

CWA / AT&T (Legacy T)
Summary of Tentative Agreement (TA)
2018 (for distribution)

The following is a summary of the changes in the 2018 AT&T / CWA Tentative Agreement (TA).

If an article is not mentioned in this summary that would indicate no substantive changes were made and the article was carried forward, keeping in mind date changes were made where applicable.

Article 1

Updated to reflect incorporation of USVI and Appendix A

Article 14

Updated to reflect the change in time around ergonomics maintaining the requirement for the company to provide ergonomic training

Article 15

Wage increases;

- 1st raise (3%) April 14, 2018 (Paid retroactive to Feb. 5,2019)
- 2nd raise (3%) August 5, 2019
- 3rd raise (2.25%) April 12, 2020
- 4th raise (2.25%) April 11, 2021

The Following charts are samples for illustration, the actual numbers may change slightly, due to rounding, but they are very close.

Sample Annual Wage Rates under Tentative Agreement				
<i>Job Title (Location)</i>	Current	CY 1 (After Ratification)	CY 2	CY 3
Communications Tech. (NY)	\$91,728	\$97,314	\$99,504	\$101,743

Bus. Cust. Service Prov. Eng. (Sacramento, CA)	\$84,084	\$89,205	\$91,212	\$93,264
Network Tech. Specialist (Atlanta, GA)	\$84,084	\$89,205	\$91,212	\$93,264
Reports Clerk (Bedminster, NJ)	\$64,428	\$68,352	\$69,890	\$71,462
Teleconference Specialist (Minneapolis, MN)	\$58,864	\$62,449	\$63,854	\$65,291
Premises Technician (Hanover, MD)	\$50,128	\$53,181	\$54,377	\$55,601
Office Support Clerk (Lisle, IL)	\$45,760	\$48,547	\$49,639	\$50,756

Example of Total "Better Off" – New Wage Dollars Minus Health Care Cost Increases				
Job Title (Location)	Option 1		Option 2	
	Employee Only	Family	Employee Only	Family
Communications Tech. (NY)	\$18,955	\$14,035	\$21,247	\$18,259
Bus. Cust. Service Prov. Eng. (Sacramento, CA)	\$17,047	\$12,127	\$19,339	\$16,351
Network Tech. Specialist (Atlanta, GA)	\$17,047	\$12,127	\$19,339	\$16,351
Reports Clerk (Bedminster, NJ)	\$12,142	\$7,222	\$14,434	\$11,446
Teleconference Specialist (Minneapolis, MN)	\$10,753	\$5,833	\$13,045	\$10,057
Premises Technician (Hanover, MD)	\$8,573	\$3,653	\$10,865	\$7,877
Office Support Clerk (Lisle, IL)	\$7,483	\$2,563	\$9,775	\$6,787

PLEASE NOTE: Tobacco cessation and working spouse surcharges are not included in these illustrative charts.

Article 19

- Prevented the Company from continued cost shifting by capping current health care at 29% for life of Agreement
- Moved 2015 New Hires from 32% to 29% cost share

- Maintained 2 options for employees:
 - Option 1: with higher contributions (premiums) and lower deductibles and continuing with employees being eligible for RX without first meeting a deductible (**no RX integration**);
 - Option 2: with lower monthly contributions (premiums) and higher deductibles.

Surcharges

The spousal surcharge applies if your spouse /LRP has coverage with their employer (outside AT&T) The monthly surcharge rates is as follows;

- 2019 no surcharge
- 2020 no surcharge
- 2021 \$100. per month,
- 2022 \$100. per month

The Tobacco surcharge ONLY applies if you, your spouse/LRP use tobacco products AND do NOT participate in a cessation program. Commitment from AT&T in writing that the definition of engagement will not require an individual to reach non-tobacco user status. These programs are intended to assist in stopping smoking but not a requirement that you successfully stop tobacco products.

- 2019 no surcharge
- 2020 \$50. per month
- 2021 \$60. per month
- 2022 \$65. per month

Pension increase for the traditional banded pensions. Those increases are as follows:

- Two one percent (1 %) increases, effective January 1, 2020
- One percent (1%), effective January 1, 2021
- One percent (1%), effective January 1, 2022

This is a four (4) year agreement expiring on April 9, 2022.

Continued Dental, Vision, Disability, Care Plus, Life Insurance programs.

Legacy T CWA Core Benefits Outline Summary

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 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 & 2018 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 & 2018 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 & 2018 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 & 2018 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 and 2018 New Hires</u> No changes from current program.</p>

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires																																																																
Eligibility for Company Subsidy	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u></p> <p>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>																																																																
Active (Full-Time) Monthly Contributions	<p><u>Current Employees, 2009 New Hires, 2012 New Hires & 2015 New Hires have a choice between the following two options:</u></p> <p>Option 1:</p> <table><tr><th colspan="4">Monthly Contribution Amounts</th></tr><tr><th></th><th>2020</th><th>2021</th><th>2022</th></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> <p>Option 2:</p> <table><tr><th colspan="4">Monthly Contribution Amounts</th></tr><tr><th></th><th>2020</th><th>2021</th><th>2022</th></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> <p><u>2018 New Hires have a choice between the following two options:</u></p> <p>Option 1:</p> <table><tr><th colspan="4">Monthly Contribution Amounts</th></tr><tr><th></th><th>2020</th><th>2021</th><th>2022</th></tr><tr><td>Individual</td><td>\$182</td><td>\$184</td><td>\$187</td></tr><tr><td>Family</td><td>\$391</td><td>\$410</td><td>\$436</td></tr></table> <p>Option 2:</p> <table><tr><th colspan="4">Monthly Contribution Amounts</th></tr><tr><th></th><th>2020</th><th>2021</th><th>2022</th></tr><tr><td>Individual</td><td>\$96</td><td>\$103</td><td>\$111</td></tr><tr><td>Family</td><td>\$266</td><td>\$286</td><td>\$308</td></tr></table>	Monthly Contribution Amounts					2020	2021	2022	Individual	\$153	\$155	\$157	Family	\$328	\$344	\$367	Monthly Contribution Amounts					2020	2021	2022	Individual	\$73	\$79	\$86	Family	\$202	\$219	\$237	Monthly Contribution Amounts					2020	2021	2022	Individual	\$182	\$184	\$187	Family	\$391	\$410	\$436	Monthly Contribution Amounts					2020	2021	2022	Individual	\$96	\$103	\$111	Family	\$266	\$286	\$308
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Active (Part-Time) Monthly Contributions	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u></p> <p>No change from current program.</p>																																																																

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires						
Working Spouse/LRP Contribution	<u>Current Employee, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u>						
	<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.						
	Additional Monthly Medical Contribution: <table><tr><td><u>2020</u></td><td><u>2021</u></td><td><u>2022</u></td></tr><tr><td><u>\$0</u></td><td><u>\$100</u></td><td><u>\$100</u></td></tr></table>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>\$0</u>	<u>\$100</u>	<u>\$100</u>
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<u>\$0</u>	<u>\$100</u>	<u>\$100</u>					
Tobacco Use Contribution	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> <u>Tobacco Use Additional Medical Contribution:</u> 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. Additional Monthly Medical Contribution: <table><tr><td><u>2020</u></td><td><u>2021</u></td><td><u>2022</u></td></tr><tr><td><u>\$50</u></td><td><u>\$60</u></td><td><u>\$65</u></td></tr></table>	<u>2020</u>	<u>2021</u>	<u>2022</u>	<u>\$50</u>	<u>\$60</u>	<u>\$65</u>
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Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires					
Annual Deductibles	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires					
	<u>Option 1:</u>					
	2020		2021		2022	
	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network
	Ind	\$ 700	\$ 800	\$2,800	\$ 850	\$2,975
	Family	\$1,400	\$1,600	\$5,600	\$1,700	\$5,950
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. 						
<u>Option 2:</u>						
2020		2021		2022		
Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	Network & Traditional Indemnity	Non-Network	
Ind	\$1,550	\$1,600	\$4,800	\$1,650	\$4,950	
Family	\$3,100	\$3,200	\$9,600	\$3,300	\$9,900	
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 & 2018 New Hires												
General CoPay/Coinsurance	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u>												
	<u>Option1:</u>												
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Preventive	\$0 / 0% Ded waived	No Benefit											
Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded											
<u>Option2:</u>													
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Preventive	\$0 / 0% Ded waived	No Benefit											
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	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u>												
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Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires												
Urgent Care Facility/Professional Services Copay / Coinsurance	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</p> <p>Option 1:</p> <table> <tr> <th colspan="2">2020 - 2022</th></tr> <tr> <th>Network & Traditional Indemnity</th><th>Non-Network</th></tr> <tr> <td>\$0 / 10% After Ded</td><td>\$0 / 50% After Ded</td></tr> </table> <p>Option 2:</p> <table> <tr> <th colspan="2">2020 - 2022</th></tr> <tr> <th>Network & Traditional Indemnity</th><th>Non-Network</th></tr> <tr> <td>\$0 / 10% After Ded</td><td>\$0 / 50% After Ded</td></tr> </table>	2020 - 2022		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 50% After Ded	2020 - 2022		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 & 2018 New Hires</p> <p>Option 1:</p> <table> <tr> <th colspan="2">2020 - 2022</th></tr> <tr> <th>Network & Traditional Indemnity</th><th>Non-Network</th></tr> <tr> <td>\$0 / 10% After Ded</td><td>\$0 / 10% After Ded</td></tr> </table> <p>Option 2:</p> <table> <tr> <th colspan="2">2020 - 2022</th></tr> <tr> <th>Network & Traditional Indemnity</th><th>Non-Network</th></tr> <tr> <td>\$0 / 10% After Ded</td><td>\$0 / 10% After Ded</td></tr> </table>	2020 - 2022		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 10% After Ded	2020 - 2022		Network & Traditional Indemnity	Non-Network	\$0 / 10% After Ded	\$0 / 10% After Ded
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Mental Health/Substance Abuse (MH/SA) Copay / Coinsurance	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires																							
	<p>Option 1:</p> <table><tr><td></td><td colspan="2">2020 2022</td></tr><tr><td></td><td>Network & Traditional Indemnity</td><td>Non-Network</td></tr><tr><td>Out Patient & In Patient</td><td>\$0 / 10% After Ded</td><td>\$0 / 50% After Ded</td></tr></table> <p>Option 2:</p> <table><tr><td></td><td colspan="2">2020 - 2022</td></tr><tr><td></td><td>Network & Traditional Indemnity</td><td>Non-Network</td></tr><tr><td>Out Patient & In Patient</td><td>\$0 / 10% After Ded</td><td>\$0 / 50% After Ded</td></tr></table>		2020 2022			Network & Traditional Indemnity	Non-Network	Out Patient & In Patient	\$0 / 10% After Ded	\$0 / 50% After Ded		2020 - 2022			Network & Traditional Indemnity	Non-Network	Out Patient & In Patient	\$0 / 10% After Ded	\$0 / 50% After Ded					
		2020 2022																						
	Network & Traditional Indemnity	Non-Network																						
Out Patient & In Patient	\$0 / 10% After Ded	\$0 / 50% After Ded																						
	2020 - 2022																							
	Network & Traditional Indemnity	Non-Network																						
Out Patient & In Patient	\$0 / 10% After Ded	\$0 / 50% After Ded																						

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires																												
Annual Out-of-Pocket Maximums (OOP)	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires																												
	Out-of-Pocket Maximum Amounts (including Annual Deductible)																												
	Option 1:																												
	<table><tr><td></td><td colspan="2">2020</td><td colspan="2">2021</td><td colspan="2">2022</td></tr><tr><td></td><td>Network & Traditional Indemnity</td><td>Non-Network</td><td>Network & Traditional Indemnity</td><td>Non-Network</td><td>Network & Traditional Indemnity</td><td>Non-Network</td></tr><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></table>		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
		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																						
	The following Out-of-Pocket Maximum provisions will apply to Option 1:																												
	(Integrated with Med/Surg, MH/SA, CarePlus)																												
If the coverage tier is Family, the Family Out-Of-Pocket Maximum must be met before the Program pays 100% of the Allowable Expenses 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.																													
The following additional costs paid by the participant apply toward the applicable Network and Traditional Indemnity or Non-Network Out-of-Pocket Maximum amounts:																													
- Deductibles																													
Option 2:																													
<table><tr><td></td><td colspan="2">2020</td><td colspan="2">2021</td><td colspan="2">2022</td></tr><tr><td></td><td>Network & Traditional Indemnity</td><td>Non-Network</td><td>Network & Traditional Indemnity</td><td>Non-Network</td><td>Network & Traditional Indemnity</td><td>Non-Network</td></tr><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></table>		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	
	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																							
The following Out-of-Pocket Maximum provisions will apply to Option 2:																													
(Integrated with Med/Surg, Rx, MH/SA, CarePlus)																													
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.																													
The following additional costs paid by the participant apply toward the applicable Network and Traditional Indemnity or Non-Network Out-of-Pocket Maximum amounts:																													
- Deductibles																													
- Prescription drug copays																													
Prescription Drug Program (Rx)	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires																												
	Option 1:																												
	Deductible:																												
	<table><tr><td></td><td>2020 - 2022</td></tr><tr><td>Individual</td><td>\$0</td></tr><tr><td>Family</td><td>\$0</td></tr></table>		2020 - 2022	Individual	\$0	Family	\$0																						
	2020 - 2022																												
Individual	\$0																												
Family	\$0																												
	Out-of-Pocket Maximum:																												
	<table><tr><td>Individual</td><td>\$1,700</td></tr><tr><td>Family</td><td>\$3,400</td></tr></table>	Individual	\$1,700	Family	\$3,400																								
Individual	\$1,700																												
Family	\$3,400																												
	Retail – Network Copays:																												
	(Up to 30-day supply, limited to 2 fills for maintenance, subject to Advanced Control Specialty Formulary provisions)																												
	<table><tr><td></td><td>2020</td><td>2021</td><td>2022</td></tr><tr><td>Generic</td><td>\$10</td><td>\$10</td><td>\$10</td></tr><tr><td>Preferred</td><td>\$40</td><td>\$40</td><td>\$40</td></tr><tr><td>Non-Preferred</td><td>\$80</td><td>\$80</td><td>\$80</td></tr></table>		2020	2021	2022	Generic	\$10	\$10	\$10	Preferred	\$40	\$40	\$40	Non-Preferred	\$80	\$80	\$80												
	2020	2021	2022																										
Generic	\$10	\$10	\$10																										
Preferred	\$40	\$40	\$40																										
Non-Preferred	\$80	\$80	\$80																										
	Retail – Non-Network Copays:																												
	Participant pays the greater of the applicable Network copay or balance remaining after the program pays 75% of																												

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires																																																
	<p>network retail cost.</p> <p>Mail Order Copays: (Up to 90-day supply, subject to Advanced Control Specialty Formulary provisions)</p> <table><tr><td></td><td>2020</td><td>2021</td><td>2022</td></tr><tr><td>Generic</td><td>\$20</td><td>\$ 20</td><td>\$20</td></tr><tr><td>Preferred</td><td>\$80</td><td>\$ 80</td><td>\$80</td></tr><tr><td>Non-Preferred</td><td>\$160</td><td>\$ 160</td><td>\$160</td></tr></table> <p>Option 2:</p> <p>Deductible: Integrated with Med/Surg, MH/SA, CarePlus Out-of-Pocket Maximum: Integrated with Med/Surg, MH/SA, CarePlus.</p> <p>Retail -- Network Copays: (Up to 30-day supply, limited to 2 fills for maintenance, subject to Advanced Control Specialty Formulary provisions)</p> <table><tr><td></td><td>2020</td><td>2021</td><td>2022</td></tr><tr><td>Generic</td><td>\$10</td><td>\$10</td><td>\$10</td></tr><tr><td>Preferred</td><td>\$40</td><td>\$40</td><td>\$40</td></tr><tr><td>Non-Preferred</td><td>\$80</td><td>\$80</td><td>\$80</td></tr></table> <p>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.</p> <p>Mail Order Copays: (Up to 90-day supply, subject to Advanced Control Specialty Formulary provisions)</p> <table><tr><td></td><td>2020</td><td>2021</td><td>2022</td></tr><tr><td>Generic</td><td>\$20</td><td>\$20</td><td>\$20</td></tr><tr><td>Preferred</td><td>\$80</td><td>\$80</td><td>\$80</td></tr><tr><td>Non-Preferred</td><td>\$160</td><td>\$160</td><td>\$160</td></tr></table> <p>The following provisions will continue to apply to Option 1 and Option 2:</p> <ul style="list-style-type: none">• Mandatory mail order for maintenance Rx – Applies after second fill at retail.• Specialty pharmacy program• Personal Choice – 100% participant-paid• Mandatory Generic• Advanced Control Specialty Formulary• New Standard Prescription Drug Formulary• Generic Step Therapy		2020	2021	2022	Generic	\$20	\$ 20	\$20	Preferred	\$80	\$ 80	\$80	Non-Preferred	\$160	\$ 160	\$160		2020	2021	2022	Generic	\$10	\$10	\$10	Preferred	\$40	\$40	\$40	Non-Preferred	\$80	\$80	\$80		2020	2021	2022	Generic	\$20	\$20	\$20	Preferred	\$80	\$80	\$80	Non-Preferred	\$160	\$160	\$160
	2020	2021	2022																																														
Generic	\$20	\$ 20	\$20																																														
Preferred	\$80	\$ 80	\$80																																														
Non-Preferred	\$160	\$ 160	\$160																																														
	2020	2021	2022																																														
Generic	\$10	\$10	\$10																																														
Preferred	\$40	\$40	\$40																																														
Non-Preferred	\$80	\$80	\$80																																														
	2020	2021	2022																																														
Generic	\$20	\$20	\$20																																														
Preferred	\$80	\$80	\$80																																														
Non-Preferred	\$160	\$160	\$160																																														
Employee Assistance Program (EAP)																																																	
Program	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</p> <p>AT&T Employee Assistance Program</p> <p>No change from current program.</p>																																																
Visit Limit	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</p> <p>Continues to provide up to 5 EAP visits per person per issue.</p>																																																
Disability																																																	
Program	<p>Current Employees, 2009 New Hires & 2012 New Hires <u>Legacy AT&T Disability Benefit Program</u></p> <p><u>No change from current program.</u></p> <p><u>2015 New Hires & 2018 New Hires</u></p> <p>AT&T Disability Income Program as described in the Summary Plan Description, except as provided below.</p> <p>No change from current program.</p>																																																

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires																				
Short Term Disability (STD)	<u>Current Employees, 2009 New Hires & 2012 New Hires</u> <u>Legacy AT&T Disability Benefit Program</u> <u>No change from current program.</u> <u>2015 New Hires & 2018 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 Hire & 2012 New Hires</u> <u>Legacy AT&T Disability Benefit Program</u> <u>No change from current program.</u> <u>2015 New Hires & 2018 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 & 2018 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 & 2018 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 & 2018 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 & 2018 New Hires</u> Dental PPO or DHMO (if available): <table border="1"><thead><tr><th colspan="4">Contribution Amounts</th></tr><tr><th></th><th>2020</th><th>2021</th><th>2022</th></tr></thead><tbody><tr><td>Individual</td><td>\$7.00</td><td>\$8.00</td><td>\$8.00</td></tr><tr><td>Ind+1</td><td>\$14.00</td><td>\$17.00</td><td>\$17.00</td></tr><tr><td>Family</td><td>\$23.00</td><td>\$27.00</td><td>\$27.00</td></tr></tbody></table>	Contribution Amounts					2020	2021	2022	Individual	\$7.00	\$8.00	\$8.00	Ind+1	\$14.00	\$17.00	\$17.00	Family	\$23.00	\$27.00	\$27.00
Contribution Amounts																					
	2020	2021	2022																		
Individual	\$7.00	\$8.00	\$8.00																		
Ind+1	\$14.00	\$17.00	\$17.00																		
Family	\$23.00	\$27.00	\$27.00																		
Active (Part-Time) Monthly Contributions	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 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 & 2018 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 & 2018 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 & 2018 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 & 2018 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 & 2018 New Hires								
Outside Network Area (ONA)	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires Provisions will apply as indicated in the Summary Plan Description.								
Vision									
Program	Current Employees, 2009 New Hires, 2012 New Hire, 2015 New Hires & 2018 New Hires AT&T Vision Program (Bargained Employees) except as provided below:								
Eligibility for Coverage	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires 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	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires 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	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires Contributions as they change from time to time.</p> <table border="1"> <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> <p>*The 2018 contributions shown above are for illustrative purposes only.</p>		Contribution Amounts 2018*	Individual	\$2.50	Ind+1	\$4.50	Family	\$8.00
	Contribution Amounts 2018*								
Individual	\$2.50								
Ind+1	\$4.50								
Family	\$8.00								
Active (Part-Time) Monthly Contributions	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires Provisions will apply as indicated in the Summary Plan Description.								
Coverage Levels	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires Provisions will apply as indicated in the Summary Plan Description.								
Flexible Spending Account (FSA)									
Plan	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires AT&T Flexible Spending Account Plan No change from current plan.								
Contribution Minimum/Maximums	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires 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	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires AT&T CarePlus – A Supplemental Benefit Program No change from current program.								

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires
Monthly Contributions	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> No change from current program.*</p> <p>*Note: Contribution amounts are 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 & 2018 New Hires</u> No change from the 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>
Life Insurance	
Program	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> AT&T Group Life Insurance Program for Active Employees</p> <p>No change from current program.</p>
Active Benefits	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> No change from current program. Note: Contribution amounts are subject to annual adjustments.</p>
Definition of Pay	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> No change from current program.</p>
Long-Term Care	
Plan	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> AT&T Consolidated Long-Term Care Insurance Plan</p>
Coverage	<p><u>2012 New Hires, 2015 New Hires & 2018 New Hires</u> 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 & 2018 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 Hire, 2015 New Hires & 2018 New Hires</u> No change from current policy.</p>
Commuter	
Policy	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 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>

Provision	Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires
Coverage	<p>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</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 Agreement to Eligible Retired Employees who terminate during the term of the Agreement.</p>
Medical	
Program	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 & 2018 New Hires except as noted below.
Eligible Retired Employees (Full-Time) Monthly Contributions	<p><u>2018 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>2009 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 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></p> <p>No change from current program, as follows:</p> <p>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>2018 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>2009 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 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></p> <p>No change from current program, as follows:</p> <p>The contribution shall continue to be the same as for similarly situated active Current Employees.</p>

Provision	Eligible Retired Employees
Medicare Part-B Premium Reimbursement	<u>2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> Not Eligible. <u>Current Employees</u> No change from current program.
Definition of Pay	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> Refer to the Summary Plan Description for the plan in which they were active participants.
Health Reimbursement Account (HRAs)	
	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> None. 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.
Supplemental Medical Benefits - CarePlus	
Program	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> No change from current program.
Monthly Contributions	<u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & 2018 New Hires</u> No change from current program. Note: Contributions continue to be 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 & 2018 New Hires</u> No change from 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.
Dental	
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 2018 New Hires except as noted in the sections below.
Eligible Retired Employees (Full-Time) Monthly Contributions	<u>2018 New Hires</u> <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. <u>2015 New Hires & 2012 New Hires</u> No change from current program, as follows: <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. <u>2009 New Hires</u> No change from current program, as follows: <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. *Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion. <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.

Provision	Eligible Retired Employees
Eligible Retired Employees (Part-Time) Monthly Contributions	<p><u>2018 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 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>2018 New Hires</u> \$15,000 Retiree Basic Life</p> <p>These provisions will continue to apply:</p> <p><u>2015 New Hires, 2012 New Hires and 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>
Eligible Retired Employees Supplemental Life (Retiree Paid)	<p><u>2018 New Hires, 2015 New Hires, 2012 New Hires & 2009 New Hires</u> 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> No change from current program.</p>
Definition of Pay	<p><u>Current Employees, 2009 New Hires, 2012 New Hires, 2015 New Hires & New Hires</u> No change from current program.</p>
Vision	
Eligible Retired Employees Vision Program	<p><u>2018 New Hires</u> 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> Eligible Retired Employees shall continue to be eligible to participate in the AT&T Eligible Former Employee Vision Program.</p>

Provision	Eligible Retired Employees
Eligible Retired Employees Monthly Retiree Contributions	<p><u>2018 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 be 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 and Eligible Retired Employees
Voluntary	
Discretionary Program	AT&T Voluntary Benefits Platform (products offered as they may change from time to time).

Article 20

Beginning in calendar year 2020: individuals hired prior to 6/26/15, who are currently eligible for five (5) or seven (7) paid personal illness days, will be eligible for ten (10) days;

Beginning in calendar year 2021: employees who had 25 years of service as of ratification will be eligible for ten (10) personal illness days a year, PLUS ON AN ANNUAL BASIS if an individual finds themselves out of paid personal illness days and has an absence leading up to disability those absence days will be paid. All other employees continue to be eligible for this exception one time during the Agreement.

Article 21

Expanded ability to utilize all EWD flexibly

Article 32-43

Updated to remove titles that have been unpopulated for a long period of time. We created a letter, should the Company repopulate the titles, and eliminated 39 as no titles were staffed in these articles; negotiated to move titles from A38 (DPA III and DPA IV) to A41 and eliminated A38.

Article 35

Moved references to metro segments to Appendix 6.

Article 43

- Maintained the certification payment schedules, as well as other components of the program.
- Updated to reflect the sale of the IDC. These technicians are now part of EVOQUE Agreement,
- Increased on call payments to \$35 for non-scheduled day and \$20 for scheduled day,
- Watermark not to go below 600 through the Agreement now tied specifically to the NTS title

Article 45

- Now covered under Article 20: providing same time off for items such as funeral as individuals covered by other functional articles.

Exhibit 1

Updated to remove Social Security numbers to protect members' identity; replaced with *attitud*.

Appendix 3

Updated to more broadly define the universes for surplus providing more protection of seniority.

Electronic Monitoring

Maintained securities regarding discipline while providing ability for additional feedback.

Eliminated the electronic monitoring trial language.

Success Sharing Plan

SSP with no GAP, meaning still eligible for SSP during the time we did not have a contract.

The Alliance

We were able to bargain a continued commitment to training which will be jointly developed as soon as possible after ratification. The program will be seeded with monies being returned from The Alliance reserves PLUS up to \$6M. (*100% of the monies will go towards training.*) AT&T Management will absorb all overhead costs.

Funds for Alliance (FAD): although The Alliance is closing, we bargained that employees who are involuntarily laid-off thru 1/1/20 will continue to have the same FAD programs and eligibility they had through The Alliance. This includes individuals who elect an option under ATTOP.

Employment Security

Updated the organizational names: maintaining the restrictions on the Company as it relates to VTP and contracting, we are still the only Core Contract with a watermark. The watermark protects essentially 75% of the unit (2664 6/30 headcount) and prevents the Company from staffing jobs in the appendix to meet this commitment. The only Core Contract with a limited layoff clause. Limiting involuntary layoffs to 400 reduced from the current Agreement of 500 (that's less than 15% of the unit can be laid off involuntarily).

Continued

- JOG,
- Card Check & Neutrality,
- Successorship language

Paid Parental Leave

Two weeks leave for new parent (adopted or birth) during 1st year; this is in addition to disability that a mother is entitled to.

Appendix A

Now includes the following Articles/Letters from Core

- Article 13 Personnel Records
- Article 14 Safety
- Article 31 Military
- Service Anniversary
- Success Sharing Plan

- Parties Demands
- Successorship

Following improvements to language

- 4.4.c - Increase Union Unpaid Time to 400 hours
- 5.6 – Management can schedule one (1) personal day instead of two (2)
- 6.6 OT Cap to 16 hours from 17 hours
- Time Title/Location – Reduce from 36/12 to 30/12

Transfers

- Regular Limited Terms have Access to ATS
- 8.1 Mutual Agreement to Waive Time and Title

Force Adjustment

- Layoff by Seniority
- Voluntary Option at Company Discretion
- 8.3 from 2 weeks to 4 weeks

Layoff Allowance

- 8.4 from 4 weeks to 6 weeks

Priority Rehire

- 8.5 – Priority to Rehire 24 months (from 12 months)

USVI

Successorship follows Core

Increased Term Pay from 28 weeks to 36 weeks

Cable Station Technicians on payroll as of September 3, 2017 will be grandfathered for the following test(s): TKT II and TMT III

Wage increases like Core