

*Transition
Guide*
for AT&T Long-Term
Disability Recipients
and Dependents

what's changing

You are receiving this information because:

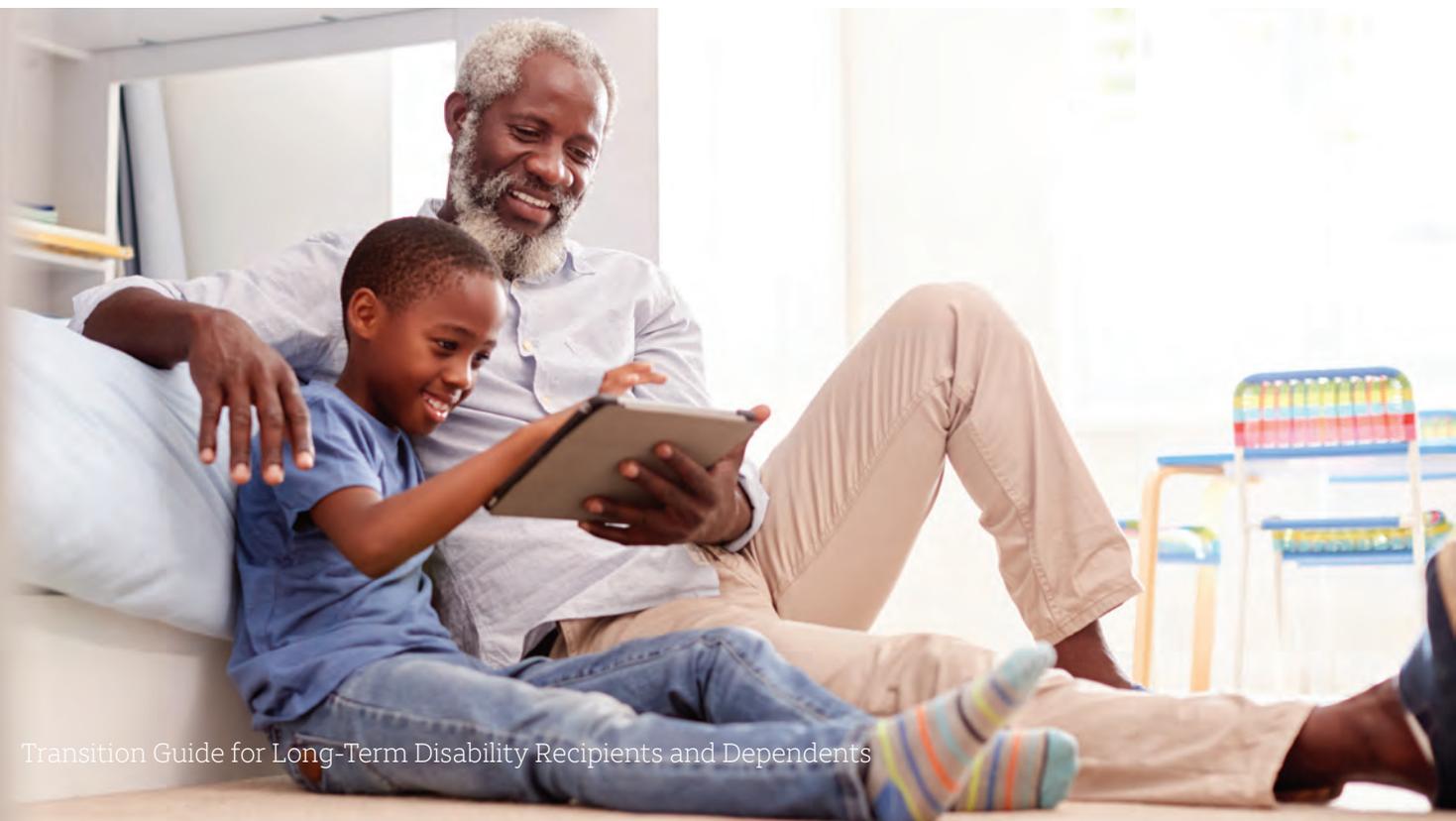
- you are a Medicare-eligible former AT&T employee receiving long-term disability benefits, or
- you are a Medicare-eligible dependent of a former AT&T employee receiving long-term disability benefits, and
- for the first time, you can enroll in health coverage through Alight Retiree Health Solutions (Alight) or the AT&T Group Medicare Advantage (PPO) plan administered by UnitedHealthcare®.

What is Alight Retiree Health Solutions?

- It is a private insurance marketplace where you compare coverage, carriers and prices.
- You can select individual coverage to supplement Medicare Parts A and B, including medical, prescription drug, dental and vision.
- And you get help from a licensed Benefits Advisor to select the coverage that best meets your needs.

When do I need to take action?

Start today! Read this Transition Guide. And take advantage of the resources available to help you learn, prepare and enroll.



Who is eligible?

The information in this guide applies to any individual who is a Medicare-eligible former AT&T employee receiving long-term disability benefits or a Medicare-eligible dependent of a former employee receiving long-term disability benefits. Those who are not Medicare-eligible may be offered coverage through the AT&T group health plans if they meet eligibility requirements.

What if I have health coverage outside of AT&T?

If you are enrolled in medical or prescription drug coverage outside of AT&T, be sure to contact Alight and ask a Benefits Advisor how this will impact the ability to purchase coverage through Alight as well as any special enrollment deadlines that may apply.

What if some family members are not Medicare-eligible?

If you are the long-term disability recipient and are Medicare-eligible*, but have dependents who are not, their eligibility for coverage under the AT&T group plans is contingent upon your enrollment in coverage through Alight or the AT&T Group Medicare Advantage (PPO) plan administered by UnitedHealthcare. Enrollment options would include a medical, prescription drug, vision or dental plan. **If you do not purchase at least one plan through Alight or the AT&T Group Medicare Advantage (PPO) plan, your dependents are not eligible for coverage under the AT&T group medical, dental and vision plans.**

**Medicare-eligible individuals diagnosed with End Stage Renal Disease may be eligible to continue coverage under the AT&T group health plans. Contact the AT&T Benefits Center at 877-722-0020 (TTY 711), 7 a.m. – 7 p.m. Central time, Monday through Friday, for more information.*

This Transition Guide refers only to your 2022 retirement health benefits. AT&T reserves the right to change your health benefits at any time.



IMPORTANT: THIS APPLIES ONLY TO INDIVIDUALS TO WHOM THIS LETTER AND GUIDE WERE DIRECTLY MAILED.

The National Council on Aging (NCOA) recommends Alight because they meet or exceed NCOA's Standards of Excellence for Medicare brokerage services.



learn

Right now, learn the basics



This Transition Guide provides the basic information you need to understand about Alight and the upcoming enrollment.

For a different way to learn, you can visit myexchangeconnection.com/att, created exclusively for AT&T Medicare-eligible individuals and dependents by Alight. *No password is required so you, your family members, and trusted advisors can easily access the site.*

The website provides:

- **The 2022 Alight guide to Medicare**, which will help you learn more about the basics of Medicare, including the types of insurance coverage available to supplement your Medicare benefits.
- **Videos:** View short, informative videos about the different types of Medicare plans available, prescription drug coverage, the enrollment process, and help after you enroll. 
- **Webinar:** You will probably have some questions about the new enrollment process and coverage options that are available. To help answer those questions, we encourage you to view a recorded webinar hosted by Alight.
- **FAQs and other important documents:** These detailed materials can help you through the process.

prepare

Next, prepare for your appointment

Meet by phone with a Benefits Advisor. Your appointment letter provides details on how to contact Alight and the date and time for your prescheduled telephone appointment with a Benefits Advisor.

During your appointment time, a Benefits Advisor will call you directly and help you enroll in healthcare coverage.

Follow the instructions in your appointment letter to confirm or reschedule your appointment with a Benefits Advisor.

Medicare regulations will not allow Alight to keep this appointment unless you confirm it at least five business days in advance.

To enroll in coverage through Alight, you must be a Medicare-eligible former AT&T employee receiving long-term disability benefits or a Medicare-eligible dependent of a former AT&T employee receiving long-term disability benefits who is eligible for Medicare Parts A and B as your primary coverage. To enroll in medical coverage through Alight, you must be enrolled in Medicare Parts A and B.

If you are not already enrolled in Medicare Parts A and B, contact the Social Security Administration (SSA) today at ssa.gov or by calling 800-772-1213 (TTY 800-325-0778). The SSA will explain the step-by-step process to enroll, including any forms that must be completed by you and returned to the SSA. If your employer-sponsored coverage is from AT&T, the AT&T Benefits Center (877-722-0020) will complete any sections that require employer information. Representatives are available 7 a.m. – 7 p.m. Central time, Monday through Friday.

enroll

Choose your coverage

Review your options and enroll in coverage during your telephone appointment with a Benefits Advisor.



A Benefits Advisor will call you during your confirmed, scheduled appointment time and take you through each of the enrollment steps.

You also have the option to complete most of the enrollment online on your own, but you'll need to speak with a Benefits Advisor to confirm the choice you made online.



questions?

Benefits Advisors are happy to answer your questions. Here are some of the questions they're most frequently asked.

Access

Do I have to go online, or can I just talk to a Benefits Advisor? Conversely, do I have to talk to a Benefits Advisor, or can I do everything online?

You don't have to go online if you don't want to. You can complete all the steps you need by reading the print materials sent to you and talking one-on-one with a Benefits Advisor. Should you choose to, you can complete nearly all the steps you need online. However, you may need to speak briefly by phone with a Benefits Advisor. The Centers for Medicare and Medicaid Services (CMS) govern the activities of Alight. CMS requires that each individual who enrolls through Alight (whether enrolling online or by calling the service center) listens to and confirms a series of questions related to the enrollment and provides their voice signature as the final step.

Who can I talk to if I have questions?

You can call Alight now at 800-928-8027 (TTY 711), 8 a.m. – 8 p.m. Central time, Monday through Friday, to speak with a Customer Service Associate (CSA). For questions regarding coverage options, the CSA can set up an appointment for you to speak with a Benefits Advisor. For questions about the AT&T Group Medicare Advantage (PPO) plan, you can call a dedicated UnitedHealthcare representative at 866-819-3448 (TTY 711), 8 a.m. – 8 p.m. local time, 7 days a week.

Appointment

Do I need to attend the appointment with a Benefits Advisor? How long will my appointment last?

We recommend attending your appointment with a Benefits Advisor to walk you through the steps to explore your options for 2022 coverage. Generally, your appointment will last 60 to 90 minutes.

Coverage options

How many coverage options will I have? When will I know the carriers who will be offered through Alight?

You can see the plans and prices available to you on the Alight website at retiree.alight.com/att. If you have questions about the options available to you, please contact a Benefits Advisor.

Does AT&T choose the policies that are offered through Alight?

No. Individual policies available for enrollment through Alight, including their administration and claims processing, are not designed, sponsored or endorsed by AT&T.

What happens to my other coverage, such as CarePlus and life insurance, when I begin participating in a policy offered through Alight in 2022?

Your eligibility for CarePlus and life insurance benefits from AT&T is unaffected by the introduction of Alight. You will receive an annual enrollment guide and confirmation statement for any benefits that may still be available to you through the AT&T Benefits Center. Please note that enrollment dates may be different.



If my dependent and I are both Medicare-eligible, do we have to enroll in the same Medicare plan through Aight, or can we enroll in separate Medicare plans?

You and your dependent can enroll in separate insurance policies through Aight or the AT&T Group Medicare Advantage (PPO) plan administered by UnitedHealthcare. For example, you can enroll through Aight and your dependent can enroll in the AT&T Group Medicare Advantage (PPO) plan.

What to watch for

You will receive mailings from the AT&T Benefits Center about CarePlus coverage and basic Life Insurance, if applicable, as well as coverage available for members of your family who are not yet Medicare-eligible.

You will also receive mailings from Aight regarding individual healthcare coverage. If a piece of mail has **AT&T Benefits Center, Aight** or **AT&T Group Medicare Advantage (PPO) plan** on it, you should open it.

Medicare-required language

Because the market for individual health coverage for Medicare-eligible individuals is regulated by the Centers for Medicare & Medicaid Services (CMS), there is language that is required on certain materials to comply with CMS regulations and help protect your interests. CMS requirements can also change, and there may be additional language required in the future. This is just one example of what you might see.

- **“Medicare has neither approved nor endorsed this information.”**

There are more FAQs available at myexchangeconnection.com/att

get support

Benefits Advisors

Alight connects you directly with specially trained and certified Benefits Advisors (licensed insurance agents). Benefits Advisors will help you find the healthcare coverage that best meets your needs.

*Benefits Advisors are paid by Alight to assist you, but receive **no compensation to enroll you in a specific insurance coverage**, so you can be sure they will help you make a choice that's right for you.*

Connect with us

It's easy to feel confident about your decisions when you have an advisor every step of the way. But that's not all. There are several ways to learn, prepare and enroll. No matter how you like to connect...



Benefits Advisor
800-928-8027
(TTY 711)



**Website for AT&T
Medicare-eligible individuals and
Medicare-eligible dependents**
Resources and information:
myexchangeconnection.com/att
Enrollment actions:
retiree.alight.com/att



Printed information
sent to you via U.S. Mail.



Webinar

View a recorded webinar at myexchangeconnection.com/att, from the comfort of your home. You'll get step-by-step guidance on the actions you need to take and details about Medicare.

Medicare has neither reviewed nor endorsed this information.

Alight Solutions is not affiliated with the offering or administration of the AT&T HRA. Please contact AT&T for details about this plan.

Alight Health Market Insurance Solutions, Inc., is contracted to represent insurance plans in your state. California Agency License Number: OE97576, Arkansas Agency License Number: 100102657, DBA in North Dakota: Alight Health Insurance Agency Solutions, Inc., Fictitious Name in New York: Alight Health Insurance Agency.

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