

## EMPLOYMENT-RELATED EVENTS AFFECTING COVERAGE

Your coverage under the Vision Care Plan will end if certain events occur.

### ***If You Change Your Employment Status***

If your employment status changes from represented to salaried, it will affect your eligibility for Vision Care Plan benefits as follows:

- Coverage under the Vision Care Plan will end on the last day of the month in which your status changes.
- Your status change to a salaried position will make you eligible to participate in the voluntary vision program offered to salaried employees.
- If you are temporarily promoted to a salaried position for a 12-month period or longer, you are eligible to participate in the voluntary vision program offered to salaried employees.

### ***If You Terminate Your Employment***

If you terminate employment for a reason other than layoff, coverage under the Vision Care Plan ends on the last day of the month in which you terminate. You may be able to continue coverage for yourself and your **eligible covered dependents** through **COBRA** (see “Continuing Your Vision Coverage Through COBRA”).

### ***If You Are Laid Off***

If you are laid off, coverage under the Vision Care Plan ends on the last day of the month *following* the month in which your layoff begins. You may be able to continue coverage for yourself and your **covered dependents** through **COBRA** (see “Continuing Your Vision Coverage Through COBRA”).

### ***If You Retire***

Your coverage under the Vision Care Plan ends on the last day of the month in which you retire. You may be able to continue coverage for yourself and your **covered dependents** through **COBRA** (see “Continuing Your Vision Coverage Through COBRA”).

### ***If You Leave the Company and Are Rehired***

If you leave the Company and then return after a break in service, your coverage resumes based on the Vision Care Plan's eligibility rules and the service bridging rules of The Avaya Inc. Pension Plan or The Avaya Inc. Pension Plan for Salaried Employees (see "Who Is Eligible" and "When Coverage Begins").

### ***If You Become Disabled***

You are eligible for coverage under the Vision Care Plan during any period you are eligible to receive benefits under The Avaya Inc. Sickness and Accident Disability Benefit Plan.

You are not eligible for coverage under the Vision Care Plan during any period you are eligible to receive benefits under The Avaya Inc. Long-Term Disability Plan. You may be able to continue coverage for yourself and your **covered dependents** through **COBRA** for a limited period of time (see "Continuing Your Vision Coverage Through COBRA").

Your coverage under the Vision Care Plan will automatically resume on your first day of work upon your return.

### ***If You Take an Approved Leave of Absence***

If you are on an approved leave of absence, you can continue vision care coverage for yourself and your **covered dependents**. In some instances, you will have to pay the full cost. You and your **covered dependents** will be notified of any continuation rights available under **COBRA**.

If you are eligible for an **FMLA** leave under The Family and Medical Leave Act of 1993, as amended, Avaya Inc. will comply with this legislation.