 - 2030		Network & ONA	Non-Network	10%*	10%*	After Ded	After Ded
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10%*	10%*								
After Ded	After Ded								
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2027 - 2030									
Network & ONA	Non-Network								
30%*	30%*								
After Ded	After Ded								
	*True emergencies only. Non-emergencies are not covered.								

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires																								
<b>Hospital Inpatient/Outpatient Facility/Professional Services Copay / Coinsurance</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p><b>Option 1 - Broad:</b> 2027 - 2030</p> <table border="1"> <tr> <td>Network &amp; ONA</td> <td>Non-Network</td> </tr> <tr> <td>10%</td> <td>50%</td> </tr> <tr> <td>After Ded</td> <td>After Ded</td> </tr> </table> <p><b>Option 1 - Select:</b> 2027 - 2030</p> <table border="1"> <tr> <td>Network</td> <td>Non-Network</td> </tr> <tr> <td>10%</td> <td>N/A</td> </tr> <tr> <td>After Ded</td> <td></td> </tr> </table> <p><b>Option 2 - Broad:</b> 2027 – 2030</p> <table border="1"> <tr> <td>Network &amp; ONA</td> <td>Non-Network</td> </tr> <tr> <td>30%</td> <td>50%</td> </tr> <tr> <td>After Ded</td> <td>After Ded</td> </tr> </table> <p><b>Option 2 - Select:</b> 2027 – 2030</p> <table border="1"> <tr> <td>Network</td> <td>Non-Network</td> </tr> <tr> <td>30%</td> <td>N/A</td> </tr> <tr> <td>After Ded</td> <td></td> </tr> </table>	Network & ONA	Non-Network	10%	50%	After Ded	After Ded	Network	Non-Network	10%	N/A	After Ded		Network & ONA	Non-Network	30%	50%	After Ded	After Ded	Network	Non-Network	30%	N/A	After Ded	
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J.M.I. C.H.

## Midwest CWA Core Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires														
Tests (all tests including x-ray, radiology, lab test, etc.) Copay / Coinsurance	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees														
<b>Option 1 - Broad:</b>															
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	Network	Non-Network													
Preventive	0% Ded waived	N/A													
Sickness/Illness	30% After Ded	N/A													

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

<b>Annual Out-of-Pocket Maximums (OOP)</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees							
	<b>Option 1 - Broad:</b>							
	Out-of Pocket Maximum Amounts (including Annual Deductible)							
		2027		2028		2029		2030
	Network & ONA	Non- Network	Network & ONA	Non- Network	Network & ONA	Non- Network	Network & ONA	Non- Network
Ind	\$4,700	\$15,000	\$5,000	\$16,500	\$5,000	\$16,500	\$5,000	\$16,500
Ind+Sp	\$9,400	\$30,000	\$10,000	\$33,000	\$10,000	\$33,000	\$10,000	\$33,000
Ind+Ch	\$9,400	\$30,000	\$10,000	\$33,000	\$10,000	\$33,000	\$10,000	\$33,000
Family	\$9,400	\$30,000	\$10,000	\$33,000	\$10,000	\$33,000	\$10,000	\$33,000

  

<b>Option 1 - Select:</b>								
	2027		2028		2029		2030	
	Network	Non- Network	Network	Non- Network	Network	Non- Network	Network	Non- Network
Ind	\$4,700	N/A	\$5,000	N/A	\$5,000	N/A	\$5,000	N/A
Ind+Sp	\$9,400	N/A	\$10,000	N/A	\$10,000	N/A	\$10,000	N/A
Ind+Ch	\$9,400	N/A	\$10,000	N/A	\$10,000	N/A	\$10,000	N/A
Family	\$9,400	N/A	\$10,000	N/A	\$10,000	N/A	\$10,000	N/A

(Integrated with Med/Surg, Rx and MH/SA)

  

<b>Option 2 - Broad:</b>								
	2027		2028		2029		2030	
	Network & ONA	Non- Network						
Ind	\$7,500	\$22,500	\$8,000	\$24,000	\$8,000	\$24,000	\$8,000	\$24,000
Ind+Sp	\$15,000	\$45,000	\$16,000	\$48,000	\$16,000	\$48,000	\$16,000	\$48,000
Ind+Ch	\$15,000	\$45,000	\$16,000	\$48,000	\$16,000	\$48,000	\$16,000	\$48,000
Family	\$15,000	\$45,000	\$16,000	\$48,000	\$16,000	\$48,000	\$16,000	\$48,000

  

<b>Option 2 - Select:</b>								
	2027		2028		2029		2030	
	Network	Non- Network	Network	Non- Network	Network	Non- Network	Network	Non- Network
Ind	\$7,500	N/A	\$8,000	N/A	\$8,000	N/A	\$8,000	N/A
Ind+Sp	\$15,000	N/A	\$16,000	N/A	\$16,000	N/A	\$16,000	N/A
Ind+Ch	\$15,000	N/A	\$16,000	N/A	\$16,000	N/A	\$16,000	N/A
Family	\$15,000	N/A	\$16,000	N/A	\$16,000	N/A	\$16,000	N/A

(Integrated with Med/Surg, Rx, MH/SA, CarePlus)

Out-of-Pocket Maximum provisions - Option 1 - Broad, Option 1 - Select, Option 2 - Broad and Option 2 - Select:  
No change from current program except as provided below:

- If the coverage tier is Individual + Child(ren), Individual + Spouse/Partner or Family, the applicable Individual + Child(ren), Individual + Spouse/Partner or 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 an individual family member once the individual meets the applicable Individual Out-Of-Pocket Maximum, even if the Individual + Child(ren), Individual + Spouse/Partner or Family Out-Of-Pocket Maximum has not been met.

J.M.I C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires
	<p>The following additional costs paid by the participant for medical and/or prescription drug services apply toward the Network/ONA or Non-Network Out-of-Pocket Maximum amounts (if applicable):</p> <ul style="list-style-type: none"><li>- Deductibles</li><li>- Copays/Coinsurance</li><li>- All prescription drug allowable charges for eligible expenses.</li></ul>

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary****Prescription Drug Program (Rx)**

2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees

**Option 1 – Broad and Select:**

Deductible: Integrated with Med/Surg and MH/SA

- Any applicable coinsurance paid for preventive care drugs as permitted under section 223(c)(2)(C) of the Internal Revenue Code is not subject to the deductible.

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

Retail – Network Coinsurance:

(Up to 30-day supply, limited to 2 fills for maintenance subject to Advanced Control Specialty Formulary provisions)

	2027-2030
Generic	10%
Preferred	10%
Non-Preferred	50%

Retail – Network Coinsurance Maximum

	2027	2028	2029	2030
Generic	\$50	\$50	\$50	\$50
Preferred	\$100	\$200	\$200	\$200
Non-Preferred	No maximum	No maximum	No maximum	No maximum

Retail – Non-Network Coinsurance:

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

Mail Order Coinsurance:

(Up to 90-day supply subject to Advanced Control Specialty Formulary provisions)

	2027-2030
Generic	10%
Preferred	10%
Non-Preferred	50%

Mail Order Coinsurance Maximum:

	2027	2028	2029	2030
Generic	\$100	\$100	\$100	\$100
Preferred	\$200	\$400	\$400	\$400
Non-Preferred	No maximum	No maximum	No maximum	No maximum

**Option 2 – Broad and Select:**

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

- Any applicable coinsurance paid for preventive care drugs as permitted under section 223(c)(2)(C) of the Internal Revenue Code is not subject to the deductible.

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

Retail – Network Coinsurance:

(Up to 30-day supply, limited to 2 fills for maintenance subject to Advanced Control Specialty Formulary provisions)

	2027-2030
Generic	30%
Preferred	30%
Non-Preferred	50%

Retail – Network Coinsurance Maximum:

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires																															
		2027	2028	2029	2030																											
Generic		\$50	\$50	\$50	\$50																											
Preferred		\$100	\$200	\$200	\$200																											
Non-Preferred		No maximum	No maximum	No maximum	No maximum																											
<p>Retail – Non-Network Coinsurance: Participant pays the greater of the applicable Network coinsurance or balance remaining after the program pays 75% of network retail cost.</p> <p>Mail Order Coinsurance (Up to 90-day supply subject to Advanced Control Specialty Formulary provisions)</p> <table border="1"> <tr> <td></td><td>2027-2030</td></tr> <tr> <td>Generic</td><td>30%</td></tr> <tr> <td>Preferred</td><td>30%</td></tr> <tr> <td>Non-Preferred</td><td>50%</td></tr> </table> <p>Mail Order Coinsurance Maximum</p> <table border="1"> <tr> <td></td><td>2027</td><td>2028</td><td>2029</td><td>2030</td></tr> <tr> <td>Generic</td><td>\$100</td><td>\$100</td><td>\$100</td><td>\$100</td></tr> <tr> <td>Preferred</td><td>\$200</td><td>\$400</td><td>\$400</td><td>\$400</td></tr> <tr> <td>Non-Preferred</td><td>No maximum</td><td>No maximum</td><td>No maximum</td><td>No maximum</td></tr> </table> <p>The following provisions will apply to Option 1 – Broad, Option 1 – Select, Option 2 – Broad, and Option 2 - Select:</p> <ul style="list-style-type: none"> <li>• Mandatory mail order for maintenance Rx – Applies after second fill at retail</li> <li>• Specialty pharmacy program</li> <li>• Personal Choice – 100% participant-paid</li> <li>• Mandatory Generic</li> <li>• Advanced Control Specialty Formulary</li> <li>• New Standard Prescription Drug Formulary</li> <li>• Generic Step Therapy</li> </ul>						2027-2030	Generic	30%	Preferred	30%	Non-Preferred	50%		2027	2028	2029	2030	Generic	\$100	\$100	\$100	\$100	Preferred	\$200	\$400	\$400	\$400	Non-Preferred	No maximum	No maximum	No maximum	No maximum
	2027-2030																															
Generic	30%																															
Preferred	30%																															
Non-Preferred	50%																															
	2027	2028	2029	2030																												
Generic	\$100	\$100	\$100	\$100																												
Preferred	\$200	\$400	\$400	\$400																												
Non-Preferred	No maximum	No maximum	No maximum	No maximum																												
<b>Employee Assistance Program (EAP)</b>																																
Program	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  AT&T Employee Assistance Program  No change from current program.																															
Visit Limit	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Effective Jan. 1, 2027 the maximum number of sessions available to eligible Active Employees and their Household Members will be 12 sessions per Plan Year or the number available to management employees as it changes from time to time, whichever is higher.																															
<b>Disability</b>																																
Program	2012 New Hires, 2009 New Hires and Current Employees  AT&T Midwest Disability Benefits Program No change from current program.  2022 New Hires and 2015 New Hires  AT&T Disability Income Program as described in the Summary Plan Description, except as provided below.																															

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires and 2022 New Hires
<b>Short Term Disability (STD)</b>	2012 New Hires, 2009 New Hires and Current Employees  No change from current program.  2022 New Hires and 2015 New Hires  AT&T Disability Income Program as described in the Summary Plan Description
<b>Long-Term Disability (LTD)</b>	2012 New Hires, 2009 New Hires and Current Employees  No change from current program.  2022 New Hires and 2015 New Hires  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.
<b>Leaves of Absence (LOAs)</b>	
<b>Policy</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Midwest Leaves of Absence Policy  No change from current policy.
<b>Types of LOAs</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  No change from current policy.

J.M.I. C.H.

## Midwest CWA Core Benefits Outline Summary

<b>Dental</b>																										
<b>Program</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>AT&amp;T Dental Program* (Bargained Employees) except as provided below.</p> <ul style="list-style-type: none"> <li>• Dental PPO</li> <li>• DHMO (available at the discretion of the Company)</li> </ul> <p>*This document highlights key elements of program design. For complete program details, refer to the Summary Plan Description (SPD).</p>																									
<b>Eligibility for Coverage</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Active Regular, Term and Temporary Full-Time and Part-Time Employees are eligible for coverage. Eligibility for coverage begins on the Employee's date of hire, provided the Employee enrolls within the 31-day enrollment period. Dependent children will be eligible to participate in the AT&amp;T Dental Program (Bargained Employees) until the end of the month in which the child reaches the age of 26 regardless of marital status.</p>																									
<b>Eligibility for Company Subsidy</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Company subsidy begins on the Employee's date of hire, provided the Employee enrolls within the 31-day enrollment period.</p>																									
<b>Active (Full-Time) Monthly Contributions</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Dental PPO or DHMO (if available)</p> <table border="1"> <thead> <tr> <th></th><th colspan="4">Contribution Amounts</th></tr> <tr> <th></th><th>2027</th><th>2028</th><th>2029</th><th>2030</th></tr> </thead> <tbody> <tr> <td>Ind</td><td>\$ 10.00</td><td>\$ 10.00</td><td>\$ 10.00</td><td>\$ 11.00</td></tr> <tr> <td>Ind+1</td><td>\$ 21.00</td><td>\$ 21.00</td><td>\$ 21.00</td><td>\$ 23.00</td></tr> <tr> <td>Family</td><td>\$ 33.00</td><td>\$ 33.00</td><td>\$ 33.00</td><td>\$ 35.00</td></tr> </tbody> </table>		Contribution Amounts					2027	2028	2029	2030	Ind	\$ 10.00	\$ 10.00	\$ 10.00	\$ 11.00	Ind+1	\$ 21.00	\$ 21.00	\$ 21.00	\$ 23.00	Family	\$ 33.00	\$ 33.00	\$ 33.00	\$ 35.00
	Contribution Amounts																									
	2027	2028	2029	2030																						
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Ind+1	\$ 21.00	\$ 21.00	\$ 21.00	\$ 23.00																						
Family	\$ 33.00	\$ 33.00	\$ 33.00	\$ 35.00																						
<b>Active (Part-Time) Monthly Contributions</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Based on Scheduled hours/week continues to be:</p> <ul style="list-style-type: none"> <li>• Greater than or equal to 20 hours = 50% of Premium Equivalent Rate.*</li> <li>• Less than 20 hours = 100% of Premium Equivalent Rate.*</li> </ul> <p>* Note: Premium Equivalent Rate is subject to annual adjustment.</p>																									
<b>Deductible</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Deductibles will continue to be:</p> <p>Network and ONA: \$25 per individual per year Non-Network: \$50 per individual per year</p>																									
<b>Annual Maximum Benefit</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Annual Maximum Benefit will continue to be:</p> <p>Network and ONA: \$1,750 per individual* Non-Network: \$1,300 per individual*</p> <p>*Not to exceed \$1,750 combined Network/Non-Network</p>																									

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

<b>Orthodontic Lifetime Maximum</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Orthodontic Lifetime Maximum will continue to be:  Network and ONA: \$2,000 per individual* Non-Network: \$1,400 per individual*  *Not to exceed \$2,000 combined Network/Non-Network
<b>Coverage Levels</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Dental PPO Coinsurance will continue to be as follows:  Class I (Diagnostic/Preventive): Network and ONA*: 100%, Ded. Waived Non-Network**: 100%, Ded. 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.
<b>Outside Network Area (ONA)</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Provisions will continue to apply as follows: <ul style="list-style-type: none"><li>• ONA benefit provided to employees who reside in a zip code which does not meet the network standards.</li><li>• ONA benefits are equivalent to PPO Network benefits.</li><li>• Enrollees who are in Network will be offered the PPO option only.</li><li>• Enrollees who are located outside the Network zip code criteria will be offered the ONA option only.</li></ul>
<b>Vision</b>	<b>Program</b> 2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  AT&T Vision Program* (Bargained Employees) except as provided below:  *This document highlights key elements of program design. For complete program details, refer to the Summary Plan Description (SPD)
<b>Eligibility for Coverage</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Active Regular, Term and Temporary Full-Time and Part-Time Employees are eligible for coverage. Eligibility for coverage begins on the Employee's date of hire, provided the Employee enrolls within the 31-day enrollment period. 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.

J.M.I C.H.

**Midwest CWA Core Benefits Outline Summary**

<b>Eligibility for Company Subsidy</b>	2022 New Hires, 2015 New Hires, 2012 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																									
<b>Active (Full-Time) Monthly Contributions</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  <table border="1" data-bbox="432 481 873 608"> <thead> <tr> <th></th><th colspan="4">Contribution Amounts</th></tr> <tr> <th></th><th>2027</th><th>2028</th><th>2029</th><th>2030</th></tr> </thead> <tbody> <tr> <td>Ind</td><td>\$3.50</td><td>\$3.50</td><td>\$3.50</td><td>\$4.00</td></tr> <tr> <td>Ind+1</td><td>\$9.50</td><td>\$9.50</td><td>\$9.50</td><td>\$11.00</td></tr> <tr> <td>Family</td><td>\$16.00</td><td>\$16.00</td><td>\$16.00</td><td>\$19.00</td></tr> </tbody> </table>		Contribution Amounts					2027	2028	2029	2030	Ind	\$3.50	\$3.50	\$3.50	\$4.00	Ind+1	\$9.50	\$9.50	\$9.50	\$11.00	Family	\$16.00	\$16.00	\$16.00	\$19.00
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Ind+1	\$9.50	\$9.50	\$9.50	\$11.00																						
Family	\$16.00	\$16.00	\$16.00	\$19.00																						
<b>Active (Part-Time) Monthly Contributions</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Based on Scheduled hours/week: <ul style="list-style-type: none"> <li>• Greater than or equal to 20 hours = 50% of cost of coverage *</li> <li>• Less than 20 hours = 100% of cost of coverage *</li> </ul> *Note: Calculation of cost of coverage is subject to annual adjustment																									
<b>Coverage Levels</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  <b>Exam:</b> 1 exam per 12 months <ul style="list-style-type: none"> <li>• Network: \$0/0%</li> <li>• Non-Network: \$28 allowance towards exam cost</li> </ul> <b>Frame Allowance:</b> 1 allowance per 12 months <ul style="list-style-type: none"> <li>• Network: \$130 allowance towards frame cost</li> <li>• Non-Network: \$30 allowance towards frame cost</li> </ul> <b>Lenses Allowance:</b> 1 set per 12 months <ul style="list-style-type: none"> <li>Network: \$0/0%</li> </ul> Covers std. plastic lenses. Single, Bi-focal, Tri-focal, Lenticular, Progressive + Polycarbonate at 100% Non-Network: \$30-\$80 allowance towards lenses  <b>Contact Lenses Allowance:</b> Allowance per 12 months <ul style="list-style-type: none"> <li>Network: \$150 allowance towards contact lenses</li> <li>Non-Network: \$150 allowance towards contact lenses</li> </ul> <b>2<sup>nd</sup> Pair Benefit:</b> Network Only: Allows for a 2 <sup>nd</sup> pair of glasses or contact lenses allowance after the first pair benefit is utilized, per 24 months																									
<b>Flexible Spending Account (FSA)</b>																										
<b>Plan</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  AT&T Flexible Spending Account Plan  No change from current plan																									
<b>Contribution Minimum/Maximums</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  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																									
<b>Supplemental Medical Benefits - CarePlus</b>																										

J.M.I C.H.

**Midwest CWA Core Benefits Outline Summary**

<b>Program</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  AT&T CarePlus – A Supplemental Benefit Program No change from current program.
<b>Eligibility for Coverage</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Active Regular, Term and Temporary Full-Time and Part-Time Employees are eligible for coverage. Eligibility for all coverage begins on the Employee's date of hire, provided the Employee enrolls within the 31-day enrollment period.
<b>Monthly Contributions</b>	2022 New Hires, 2015 New Hires, 2012 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.
<b>General Benefits</b>	2022 New Hires, 2015 New Hires, 2012 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 the benefits offered under CarePlus.
<b>Life Insurance</b>	
<b>Program</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  AT&T Group Life Insurance Program for Active Employees  No change from current program.
<b>Eligibility for Coverage</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Active Regular, Term and Temporary Full-Time and Part-Time Employees are eligible for coverage. Eligibility for all coverage begins on the Employee's date of hire, provided the Employee enrolls within the 31-day enrollment period. 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.
<b>Active Benefits</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  No change from current program including the following provisions: Accelerated Death Benefit - Available when life expectancy is 24 months or less. Minimum Distribution: 25% of total life insurance benefit. Maximum Distribution: lesser of 75% of total life insurance benefit or \$1M.  Note: Contribution amounts are subject to annual adjustments.
<b>Definition of Pay</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  No change from current program.
<b>Adoption, Surrogacy, and Cryopreservation</b>	
<b>Policy</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  AT&T Adoption Reimbursement Policy AT&T Surrogacy Reimbursement Policy AT&T Cryopreservation Policy
<b>Coverage</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Effective as soon as administratively feasible, active Regular, Term and Temporary Full-Time and Part-Time employees may receive reimbursement of qualifying adoption, surrogacy and tissue cryopreservation expenses up to the same amounts available to AT&T managers, as they change from time to time.  Note: The maximum annual reimbursement for qualifying adoption expenses may not be less than \$5,000 per child.

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

<b>Commuter</b>	
<b>Policy</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  AT&T Commuter Benefit Policy  No change from current policy, except as mandated by IRS Code Section 132 Regulations.
<b>Coverage</b>	2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees  Pre-tax deductions for parking and mass transit  No change from current policy. Eligible expense and monthly limits continue to be updated annually as allowed by IRS Code Section 132 Regulations.

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Eligible Retired Employees
<b>Retiree Provisions</b>	<p><b>Effective 1/1/2027:</b> Applicable for the term of the Agreement to Eligible Retired Employees who terminate during the term of the 2026 Labor Agreement.</p>
<b>Medical</b>	
<b>Program</b>	Eligible Retired Employees shall be eligible to participate in the same choice of program options and 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.
<b>Eligible Retired Employees (Full-Time) Monthly Contributions</b>	<p>2022 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</li> </ul> <p>2015 New Hires and 2012 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>2009 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p>Current Employees The contribution shall continue to be the same as for similarly situated active Current Employees.</p>
<b>Eligible Retired Employees (Part-Time) Monthly Contributions</b>	<p>2022 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</li> </ul> <p>2015 New Hires and 2012 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>2009 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p>Current Employees The contribution shall continue to be the same as for similarly situated active Current Employees.</p>
<b>Medicare Part-B Premium Reimbursement</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires and 2009 New Hires</p> <p>Not Eligible</p> <p>Current Employees</p> <p>No change from current program.</p>

J.M.I. C.H.

**Midwest CWA Core Benefits Outline Summary**

Provision	Eligible Retired Employees
<b>Health Reimbursement Account (HRAs)</b>	
	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>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>
<b>Supplemental Medical Benefits - CarePlus</b>	
<b>Program</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>No change from current program.</p>
<b>Monthly Contributions</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>No change from current program.</p>
<b>General Benefits</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>No change from current program, except those required to comply with healthcare reform legislation (PPACA).</p> <p>Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.</p>
<b>Dental</b>	
<b>Program</b>	Eligible Retired Employees shall be eligible to participate in the same provisions as similarly situated active Current Employees, 2009 New Hires, 2012 New Hires or 2022 New Hires except as noted in the sections below.
<b>Eligible Retired Employee (Full-Time) Monthly Contributions</b>	<p>2022 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</li> </ul> <p>2015 New Hires and 2012 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>2009 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p>Current Employees</p> <p>The contribution shall continue to be the same as for similarly situated active Current Employees.</p>

J.M.I. C.H.

## Midwest CWA Core Benefits Outline Summary

Provision	Eligible Retired Employees
<b>Eligible Retired Employees (Part-Time) Monthly Contributions</b>	<p>2022 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</li> </ul> <p>2015 New Hires and 2012 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>2009 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 50% of full cost of coverage*.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p><b>*Note:</b> Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p> <p>Current Employees The contribution shall continue to be the same as for similarly situated active Current Employees.</p>
<b>Life Insurance</b>	
<b>Eligible Retired Employees Basic Life (Company Paid)</b>	<p>2022 New Hires \$15,000 Retiree Basic Life</p> <p>These provisions will continue to apply:</p> <p>2015 New Hires, 2012 New Hires and 2009 New Hires \$15,000 Retiree Basic Life</p> <p>Current Employees 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>
<b>Eligible Retired Employees Supplemental Life (Retiree Paid)</b>	<p>2022 New Hires 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>2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees No change from current program.</p>
<b>Definition of Pay</b>	<p>2022 New Hires, 2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>No change from current program.</p>
<b>Vision</b>	
<b>Eligible Retired Employees Vision Program</b>	<p>2022 New Hires Eligible Retired Employees shall be eligible to participate in the AT&amp;T Eligible Former Employee Vision Program</p> <p>2015 New Hires, 2012 New Hires, 2009 New Hires and Current Employees</p> <p>Eligible Retired Employees shall continue to be eligible to participate in the AT&amp;T Eligible Former Employee Vision Program.</p>

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## Midwest CWA Core Benefits Outline Summary

Provision	Eligible Retired Employees
<b>Eligible Retired Employees Monthly Retiree Contributions</b>	<p>2022 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible are ineligible for coverage.</li> </ul> <p>2015 New Hires and 2012 New Hires</p> <ul style="list-style-type: none"> <li>Eligible Retired Employees who are Non-Medicare eligible will continue to pay 100% of full cost of coverage* with no Company subsidy.</li> <li>Eligible Retired Employees who are Medicare eligible will continue to be ineligible for coverage.</li> </ul> <p>2009 New Hires and Current Employees</p> <p>Eligible Retired Employees will continue to pay 100% of full cost of coverage* with no Company subsidy.</p> <p>*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.</p>

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