### E.H.H K.C.

# IBEW System Council T-3 Benefits Outline Summary

4121AM

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Active Employees	AT&T Midwest and SBC Global Services, Inc.
Effective Date(s)	Health & Welfare: 1/1/2018
Eligibility	
For Medical, Dental, Vision, CarePlus, and Life Insurance (unless otherwise specified)	2013 New Hires, 2009 New Hires and Current Employees Follow provisions of the applicable program: Medical – AT&T Midwest Medical Program Dental – AT&T Dental Program (Bargained Employees) Vision – AT&T Vision Program (Bargained Employees) Disability – AT&T Midwest Disability Benefits Program CarePlus – AT&T CarePlus - A Supplemental Benefit Program Life Insurance – AT&T Group Life Insurance Program for Active Employees*  2017 New Hires Follow provisions of the applicable program: Medical – AT&T Midwest 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* *includes Supplemental Life and Dependent Life provisions.
Health Reimbursement A	ccount (HRAs)
	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees None.  Note: No additional Company crediting. Current Employees and 2009 New Hires who have remaining account balances
Medical	will continue to have access to those account balances subject to provisions of the Program.
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Midwest Medical Program  The Company will continue to provide fully insured coverage options such as HMOs at the discretion of the Company.
	No change from current program execut as provided below.
Dependent Eligibility	No change from current program except as provided below: 2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
Eligibility for Company Subsidy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program except as noted below:  Individual Coverage: Company subsidy for Employees enrolled in Company-sponsored Individual medical coverage (including fully insured coverage options, if available) will 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.  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 NCS is attained (also referred to as 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.

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires							98			
Active	2013 New Hires (hired before 1/1/2015), 2009 New Hires and Current Employees										
(Full-Time)	Monthly Contribution Amounts										
Monthly Contributions		0=1	ion 1	<del></del>					24	0000	
			ion 1 vidual		2018	2019	2020			2022	
		Fan			\$105 \$264	\$113 \$296	\$126 \$330			\$165	
		[ Fail	ıııy		3204	1 3290	3330	) \$3	30	\$433	
						y Contributio	n Amounts				
		<del></del>	ion 2		2018	2019	2020			2022	
			vidual		\$46	\$59	\$72			\$112	
		Fan	nily		\$121	\$154	\$189	\$2	50 [	\$293	
	2017 N	ew Hires									
					Monthly	. Cantalbustia	- A				
		Ont	ion 1	Т-	2018	y Contributio 2019		200	14	2000	
			vidual		\$138	\$144	\$150			2022	
		Farr			\$362	\$377	\$394			\$165 \$433	
							<del></del>	1 01		<del></del>	
		Ont	on 2			y Contributio		200	<del>u                                     </del>	2000	
			ion z vidual	+	2018 \$84	2019 \$90	2020			2022	
		Fam			\$220	\$236	\$97 \$254	\$10		\$112 \$293	
		<u> an</u>	]		4	1	1 9234	1 921	<u>~</u>	#E33	
Active (Part-Time) Monthly Contributions		ew Hires, 20 nge from cur			w Hires an	d Current Er	nployees				
									· · · · · · · · · · · · · · · · · · ·		
Annual Deductibles	2017 N	ew Hires, 20	13 New Hir	es, 2009 Ne	w Hires an	d Current Er	nployees				
Deductibles	Option :	1:									
		20	18	20	19	20:	20	20	21	20	022
		Network/ PPO/ONA	Non- Network/	PPO/ONA	Non- Network/	Network/ PPO/ONA	Non-	Network/	Non-	Network/	Non
		770/0145	Non-	FFOIGH	Non-	PFU/UNA	Network/ Non-	PPO/ONA	Network/ Non-	PPO/ONA	Netwo Non-Pl
			PPO		PPO		PPO		PPO		
	Ind Fam	\$ 650 \$1,300	\$2,275 \$4,550	\$ 700 \$1,400	\$2,450 \$4,900	\$ 750 \$1,500	\$2,825 \$5,250	\$ 800 \$1,600	\$2,800 \$5,600	\$ 850 \$1,700	\$2,97 \$5,95
	Annuai	Deductible F									
	Annuai No char	ige from cur he Annual D	rent prograi		ded in the (	Out-Of-Pocke	et Maximun	าร			
	Annual No char Note: T	nge from cur he Annual D	rent prograi	will be included	19	202	20	202	11	20	22
	Annual No char Note: T	nge from cur he Annual D	rent program	will be included and the second secon	19 Non-	202 Network/	0 Non-	202 Network/	Non-	Network/	Non-
	Annual No char Note: T	nge from cur he Annual D	leductibles  Non- Network/ Non-	will be included	Non- Network/ Non-	202	Non- Network/ Non-	202	Non- Network/ Non-		Non- Networ
	Annual No char Note: T	he Annual D 2: 20 Network/ PPO/ONA	leductibles  I 8  Non- Network/ Non- PPO	20: Network/ PPO/ONA	Non- Network/ Non- PPO	202 Network/ PPO/ONA	Non- Network/ Non- PPO	202 Network/ PPO/ONA	Non- Network/ Non- PPO	Network/ PPO/ONA	Non- Networ Non-PF
	Annual No char Note: T	he Annual E 2: 20' Network/ PPO/ONA \$1,450	18 Non- Network/ Non- PPO \$4,350	20: Network/ PPO/ONA	Non- Network/ Non- PPO \$4,500	202 Network/ PPO/ONA \$1,550	Non- Network/ Non- PPO \$4,850	202 Network/ PPO/ONA \$1,600	Non- Natwork/ Non- PPO \$4,800	Network/ PPO/ONA \$1,850	Non-Netwo
	Annual No char Note: T	he Annual E 2: 20: Network/ PPO/ONA	leductibles  I 8  Non- Network/ Non- PPO	20: Network/ PPO/ONA	Non- Network/ Non- PPO	202 Network/ PPO/ONA	Non- Network/ Non- PPO	202 Network/ PPO/ONA	Non- Network/ Non- PPO	Network/ PPO/ONA	Non- Network Non-PF
	Annual No char Note: T Option 2	he Annual E 2: 20' Network/ PPO/ONA \$1,450	18 Non- Network/ Non- PPO \$4,350 \$8,700	20: Network/ PPO/ONA	Non- Network/ Non- PPO \$4,500	202 Network/ PPO/ONA \$1,550	Non- Network/ Non- PPO \$4,850	202 Network/ PPO/ONA \$1,600	Non- Natwork/ Non- PPO \$4,800	Network/ PPO/ONA \$1,850	Non- Network Non-PF
	Annual No char Note: T	nge from cur he Annual D 2: 20 Network/ PPO/ONA \$1,450 \$2,900 Deductible P ge from cur if the cov Family Ar The follow	IS Non-Network/Non-PPO \$4,350 \$8,700	20 Network/ PPO/ONA \$1,500 \$3,000  m except as a Family, no ctible can be baid by the peductible an	Non-Network/Non-PPO \$4,500 \$9,000 provided beindividual compart anounts:	202 Network/ PPO/ONA \$1,550 \$3,100	Non- Network/ Non- PPO \$4,650 \$9,300	Network/ PPO/ONA \$1,600 \$3,200  I the Family overed family plicable Network/	Non- Network/ Non- PPO \$4,800 \$9,800	Network/ PPO/ONA \$1.650 \$3,300	Non-Network Non-PF \$4,950 \$9,900

Provision	Curre	ent Employee	s, 2009 Ne	w Hires, 2013 New Hires and 2017 New Hires
General Copay/Colnsurance	2017 New Hires, Option 1:	2013 New Hires,	2009 New Hire	s and Current Employees
		2018	-2022	٦
		Network/ PPO/ONA	Non- Network/ Non-PPO	
2.0	Preventive	\$0 / 0% Ded waived	No Benefit	
	Sickness/ Illness	\$0 / 10% After Ded	\$0 / 50% After Ded	
	Option 2:	2019	-2022	7
		Network/ PPO/ONA	Non- Network/ Non-PPO	
	Preventive	\$0 / 0% Ded walved	No Benefit	
	Sickness/	\$0 / 10% After Ded	\$0 / 50% After Ded	
	expenses may be	changed from tin	ne to time at the	ing the Allowable Charge for all categories of Non-Network/Non-PPO e Company's discretion.
Office Visit Copay / Coinsurance	2017 New Hires, Option 1:	2013 New Hires,	2009 New Hire:	s and Current Employees
	Control 1.	2018	-2022	1
		Network/ PPO/ONA	Non- Network/	
	Preventive	\$0 / 0% Ded waived	Non-PPO No Benefit	
	Sickness/	\$0 / 10% After Ded	\$0 / 50% After Ded	
	Option 2:	1 2048	2000	1
ļ		2018- Network/	Non-	
a		PPO/ONA	Network/ Non-PPO	
	Preventive	\$0 / 0% Ded waived	No Benefit	
	Sickness/	\$0 / 10% After Ded	\$0 / 50% After Ded	
Facility/Professional	2017 New Hires, : Option 1:	2013 New Hires, 2	2009 New Hires	and Current Employees
Copay / Coinsurance	2018-20	22		
		Non-		
		Network/ Non-PPO		
		\$0 / 50%		
		After Ded		
	Option 2: 2018-20	22		
	Network/ I PPO/ONA I	Non- Network/ Non-PPO		
1				

Provision	Curren	t Employee	s, 2009 Nev	v-Hires, 2013 New Hires and 2017 New Hires
Emergency	2017 New Hires, 20	13 New Hires, 2	009 New Hires	and Current Employees
Room	Option 1:			
Facility/Professional Services	2018-202	2		
Copay / Coinsurance		on-		
Copay / Coinsurance		etwork/		
		n-PPO		
		/ 10%		
		ter Ded		
	Option 2:			
	2018-202	2		
	Network/ No	on-		
		etwork/N		
		-PPO		
		/ 10%		
		ter Ded		
Hospital Inpatient/Outpatient Facility/Professional	2017 New Hires, 20	13 New Hires, 2	009 New Hires	and Current Employees
Services	Option 1:			
Copay / Coinsurance	2018-202	2		
		n-		
		etwork/ on-PPO		
		/ 50%		
		ter Ded		
	Option 2:			
	2018-2022	,		
		n-		
		itwork/		
		n-PPO		
		/ 50%		
	After Ded Aft	er Ded		
Tests	2017 New Hires, 20	13 New Hires, 20	009 New Hires	and Current Employees
(all tests including x-ray,	0-41 4.			
radiology, lab test, etc)	Option 1:	2010		1
Copay / Coinsurance		2018-		
		Network/ PPO/ONA	Non-	
		PPO/UNA	Network/	
	Preventive	\$0 / 0%	Non-PPO No Benefit	
	Fleventive	Ded waived	INO Denetit	
	Sickness/Illness	\$0 / 10%	\$0 / 50%	
	Olokilossi ililoss	After Ded	After Ded	
	· · · · · · · · · · · · · · · · · · ·		1 1.01.0.	
	Option 2:			
		2018-	-2022	
		Network/	Non-	
ļ	1	PPO/ONA	Network/	
			Non-PPO	
	Preventive	\$0 / 0% Ded waived	No Benefit	
	Sickness/Iliness	\$0 / 10%	\$0 / 50%	
		After Ded	After Ded	

Provision · ·	Curren	t Employees	s, 2009 Nev	Hires, 2013 New Hires and 2017 New Hires
Mental Health/Substance Abuse (MH/SA)	2017 New Hires, 20	013 New Hires, 2	009 New Hires	and Current Employees
Copay / Coinsurance	Option 1:			
		2018-	2022	
		Network/ PPO/ONA	Non- Network/ Non-PPO	192
	Preventive	\$0 / 0% Ded waived	No Benefit	
	Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded	
	Option 2:		-	
		2018	-2022	
		Network/ PPO/ONA	Non- Network/ Non-PPO	
	Preventive	\$0 / 0% Ded walved	No Benefit	
	Sickness/Illness	\$0 / 10% After Ded	\$0 / 50% After Ded	

# Annual Out-of-Pocket Maximums (OOP)

Out-of-Pocket Maximum Amounts

Option 1:

(Including Annual Deductible 2018 2019 2020 2021 2022 Network Network Non-Non-Network/ PPO PPO/ ONA PPO/ ONA Network Network/ Network Network/ ONA ONA Non-Non-Non-Non-ONA Non-**PPO** Ind \$3,250 \$3,500 \$9,750 \$10,500 \$3,750 \$11,250 \$4,000 \$12,000 \$4,250 \$12,750 Family \$6,500 \$19,500 \$7,000 \$21,000 \$7,500 \$22,500 \$8,000 \$24,000 \$8,500 \$25,500

(Integrated Med/Surg, MH/SA)

Out-of-Pocket Maximum provisions:

No change from current program, except as provided below:

The following additional costs paid by the participant apply toward the applicable Network/PPO/ONA or Non-Network/Non-PPO Out-of-Pocket Maximum amounts:

- Deductibles
- Coinsurance

Option 2:

Out-of-Pocket Maximum Amounts
(Including Annual Deductible)

	20	118	20	019	20	020	20	21	20	22
	Network/ PPO/ ONA	Non- Network/ Non- PPO								
Ind	\$6,550	\$19,650	\$6,550	\$19,650	\$6,550	\$19,650	\$6,550	\$19,650	\$6,550	\$19,650
Family	\$13,100	\$39,300	\$13,100	\$39,300	\$13,100	\$39,300	\$13,100	\$39,300	\$13,100	\$39,300

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

Out-of-Pocket Maximum provisions:

If the coverage tier is Family, the applicable 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/PPO/ONA Services for an individual family member once the individual meets the Network/PPO/ONA 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/PPO/ONA or Non-Network/Non-PPO Out-of-Pocket Maximum amounts:

- Deductibles
- Coinsurance
- Outpatient prescription drug allowable charges for eligible expenses

### Prescription Drug Program (Rx)

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

Option 1:

Deductible:

None.

Out-of-Pocket Maximum:

2018-2022

Ind

\$1,200

Fam

\$2,400

Retail - Network Copays:

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

	2018	2019	2020	2021	2022
Generic	\$10	\$10	\$10	\$10	\$10
Preferred	\$35	\$35	\$35	\$35	\$35
Non-Preferred	\$60	\$70	\$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 network retail cost.

Mail Order Copays:

(Up to 90-day supply)

	2018	2019	2020	2021	2022
Generic	\$20	\$20	\$20	\$20	\$20
Preferred	\$70	\$70	\$70	\$70	\$70
Non-Preferred	\$120	\$140	\$160	\$160	\$160

#### Option 2:

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

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

#### Retail - Network Copays:

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

	2018	2019	2020	2021	2022
Generic	\$9	\$9	\$9	\$9	\$9
Preferred	\$35	\$35	\$35	\$35	\$35
Non-Preferred	\$70	\$70	\$70	\$70	\$70

Retall - Non-Network/Non-PPO Copays:

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

Mail Order Copays:

(Up to 90-day supply)

	2018	2019	2020	2021	2022
Generic	\$18	\$18	\$18	\$18	\$18
Preferred	\$70	\$70	\$70	\$70	\$70
Non-Preferred	\$140	\$140	\$140	\$140	\$140

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

- Mandatory mail order for maintenance Rx Applies after second fill at retail.
- · Specialty pharmacy program
- Personal Choice 100% participant-paid
- Mandatory Generic
- · Compound medication limitation

The following provisions also apply to Option 1 and Option 2:

Advanced Control Specialty Formulary

Provision	Current Employees, 2	009 New Hires, 2013 New H	lires and 2017 New Hires					
	New Standard Prescription Drug Form     Generic Step Therapy	ulary						
Employee Assistance Pr	ogram (EAP)							
Program	2017 New Hires, 2013 New Hires, 2009 No change from current program.	New Hires and Current Employees						
Visit Limit	2017 New Hires, 2013 New Hires, 2009 No change from current program.	New Hires and Current Employees						
Disability								
Program	2013 New Hires, 2009 New Hires and Co No change from current program.	urrent Employees						
	2017 New Hires Effective June 25, 2017, AT&T Disability provided below.	Income Program as described in the S	Summary Plan Description except as					
Short Term Disability (STD)	2013 New Hires, 2009 New Hires and Co No change from current program.	urrent Employees						
	2017 New Hires Benefit: Short-Term Disability Benefits a 100 percent of Pay, based on your service		ed are designed to replace 60 percent or					
	% of Pay							
	Term of Employment	100%	60%					
	6 months < 2 years	0 weeks	26 weeks					
	2 years < 5 years	4 weeks	22 weeks					
	5 years < 15 years	13 weeks	13 weeks					
	15 years or more	26 weeks	0 weeks					
Long-Term Disability (LTD)	2013 New Hires, 2009 New Hires and Co No change from current program. 2017 New Hires	urrent Employees	П					
	The AT&T Disability Income Program as employees are not eligible for LTD benef	described in the Summary Plan Descrits.	iption except that Temporary and Term					
eaves of Absence (LOA	8)							
Policy	2017 New Hires, 2013 New Hires, 2009 i Midwest Leaves of Absence Policy.	New Hires and Current Employees						
Types of LOAs	2017 New Hires, 2013 New Hires, 2009 I No change from current policy.	New Hires and Current Employees						
Dental								
Program	2017 New Hires, 2013 New Hires, 2009 AT&T Dental Program (Bargained Emplo Dental PPO DHMO (available at the discretion of t	pyees) except as provided below.						
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 I Eligibility for coverage continues to begin TOE).		onths NCS is attained (also referred to as					
Eligibility for Company Subsidy	2017 New Hires, 2013 New Hires, 2009 I Company subsidy continues to begin on TOE).		onths NCS is attained (also referred to as					

Provision	Current Employees; 2009 New Hires, 2013 New Hires and 2017 New Hires
Active	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
(Full-Time) Monthly Contributions	Contributions for Dental PPO or DHMO (if available)
	2018-2022
	i Ind \$8 i Ind +1 \$17
	Family \$27
Active	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
(Part-Time)	Based on Scheduled hours/week:
Monthly Contributions	Greater than or equal to 20 hours = 50% of full cost of coverage*
	Less than 20 hours = 100% of full cost of coverage* with no Company subsidy
Deductible	*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Deductible	2017 New Files, 2013 New Files, 2009 New Files and Current Employees
	Network and ONA: \$25 per individual per year Non-Network: \$50 per individual per year
Annual Maximum Benefit	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
maximum benefit	Network and ONA: \$1,750 per individual*
	Non-Network: \$1,300 per individual*
	*Not to exceed \$1,750 combined Network/Non-Network
Orthodontic Lifetime Maximum	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	Network and ONA: \$2,000 per individual*
	Non-Network: \$1,400 per individual*
	*Not to exceed \$2,000 combined Network/Non-Network
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Dental PPO Coinsurance
	Class I (Diagnostic/Preventive):
	Network and ONA*: 100%, deductible waived Non-Network**: 100%, deductible waived
	Class II (Basic restorative – fillings, extractions, periodontal treatment/maintenance):
	Network and ONA*: 90%, after deductible Non-Network**: 70%, after deductible
	Class III (Major restorative – crowns, dentures, bridgework):
	Network and ONA*: 80%, after deductible Non-Network**: 50%, after deductible
	Class IV (Orthodontia):
	Network and ONA*: 80%, after deductible
	Non-Network**: 50%, after deductible
	Notes:
	*For ONA, paid at Network contracted rate. **For Non-Network paid based on reasonable and customary amounts.
Outside Network Area (ONA)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  ONA benefit provided to employees who reside in a zip code which does not meet the network standards
	ONA benefits are equivalent to PPO Network benefits
	<ul> <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>
Vision	The second sections are instituted and second second will be deter option only
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Vision Program (Bargained Employees) except as provided below.
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	Eligibility for coverage continues to begin on the first day of the month in which 6 months of NCS is attained (also referred to as TOE).

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Eligibility for Company	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Subsidy	Eligibility for Company subsidy continues to begin on the first day of the month in which 6 months of NCS is attained (also referred to as TOE).
Active (Full-Time) Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Contributions for 2018-2022:
monthly contributions	2018-2022 Contribution Amounts
	Ind \$2.50
	Ind +1 \$5.50
	Fam \$9.00
Active (Part-Time)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Monthly Contributions	Based on Scheduled hours/week:  • Greater than or equal to 20 hours = 50% of full cost of coverage*  • Less than 20 hours = 100% of full cost of coverage* with no Company subsidy
	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	Exam: 1 exam per 12 months  Network: \$0 copay
	Non-Network: \$28 allowance
	Frame Allowance: 1 pair per 12 months
	Network: \$130 allowance     Non-Network: \$ 30 allowance
	Lenses Allowance: 1 set per 12 months  Network: \$0 copsy/coinsurance Covers std_plactic_lenses: Single_Bifeed_Td_feed_Lentestate Brosseship t_Betweethers to 1000/
	Covers std. plastic lenses: Single, Bi-focal, Tri-focal, Lenticular, Progressive + Polycarbonate at 100%  Non-Network: \$30-\$80 allowance
	Contact Lenses Allowance: Allowance per 12 months  Network: \$150 allowance Non-Network: \$150 allowance
	2 <sup>nd</sup> Pair Benefit: Allows for a 2 <sup>nd</sup> pair of glasses or contact lenses allowance after the first pair benefit is utilized, per 24 months.
Flexible Spending Accou	nt (FSA)
Plan	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Flexible Spending Account Plan
	No change from current plan, except those that are mandated by healthcare reform legislation (PPACA).
Contribution Minimum/Maximums	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	No change from current plan, except those that are mandated by healthcare reform legislation (PPACA) and to annually adjust the maximum contribution amount to that permitted by law for each calendar year for which the IRS issues timely guidance such that the Company can implement the change.
Supplemental Medical Be	nefits
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T CarePlus – A Supplemental Benefit Program
	No change from current program.
Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  No change from current program.
General Benefits	Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	No change from current program, except those required to comply with healthcare reform legislation (PPACA).
	Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Life Insurance	
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees
Active Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
	Note: Contributions amounts are subject to annual adjustment.
Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  No change from current program.
Long-Term Care	
Plan	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Consolidated Long-Term Care insurance Plan
Coverage	2017 New Hires and 2013 New Hires Not available; closed to new entrants as of 5/1/2012.
	2009 New Hires and Current Employees  No change from current plan, except that the Company has the unilateral right to change, modify, amend and discontinue the AT&T Consolidated Long-Term Care Insurance Plan.
Adoption Assistance	
Policy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  No change from current policy.
Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Commuter	
Policy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	Pre-tax deductions for parking and mass transit. 2017 Internal Revenue Service (IRS) limits: \$255 parking; \$255 mass transit.
	Eligible expense and monthly limits follow IRS Code Section 132 Regulations.
	Note: Annual adjustments apply.

Provision	Eligible Retired Employees
	Effective 1/1/2018 for AT&T Midwest and SBC Global Services, Inc., except Appendix G:
Retiree Provisions	Applicable for the term of the Agreement to Eligible Retired Employees who terminate during the term of the Agreement.
	Note: Appendix G Employees continue to not be eligible for post-employment benefits.
Medical	
Program	AT&T Midwest Eligible Former Bargained Employee Medical Program
	Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated active Employees except as noted in the sections below.
Eligible Retired Employees (Full-Time)	Current Employee, 2009 New Hires and 2013 New Hires No change from current program
Monthly Contributions	2017 New Hires
	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.
	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.
Eligible Retired Employees	Current Employee, 2009 New Hires, and 2013 New Hires
(Part-Time)	No change from current program.
Monthly Contributions	2017 New Hires
	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.
	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.

Provision	Eligible Retired Employees
Medicare Part-B Premium	2017 New Hires, 2013 New Hires and 2009 New Hires
Reimbursement	Not Eligible.
	Current Employees
	No change from current plan.
Health Reimbursement	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Account (HRA)	None.
	Note: No additional Company crediting. Current employees and 2009 New Hires who have remaining account balances
	will continue to have access to those account balances subject to provisions of the Program.
Supplemental Medical Be	enefits
_	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Program	AT&T Eligible Former Employee CarePlus – A Supplemental Benefit Program
	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Monthly Contributions	No change from current program.
Monthly Contributions	Note Controlled to the state of
	Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	2017 New Fines, 2010 New Fines, 2000 New Fines and Odifient Chiployees
General Benefits	No change from current program, except those required to comply with healthcare reform legislation (PPACA).
Contract Bonding	Company continues to rate the unilatoral right to change modify arrend and discontinue the bandle office of the
	Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.
Dental	
	AT&T Eligible Former Employee Dental Program
_	
Program	Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated
	active Employees except as noted in the sections below.
Eligible Retired Employee	Current Employee, 2009 New Hires, and 2013 New Hires
(Full-Time)	No change from current program.
Monthly Contributions	2017 New Hires
	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.
	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.
	Note: Calculation of the fun cost of coverage is subject to change from time to time at the company's discretion.
Eligible Retired Employees	Current Employee, 2009 New Hires, and 2013 New Hires
(Part-Time)	No change from current plan.
Monthly Contributions	2017 New Hires
	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.
	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.
Life Insurance	
Eligible Retired Employees	
Basic Life	2017 New Hires, 2013 New Hires and 2009 New Hires
(Company Paid)	\$15,000 Retiree Basic Life
	Current Employees
	1X Annual Pay
	Note: For the purposes of Detine Desir Life only. Appeal Days In the Free Land Day Co.
	Note: For the purposes of Retiree Basic Life only, Annual Pay: Is the Employee's Rate of Pay as of 12/31/2009. Includes base wages, targeted commissions, team award, individual discretionary award, and miscellaneous pay, where
	applicable.
Supplemental Life	Current Employee, 2009 New Hires, and 2013 New Hires
(Retiree Paid)	No change from current plan.
	2017 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.
Definition of Day	Contributions shall be the same as for a similarly situated active employee.
Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	No change from current program.
Vision	
Vision	

Provision .	Eligible Retired Employees
Eligible Retired Employees Vision Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  Eligible Retired Employees shall be eligible to participate in the AT&T Eligible Former Employee Vision Program (formerly named the AT&T Retiree Vision Care Program)
Eligible Retired Employees Monthly Retiree Contributions	Current Employee, 2009 New Hires, and 2013 New Hires No change from current program.  2017 New Hires
	<ul> <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>
	*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.

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

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### IBEW System Council T-3 Benefits Outline Summary

C/2/AM

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires							
Active Employees	AT&T National							
Effective Date(s)	Health & Welfare: 1/1/2018							
Eligibility								
For Medical, Dental, Vision, CarePlus, and Life Insurance (unless otherwise specified)	2013 New Hires, 2009 New Hires and Current Employees Follow provisions of the applicable program: Medical — AT&T Corp. Medical Program Dental — AT&T Dental Program (Bargained Employees) Vision — AT&T Vision Program (Bargained Employees) Disability — Legacy AT&T Disability Benefits Program CarePlus — AT&T CarePlus - A Supplemental Benefit Program Life Insurance — AT&T Group Life Insurance Program for Active Employees*							
	2017 New Hires Follow provisions of the applicable program: Medical – AT&T Corp. Medical Program Dental – AT&T Dental Program (Bargained Employees) Vision – AT&T Vision Program (Bargained Employees) Disability – AT&T Disability Income Program CarePlus – AT&T CarePlus - A Supplemental Benefit Program Life Insurance – AT&T Group Life Insurance Program for Active Employees* *Includes Supplemental Life and Dependent Life provisions.							
Health Reimbursement A	Account (UDAe)							
	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees None.  Note: No additional Company crediting. Current Employees and 2009 New Hires who have remaining account balances will continue to have access to those account balances subject to provisions of the Program.							
Medical	Will Contained to here access to those accessing seasons see set to proviousle of the Frogram.							
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Corp. Medical Program  The Company will continue to provide fully insured coverage options such as HMOs at the discretion of the Company.  No change from current program except as provided below:							
Dependent Eligibility	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.							
Eligibility for Company Subsidy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program except as noted below:  Individual Coverage: Company subsidy for Employees enrolled in Company-sponsored Individual medical coverage (including fully insured coverage options, if available) will 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.  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 NCS is attained (also referred to as 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 (including fully insured coverage options, if available) but are required to pay 100% of the cost of coverage (including fully insured coverage options, if available) but are required to pay 100% of the cost of coverage (including fully insured coverage options, if available) but are required to pay 100% of the cost of 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							

IBEW	System	Council T	-3	Benefits	<b>Outline</b>	Summary	v
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Provision	<del></del>					tline Sur	<u>,</u>				_	
FTOVISION		Current	Employ	ees, 200	9 New H	lires, 201	3 New I	Hires and	2017 N	lew Hires	•	
Active (Full-Time)	2013 Nev	v Hires 2009	New Hire	s and Currei	nt Employe	es	<del></del>					
Monthly Contributions	Monthly Contribution Amounts											
,		Optio	n 1		2018	2019	2020	2021	2	022		
	i	Indivi	dual		\$105	- \$113	\$126	\$149		165		
		Fami	у		\$264	\$296	\$330	\$390		433		
								•				
	Monthly Contribution Amounts											
		Optio			2018	2019	2020	2021		022		
		Indivi	_		\$46	\$59	\$72	\$95	$\overline{}$	112		
	1	Fami	у		\$121	\$154	\$189	\$250	)   \$	293		
	2017 Nev	v Hires										
		·	4			Contribution	<del></del>					
		Optio			2018	2019	2020	2021		022		
		Indivi			\$138	\$144	\$150	\$158		165		
		Fami	<u>y</u>		\$362	\$377	\$394	\$414	\$	433		
					Monthly	Contribution	Amounte					
		Optio	n 2		2018	2019	2020	2021	20	022		
	1	Indivi			\$84	\$90	\$97	\$104		112		
		Famil			\$220	\$236	\$254	\$273		293		
		<u> </u>				<del></del>		1				
Active	2017 No.	Ulana 204	2 Nam Ulas	- 2000 No.	. I lises and	Current Em	-1					
(Part-Time) Monthly Contributions		e from curre			V MIIOS AND	Cullent Em	pioyees					
Annual Deductibles	Option 1:	v Hires, 201		s, 2009 Nev		Current Em		202	21	202	22	
		Network/ Traditional	Non-	Network/ Traditional	Non-	Network/ Traditional	Non-	Network/ Traditional	Non-	Network/ Traditional	Non-	
		Indemnity	Network	Indemnity	Network	Indemnity	Network	Indemnity	Network	Indemnity	Networ	
	Ind	\$ 650	\$2,275	\$ 700	\$2,450	\$ 750	\$2,625	\$ 800	\$2,800	\$850	\$2,975	
	Family	\$1,300	\$4,550	\$1,400	\$4,900	\$1,500	\$5,250	\$1,600	\$5,600	\$1,700	\$5,950	
	Annual D	eductible Pr	ovisions:									
	No chang	e from curre e Annual De	nt progran	vill be include		ut-Of-Pocke		202	1	202	22	
	No chang Note: The	e from curre  Annual De  20  Network/ Traditional	ent program ductibles v	vill be include  201  Network/ Traditional	Non-	202 Network/ Traditional	Non-	202 Network/ Traditional	Non-	2002 Network/ Traditional	Non-	
	No chang Note: The Option 2:	e from curre e Annual De  20  Network/ Traditional Indemnity	ant program ductibles v 8 Non- Network	vill be include  201  Network/ Traditional Indemnity	Non- Network	202 Network/ Traditional Indemnity	Non- Network	202 Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Nan- Network	
	No chang Note: The Option 2:	e from curre e Annual De  20  Network/ Traditional Indemnity \$1,450	8 Non-Network \$4,350	201 Network/ Traditional Indemnity \$1,500	Non- Network \$4,500	202 Network/ Traditional Indemnity \$1,550	Non- Network \$4,650	202 Network/ Traditional Indemnity \$1.600	Non- Network	Network/ Traditional Indemnity \$1,650	Non- Networ \$4,950	
	No chang Note: The Option 2:	e from curre e Annual De  20  Network/ Traditional Indemnity	8 Non-Network \$4,350 \$8,700	vill be include  201  Network/ Traditional Indemnity	Non- Network	202 Network/ Traditional Indemnity	Non- Network	202 Network/ Traditional Indemnity	Non- Network	Network/ Traditional Indemnity	Non- Networ	

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires							
General	2017 New Hires,	2013 New Hires,	2009 New Hire	s and Current Employees				
Copay/	Ontion 1:							
Coinsurance	Option 1:	2016	3-2022	1				
				-				
		Network/	Non-					
		Traditional Indemnity	Network					
	Preventive	\$0 / 0%	No Benefit	-				
	Preventive	Ded waived	140 Delleill					
	Sickness/	\$0 / 10%	\$0 / 50%	<del> </del>				
	Iliness	After Ded	After Ded					
		1	1	1				
	Option 2:			_				
		2018	3-2022					
		Network/	Non-					
		Traditional	Network					
		Indemnity						
	Preventive	\$0 / 0%	No Benefit					
	<u> </u>	Ded waived		-				
	Sickness/	\$0 / 10%	\$0 / 50%					
	[_lliness	After Ded	After Ded	J				
	Note: Non-netwo may be changed	rk: The methodo from time to time	logy for calculate at the Company	ing the Allowable Charge for all categories of Non-Network expenses y's discretion.				
Office Visit	2017 New Hires,	2013 New Hires,	2009 New Hires	and Current Employees				
Copay / Coinsurance								
	Option 1:			7				
	<u> </u>		3-2022					
		Network/	Non-					
		Traditional	Network					
		Indemnity	No Deces					
	Preventive	\$0 / 0%	No Benefit					
	Sickness/	Ded waived \$0 / 10%	\$0 / 50%	-				
	Illness	After Ded	After Ded					
	IIIIIGSS	Aiter Dea	Antei Dou	J				
	Option 2:							
	CP	2018	3-2022	]				
	· · · · · · · · · · · · · · · · · · ·	Network/	Non-	1				
		Traditional	Network					
	1	Indemnity						
	Preventive	\$0 / 0%	No Benefit	]				
	l L	Ded waived						
	Sickness/	\$0 / 10%	\$0 / 50%					
	liiness	After Ded	After Ded					
Urgent Care	2017 New Hires,	2013 New Hires,	2009 New Hire:	s and Current Employees				
Facility/Professional								
Services	Option 1:			S				
Copay / Coinsurance	2018-20							
		Non-						
	1 1	Network						
	Indemnity	\$0 / 50%						
		After Ded						
	Aiter Ded	Alter Ded						
	Option 2:							
	2018-20	122						
		Non-						
		Network						
	Indemnity							
		\$0 / 50%						
		After Ded						

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires							
Emergency Room	2017 New Hires, 20	013 New Hires, 2	009 New Hires	and Current Employees				
Facility/Professional	Option 1:							
Services	2018-202	2						
Copay / Coinsurance	Network/ N	on-						
	Traditional   N	etwork						
	Indemnity							
		0 / 10%						
	After Ded A	fter Ded						
	Option 2:							
	2018-202	2						
		on-						
		etwork						
	Indemnity							
	\$0 / 10% \$0	0 / 10%						
	After Ded A	fter Ded						
Hospital	2017 New Hires, 20	013 New Hires, 20	009 New Hires	and Current Employees				
Inpatient/Outpatient								
Facility/Professional	Option 1:							
Services	2018-202							
Copay / Coinsurance		on-						
		etwork						
	Indemnity	<del></del>						
		0 / 50%						
	After Ded A	fter Ded						
	0-11 2							
	Option 2: 2018-202	3						
		on-						
		etwork						
	Indemnity	GIWOIK						
		0 / 50%						
		fter Ded						
Tests			009 New Hires	and Current Employees				
(all tests including x-ray,								
radiology, lab test, etc)	Option 1:							
Copay / Coinsurance		2018-2	2022					
		Network/	Non-					
		Traditional	Network					
	<u> </u>	Indemnity						
	Preventive	\$0 / 0%	No Benefit					
	0.1	Ded waived	20.000					
	Sickness/Illness	\$0 / 10%	\$0 / 50%					
		After Ded	After Ded					
	Option 2:							
	GDIIGIT Z.	2018-	-2022					
		Network/	Non-					
		Traditional	Network					
		Indemnity						
	Preventive	\$0 / 0%	No Benefit					
	L	Ded waived						
	Sickness/Illness	\$0 / 10%	\$0 / 50%					
		After Ded	After Ded					

#### Provision Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires Mental Health/Substance 2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Abuse (MH/SA) Copay / Coinsurance Option 1: 2018-2022 Network/ Non-Traditional Network Indemnity Preventive \$0 / 0% No Benefit Ded waived Sickness/lilness \$0 / 10% \$0 / 50% After Ded After Ded Option 2: 2018-2022 Network/ Non-Traditional Network Indemnity Preventive \$0 / 0% No Benefit Ded waived Sickness/Illness \$0 / 10% \$0 / 50% After Ded After Ded 2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Annual **Out-of-Pocket Maximums** Option 1: (OOP) **Out-of-Pocket Maximum Amounts** (including Annual Deductible) 2018 2020 2019 2021 2022 Network/ Network/ Network Network/ Non-Non-Network Traditiona Network Traditional Traditional Network Network Traditional Network Traditiona Network Indemnity Indemnity Indemnity Indemnity Indemnity \$3,250 \$9,750 \$3,500 \$10,500 \$3,750 \$11,250 \$4,000 \$12,000 \$4,250 \$12,750 \$6,500 \$19,500 Family \$7,000 \$21,000 \$7,500 \$22,500 \$8,000 \$24,000 \$8,500 \$25,500 (Integrated Med/Surg, MH/SA) Out-of-Pocket Maximum provisions: No change from current program, except as provided below: The following additional costs paid by the participant apply toward the applicable Network/Traditional Indemnity or Non-Network Out-of-Pocket Maximum amounts: **Deductibles** Coinsurance Option 2: **Out-of-Pocket Maximum Amounts** (including Annual Deductible) 2018 2019 2020 2021 2022 Network Network Network Non-Network Non-Network/ Non-Traditional Network Traditional Network Traditional Network Traditional Network Traditional Network Indemnity Indemnity Indemnity Indemnity Indemnity Ind \$8,550 \$19,650 \$6,550 \$19,650 \$6,550 \$19,650 \$8,550 \$19,650 \$6,550 \$19,650 \$13,100 Family \$39,300 \$13,100 \$39,300 \$13,100 \$39,300 \$13,100 \$39,300 \$13,100 \$39,300 (Integrated with Med/Surg, Rx, MH/SA, CarePlus) Out-of-Pocket Maximum provisions: If the coverage tier is Family, the applicable 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/Traditional Indemnity Services for an individual family member once the individual meets the Network/Traditional Indemnity Individual Out-Of-Pocket Maximum, even if the Family Out-Of-Pocket Maximum has not

Outpatient prescription drug allowable charges for eligible expenses

Network Out-of-Pocket Maximum amounts: Deductibles Coinsurance

The following additional costs paid by the participant apply toward the applicable Network/Traditional Indemnity or Non-

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### IBEW System Council T-3 Benefits Outline Summary

### Prescription Drug Program (Rx)

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

Option 1:

Deductible: None.

Out-of-Pocket Maximum:

ad

2018-2022 \$1,200

Fam

\$2,400

Retail - Network Copays:

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

	2018	2019	2020	2021	2022
Generic	\$10	\$10	\$10	\$10	\$10
Preferred	\$35	\$35	\$35	\$35	\$35
Non-Preferred	\$60	\$70	\$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 network retail cost.

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

	2018	2019	2020	2021	2022
Generic	\$20	\$20	\$20	\$20	\$20
Preferred	\$70	\$70	\$70	\$70	\$70
Non-Preferred	\$120	\$140	\$160	\$160	\$160

#### Option 2:

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

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

Retail - Network Copays:

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

	2018	2019	2020	2021	2022
Generic	\$9	\$9	\$9	\$9	\$9
Preferred	\$35	\$35	\$35	\$35	\$35
Non-Preferred	\$70	\$70	\$70	\$70	\$70

Retail - Non-Network Copays:

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

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

	2018	2019	2020	2021	2022
Generic	\$18	\$18	\$18	\$18	\$18
Preferred	\$70	\$70	\$70	\$70	\$70
Non-Preferred	\$140	\$140	\$140	\$140	\$140

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

- Mandatory mail order for maintenance Rx Applies after second fill at retail.
- · Specialty pharmacy program
- Personal Choice 100% participant-paid
- Mandatory Generic
- Compound medication limitation

The following provisions also apply to Option 1 and Option 2:

- · Advanced Control Specialty Formulary
- New Standard Prescription Drug Formulary
- · Generic Step Therapy

	Current Employees,	2009 New Hires, 2013 New Hi	ires and 2017 New Hires
Employee Assistance P	rogram (EAP)		
Program	2017 New Hires, 2013 New Hires, 200 No change from current program.	9 New Hires and Current Employees	
Visit Limit	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.		
Disability			
Program	2013 New Hires, 2009 New Hires and No change from current program.	Current Employees	
	2017 New Hires Effective June 25, 2017, AT&T Disabil provided below.	ity Income Program as described in the St	ummary Plan Description except as
Short Term Disability (STD)	2013 New Hires, 2009 New Hires and Current Employees No change from current program.		
	2017 New Hires		
	Benefit: Short-Term Disability Benefit: 100 percent of Pay, based on your ser	and the other sources of income received vice as shown below:	d are designed to replace 60 percent or
		% of	Pay
	Term of Employment	100%	60%
	6 months < 2 years	0 weeks	26 weeks
	2 years < 5 years	4 weeks	22 weeks
	5 years < 15 years	13 weeks	13 weeks
	15 years or more	26 weeks	0 weeks
Long-Term Disability (LTD)	2013 New Hires, 2009 New Hires and No change from current program  2017 New Hires The AT&T Disability Income Program a employees are not eligible for LTD ben	as described in the Summary Plan Descrip	otion except that Temporary and Term
Dontal			
Dental	2017 Naw Hiras 2013 Naw Hiras 200	O Nov. Wass and Owner Fredrick	
Dental Program	2017 New Hires, 2013 New Hires, 200 AT&T Dental Program (Bargained Em Dental PPO DHMO (available at the discretion of	ployees) except as provided below.	
	AT&T Dental Program (Bargained Em     Dental PPO     DHMO (available at the discretion of the dis	ployees) except as provided below.	nths NCS is attained (also referred to as
Program	AT&T Dental Program (Bargained Em Dental PPO Dental PPO DHMO (available at the discretion of the discr	ployees) except as provided below.  If the Company)  New Hires and Current Employees plin on first day of the month in which 6 month in which 8 month in which	·
Eligibility for Coverage  Eligibility for Company Subsidy  Active	AT&T Dental Program (Bargained Em Dental PPO Dental PPO DHMO (available at the discretion of the disc	ployees) except as provided below.  If the Company)  New Hires and Current Employees plin on first day of the month in which 6 month in which 8 month in which	·
Program  Eligibility for Coverage  Eligibility for Company Subsidy	AT&T Dental Program (Bargained Em Dental PPO or DHMO 2018-2022 Ind S8 Ind +1 \$17	ployees) except as provided below.  If the Company)  New Hires and Current Employees plin on first day of the month in which 6 month in which 6 month first day of the month in which 6 month in	·
Eligibility for Coverage  Eligibility for Company Subsidy  Active (Full-Time)	AT&T Dental Program (Bargained Em Dental PPO or DHMO 2018-2022 Ind Select PPO Dental PPO	ployees) except as provided below.  If the Company)  If the Company	·
Eligibility for Coverage  Eligibility for Company Subsidy  Active (Full-Time) Monthly Contributions	AT&T Dental Program (Bargained Em Dental PPO or DHMO 2018-2022 Dental PPO Den	ployees) except as provided below.  If the Company)  New Hires and Current Employees plin on first day of the month in which 6 month in white and Current Employees  New Hires and Current Employees	·

	IBEW System Council T-3 Benefits Outline Summary
Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Deductible	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	Network and ONA: \$25 per individual per year Non-Network: \$50 per individual per year
Annual	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Maximum Benefit	Nichords and ONA, 64 750 and individuals
	Network and ONA: \$1,750 per individual* Non-Network: \$1,300 per individual*
	*Not to exceed \$1,750 combined Network/Non-Network
Orthodontic	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Lifetime Maximum	Network and ONA: \$2,000 per individual*
	Non-Network: \$1,400 per individual*
	*Not to exceed \$2,000 combined Network/Non-Network
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  Dental PPO Colnsurance
	Class I (Diagnostic/Preventive):  Network and ONA*: 100%, deductible waived
	Non-Network**: 100%, deductible waived
	Class II (Basic restorative - fillings, extractions, periodontal treatment/maintenance):
	Network and ONA*: 90%, after deductible Non-Network**: 70%, after deductible
	Class III (Major restorative – crowns, dentures, bridgework):  Network and ONA*: 80%, after deductible
	Non-Network**: 50%, after deductible
	Class IV (Orthodontia):
	Network and ONA*: 80%, after deductible Non-Network**: 50%, after deductible
	NOTITIES OF A STATE OF THE STAT
	Notes:  *For ONA, paid at Network contracted rate.
	**For Non-Network paid based on reasonable and customary amounts.
Outside Network Area (ONA)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	ONA benefit provided to employees who reside in a zip code which does not meet the network standards.
	ONA benefits are equivalent to PPO Network benefits.     Enrollees who are in Network will be offered the PPO option only.
	Enrollees who are located outside the Network zip code criteria will be offered the ONA option only.
Vision Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
riogram	AT&T Vision Program (Bargained Employees) except as provided below.
Eligibility for Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Englamity for coverage	
	Eligibility for coverage continues to begin on the first day of the month in which 6 months of NCS is attained (also referred to as TOE).
Eligibility for Company	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Subsidy	
	Eligibility for Company subsidy continues to begin on the first day of the month in which 6 months of NCS is attained (also referred to as TOE).
Antivo	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
Active (Full-Time)	Contributions for 2018-2022:
Monthly Contributions	2018-2022
	Contribution
	Amounts
	Ind \$2.50
	Ind +1 \$5.50 Fam \$9.00
Active	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
(Part-Time)	
Monthly Contributions	Based on Scheduled hours/week:  • Greater than or equal to 20 hours = 50% of full cost of coverage*.
	• Less than 20 hours = 100% of full cost of coverage* with no Company subsidy.
	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.

Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Coverage Levels	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	Exam: 1 exam per 12 months  Network: \$0 copay  Non-Network: \$28 allowance
	Frame Allowance: 1 pair per 12 months  Network: \$130 allowance  Non-Network: \$ 30 allowance
	Lenses Allowance: 1 set per 12 months  Network: \$0 copay/coinsurance Covers std. plastic lenses: Single, Bi-focal, Tri-focal, Lenticular, Progressive + Polycarbonate at 100% Non-Network: \$30-\$80 allowance
	Contact Lenses Allowance: Allowance per 12 months  Network: \$150 allowance  Non-Network: \$150 allowance
	2 <sup>nd</sup> Pair Benefit: Allows for a 2 <sup>nd</sup> pair of glasses or contact lenses allowance after the first pair benefit is utilized, per 24 months.
Flexible Spending Accou	unt (FSA)
Plan	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Flexible Spending Account Plan
	No change from current plan, except those that are mandated by healthcare reform legislation (PPACA).
Contribution Minimum/Maximums	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
	No change from current plan, except those that are mandated by healthcare reform legislation (PPACA) and to annually adjust the maximum contribution amount to that permitted by law for each calendar year for which the IRS issues timely guidance such that the Company can implement the change.
Supplemental Medical B	enefits
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T CarePlus – A Supplemental Benefit Program
	No change from gurrant amoram
	No change from current program.
Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
Monthly Contributions  General Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
•	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.
General Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under
General Benefits	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under
General Benefits Life Insurance	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.
General Benefits  Life Insurance  Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contributions amounts are subject to annual adjustment.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
General Benefits  Life Insurance Program  Active Benefits  Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contributions amounts are subject to annual adjustment.
General Benefits  Life Insurance Program  Active Benefits  Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contributions amounts are subject to annual adjustment. 2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees
General Benefits  Life Insurance Program  Active Benefits  Definition of Pay  Long-Term Care	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company. 2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees No change from current program.  Note: Contributions amounts are subject to annual adjustment. 2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
General Benefits  Life Insurance Program  Active Benefits  Definition of Pay  Long-Term Care	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program, except those required to comply with healthcare reform legislation (PPACA).  Company continues to retain the unilateral right to change, modify, amend and discontinue the benefits offered under CarePlus.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Group Life Insurance Program for Active Employees  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.  Note: Contributions amounts are subject to annual adjustment.  2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.

- w. p. *	IDEN System Council 1-3 Benefits Outline Summary
- Provision	Current Employees, 2009 New Hires, 2013 New Hires and 2017 New Hires
Policy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current policy.
Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  No change from current policy.
Commuter	
Policy	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  No change from current policy.
Coverage	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  Pre-tax deductions for parking and mass transit. 2017 Internal Revenue Service (IRS) limits: \$255 parking; \$255 mass transit.  Eligible expense and monthly limits follow IRS Code Section 132 Regulations.
	Note: Annual adjustments apply.

Provision	Eligible Retired Employees
	Effective 1/1/2018 for AT&T National:
Retiree Provisions	Applicable for the term of the Agreement to Eligible Retired Employees who terminate during the term of the Agreement.
Medical	
Program	AT&T Corp. Eligible Former Bargained Employee Medical Program
	Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated active Employees except as noted in the sections below.
Eligible Retired Employees (Full-Time)	Current Employee, 2009 New Hires and 2013 New Hires No change from current program
Monthly Contributions	New Hires     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.
Eligible Retired Employees (Part-Time)	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.  Current Employee, 2009 New Hires, and 2013 New Hires No change from current program.
Monthly Contributions	2017 New Hires     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.
Medicare Part-B Premium Reimbursement	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.  2017 New Hires, 2013 New Hires and 2009 New Hires Not Eligible.
	Current Employees No change from current plan.
Health Reimbursement Account (HRA)	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees None.
	Note: No additional Company crediting. Current employees and 2009 New Hires who have remaining account balances will continue to have access to those account balances subject to provisions of the Program.
Supplemental Medical Bo	
Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees AT&T Eligible Former Employee CarePlus A Supplemental Benefit Program
Monthly Contributions	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
	Note: Contribution amounts are subject to change from time to time at the sole discretion of the Company.
	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees  No change from current program, except those required to comply with healthcare reform legislation (PPACA).
General Benefits	Company continues to retain the unliateral right to change, modify, amend and discontinue the benefits offered under CarePlus.
Dental	
Jentai	

	IBEW System Council T-3 Benefits Outline Summary
Provision	Eligible Retired Employees
	AT&T Eligible Former Employee Dental Program
Program	Eligible Retired Employees shall be eligible to participate in the same choice of options and provisions as similarly situated active Employees except as noted in the sections below.
Eligible Retired Employee (Full-Time) Monthly Contributions	Current Employee, 2009 New Hires, and 2013 New Hires No change from current program.
,	Eligible Retired Employees who are Non-Medicare eligible will pay 100% of full cost of coverage* with no Company subsidy.      State of Coverage with no Company subsidy.
	Eligible Retired Employees who are Medicare eligible are ineligible for coverage.      Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.
Eligible Retired Employees (Part-Time)	Current Employee, 2009 New Hires, and 2013 New Hires No change from current plan.
Monthly Contributions	2017 New Hires  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.
	* Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.
Life Insurance	
Eligible Retired Employees Basic Life (Company Paid)	2017 New Hires, 2013 New Hires and 2009 New Hires \$15,000 Retiree Basic Life Current Employees 1X Annual Pay
	Note: For the purposes of Retiree Basic Life only, Annual Pay: Is the Employee's Rate of Pay as of 12/31/2009. Includes base wages, targeted commissions, team award, individual discretionary award, and miscellaneous pay, where applicable.
Supplemental Life (Retiree Paid)	Current Employee, 2009 New Hires, and 2013 New Hires No change from current plan.
	2017 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.  Contributions shall be the same as for a similarly situated active employee.
Definition of Pay	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees No change from current program.
Vision	
Eligible Retired Employees Vision Program	2017 New Hires, 2013 New Hires, 2009 New Hires and Current Employees Eligible Retired Employees shall be eligible to participate in the AT&T Eligible Former Employee Vision Program (formerly named the AT&T Retiree Vision Care Program)
Eligible Retired Employees Monthly Retiree Contributions	Current Employee, 2009 New Hires, and 2013 New Hires No change from current program.
33,11,131,131,131,131,131,131,131,131,1	2017 New Hires     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.
	*Note: Calculation of the full cost of coverage is subject to change from time to time at the Company's discretion.

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