

IAPE TNG/CWA LOCAL 1096

PROPOSAL NO. 14

Select Issues

November 28, 2023

(The Union reserves the right to modify or withdraw any of the following proposals during bargaining. These proposals are made without prejudice to the Union's position regarding the proper interpretation of the existing contract language or existing practices or policies. All proposals are part of a complete package, and no agreements reached during bargaining are final until agreement has been reached on all issues.)

All Union proposals remain unchanged except as provided below. All Union responses to Company proposals remain unchanged except as modified below.

Health Insurance

Premiums. For calendar year 2024, the Company may increase all plan premiums by up to 0.25% of Employee salary. For future benefits plan years, the Company may increase plan premiums by an amount equal to the average CPI for the 12-month period ending June 30 of each year. For example: if CPI for the 12-month period ending June 30, 2024 = 5%, the Company may increase the premium for POS Employee + Spouse coverage from 4.6% to 4.83%. **Proposal Unchanged.**

Canadian Premiums. For 2024, preserve 2023 health insurance premiums for IAPE-represented employees working in Canada. **Proposal Unchanged.**

Plan Design. The union offers the following counter proposals for maximum plan design changes. Areas where the union's proposal differs from the company's are highlighted in **red text**.

Choice POS II

| Choice POS II Provision | 2023 Plan Design | Dow Jones Proposal | IAPE Proposal |
|--------------------------------|-------------------------|---------------------------|------------------------|
| In-network plan design | | | |
| Deductible | \$600 / \$1,200 | \$700 / \$1400 | \$700 / \$1,400 |
| PCP Visit | \$35 copay | \$40 | \$40 |

| | | | |
|--------------------------------|------------------------|------------------------|------------------------|
| Specialist Visit | \$50 copay | \$50 | \$50 |
| Emergency Room | 20% after \$300 copay | 20% after \$300 copay | 20% after \$300 copay |
| Coinsurance | 20% | 25% | 20% |
| OOP Maximum (Incl. Deductible) | \$4,000 / \$8,000 | \$5000/\$10,000 | \$5000/\$10,000 |
| OOP Maximum Type | Embedded | Embedded | Embedded |
| Pharmacy plan design | | | |
| Rx Deductible | N/A | N/A | N/A |
| Retail Rx: Generic | \$10 copay | \$15 copay | \$15 copay |
| Retail Rx: Brand | 30% coinsurance | 30% coinsurance | 30% coinsurance |
| | (\$30 min, \$75 max) | (\$40 min, \$85 max) | (\$40 min, \$85 max) |
| Retail Rx: Non-formulary | 50% coinsurance | 50% coinsurance | 50% coinsurance |
| | (\$50 min / \$100 max) | (\$60 min / \$110 max) | (\$60 min / \$110 max) |
| Mail Rx | 2 times retail | 2 times retail | 2 times retail |
| Rx OOP Maximum | \$3,000 / \$6,000 | Combined with medical | Combined with medical |

CDHP - Tentative Agreement

| CDHP Provision | 2023 Plan Design | 2025/26 Tentative Agreement |
|---------------------------------|---|--|
| Employer Funding Amount | \$500 / \$1,000 | \$500 / \$1,000 |
| In-network plan design | | |
| Deductible* | \$1,500 / \$3,000 (1,600/3,200 in '24) | \$2,000 / \$4,000 |
| PCP Visit | 20% after deductible | 20% after deductible |
| Specialist Visit | | |
| Emergency Room | | |
| Coinsurance | 20% | 25% |
| OOP Maximum (Incl. Deductible)* | \$4,000 / \$8,000 | \$5,000 / \$10,000 |
| | (OOPM for individuals on a family contract will be embedded at \$7,900) | (OOPM for individuals on a family contract will be embedded at the lesser of the family OOPM and the |

| | | |
|-----------------------------|--|---|
| | | individual maximum allowable OOPM, as defined by the ACA) |
| OOP Maximum Type | Aggregate | Aggregate |
| Pharmacy plan design | | |
| Rx Deductible | Combined with medical | Combined with medical |
| Retail Rx: Generic | Preventive Rx at no cost | Preventive Rx at no cost |
| Retail Rx: Brand | 20% after deductible (\$75 max for generic and brand, \$100 max for non-formulary) | 20% after deductible (\$100 max for generic and brand, \$125 max for non-formulary) |
| Retail Rx: Non-formulary | | |
| Mail Rx | 2 times retail | 2.5 times retail |
| Rx OOP Maximum | Combined with medical | Combined with medical |

* OOPM for individuals on a family contract will be embedded at the lesser of the family OOPM or the individual maximum allowable OOPM, as defined by the ACA

Basic Choice - Tentative Agreement

| Basic Choice Provision | 2023 Plan Design | 2025/26 Tentative Agreement |
|--------------------------------|---|---|
| Employer Funding Amount | N/A | N/A |
| In-network plan design | | |
| Deductible | \$3,000 / \$6,000 | \$3,500 / \$7,000 |
| PCP Visit | | |
| Specialist Visit | 30% after deductible | 30% after deductible |
| Emergency Room | | |
| Coinsurance | 30% | 30% |
| OOP Maximum (Incl. Deductible) | \$6,000 / \$12,000 | \$7,000 / \$14,000 |
| OOP Maximum Type | Embedded | Embedded |
| Pharmacy plan design | | |
| Rx Deductible | Combined with medical | Combined with medical |
| Retail Rx: Generic | | |
| Retail Rx: Brand | Preventive Rx at no cost 30% after deductible | Preventive Rx at no cost 30% after deductible |
| Retail Rx: Non-formulary | | |

| | | |
|----------------|-----------------------|-----------------------|
| Mail Rx | | |
| Rx OOP Maximum | Combined with medical | Combined with medical |

Future Plan Improvements. Improvements to health insurance coverage that may have a financial impact will be offered to/discussed with the Union. The Union will accept or reject participation in the enhanced benefit within 60 days. **Proposal Unchanged.**

Doula Coverage. The Union is willing to accept a 2025 introduction of this benefit, per the Company’s explanation. (“Since Doula coverage is not ‘medically necessary’ within the Aetna plan, it must be provided outside the Aetna medical plan and it must be a taxable benefit. Note that this will require that employees disclose to the company the fact that they are using the Doula services.”) **Proposal Unchanged.**

Out-Of-Network Mental Health Coverage. Apply in-network reimbursement percentages (subject to the Aetna R&C and other plan terms) for out-of-network providers for mental health services. We understand the issue about finding in-network providers. **Proposal Unchanged.**

Physical Fitness Reimbursement. Modify plan to allow for participation in wellness programs. **Proposal Unchanged.**

Leaves of Absence. Modify the bereavement policy (which will remain part of a list of Company benefits in which IAPE-represented employees participate subject to the Company’s ability to implement future changes without further bargaining) to provide for up to 5 days of leave per death, including the day of the funeral, and to remove restrictions on the familial relationship between the employee and the deceased. **Proposal Unchanged.**

Parental Leave. Remove distinction between primary and secondary caregivers. **Proposal Unchanged.**

Article XXIV - Miscellaneous

Source Protection: Whenever a request or demand, including a subpoena, for the disclosure of information, notes, documents, photograph, video, or other material, or the source thereof, is made of the Company, the Company shall immediately notify all affected employees of the request or demand. Whenever such a request or demand is made directly of an employee, the employee shall immediately notify the Company of the request or demand.

Following such notification, if the employee elects to resist or refuse the demand for information pursuant to a shield law or otherwise, the Company shall provide competent legal counsel to assist the employee in resisting or refusing the demand information.

The Company shall make employees whole for any fines, damages, loss of pay, or loss of benefits resulting from the employee's decision to resist or refuse the demand for information.

Proposal Unchanged.