



AT&T
Integrated Disability
Service Center Guide

Revised May 2009



NIN 78-17010

Important information about:

- Disability claims
- Workers' compensation
- Work restrictions and job accommodations

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WHERE TO GET MORE INFORMATION

AT&T INTEGRATED DISABILITY SERVICE CENTER (IDSC)

 866-276-2278

 Monday through Friday from 7 a.m. to 7 p.m. Central

 866-224-4627
Toll-free (general)

 866-856-5065
Toll-free (appeals)

For AT&T Southeast (legacy BellSouth)

 866-299-4151
Toll-free (claims)

 888-488-9547
Toll-free (appeals)

DISABILITY STATUS WEB SITE

The Disability Status Web site provides secure online access to the status of your disability benefits claim(s) under your disability benefits plan.

→ hronestop.att.com (from work) or through access.att.com (from home). Choose Your Benefits and then Your Important Benefits Links to find the Disability Status Web site.

Note: You will need your ATTUID and passphrase.

AT&T BENEFITS CENTER

Contact the AT&T Benefits Center regarding eligibility for health and life insurance benefits.

 877-722-0020 (domestic)

 847-883-0866 (international)

 Monday through Friday from 7 a.m. to 7 p.m. Central

BENEFITS INFORMATION

While you're out on disability, updated benefits information will be sent to your home address on file. You can access benefits information on the Your Benefits section of HROneStop at hronestop.att.com (from work) or through access.att.com (from home).

If you have any HR or payroll questions, contact HROneStop at 888-722-1787.

DISABILITY SUMMARY PLAN DESCRIPTION (SPD)

You can view your company's SPD by visiting the AT&T Benefits Center Web site:

→ <http://resources.hewitt.com/att>

FAMILY MEDICAL LEAVE ACT (FMLA) HROneStop

→ hronestop.att.com (from work) or through access.att.com (from home)

 888-722-1787 (say "FMLA" when prompted)

FIDELITY SERVICE CENTER

For legacy SBC and AT&T Mobility employees

For information on your pension or savings plans

 800-416-2363

 Monday through Friday from 7:30 a.m. to 11 p.m. Central

PENSION

AT&T Pension Service Center

For legacy AT&T employees

 800-736-7779

→ <https://www.attpsc.com>

 Monday through Friday from 8 a.m. to 5 p.m. Central

AT&T Benefits Center

For AT&T Southeast Region (legacy BellSouth) employees

 877-722-0020

WORKERS' COMPENSATION WEB SITE

→ hronestop.att.com (from work)

Choose Quick Reference and Contacts and then Workers' Compensation. Click on Risk Management/Workers' Compensation Web site, and then go to Workers' Comp Tool Kit.

Note: You will need your ATTUID and intranet PIN.

Helmsman Management Services (Liberty Mutual) for Workers' Compensation Claims

AT&T Southwest region employees' claims reported on or before June 30, 2004, in Arkansas, Oklahoma and Texas:

 800-300-0110

 Monday through Friday from 8 a.m. to 5 p.m. Central

AT&T Southwest region employees' claims reported on or before June 30, 2004, in Kansas and Missouri:

 800-835-6279

 Monday through Friday from 8 a.m. to 5 p.m. Central

AT&T West region employees' claims reported on or before June 30, 2004, in California:

 800-281-1120

 Monday through Friday from 8 a.m. to 5 p.m. Pacific

About This Guide

Refer to this guide when you are absent from work because of an illness or injury or if you are in need of a job accommodation. This guide will take you through the process of applying for short-term disability (STD) benefits, filing a workers' compensation claim and arranging for your return to work and/or requesting job accommodations.

General information in this guide is provided on how to work with the AT&T Integrated Disability Service Center (IDSC) when handling your disability claim(s). This guide is neither an official plan document nor a summary plan description (SPD). For detailed information, refer to your specific company's disability benefits plan identified in the "Disability Benefits Plan Participants" section beginning on page 16. If there is any conflict between this guide and official plan documents, the official plan documents supersede.

What Is the AT&T Integrated Disability Service Center?

The AT&T Integrated Disability Service Center (IDSC) is administered by Sedgwick Claims Management Services (Sedgwick CMS), and their various team members administer the following:

- Claims for short-term disability (STD) and long-term disability (LTD) benefits under AT&T's disability benefits plans
- Workers' compensation claims
- The process of returning to work following a disability or an on-the-job injury absence
- Requests for workplace restrictions and for job accommodations because of a medical condition with a duration of more than 10 business days

Note: For AT&T Southeast region (legacy BellSouth) nonmanagement employees, all requests for restrictions or job accommodations made within 30 working days of an approved STD claim should be referred to the IDSC case manager who administered the employee's STD claim. Requests made after 30 working days will follow the accommodation process like all other AT&T employees.

Quick Reference

How to Make a Claim for Disability or Workers' Compensation Benefits

Employee

- Inform your supervisor of an absence because of an illness or on-the-job injury.
- Contact the IDSC at 866-276-2278 to initiate a claim for disability benefits as soon as you become aware of the need to take an absence of eight or more consecutive calendar days.

IMPORTANT

All claims for benefits must be reported within 60 days of your first day of absence from work.

All on-the-job injuries, regardless of whether you seek medical treatment or have lost time, must be reported to your supervisor, who, in turn, is required to contact the IDSC to report the claim.

- If needed, locate a treatment provider for your on-the-job injury on the Workers' Compensation Web site. (Refer to page 3 for directions on how to access the site.)

California Residents: If you have predesignated a treating provider, you can schedule an appointment with that doctor. Otherwise, your supervisor will need to locate a provider on the Workers' Compensation Web site at <https://spsf05.web.att.com/sites/RiskMgmt/Workers%20Compensation/default.aspx>, and go to the SBR Provider Look Up.

- Complete two Authorization for Release of Protected Health Information forms, which are included in your initial packet. Send one completed form to your treatment provider and one to the IDSC.
- Follow your treatment provider's instructions and treatment plan.
- Provide medical documentation to the IDSC within the required time frame.

- Provide any payment required by your treatment provider in order to furnish medical documentation associated with your disability claim to the IDSC.
- Advise your treatment provider to expect a telephone call from the IDSC.
- Notify the IDSC of any changes in your medical condition or treatment provider for your disability claim. For your workers' compensation claim, notify the IDSC before changing treatment providers.
- Refer to your disability benefits plan SPD for applicable requirements and follow them.
- Undergo medical or psychological evaluation(s), if requested by the IDSC.
- Notify the IDSC and your supervisor of any changes in your address and/or telephone number.

Supervisor

- Contact the IDSC immediately to initiate a workers' compensation claim for your employee's on-the-job injury. All incidents should be reported to the IDSC regardless of whether the employee seeks medical treatment or has lost time.
- Enter proper time-coding, and monitor pay accuracy.

For California residents: Provide your employee with Form B-386 within 24 hours of the on-the-job injury.

- Advise your employee to call the IDSC to initiate a claim for disability benefits as soon as you become aware of his/her need to take an absence of eight or more consecutive calendar days.

Note: All claims for short-term disability benefits must be reported *within 60 days* of the employee's first day of absence from work because of illness or injury.

- If needed, locate a treatment provider for your employee's on-the-job injury on the Workers' Compensation Web site. (Refer to page 3 for directions on how to access the Web site.)

For California residents: If the employee has properly completed a written predesignation of a treating provider, please refer the employee to that provider. Otherwise, refer the employee to a provider located on the Worker's Compensation Web site.

- Verify specific details about the workers' compensation accident, if applicable.
- Upon receipt of the Reported Disability Claim Notice from the IDSC, verify that all information is accurate.

Employee's Treatment Provider

- Provide the IDSC with medical documentation for disability and/or workers' compensation in order to substantiate the claim, including a description of what specifically is preventing the employee from working. Medical documentation can be provided to the IDSC either over the telephone or in writing; however, if provided over the telephone, the IDSC may still require written documentation.

Case Manager

- Provide an email notification of the reported disability claim to the employee's supervisor.
- Gather and process all necessary information for processing the disability and/or workers' compensation claim.
- Contact the employee's supervisor to verify claim information, confirm job duties and review the potential for transitional work.
- Contact the treatment provider to collect medical information and to schedule a return-to-work date, if applicable.
- Contact the employee to advise him/her of the status of his/her claim.
- Upon approval or denial of the claim, send written documentation to the employee and the supervisor.
- Facilitate the return-to-work process, if applicable.
- Arrange for medical or psychological evaluations, if applicable.

What the Customer Service Unit Does

- Answers questions about your disability, workers' compensation and job accommodation claim(s), such as the date your medical information must be received by the IDSC, the status of your claim and/or the date you return to work.
- Assists you with questions about your disability benefits plan.
- Assists you with locating a treatment provider for an on-the-job injury, if needed.

The Process of Returning to Work

Employee

- Notify the IDSC of your return to work.
 - Notify your supervisor and the IDSC of your ability to return to work.
- or*
- Notify the IDSC if you believe that additional time off is needed for recovery, and provide additional medical information to support your request.

Supervisor

- Accommodate temporary job restrictions when reasonable.
- Consult with your Employee Relations Manager (ERM) regarding job accommodations.
- Notify the IDSC of the employee's return to work.
- If the employee returns to work with temporary restrictions, cover the Transitional Work Program (TWP) with employee by using the TWP acknowledgement form. (This excludes AT&T Southeast nonmanagement employees).

Employee's Treatment Provider

- Notify the IDSC of the employee's ability to return to work either with or without restrictions.
- or*
- Notify the IDSC of the employee's need for additional time off, and provide additional medical information to support the request.

Case Manager

- Initiate the process for approval of any additional time off for recovery.
- Facilitate discussions with the employee's supervisor regarding any work restrictions or job accommodations.
- Facilitate discussions with the treatment provider regarding any work restrictions or job accommodations.
- Provide email notification to the employee's supervisor with any agreed-upon work restrictions or job accommodations.
- Notify the employee of his/her return-to-work date and any work restrictions or job accommodations.

Fast-Track Disability Processing

The AT&T Integrated Disability Service Center (IDSC) has Fast-Track claims processing that allows routine disability benefits claims — such as childbirth, certain surgeries, or noncomplicated short-duration illness (an illness not expected to exceed the usual recovery time) — to be authorized by a disability specialist over the telephone.

The Fast-Track process reduces the amount of time you spend getting the appropriate documentation from your treatment provider. If your claim is approved, the Fast-Track process will ensure that payroll is notified in a timely manner to avoid a delay in receiving your disability benefit.

Here's how it works:

- You call the IDSC at 866-276-2278 to report your disability benefits claim as soon as you become aware of the need to take an absence of eight or more consecutive calendar days.
- The disability specialist obtains relevant medical information from you and verifies the information with your treatment provider.
- Once the disability specialist verifies the information, he/she approves or denies your claim and notifies you and your department immediately.
- If the claim does not qualify for Fast-Track status, your claim will be reviewed and assigned to the appropriate disability case manager.

Disability Benefits Determinations

Duration and Amount

Your disability benefits plan is designed to provide benefits only if, due to an illness or injury, you qualify for short-term disability benefits as defined by the short-term disability benefits plan or program in which you participate. Your case manager considers your medical diagnosis and the duties you could perform to determine the length of a disability period.

The duration of your disability benefits is based on the medical information your treatment provider(s) gives to your case manager. Your case manager may discuss the recommended length of absence for the disability with your treatment provider.

The length of time during which you are eligible to receive either full- or partial-pay disability benefits under your disability benefits plan is based on your Term of Employment (formerly Net Credited Service (NCS) or Seniority) and the terms of your disability benefits plan. In general, the greater your Term of Employment, the longer you will receive full-pay benefits instead of partial-pay benefits. Be sure to review your disability benefits plan SPD for detailed information.

Information Needed for Approval

Either you or your treatment provider will need to submit medical information in order to support your disability benefits claim. At times, a treatment provider might believe that an extended absence as a result of your disability is warranted. Your treatment provider must provide objective medical information to your case manager that includes, but is not limited to, the severity of your condition and functionality in order to support the diagnosis.

To facilitate the approval process of your disability benefits claim, medical reports should include the following information in addition to the other information necessary to establish your disability claim:

- Current symptoms
- Other medical conditions that might affect or lengthen your recovery period
- Existing abnormalities or deficiencies
- Results from physical examinations
- Observations made by your treatment provider during office visits/therapy sessions
- Findings from a formal mental-status examination, including clinical presentation and interaction
- Diagnostic tests and their results (for example, lab results, X-rays and MRIs)
- A treatment plan
- Any prescribed medications and your response to those medications
- Complications, if any
- Level of functionality (restrictions and limitations)
- Documentation that supports the rationale that your treatment provider used when determining your level of functionality
- A description of the impact that your level of functionality has on your ability to perform your job and other daily activities

If your treatment provider does not know what information is needed, then your case manager can help. It is important that you inform the IDSC if you have multiple treatment providers — for example, therapists and specialists.

Note: Only the IDSC has the authority to determine whether you have a disability that qualifies you for benefits under your company's disability benefits plan.

Continuation of Disability Benefits

The IDSC monitors your condition in order to verify that you return to work at the end of your approved period of absence. If you have not returned to work, either you or your treatment provider must provide your case manager with additional objective medical information to support your need for continued disability benefits.

The case manager will review the additional medical information to determine whether you qualify for an extension of disability benefits payments and will either approve or deny those benefits. Once the IDSC makes a determination of your benefits, you and your supervisor will be notified.

Denial of Disability Benefits

If your case manager determines that the medical information submitted by your treatment provider does not support the approval of short-term disability under the terms of your plan, your disability benefits may be denied or discontinued.

If you do not meet the Term of Employment specified in your plan, you are not eligible for short-term disability benefits. Your benefits may also be denied if you do not file your claim *within 60 days* of injury or illness.

You should consider all of your options in case your request for disability benefits is not approved.

- Contact your supervisor to discuss your intent to return to work.
- Contact the IDSC to appeal the denial of your claim.
- If you are eligible and have time available under the Family Medical Leave Act (FMLA), discuss applying for FMLA with your supervisor to protect your time away from work.

What Happens If Your Claim Is Denied

If the IDSC determines that your medical information does not support disability benefits under the terms of your plan, your claim will be denied. Your case manager will call you to explain why your claim was denied and the process to appeal the IDSC's decision. You will also receive a letter in the mail that outlines the reasons for the denial and provides information about the appeal process. The IDSC will also notify your supervisor of the denial.

Offsets to Disability Benefits

Your disability benefits may be offset (reduced) by other sources of income that are available to you, such as State Disability Insurance (SDI) and workers' compensation. You should refer to your disability benefits plan SPD for more information about sources of income that may offset your disability benefits.

If Social Security Disability Insurance (SSDI) is an applicable offset under the terms of your plan and you need assistance with the application process, your case manager may refer you to the company's preferred vendor, Allsup, Inc., for assistance with your application at no cost to you.

State Disability Insurance

Employees working in California, New York, New Jersey, Hawaii, Puerto Rico or Rhode Island are eligible to receive State Disability Insurance (SDI). If you work in one of these states and you qualify for short-term disability (STD) under your disability benefits plan, you must apply for SDI.

STD payments make up the difference between your SDI payment and your full- or partial-pay amount for disability benefits; therefore, the amount of SDI you receive will be deducted from your STD payment. If you are receiving partial-pay STD payments and the amount you receive from SDI is more than your partial-pay amount, you will not receive STD payments.

Note: If you do not apply for SDI, the IDSC will assume that you did and will estimate the offset amount and deduct it from your STD payment until the IDSC receives written verification from the state.

Be sure to apply for SDI in a timely manner. If your SDI claim is denied because of late filing, any disability benefits you receive will be reduced by the estimated amount of SDI benefits you would have received if you had filed on time.

Your SDI payment is paid by a separate check from your local state disability agency or policyholder.

Contact your local state disability agency or policyholder if you have questions about the SDI application or SDI payments.

Workers' Compensation

If you qualify for sickness or accident disability under your company disability benefits plan because of an on-the-job injury, you may be eligible for workers' compensation benefits. When a workers' compensation claim is made, the IDSC reviews it to determine if you are eligible for disability under the terms of your plan. Even if your workers' compensation benefits are approved, the IDSC will not automatically approve disability for all or any period of your workers' compensation absence. This is because your disability benefits are determined in accordance with the provisions outlined in your disability benefits plan.

Note: Your workers' compensation benefits will be an offset to your disability benefit.

Similar to how State Disability Insurance (SDI) is paid, if your workers' compensation benefits are more than your partial-pay disability benefits amount, you may not receive a disability payment.

Your disability benefits payment is provided by your company and will be processed through the same payroll system used before going on disability (either a check or direct deposit). Your workers' compensation benefits are sent to your home as a separate check from the workers' compensation administrator.

Note: Refer to the "Where to Get More Information" section for your workers' compensation administrator. Workers' compensation coverage is available to all employees as provided under the laws of their state.

Reporting an Incident

Any injury or illness may be compensated under workers' compensation if it occurred in the course of performing your job duties. Your supervisor must report the incident to the IDSC immediately so an investigation may begin to determine compensability. Your supervisor cannot determine whether workers' compensation applies to the incident.

The IDSC, as administrated by Sedgwick CMS, is the workers' compensation administrator for AT&T. The IDSC will determine whether your claim will be accepted under the workers' compensation laws in your state.

If you have another job with a non-AT&T company and are working while receiving workers' compensation, you must notify your case manager immediately to determine if this will affect your workers' compensation benefits.

Receiving Treatment or Filling Prescriptions

The IDSC can provide a referral to a treatment facility for your workers' compensation incident. You should schedule appointments for treatment on nonscheduled work hours or as close as possible to the beginning or end of your work day. Meet with your supervisor if you need to arrange time away from work to attend an appointment for treatment.

If you need to fill a prescription for your workers' compensation claim, contact your pharmacy and mention that AT&T is part of the Medical Services Company (MSC) program that participates in Express Scripts for Prescription Medications.

- If your pharmacy does participate in this program, it will fill your prescription and send the bill directly to the IDSC address on page 10.
- If your pharmacy does not participate in this program, or if you are having difficulty filling your prescription, contact your case manager immediately.

All bills related to prescriptions handled under the Express Scripts program and bills you receive for workers' compensation should be sent to the following address:

AT&T Integrated Disability Service Center
P.O. Box 14627
Lexington, KY 40512-4627
866-224-4627 (fax)

Returning to Work

When you are released to return to work, contact your case manager immediately. If your treatment provider releases you to return to work with restrictions or limitations, your case manager will work with you, your treatment provider and your supervisor to determine if a return to work with restrictions can be negotiated.

Work Restrictions and Job Accommodations

After an Absence From Work

After you have been absent from work because of an illness or injury, you may need work restrictions or accommodations at your job site in order to return to work. If you are still receiving disability benefits and/or workers' compensation, you may request work restrictions or accommodations.

Here's how:

- You or your treatment provider should contact your case manager at 866-276-2278 to request work restrictions or job accommodations.
- Your case manager may contact you for current medical information or additional information, if necessary, before verifying it with your treatment provider.
- Your case manager may refer a request for work restrictions or accommodations to a Return-to-Work Specialist, if applicable.

- The IDSC notifies your department as to whether work restrictions or job accommodations are necessary and the recommended duration.
- Your department considers the request for restrictions or accommodations and notifies the IDSC whether or not the work restrictions or accommodations can be provided.

If your department accommodates your temporary work restrictions or accommodations, you will be considered a Transitional Work Program (TWP) participant. (This excludes AT&T Southeast (legacy BellSouth) non-management employees.) Your supervisor should provide you with information about the TWP when you return to work. The IDSC monitors your case to determine:

- When you no longer need the work restrictions or accommodations.
- Whether the work restrictions or accommodations become permanent.
- Whether the medical information provided by your treatment provider no longer supports the work restrictions or accommodations.

If your department is unable to accommodate your work restrictions or accommodations, the IDSC monitors your case to determine:

- Whether the work restrictions or accommodations change and whether they can be accommodated by your department.
- Whether you no longer need the work restrictions or accommodations.
- Whether the work restrictions or accommodations become permanent.

If You Have Not Been Absent

If your illness, injury or condition does not require your absence from work, but you have work restrictions or accommodations recommended by your treatment provider with a duration of greater than 10 business days, a job accommodation specialist will assist you with your request. For work restrictions or accommodations lasting fewer than 10 days, contact your supervisor.

If your illness, injury or condition requires a reduced work schedule that does not qualify for disability benefits under your disability benefits plan and you are not eligible under the Family Medical Leave Act (FMLA), a job accommodation specialist will assist you with your request. Please discuss a request for temporary reduced work hours with your supervisor or attendance manager, and refer to your disability benefits plan SPD to determine whether your plan provides for partial-disability benefits.

Here's how a request for any work restriction or job accommodation (with a duration of greater than 10 business days) is made:

- Inform your supervisor that you need work restrictions or a job accommodation.
- Contact the IDSC at 866-276-2278 to request work restrictions or accommodations.
- You'll be assigned a job accommodation specialist to work with you, your treatment provider and your department.
- Your job accommodation specialist contacts you for your current medical information and then verifies that information with your treatment provider.
- Your job accommodation specialist notifies you and your department as to whether work restrictions or accommodations are medically necessary and what the recommended duration is for the restrictions or accommodations.
- Your department will consider the request for restrictions or accommodations and notify your job accommodation specialist if the work restrictions or accommodations can be provided. Your department may consult with your Employee Relations Manager if it has questions about the request.

If the work restrictions or accommodations are temporary (less than six months), you will be considered a Transitional Work Program (TWP) participant. (AT&T Southeast Region (legacy BellSouth) non-management employees are excluded from the TWP program.) Your supervisor should provide you with information about the TWP. If your department is able to provide the work restrictions or accommodations, your job accommodation specialist will monitor your case to determine:

- When you no longer need the work restrictions or accommodations.
- Whether the work restrictions or accommodations become permanent. If your department is unable to accommodate any permanent restrictions or accommodations, an escalation to the associate director of job accommodations will be made.
- Whether the medical information provided by your treatment provider no longer supports the work restrictions or accommodations.

Note: If a claimant wants to self-identify as an individual with a disability, he/she can visit this Web site: <http://ebiz.sbc.com/mandatoryolicies/eoo.html>.

Frequently Asked Questions

Q1: Why should I sign the Authorization for Release of Protected Health Information forms and provide them to my treatment provider?

A1: Under the guidelines of the Health Information Portability and Accountability Act (HIPAA), your treatment provider must have your permission in order to release any information relating to your illness or injury to the IDSC. You provide that permission by signing the release-of-information forms. If the IDSC does not receive medical information to support your claim, it may affect your ability to receive disability benefits.

Q2: Are there medical conditions that do not qualify for disability benefits?

A2: There are a number of conditions or procedures that, generally speaking, don't require more than seven consecutive calendar days of total or partial absence from work, which means that they would not qualify for disability benefits. These include:

- Abortion
- Acute hemorrhoids
- Breast biopsy (benign)
- Dilation and curettage (D&C)
- Dizziness
- Fatigue
- Flu/cold
- Gum surgery (periodontal)
- Headaches/migraines
- Kidney stones
- Laparoscopic abdominal surgery, including appendectomy, gallbladder removal (cholecystectomy), tubal ligation, pelvic adhesions, laparoscopic hernia repair
- Miscarriage
- Normal pregnancies before delivery
- Sore throat
- Stomach flu
- TMJ syndrome
- Tooth extractions
- Vasectomy

In these situations, the IDSC will not certify disability benefits unless review of the medical evidence submitted by your treatment provider supports your claim for disability benefits and the absence lasts beyond any required incidental absence (or waiting) period. Check your disability benefits plan SPD for more information.

Q3: Who is considered a treatment provider?

A3: Your treatment provider is your doctor or other licensed health professional, based on the definition in your disability benefits plan, who provides medical care to you during your absence from work and who provides medical information to the IDSC.

Q4: How can the Customer Service Unit help me?

A4: The Customer Service Unit can answer questions about your disability benefits, workers' compensation and job accommodation claim(s), including the date your medical information must be received by the IDSC, whether the IDSC received your medical information, the status of your claim, your return-to-work date and other important claim information. The Customer Service Unit can also answer questions about your disability benefits plan.

Q5: What will be the impact on my benefit payments if the IDSC does not receive my medical information in a timely manner?

A5: It is your responsibility to ensure that your medical information is submitted to the IDSC. The IDSC will contact your treatment provider to request the necessary medical information for the period of absence. If the IDSC does not receive your information in time to meet the scheduled benefit payment cutoff, any check you receive might not include your benefit payment. If this happens and your claim is later approved, any benefits that may be due to you will be included on your next check. If you have additional questions, contact your supervisor.

Q6: What happens if my disability benefits are denied and I am not able to return to work?

A6: You should contact your supervisor to discuss your intent to return to work or to appeal the denial of your claim with the IDSC.

Q7: What happens once a claim for disability benefits has been approved?

A7: Once the IDSC approves your claim for disability benefits, you must comply with the requirements in your disability benefits plan. These requirements may include:

- Remaining under proper care of an appropriate treatment provider
- Being available for contact by the IDSC staff and providing information when requested
- Requesting and receiving permission from the IDSC if you wish to recuperate or travel away from home
- Having a medical or psychological evaluation, if requested by the IDSC
- Not working other jobs (including family-owned or home-based businesses)
- Not attending school.

You are responsible for understanding these compliance guidelines as outlined in your disability benefits plan SPD. Failure to comply with these requirements may result in discontinuation of your disability benefits and the loss of disability benefits for each day that you do not comply.

Q8: How does the FMLA work with STD benefits?

A8: FMLA will run concurrently with your approved STD benefits as long as you are eligible and have FMLA time available. However, if your STD benefits are denied, you will need to work with your supervisor in order to apply for FMLA.

Q9: Can I travel while I'm receiving disability benefits?

A9: Generally, travel isn't compatible with a disability absence. Your activity while receiving disability benefits should be consistent with recovering and returning to work. Traveling while disabled could aggravate your impairment, interrupt your medical treatment and/or increase the length of your absence.

We do recognize that some employees may need to travel while on disability absence, so each travel request is evaluated by case managers.

If you need to travel while receiving disability benefits, contact the IDSC at 866-276-2278. The IDSC will either grant permission or deny your request and may contact your treatment provider. (Refer to Question 7 for information on the consequences of not receiving permission before traveling.)

Note: Your specific disability benefits plan may prohibit travel for any reason. Please refer to your disability benefits plan SPD.

Q10: What happens to my health and life insurance benefits while I'm receiving disability benefits?

A10: Your health and life insurance benefits will not be affected. Any required contributions for your benefits plans (for example, medical coverage, life insurance, flexible spending accounts or savings plan) will be deducted from your disability benefits payment. Please refer to the applicable plan SPD for more information.

Q11: How will my payroll contributions be made for health and life insurance if I am not receiving a sufficient amount of STD benefits?

A11: In the event that your STD benefits are insufficient to cover your health and life insurance contributions and you have an outstanding balance of more than \$50 in contributions, the AT&T Benefits Center will send you a payment notice advising you that you will need to make payments directly to the health and life insurance eligibility and enrollment vendor for your monthly contributions in order to continue those benefits.

Q12: If my STD is for child delivery, is there anything I need to do to enroll my child for health and life benefits?

A12: To enroll your child (effective on the date of birth) for health and life benefits, you must contact the AT&T Benefits Center at 877-722-0020 *within 31 days* of the date of birth. If you do not enroll your child within 31 days, coverage will begin on a later date depending on the medical and life benefits plan in which you are enrolled and the terms and conditions of eligibility and enrollment as outlined under that plan. Please refer to your applicable medical or life benefits plan SPD for more information.

Q13: What happens if I immediately become disabled again after I return to work?

A13: You may be eligible for disability benefits on the first day of absence. You should refer to your disability benefits plan SPD for more information.

Q14: Do I have to call the IDSC when my treatment provider releases me to return to work?

A14: Yes. When you are released to return to work, contact the IDSC and your supervisor. In the event that your treatment provider identifies restrictions, the IDSC will work with you and your supervisor to facilitate a safe and healthy return.

Q15: What happens if my disability benefits period has ended but I can't safely drive? How can I get to work?

A15: Transportation to work is always your responsibility. For example, if an employee experiences car trouble, has his or her license suspended or experiences other events that would affect his or her ability to drive, he or she must make other transportation arrangements. Likewise, your company is not responsible for your transportation following a disability or during a period of partial disability.

Q16: Who monitors my case to determine that the necessary accommodations are made for me when I return to work?

A16: On approved cases, the IDSC will continue to monitor the case until your full-time/full-duty return to work.

Q17: How can I check on the status of my disability claim?

A17: Call the IDSC at 866-276-2278. The interactive voice response (IVR) system allows you to track your disability claim and to obtain:

- Your claim status for pending, approved or reinstated disability claims and accepted workers' compensation claims for up to the last five claims.
- The last date information was received on your claim.
- The best estimated return-to-work date.
- The date the last check was paid on LTD and workers' compensation claims.

Note: All calls regarding denied claims will automatically be transferred to the Customer Service Unit.

If you are unable to obtain the needed information from either the IVR or the Customer Service Unit, leave a voice mail message for the case manager. Your call will be returned within one business day. You can also access the Disability Status Web site through HROneStop (from work) or by going through access.att.com (from home). Choose Your Benefits and then Your Important Benefits Links to find the Disability Status Web site.

Q18: If my disability benefits are denied, how can I obtain a copy of my disability claim file?

A18: In the event that your disability claim is wholly or partially denied, you can submit a written request to the IDSC to have a copy of your denied disability claim sent to you.

Q19: Will my supervisor be advised of the condition of my illness or injury if I am receiving disability benefits?

A19: A supervisor can ask about the status of your claim and of your expected return-to-work date while you are receiving disability benefits. Because of patient confidentiality, the IDSC will not provide a supervisor with any medical information, including the reason for your absence or your treatment provider's information.

Q20: What happens if I'm not able to return to work and I have exhausted my 52- or 26-week STD benefits period based on the terms of my disability benefits plan?

A20: Before the end of your approved STD benefits period, your case manager will consult with your treatment provider and evaluate your condition to determine whether you're eligible to receive long-term disability (LTD) benefits. Because the requirements for eligibility for LTD differ from those for STD, additional information will be required from you and from your treatment provider. In some cases, an independent medical evaluation may be required, and others require an application form to be submitted. Please refer to your disability benefits plan SPD for more details.

Q21: How long do I need to be back at work before becoming eligible for a new 52- or 26-week STD benefits period based on the terms of my disability benefits plan?

A21: In general, you must return to work on your regular schedule for at least 13 weeks (or 26 continuous weeks, as appropriate). Please refer to your disability benefits plan SPD for details.

Q22: Does my disability benefits plan provide pay if I take time off for treatment-provider appointments after I have returned to work?

A22: The disability benefits plan does not provide pay if you take time off work for treatment-provider appointments. Certain workers' compensation evaluative appointments may be covered by workers' compensation. The determination for coverage under workers' compensation will be made by the workers' compensation specialist.

Q23: If my treatment provider requires payment for providing medical information to the IDSC, who is responsible to make the payment?

A23: You are responsible for making the payment for providing medical information for your disability claim, if required by your treatment provider.

Q24: What is the required Term of Employment (formerly NCS or Seniority) that I have to meet?

A24: The amount of Term of Employment required in order to be eligible for disability benefits depends on your specific plan. Please refer to your disability benefits plan SPD for more information.

Q25: What happens if I do not file my claim immediately?

A25: It is the sole responsibility of the employee to report his or her claim. Please refer to your Plan or Program document for more information. Most plans require that the claim be reported within 60 days of illness or injury. Failure to report the claim within a timely manner can impact your eligibility for benefits.

Disability Benefits Plan Participants

Disability Plan	Employees	Company Name		
AT&T Disability Benefits Plan	Bargained Employees on STD on Dec. 31, 2008	AT&T Video Services, Inc. (AT&T Southwest Region)		
AT&T Disability Income Program	Bargained	AT&T Messaging, LLC (AT&T Southwest Region) AT&T Operations, Inc. (AT&T Southwest Region) AT&T Services, Inc. (AT&T Southwest Region) AT&T Video Services, Inc. (AT&T Southwest Region) SBC Global Services, Inc. (AT&T Midwest Region – COS) SBC Global Services, Inc. (AT&T West Region) SBC Internet Services (National Internet Contract Tier 1 and Tier 2) SBC Long Distance (AT&T West Region) Southwestern Bell Advertising Group, Inc. Southwestern Bell Telephone Company Southwestern Bell Yellow Pages, Inc.		
AT&T Disability Income Program	Nonbargained (All management and nonmanagement nonunion): <ul style="list-style-type: none"> • Legacy SBC companies • BellSouth Telecommunications, Inc. or SBC Internet Services, Inc. (in the AT&T Southeast region) in the Premise Technician, or Dispatcher job title 	<table border="0"> <tr> <td style="vertical-align: top;"> Alascom, Inc. Ameritech Publishing, Inc. Ameritech Services, Inc. AT&T Advertising, L.P. AT&T Billing Southeast, Inc. AT&T Capital Services, Inc. AT&T Consulting Solutions, Inc. AT&T Corp. AT&T Global Communications Services, Inc. AT&T Global Network Services, LLC AT&T Government Solutions, Inc. AT&T Intellectual Property Marketing, Inc. AT&T Investment Management Corp. AT&T Labs, Inc. AT&T Management Services, L.P. AT&T Messaging Services, Inc. AT&T Mexico, Inc. AT&T Network Procurement Management, LLC AT&T Operations, Inc. AT&T Puerto Rico, Inc. AT&T Services, Inc. AT&T Solutions, Inc. </td> <td style="vertical-align: top;"> AT&T Technical Services Company, Inc. AT&T Video Services, Inc. AT&T of the Virgin Islands, Inc. AT&T World Personnel Services, Inc. Berry Network, Inc. BellSouth Advertising & Publishing Company BellSouth Communication Systems, LLC BellSouth Corporation BellSouth Entertainment, LLC BellSouth Intellectual Property Corporation BellSouth Intellectual Property Management Corporation BellSouth Long Distance, Inc. BellSouth Telecommunications, Inc. CCPR Services, Inc. Cingular Wireless Employee Services, LLC Illinois Bell Telephone Company Indiana Bell Telephone Company, Incorporated Intelleprop, Inc. Intelligent Media Ventures, LLC </td> </tr> </table>	Alascom, Inc. Ameritech Publishing, Inc. Ameritech Services, Inc. AT&T Advertising, L.P. AT&T Billing Southeast, Inc. AT&T Capital Services, Inc. AT&T Consulting Solutions, Inc. AT&T Corp. AT&T Global Communications Services, Inc. AT&T Global Network Services, LLC AT&T Government Solutions, Inc. AT&T Intellectual Property Marketing, Inc. AT&T Investment Management Corp. AT&T Labs, Inc. AT&T Management Services, L.P. AT&T Messaging Services, Inc. AT&T Mexico, Inc. AT&T Network Procurement Management, LLC AT&T Operations, Inc. AT&T Puerto Rico, Inc. AT&T Services, Inc. AT&T Solutions, Inc.	AT&T Technical Services Company, Inc. AT&T Video Services, Inc. AT&T of the Virgin Islands, Inc. AT&T World Personnel Services, Inc. Berry Network, Inc. BellSouth Advertising & Publishing Company BellSouth Communication Systems, LLC BellSouth Corporation BellSouth Entertainment, LLC BellSouth Intellectual Property Corporation BellSouth Intellectual Property Management Corporation BellSouth Long Distance, Inc. BellSouth Telecommunications, Inc. CCPR Services, Inc. Cingular Wireless Employee Services, LLC Illinois Bell Telephone Company Indiana Bell Telephone Company, Incorporated Intelleprop, Inc. Intelligent Media Ventures, LLC
Alascom, Inc. Ameritech Publishing, Inc. Ameritech Services, Inc. AT&T Advertising, L.P. AT&T Billing Southeast, Inc. AT&T Capital Services, Inc. AT&T Consulting Solutions, Inc. AT&T Corp. AT&T Global Communications Services, Inc. AT&T Global Network Services, LLC AT&T Government Solutions, Inc. AT&T Intellectual Property Marketing, Inc. AT&T Investment Management Corp. AT&T Labs, Inc. AT&T Management Services, L.P. AT&T Messaging Services, Inc. AT&T Mexico, Inc. AT&T Network Procurement Management, LLC AT&T Operations, Inc. AT&T Puerto Rico, Inc. AT&T Services, Inc. AT&T Solutions, Inc.	AT&T Technical Services Company, Inc. AT&T Video Services, Inc. AT&T of the Virgin Islands, Inc. AT&T World Personnel Services, Inc. Berry Network, Inc. BellSouth Advertising & Publishing Company BellSouth Communication Systems, LLC BellSouth Corporation BellSouth Entertainment, LLC BellSouth Intellectual Property Corporation BellSouth Intellectual Property Management Corporation BellSouth Long Distance, Inc. BellSouth Telecommunications, Inc. CCPR Services, Inc. Cingular Wireless Employee Services, LLC Illinois Bell Telephone Company Indiana Bell Telephone Company, Incorporated Intelleprop, Inc. Intelligent Media Ventures, LLC			

Disability Plan	Employees	Company Name
AT&T Disability Income Program <i>(continued)</i>	Nonbargained (All management and nonmanagement nonunion): <ul style="list-style-type: none"> • Legacy SBC companies • BellSouth Telecommunications, Inc. or SBC Internet Services, Inc. (in the AT&T Southeast region) in the Premise Technician, or Dispatcher job title 	L.M. Berry and Company Michigan Bell Telephone Company Nevada Bell Telephone Company The Ohio Bell Telephone Company Pacific Bell Directory Pacific Bell Information Services Pacific Bell Telephone Company PBD Holdings, dba AT&T Digital Graphics ADvantage SBC Global Management Support, LLC SBC Global Services, Inc. SBC International, Inc. SBC Internet Services, Inc. SBC Long Distance, Inc. SNET America, Inc. SNET Diversified Group, Inc. SNET Information Services, Inc. The Southern New England Telephone Company Southwestern Bell Advertising Group, Inc. Southwestern Bell Telephone Company Southwestern Bell Yellow Pages, Inc. Stevens Graphics, Inc. Teleport Communications New York TCG of the Carolinas, Inc. TCG New Jersey TCG New Jersey, Inc. TCG Rhode Island TCG Services, Inc. TC Systems, Inc. Wisconsin Bell, Inc.
AT&T Sickness and Accident Disability Benefits Plan for Occupational Employees	Bargained (Occupational) and CNRP	AT&T Corp. AT&T Global Communications Services, Inc. AT&T Global Network Services, LLC AT&T Labs, Inc. AT&T Operations, Inc. AT&T of Puerto Rico, Inc. AT&T Services, Inc. AT&T Solutions, Inc. AT&T of the Virgin Islands, Inc. Teleport Communications New York TCG of the Carolinas, Inc. TCG New Jersey TCG New Jersey, Inc. TCG Rhode Island TCG Services, Inc. TC Systems, Inc.

Disability Plan	Employees	Company Name
Pacific Telesis Group Comprehensive Disability Benefits Plan	Bargained	AT&T Services, Inc. – (AT&T West Region) AT&T Video Services, Inc. dba, Pacific Bell Home Entertainment – (AT&T West Region) Nevada Bell Telephone Company Pacific Bell Directory Pacific Bell Telephone Company PBD Holdings dba, AT&T Digital Graphics ADvantage
Ameritech Sickness and Accident Disability Benefits Plan	Bargained	Ameritech Publishing, Inc. Ameritech Services, Inc. AT&T Services, Inc. (AT&T Midwest Region) Illinois Bell Telephone Company Indiana Bell Telephone Company, Incorporated Michigan Bell Telephone Company The Ohio Bell Telephone Company SBC Global Services, Inc. (AT&T Midwest Region) (excluding COS) SBC Long Distance, Inc. (AT&T Midwest Region) Wisconsin Bell, Inc.
AT&T East Disability Benefits Program	Bargained	AT&T Operations, Inc. (AT&T East Region) AT&T Services, Inc. (AT&T East Region) SNET America, Inc. SNET Diversified Group, Inc. SNET Information Services, Inc. The Southern New England Telephone Company
BellSouth Short Term Disability Plan	Bargained (Includes NMNUs)	AT&T Billing Southeast, Inc. BellSouth Advertising & Publishing Company BellSouth Communication Systems, LLC BellSouth Corporation BellSouth Entertainment, LLC BellSouth Long Distance, Inc. BellSouth Telecommunications, Inc. L. M. Berry Company Berry Network, Inc.

Disability Plan	Employees	Company Name
AT&T Mobility Disability Benefits Program	Bargained (Excludes CWA District 6)	Cingular Wireless Employee Services, LLC CCPR Services, Inc.
Cingular Wireless Disability Benefits Plan for Bargained Employees	Bargained Employees of CWA District 6	Cingular Wireless Employee Services, LLC

