Southeast

Beneficiaries



What's Changing for 2027

Starting Jan. 1, 2027:

- **New default beneficiary hierarchy:** If you pass away without a beneficiary election on file on Fidelity NetBenefits, your remaining assets will pay out first to your spouse/partner (if applicable) and then to your estate.
- **Fidelity's Online Beneficiary System (OLB) will be the single source of beneficiary information.** If you previously submitted paper forms, they will no longer be valid. If no beneficiary is listed in the OLB, the default hierarchy above will apply.

Make sure your benefits go to the right people if something were to happen to you. Review and update your beneficiaries—especially after a life event like marriage or divorce.

Keep in mind:

- Plan rules may affect who receives benefits.
- Your marital status may determine your beneficiary for some plans.
- Read the Summary Plan Description (SPD) to see how each of your benefits will be paid.

How to update:

- **401(k), pension, life insurance, and final compensation and benefits:** Go here
- **Health Savings Account (if you have one):** Go here, choose **Health Savings Account**, and then select **Beneficiaries** in the quick links.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

CarePlus



Your CarePlus Benefit

CarePlus is a supplemental benefit that helps pay for certain services not covered by your medical program. You don't need AT&T medical coverage to enroll, but **you must be enrolled in CarePlus to use its benefits**.

Contributions will not change for 2027:

- Individual: $1 per month
- Family: $3 per month

If you're already enrolled, you'll stay enrolled. To end your CarePlus enrollment, you must opt out during Annual Enrollment.

If you are not currently enrolled in CarePlus, you can choose coverage for 2027 during Annual Enrollment. Otherwise, your next opportunity to enroll in CarePlus will be during the next Annual Enrollment period—unless you experience a qualified status change (e.g., getting married or divorced, having a baby, etc.) or your medical program allows you to enroll throughout the year.

What Your Benefit Includes

CarePlus provides benefits for two main types of services:

- **Experimental:** Helps with the cost of certain medical treatments that are still being studied and usually aren't covered by medical plan options. These may include some treatments for cancer, inherited conditions, or orthopedic procedures, devices, and therapies.
- **Expanded:** Additional support that isn't experimental but may still be helpful. Coverage may include wigs for alopecia, doula services, or use of service animals.

AT&T reviews CarePlus services from time to time to keep coverage current. See your CarePlus Summary Plan Description (SPD) for a full list of covered services. The SPD includes some benefits not listed on the CarePlus website, such as Back-Up Care Days from Bright Horizons. You can also find out more information on the CarePlus website at careplus.att.com.

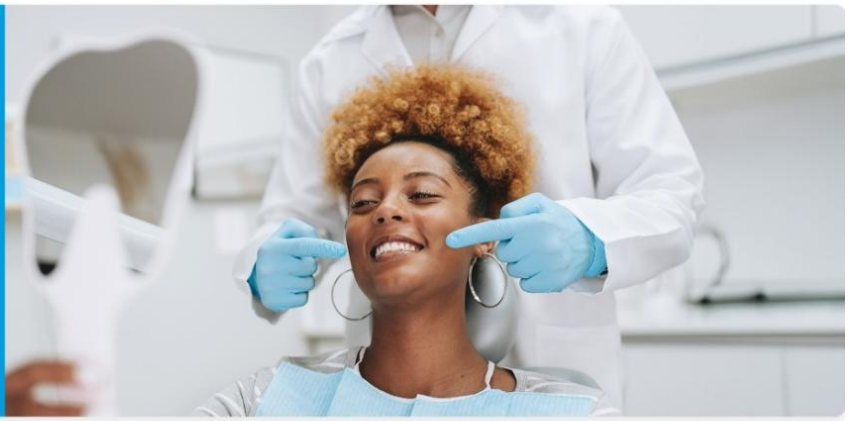
What Else You Should Consider

UnitedHealthcare® administers the CarePlus program and must approve most services before they're covered.

If you have questions about CarePlus, call UnitedHealthcare® at 877-261-3340 (711 from a TTY phone), Monday – Friday from 7 a.m. – 7 p.m. Central time.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Dental Options



Your Dental Benefit

Your dental plan options are not changing in 2027 but your contributions could. Review your dental coverage options and contributions during Annual Enrollment to make sure your plan option is still a good fit.

All dental plan options cover:

- **Preventive care services:** Like annual exam, two cleanings, and x-rays, at no cost to you if you use a network provider.
- **Basic services:** Like fillings, extractions, root canals, gum treatment, and more.
- **Major services:** Like crowns, bridges, dentures, and more.
- **Orthodontia:** Like braces and other orthodontic treatments.

Note: Some services have limits on how much or how often they're covered. See exclusions and limitations in your dental Summary Plan Description (SPD) for more information.

Remember: Seeing a network dental provider can lower your costs. Always check that your provider is in-network before each visit since networks can change throughout the year.

What Else You Should Consider

To see Dental Health Maintenance Organization (DHMO) services available check the DHMO Patient Charge Schedule.

Where You Can Find More Information

- See your program's dental Summary Plan Description (SPD) for details.
- Review your 2027 AT&T dental plan options and costs . Click **Compare Dental Plan Details**.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Dependent Eligibility



Review your dependents to make sure they're still eligible and enrolled.

- **Medical:** You can cover your spouse/partner and eligible child(ren). Child coverage continues up to the end of the month they turn age 26.
- **Dental, vision, and life insurance:** Coverage rules may differ.
- You'll need each dependent's full name and Social Security Number to enroll them.
- For additional information on eligible dependents, read your Summary Plan Description (SPD).

To check:

- Contact the AT&T Benefits Center to confirm who's enrolled.
- You don't need to re-enroll current dependents unless they lost eligibility.

To add or remove:

- Make changes during Annual Enrollment or if you need to make a change at another time of year, visit Coverage Changes for Spouse and Child.
- To avoid penalties and benefits fraud, remove dependents when they're no longer eligible.
- The plan will automatically remove child dependents when they are no longer eligible due to age.

AT&T may review eligibility at any time.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Disability



Your Short-Term, Long-Term, & Supplemental Long-Term Disability Benefits

Disability coverage can help protect your income if you can't work for a while due to illness or injury. If that's the case, you may qualify for short-term disability (STD) or long-term disability (LTD) benefits.

What Your Benefits Include

STD

Your STD coverage pays income for a limited time if you can't work.

LTD

- If you can't return to work after short-term disability, you may qualify for long-term disability.
- AT&T provides LTD coverage at no cost to you.
- You will receive 50% of your eligible pay.
- **Supplemental LTD:** If you're not currently receiving STD or LTD benefits, you can elect supplemental LTD coverage during Annual Enrollment, which will add 10% or 20% to your eligible pay if you need to use your LTD benefit. Your cost for supplemental LTD coverage will be paid from your paycheck after taxes.

Read the Summary Plan Description (SPD) to see how each of your benefits will be paid.

Where You Can Find More Information

- Learn more about your disability support in the Benefits Summary.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Save Money with Spending Accounts



Save Money with an HSA

What's Changing for 2027

Here's what's changing with the Health Savings Account (HSA):

- **Update your HSA beneficiaries when you enroll.** Read more about important changes coming in 2027, and take action so you don't leave your family's financial future undecided.
- **Higher contribution limit:** In 2027, you can contribute more—up to $4,500 for you or up to $9,000 for your family (up from $4,400 and $8,750).

HSA vs. FSA: What's the Difference?

You have access to a Health Savings Account (HSA) and two Flexible Spending Accounts (FSAs) to help you save for health and dependent care costs (2027 contribution limits apply).

Here's a quick overview of the HSA and FSAs.

	Health Savings Account (HSA)	Health Care Flexible Spending Account (FSA)*	Dependent Care Flexible Spending Account (FSA)*
Description	Save tax-free money for qualified healthcare expenses.	Also allows you to save tax-free money for qualified healthcare	Save tax-free for child or elder care (e.g., day care, summer camp, and

		expenses, but you must use all the money in the account each year or you lose it.	home care expenses).
Maximum annual contribution	$4,500 individual coverage; $9,000 family coverage (includes your contributions and any company HSA contributions, if applicable)	$3,400**	$7,500
Offer "catch-up" contributions?	Yes, for age 55 and older ($1,000 maximum)	No	No
Ability to invest balance?	Yes	No	No
Are contributions taken pre-tax or after-tax?	Pre-tax***	Pre-tax	Pre-tax
Balance carries over each year?	Yes, HSA funds can be used now and in the future (even after you retire or leave the company).	No, must be used each calendar year or you forfeit the money.	No, must be used each calendar year or you forfeit the money.
When are contributions available to spend?	Balance is available to spend as you make contributions.	Annual amount you elect to contribute is available at the beginning of the year.	Balance is available to spend as you make contributions.
Eligibility	You can open an HSA if you: • Enroll in an HSA-eligible high deductible health plan option. • Are not claimed as a	You can participate whether or not you elect coverage in a medical plan option.	You can participate whether or not you elect coverage in a medical plan option.

- Are not claimed as a dependent on someone else's tax return.
- Do not have other low deductible healthcare coverage, such as through a spouse's/partner's employer.
- Do not participate in a Health Care FSA, unless your Health Care FSA is designated as "limited purpose" to reimbursement of eligible dental, vision, and preventive care expenses.
- Are not enrolled in any part of Medicare.

If you contribute to an HSA, money in your FSA can ONLY be used for eligible dental, vision, and preventive care expenses.

option.

This can only be used to pay for eligible dependent care expenses.

* Use your FSA funds by Dec. 31, 2027. Submit claims by March 31, 2028. After that, you'll lose any money left in the account.

** During Annual Enrollment, if you choose to contribute the 2026 IRS maximum, you can opt-in to automatically increase to the 2027 limit.

*** In California and New Jersey, HSA contributions are taxed by the state. Other states may treat them differently so check with a tax advisor. You will take home more pay with pre-tax contributions than after-tax ones.

Health Savings Account (HSA)

An HSA is a tax-free* way to pay for eligible healthcare costs. To access it, you must enroll in a high-deductible medical plan option that is HSA-eligible.

Important: Review and update your beneficiary designation. If you don't have a valid beneficiary designation on file with Fidelity, default beneficiary rules will apply.

How the HSA Works

You choose how much to contribute, and you can change the amount you contribute at any time. Money comes from your paycheck before taxes* and can be used now or later.

Key Benefits

- Lowers your taxable income
- Earnings grow tax-free
- No taxes when you use it for eligible healthcare costs
- The money is yours to keep—even if you change plans, leave, or retire

2027 Limits

- $4,500 (individual) or $9,000 (family)
- Age 55+: You can contribute up to $1,000 more per year

Other Details

- Contributions come out of each paycheck
- You can only spend what's in your account
- Your balance rolls over each year—there's no "use-it-or-lose-it"

* In California and New Jersey, HSA contributions are taxed by the state. Other states may treat them differently so check with a tax advisor. You will take home more pay with pre-tax contributions than after-tax ones.

Here's How It Works

- When you enroll in medical coverage, choose either Option 2—Broad or Option 2—Select (or another high deductible plan option, if available in your ZIP code) to access an HSA.
- Contribute $37.50 per quarter ($150 per year) through payroll deductions and AT&T matches it.

Important

- Every Annual Enrollment, you must enroll (see above) and choose your contribution amount in order to get the company match.
- Once you contribute the required amount, you'll keep receiving the company match in later quarters if you stay eligible.

What Else You Should Consider

Enrolling in an HSA for the First Time?

To make payroll contributions, you must open an HSA with Fidelity and complete these steps:

Get Started

- During Annual Enrollment, choose your HSA contribution amount when you enroll in medical coverage.
- Outside Annual Enrollment, update your amount on the AT&T Benefits Center website (from the home page, scroll down to the **References** section and select **Change HSA Contributions**) or call 877-722-0020.
- Log in to Fidelity NetBenefits to:
    - **Add a beneficiary:** From the home page, go to the **Health Savings Account tile** and choose **Beneficiaries** in the quick links.
    - **Invest your balance (if you want):** From the home page, go to the **Health Savings Account** tile and choose **Investing** in the quick links.

Good to Know

- Payroll deductions start with your first paycheck on or after Jan. 1 (if you enroll during Annual Enrollment).
- You can change your contribution at any time.
- Your HSA is between you and Fidelity, not AT&T.

Medicare

- If you enroll in Medicare Part A or Part B, you are no longer eligible to contribute to an HSA or receive company contributions. To avoid potential tax consequences, be sure to stop HSA contributions at least six months before your Medicare enrollment date.
- You can still use and invest your existing balance.

Details

For more information, refer to the AT&T Flexible Spending Account Plan and AT&T Medical Program Summary Plan Descriptions (SPDs).

Where You Can Find More Information

- Learn more about your HSA benefit in the Benefits Summary.

Save Money with FSAs

What's Changing for 2027

Here's what's changing with Flexible Spending Accounts:

- **Contribution limit:** In 2026, the maximum amount increased to $3,400, up $100 from the prior year. Later this year, the IRS may raise it again for 2027. If you choose $3,400 during Annual Enrollment, you can opt-in to automatically increase to the 2027 limit if it changes.

Flexible Spending Accounts (FSAs)

What FSAs Are

Health Care FSA

Use a Health Care FSA to pay for eligible health costs—like doctor visits, prescriptions, dental, and vision care—for you and your dependents.

- During Annual Enrollment, choose to contribute up to $3,400 (the current annual limit).
- After Annual Enrollment, the IRS may raise the limit for 2027. If you choose $3,400, you can opt-in to automatically increase to the 2027 limit if it changes.
- Use all funds by year-end or lose them.
- Money comes out of each paycheck, but you can use your full annual amount anytime—even before you fully contribute it.

Dependent Care FSA

Use a Dependent Care FSA to pay for care so you (and your spouse/partner) can work, look for work, or attend school full-time.

Eligible expenses include:

- Day care
- Summer day camp
- After-school or in-home care

Eligible dependents include:

- Children under age 13
- A spouse/partner, disabled child(ren) over age 13, or qualifying relative who:
  - Can't care for themselves
  - Lives with you
  - Depends on you financially

Key Details

- Contribute up to $7,500 in 2027.
- You can only be reimbursed up to your current account balance (at the time you file a claim).
- Unused funds are forfeited—they do not roll over to the following year.

For Both FSAs

- You must spend all money by Dec. 31, 2027.
- Request reimbursement by March 31, 2028.
- Health Care and Dependent Care FSAs are separate. You can't use one for the other.
- For more details, see the AT&T Flexible Spending Account Plan Summary Plan Description (SPD).

How FSAs Work

Examples of eligible expenses include:

Health Care FSA	Dependent Care FSA
• Services from licensed providers • Medical, dental, and vision expenses not covered by your plan option (like deductibles, copays, coinsurance, etc.) • Prescription drugs • Over-the-counter items (like insulin, pain relievers, cold and allergy medications, etc.)	• Private caregivers (must provide a tax ID or Social Security Number) • Daycare centers • Summer day camp • Adult day care programs

What Else You Should Consider

- Choose your annual FSA contribution amount(s) during Annual Enrollment.
- Paycheck deductions start with your first paycheck on or after Jan. 1.
- If you don't enroll during Annual Enrollment, you won't have an FSA for 2027 (unless you have a qualifying life event throughout the year, like a marriage, divorce, new baby, etc.).

If You Have a Health Savings Account (HSA)

- Your Health Care FSA becomes "limited purpose." You can only use it for dental, vision, and preventive care.
- If you open an HSA after Annual Enrollment (or if your spouse has one), you must contact the AT&T Benefits Center at 877-722-0020 to switch your Health Care FSA to limited purpose.
- Once changed, it stays limited purpose for the rest of the year.

Where You Can Find More Information

- Learn more about your Health Care FSA benefit in the Benefits Summary.
- Learn more about your Dependent Care FSA benefit in the Benefits Summary.

- Refer to the AT&T Flexible Spending Account Plan Summary Plan Description (SPD).

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Medical ID Cards



If you stay with the same medical plan option in 2027 and nothing changes with your benefits administrator or network, you will continue using your current medical ID card.

You will get a new medical ID card if you switch medical plan options or networks, if your benefits administrator changes, or if you enroll in coverage for the first time. Your card should arrive by Jan. 1, 2027.

If you need care before your card arrives, or if you lose your card, your provider can check your coverage directly with your benefits administrator. You may also be able to view or print a digital copy from your benefits administrator's website or app.

If you enroll in a company self-insured medical plan option (e.g., an option through Blue Cross Blue Shield, etc.), CVS Caremark manages your prescription benefits.

If you're new to AT&T medical coverage, CVS Caremark will mail you a separate prescription ID card. Visit caremark.com if you need a replacement or temporary card. You can also view your details in the CVS Caremark app.

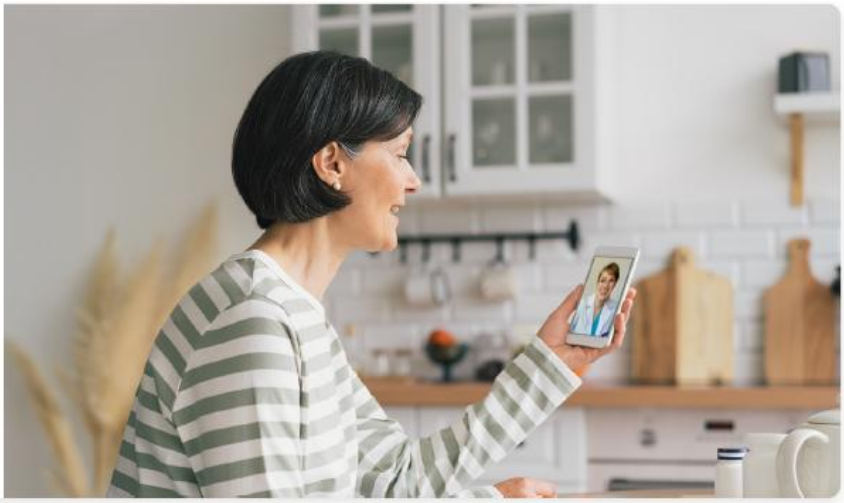
You can also contact Your Personal Healthcare Team by Included Health to confirm that a provider is in-network. Your medical and prescription ID cards are available through the Included Health app as well.

HMO Options

Note: If you are eligible for and enroll in the same Health Maintenance Organization (HMO)/Fully-Insured Managed Care Option (FIMCO)—such as an option through Kaiser, etc.—you had in 2026, you may not get a new ID card. You can access your card details through your plan option's website or app (if available).

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Your Personal Healthcare Team



Note: These services are available **if you enroll in a company self-insured medical plan option**. If you enroll in an HMO or other Fully-Insured Managed Care Option (FIMCO), similar services may be offered by your carrier. Check your plan option details to see what's included.

Your Included Health Benefit

You and your eligible dependents have access to Your Personal Healthcare Team by Included Health**—at no cost to you**. You can get help with finding care, managing benefits, navigating health decisions, support with medical bills, and access to virtual care. It's all designed to make healthcare easier, clearer, and less stressful.

What Your Benefit Includes

Virtual Health Services

Get care for both physical and mental health matters, like colds, flu, allergies, anxiety, ongoing chronic conditions, and more. These virtual services are available year-round, from your phone, tablet, or computer, **at no cost to you**.

- **Virtual Primary Care:** Choose a primary care doctor and get care entirely online. You'll get the same level of care as an office visit, including:
  - Ongoing care from a team that gets to know you and your family
  - Coordinated care and referrals when you need in-person services
  - Access to prescriptions and refills
- **Virtual Urgent Care:** Get on-demand care for you and your covered dependents, 24/7.
- **Virtual Mental Care:** Connect with licensed therapists and psychiatrists for high-quality care.

Care, Answers, & Help

Your Personal Healthcare Team helps you:

Get a doctor who knows you.

Receive personalized recommendations for primary care providers, high-quality facilities, and specialists in your networks.

Access advice anytime, anywhere.

Call or chat with a doctor when it works for you—by app, website, or phone. Get quick answers about symptoms, conditions, and treatment options. Learn more about treatment decision support.

Get an expert medical opinion.

Dealing with a medical condition, surgery decision, or new medication? A specialist can review your case and share a written opinion with you and your doctor—no office visit needed. Learn more about expert medical opinion.

Know what's covered.

See your coverage details in one place. Track your deductible, view your claims, and even learn ways to save on healthcare.

Access support with bills and claims.

Your Personal Healthcare Team can review medical bills for errors and help with denied claims to help you save.

Make the most of your AT&T benefits and resources.

View all your AT&T benefits and programs together. Get help choosing what's best for you or your dependents.

Access virtual visits with trusted high-quality, culturally competent doctors.

Connect with recommended doctors and care teams by mobile or desktop for convenient, virtual care.

What Else You Should Consider

Care Coordination & Support

Care coordinators offer one-on-one support for the unique needs of those from diverse communities and eligible dependents, at no cost.

Find care that fits you.

Get matched with doctors, specialists, therapists and psychiatrists who respect your background and healthcare needs. Your care coordinator can help you:

- Plan for surgery or ongoing treatment
- Understand health benefits and paperwork changes
- Find prescription savings and discounts
- Locate local resources and support groups
- Schedule appointments and arrange transportation
- Get support for personal, family, work, or life concerns

Where You Can Find More Information

To get started:

1. Download the Included Health app, visit includedhealth.com/att, or call 800-374-1009.
2. Create an account or log in.
3. Call or chat with Your Personal Healthcare Team 24/7.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Life Insurance



Your Life Insurance Benefit

AT&T provides access to life insurance that can protect you and your loved ones financially in the event of your death or the death of a covered dependent.

Important: Review and update your beneficiary designation. If you don't have a valid beneficiary designation on file with Fidelity, default beneficiary rules will apply.

What's Changing for 2027

- **Update your life insurance beneficiaries when you enroll.** Read more about important changes coming in 2027, and take action so you don't leave your family's financial future undecided.

What Your Benefit Includes

Basic Life & Accidental Death and Dismemberment (AD&D) Insurance

AT&T pays the monthly cost of your basic life and AD&D coverage.* You're covered for an amount equal to your annual pay.

*If coverage is over $50,000, the extra cost AT&T pays is counted as taxable (i.e., imputed) income and will show on your paycheck.

Supplemental Life & AD&D Insurance for You & Your Dependents

- Think about how much coverage your family may need (e.g., their needs, your estate settlement, etc.) when choosing extra life or AD&D insurance.
- You can choose one to 10 times your annual pay, up to a combined $7 million total.
- You can add spouse/partner coverage starting at $10,000 or from $25,000 to $300,000.

You can add coverage for dependent children from $5,000 to $30,000.

Where You Can Find More Information

- Learn more about your life insurance benefit in the Benefits Summary.
- Learn more about your AD&D insurance benefit in the Benefits Summary.
- See the AT&T Group Life Insurance Program Summary Plan Description (SPD) for more program details.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Medical Options



Your 2027 Coverage: Much Like 2026

Note: While your medical plan options for 2027 haven't changed, your monthly contributions may have. Take the time during Annual Enrollment to review and choose the right coverage for you and your family.

Medical coverage isn't just for when you're sick. It also helps you stay healthy with preventive care, like annual check-ups. AT&T offers several medical plan options so you can choose what fits you best for the coming year.

Use the Medical Plan Option Evaluator tool to explore your out-of-pocket costs, network providers, and other preferences to help find the best option for you and your family.

Your Medical Benefit

AT&T offers company self-insured medical plan options, (e.g. those administered by Blue Cross Blue Shield) and Fully-Insured Managed Care Options (FIMCOs) (e.g., those administered by Kaiser).

Remember: If your providers aren't in your plan option's network, you may pay more for care. Always check the network before enrolling—and again before receiving care—since networks can change.

You can confirm whether your provider is in-network or find new ones by visiting Blue Cross Blue Shield of Illinois (BCBSIL)* at bcbsil.com/att. Even if you're already a BCBSIL member, follow the prompts to select the correct network based on your location and bargaining group.

* Blue Cross and Blue Shield of Illinois (BCBSIL) provides national coverage.

2027 Company Self-Insured Medical Plan Options

AT&T offers you company self-insured medical plan options. Use the table below to see what's different across the options, what's the same, and what to consider.

Features	What to Know
What's different?	Options vary by network, copays, and premiums.

What's the same?	All cover the same services.
Additional benefits	• Virtual Care from Your Personal Healthcare Team by Included Health • Access to Centers of Expertise See "What Else You Should Consider" for more details.

Note: If you don't enroll during Annual Enrollment, your current coverage will continue. To change or stop medical coverage, you must take action during Annual Enrollment.

Prescription Comparisons

The cost you pay for prescription drugs may vary based on several factors, including the medical plan option you choose. Before you enroll, explore estimated costs and compare across plan options to better understand how your medications may be covered.

Compare your CVS prescription costs.

Fully-Insured Managed Care/Health Maintenance Options

You may be eligible for a Health Maintenance Organization (HMO), which is a Fully-Insured Managed Care Option (FIMCO) based on your home ZIP code.

Important: You can enroll most dependents, but some (e.g., partners and disabled dependents) may need extra review or may not be covered.

Before you enroll in an HMO/FIMCO for 2027, review and compare all your medical plan options. If you have questions, call the HMO/FIMCO service center (not the AT&T Benefits Center). Phone numbers and your reference number are on the medical plan options chart. Have your reference number ready and say you are an AT&T participant.

More Benefits

When you enroll in a company self-insured medical plan option, you have access to certain additional benefits year-round:

Virtual Care Visits with Included Health

You and your covered eligible dependents can access virtual primary, urgent, and mental health care at no cost to you.

Learn more about virtual care services.

Digital Exercise Therapy

Access digital exercise therapy to help reduce and prevent joint and back pain. You'll get guided exercises, helpful tips, and support from a personal health coach—all at no cost to you.

Learn more about digital exercise therapy with Hinge Health.

Centers of Expertise

Gain access to Centers of Expertise (COEs) for cancer care, certain surgeries, and more.

- **Cancer Care Support:** A dedicated care team, including your own oncology nurse navigator, can help answer questions, coordinate care, and support you or a loved one after a diagnosis. Learn more about cancer care support through Lantern Care.

- **Cell and Gene Therapy:** Receive guidance, education, and access to specialized care centers. A nurse care guide can help you or an eligible dependent understand options and next steps. If you need cell or gene therapy, you must go through the COE for care. Copays, deductibles, and out-of-pocket costs may apply. Learn more about cell and gene therapy through Emerging Therapy Solutions.
- **Surgical Care and Support:** Get help finding high-quality care for many planned surgeries, like those for weight loss and joints. Personalized support is available for you and your covered dependents. Learn more about surgical care and support through Lantern Care.
- **Sleep Support:** Schedule a teleconsult and sleep test at no cost to you, plus get guidance, resources, and treatment options for common sleep issues. Learn more about sleep support through Nox Sleep Care (formerly known as SleepCharge).

Where You Can Find More Information

- Review and compare all your 2027 medical plan (with prescription drug) options and their costs.
- Go to Your Personal Healthcare Team by Included Health to connect with specialists who can help you navigate your medical plan options and find providers in the network who meet your needs.
- View videos to learn more about your benefits.
- Use the Medical Plan Option Evaluator tool. You'll answer a few short questions and receive a suggested plan based on your answers and preferences. You'll see estimated costs and whether your providers on-file are in-network.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Other Protection Benefits



What's Changing for 2027

Here's what's changing with other protection benefits next year:

- **Monthly contributions are decreasing:** If you enroll in critical illness insurance, accident insurance, or hospital indemnity insurance, you will pay less per month in 2027.
- **The health screening benefit will be removed:** If you enroll in critical illness insurance, the $50 annual benefit for completing an eligible screening will no longer be available.
- **New limit on divorce services:** If you enroll in the legal plan, your benefit for these services will be limited to 30 hours.

Your other protection benefits have two parts: ancillary benefits and identity theft protection. Let's review both.

Ancillary Benefits

AT&T continues to offer ancillary benefits through MetLife:

- Critical illness insurance
- Accident insurance
- Hospital indemnity insurance
- Legal plan

If you are not currently enrolled in any ancillary benefits, you can choose coverage for 2027 during Annual Enrollment. Otherwise, your next opportunity to enroll will be during the next Annual Enrollment period—unless you experience a qualified status change (e.g., getting married or divorced, having a baby, etc.).

If you are currently enrolled in any of these benefits and wish to continue with no changes for 2027, you do not need to take action during Annual Enrollment. Visit metlife.com/info/att for details.

How You Pay

Your contributions will be made through after-tax payroll deductions. However, employees on unpaid disability or a leave of absence will be billed and required to make payments directly with the AT&T Benefits Center.

Critical Illness Insurance

Your Critical Illness Insurance Benefit

With critical illness coverage, you may eligible to receive a lump-sum payment upon verified diagnosis of a covered condition to use as you see fit. The money is paid directly to you and can be used for anything, including everyday expenses.

What Your Benefit Includes

You can choose either $10,000 or $20,000:

- You and your spouse/partner are eligible to receive 100% of the amount you choose.
- Covered children are eligible to receive 50%.

Children up to age 26 are automatically covered when you enroll yourself or yourself and your spouse/partner. Special rules apply for disabled children over age 26.

Autism Spectrum Disorders Benefit

For autism spectrum disorders diagnosed after you enroll and your coverage takes effect, MetLife will pay 25% of the critical illness coverage amount.

What Else You Should Consider

- You will not have to answer any medical questions when you enroll.
- You can keep your coverage if you change jobs or retire.
- You can use your payment to cover amounts not paid by your medical plan option, such as deductibles, coinsurance, and copays.

Where You Can Find More Information

- Visit metlife.com/info/att for a list of what's covered.
- For complete terms and conditions of your benefits, please see your Summary Plan Description (SPD).
- Review your coverage options and pricing when you complete 2027 Annual Enrollment.

Accident Insurance

Your Accident Insurance Benefit

Get help with unexpected costs, including expenses your medical plan option may not cover.

What Your Benefit Includes

Accidents can be costly. Accident insurance includes 150 covered conditions, medical services, and treatments associated with an accident that could trigger benefits to be paid to you or an eligible family member. The money is paid directly to you, not your doctor or hospital, and you can use it however you want.

You can choose Low or High coverage.

What Else You Should Consider

- You will not have to answer any medical questions when you enroll.
- You can keep the coverage if you change jobs or retire.
- Have kids under 18? Accident insurance helps cover common mishaps like sports injuries and bike accidents. If a covered injury happens during organized sports, you may receive 25% more.
- This benefit works well with other medical plan options because you can use your payment to cover amounts not paid by your medical plan option, such as deductibles, coinsurance, and copays.

Where You Can Find More Information

- Visit metlife.com/info/att for a list of what's covered.
- Review your coverage options and pricing when you complete 2027 Annual Enrollment.

Hospital Indemnity Insurance

Your Hospital Indemnity Insurance Benefit

Unexpected hospital stays can lead to expenses that add up quickly. When you're admitted to the hospital for planned or unplanned reasons, hospital indemnity insurance pays a flat amount for the day you are admitted and a per-day amount for each covered hospital stay. Help cover things like deductibles, copays, or bills at home. The money is paid directly to you and can be used however you need.

What Your Benefit Includes

A hospital stay can mean extra costs—both medical and everyday expenses. Receive a one-time payment to help cover things like deductibles, copays, out-of-network care, or bills at home, such as rent, car payments, or child care. The money is paid directly to you and can be used however you need.

What Else You Should Consider

- You will not have to answer any medical questions when you enroll.
- You can keep your current coverage if you change jobs or retire.
- Expecting a baby in 2027? Hospital indemnity insurance can help with your delivery-related costs.
- This benefit works well with other medical plan options because you can use your payment to cover amounts not paid by your medical plan option, such as deductibles, coinsurance, and copayments.

Where You Can Find More Information

- Visit metlife.com/info/att for a list of what's covered.
- For complete terms and conditions of your benefits, please see your Summary Plan Description (SPD).
- Review your coverage options and pricing when you complete 2027 Annual Enrollment.

Legal Plan

Your Legal Plan Benefit

Get access to legal counsel for a wide range of personal legal matters for you, your family, and your parents.

What Your Benefit Includes

For a monthly fee, get unlimited access to a network of attorneys for covered legal needs. There are no waiting periods, deductibles, or claim forms. Coverage includes you, your family, and your parents.

What Else You Should Consider

- You can create wills, living wills, and powers of attorney online in as little as 15 minutes. Just answer a few questions about you, your family, and your assets, and your documents are ready right away.
- You can keep your coverage if you change jobs or retire.

Where You Can Find More Information

- Visit metlife.com/info/att for additional details, including pricing and a full list of covered services.
- For complete terms and conditions of your benefits, please see your Summary Plan Description (SPD).
- Review pricing when you complete 2027 Annual Enrollment.

Identity Theft Protection

Your Identity Theft Protection Benefit

You can help protect your identity—and your family—with identity theft protection.

What Your Benefit Includes

- It looks for signs of identity theft across public records, transactions, social media, and more.
- You can lock your credit to help stop fraudsters from opening accounts in your name.
- If identity theft happens, a specialist will work with you until it is restored.

Visit idwatchdog.com/myplan/ATT for more details and information about cost.

What Else You Should Consider

- When you enroll, your family is also protected.
- ID Watchdog shares limited, non-identifiable usage information with AT&T so AT&T can manage and improve the program. This information does not include your financial details. By enrolling, you consent to this information sharing.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Your 2026 Prescription Deadlines



This article does not apply to those enrolled in a Fully-Insured Managed Care Option (FIMCO), such as an HMO.

For 2026 prescription drug copays or coinsurance to apply, submit eligible prescription orders or refills by the deadlines below. These dates apply to both retail and specialty pharmacies.

Note: Allow extra time for mail order prescriptions, especially around holidays.

	Type of Order	Deadline
Dec. 20, 2026	New/refill mail order requests	11 a.m. Central time
	Physician responses to FastStart requests	11 a.m. Central time
Dec. 29, 2026	New/refill prescriptions placed at a Retail or Specialty Pharmacy	11:59 p.m. Central time
Dec. 31, 2026 **Note:** Confirmation will be sent when order is completed.	Refill orders placed by speaking with a CVS Caremark associate	5 p.m. Central time
	Refill orders using CVS Caremark's automated phone system or online order system on caremark.com	11:59 p.m. Central time

Your 2027 copay or coinsurance and deductible will apply to orders completed on or after Jan. 1, 2027. If you have questions, contact CVS Caremark Customer Service at 800-378-8851 or online at caremark.com.

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Surcharges



Working Spouse/Partner Surcharge

What's Changing for 2027

The Working Spouse/Partner Surcharge will be $130 per month in 2027.

During Annual Enrollment, you must certify whether your spouse/partner can get medical coverage through their employer.

What This Means For You

- If your spouse/partner has access to other coverage and you enroll them in AT&T medical coverage, you'll pay the $130 monthly surcharge.
- If your spouse/partner does not have access to other coverage, certify that during Annual Enrollment to avoid the surcharge.
- If you don't certify, the surcharge will be added.

Watch the Surcharges video to learn more.

Tobacco User Attestation

During Annual Enrollment, you must "attest"—or confirm—whether you and/or your spouse/partner use tobacco, even if you don't plan to enroll in AT&T medical coverage.

Your answer will automatically apply to all programs with higher costs for tobacco users, including:

- Medical (Tobacco User Surcharge)
- Supplemental life insurance
- Critical illness insurance

If You Don't Confirm

- Your status will default to "Yes, Tobacco User" for 2027.

Who is a Tobacco User?

Anyone who uses cigarettes, cigars, pipes, e-cigarettes, vapes, or smokeless tobacco once a month or more, on average.

Tobacco User Surcharge

The Tobacco User Surcharge stays at $75 per month in 2027.

Avoid the Surcharge

If you and/or your spouse/partner use tobacco and want to avoid the surcharge, complete the tobacco cessation program—at no cost to you. Learn more in the Benefits Summary.

Note: The surcharge does not apply if you're not enrolled in AT&T medical coverage or if it would cause you to pay more than the full cost of coverage.

For More Information

- Watch the Surcharges video to learn more.
- For more information, see the 2027 AT&T Medical Program Summary Plan Description (SPD).

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Vision Options



Your Vision Benefit

In 2027, your AT&T vision coverage will continue to be administered by EyeMed.

What Else You Should Consider

See the EyeMed website or app for more information about savings with network providers and greater savings at certain retail locations.

Member-Only Special Offers

You may be eligible for special savings, exclusive to EyeMed members. To access them, register online at eyemedvisioncare.com/att or go to the EyeMed app. Sign in, then select Special Offers to shop the savings.

Go to the EyeMed website or use the EyeMed app to search for a provider, book an appointment, and use the cost estimator tool. That way you'll know before you go.

Where You Can Find More Information

- See your program's vision Summary Plan Description (SPD) for details.
- Take time to look at your 2027 AT&T vision plan options and costs. Use this opportunity to explore and choose what's right for you.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.

Wellbeing Program



Your Wellbeing Benefit

The wellbeing program offers tools and activities to support your physical, financial, emotional, and social wellbeing. You choose what matters most to you and focus on where you want or need help.

Examples include:

- Tracking steps, sleep, and nutrition.
- Participating in company and peer challenges.
- Completing wellbeing journeys for movement, stress, resilience, nutrition, finances, and more.
- Taking assessments, like sleep check-ins or financial snapshots.
- And more!

What Your Program Includes

Manage your wellbeing program activities, benefits, and resources through the AT&T Benefits Center website or the Alight Mobile app.

Get Started

- Visit the Wellbeing 101 page to explore the program, learn how to connect an activity tracker, and get tips.
- Download the Alight Mobile app from the Apple App Store or Google Play. Select **AT&T** and sign in with your AT&T Benefits Center credentials.

New participants and eligible spouses/partners can register on the website or app and create a username and password. If your spouse/partner is not listed as your dependent, call the AT&T Benefits Center at 877-722-0020 to add their information and set up access.

What Else You Should Consider

Whether you incorporate the wellbeing program into your daily life or use it sporadically, the wellbeing program is here for you 24/7.

To receive important wellbeing reminders and program information, sign up for text messages.

Where You Can Find More Information

- Review the wellbeing program FAQs to get answers to common questions.
- See personalized wellbeing content, health insights, and more.

To understand the full terms and conditions of your benefits, review your official plan documents. These include your Summary Plan Description and any Summaries of Material Modifications. You can find them in the Legal Notices tab. If you are enrolled in a Fully-Insured Managed Care Option, such as an HMO, check with your carrier for any Evidence of Coverage documents.