

2025 Benefits Guide

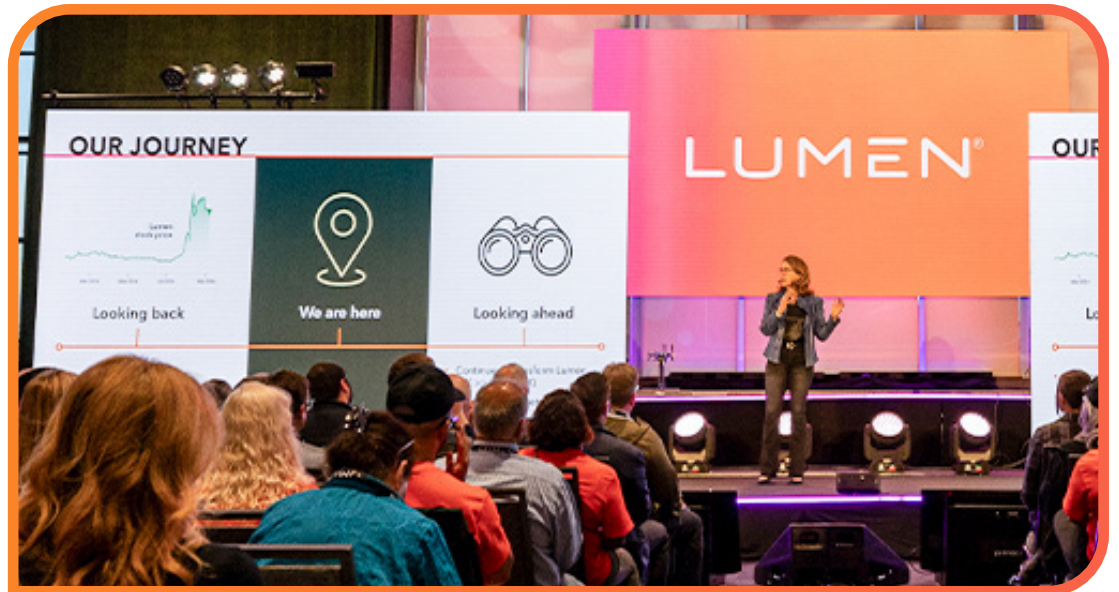
For prospective new hires (U.S.
Employees)

Table of Contents

About Lumen.....	3
Employee classifications and eligibility.....	4
Employee classifications	4
Eligibility.....	4
When benefits begin	4
Eligibility.....	5
Plan and program overviews.....	7
Summary of benefit plans and programs.....	7
Medical plan overviews.....	13
Surest Health PPO, Surest Select Health PPO and HDHP with Optional HSA	13
Dental Plan overviews.....	18
Vision Plan overview.....	19
Life, Accidental Death and Dismemberment, Business Travel Accident	22
Amazing Benefits at Lumen	23

U.S. Reserved Rights:

Lumen reserves the right to amend or terminate any employee policy – with respect to any or all classes of employees – without prior consultation with any employee, subject to any applicable laws and collective bargaining agreements. Lumen has the sole right and discretion to interpret and administer the terms of this Policy, including resolution of any questions regarding its scope, application or meaning. The decision of the Company shall be conclusive and binding on all persons.



About Lumen

At Lumen, we pride ourselves on making amazing happen every day.

Lumen is dedicated to fostering a culture that prioritizes the physical, mental, financial, social, and professional well-being of our employees. Well-being encompasses both feeling good and functioning well, and it is influenced by various factors unique to each individual. The overall well-being of our employees is essential to their success as well as the success of the company.

Lumen equips all employees with the tools and resources needed to thrive both personally and professionally. By providing access to various programs and a supportive community, we aim to cultivate a healthier, happier, and more resilient workforce.

We offer a wide range of Health, Life, and Voluntary Lifestyle benefits to support your overall wellbeing. Beyond the comprehensive benefits package, employees are eligible for additional benefits and perks (such as Employee Concessions, Advocacy Services and more).

Each day, we work with our customers and partners to advocate for and support a brighter, more conscientious future. From advanced solutions that support customer sustainability missions to reducing our own environmental footprint, Lumen is committed to these principles, which unify our beliefs into a cohesive philosophy that guides our actions in all matters.

Additional information can be found on lumenbenefits.com.

Employee classifications and eligibility

Employee classifications

An “employee,” for purposes of all Company benefit plans, programs and policies is an individual who is directly employed by Lumen and is treated and classified as a Company employee for payroll and benefit purposes.

Note: Based on the information below, Union Represented employees should refer to their Collective Bargaining Agreement.

- **Full-time** - Positions which are normally scheduled to work a minimum of 30 hours per week and are classified as Full-time status in the Payroll system. Employees in a Full-time status position are eligible for all employee Health and Life benefits, subject to eligibility requirements and satisfaction of waiting periods. Hours scheduled or worked doesn't determine status position.
- **Part-time** - Positions which employees who are normally scheduled to work at least 20 hours per week and classified as Part-time in the Payroll system are eligible for certain Health benefits, subject to eligibility requirements and satisfaction of waiting periods. Hours scheduled or worked does not determine status position.
- **Regular** - Positions approved for an indefinite period of time are classified as regular.
- **Temporary** - Positions approved for a finite period of time to fill temporary and/or occasional needs, generally less than six months duration are classified as temporary. Employees in this category are eligible for Medical, Employee Assistance Program (EAP) and the Well Connected Wellness Program benefits as required by the ACA but are not eligible for any other Company benefits, PTO, or holidays. Temporary employees will be automatically enrolled in EAP and can participate in the wellness programs. Temporary employees will need to elect medical coverage. Temporary employment should not exceed six continuous months without review by Human Resources, division management and approval by the Vice President of Benefits and Policy.

Eligibility

Please refer to the below employee classifications to determine eligibility in the benefit plan options or programs. Union Represented employees should refer to their Collective Bargaining Agreement.

When benefits begin

- **Regular Full-time, Term Full-time, Regular Part-time, Term Part-time and Seasonal employees** - If hired in Jan. 2025, applicable coverage will be effective on Feb. 1. If hired on or after Feb. 1, 2025, applicable coverage will be effective on the date of hire. Employees will have 30 days to enroll, and coverage will be retroactive to the effective date. Coverage is based on plan and program eligibility and timely enrollment.
- **Temporary Full-time, Temporary Part-time and Incidental employees** - Applicable coverage is effective 91 days from date of hire. Employees will have 30 days to enroll, and coverage will be retroactive to the effective date. Coverage is based on plan and program eligibility and timely enrollment.

If the employee fails to enroll by the deadline, they will automatically default into the Company-paid benefit plans; Employee Assistance Program, Basic Term Life Insurance, Basic/Personal Accidental Death and Dismemberment (AD&D) and Business Travel Accident, and the Well Connected Wellness Program, if eligible.

Note: Employees who are eligible for Disability benefits (Short-term disability and Long-term disability) must complete one year of continuous service before coverage begins.

Eligibility

The below employee classifications determine eligibility in the benefit plan options or programs. Union Represented employees must refer to their Collective Bargaining Agreement.

Employee Classification	Eligibility	Premiums
<p>Full-time or Term Full-time employees</p>	<p>As a Full-time employee, you and your eligible dependent(s) may enroll in:</p> <ul style="list-style-type: none"> • Medical • Dental • Vision • Employee Assistance Program (Emotional Wellbeing Solutions). Employees are automatically enrolled even if not enrolled in a Lumen medical plan; all family members in your household are eligible to participate. • Flexible Spending Accounts (Health Care, and Dependent Day Care) • Health Savings Account (HSA). Available when enrolled in the High Deductible Health Plan with Optional Health Savings Account • Well Connected Wellness Program (Employees don't need to be enrolled in the medical plan to participate in the Wellness Program) • Lifestyle Reimbursement • Disability (Short-Term and Long-Term) • Life Insurance including Accidental Death & Dismemberment and Business Travel Accident (BTA) • Commuter Spending Accounts (Parking and Mass Transit) • Voluntary Lifestyle Benefits 	<p>Depending on how you answer the Tobacco usage and Working Spouse/Domestic Partner statements for the Lumen medical plans will determine whether you will have additional deduction(s). The Tobacco surcharge is \$80 bi-weekly and the Working Spouse/Domestic Partner surcharge is \$100 bi-weekly.</p> <p>If your base pay is less than \$30,000 regardless of how you answer the Working Spouse/Domestic Partner Surcharge statement, you will not be subject to the surcharge. If your base pay changes mid-year and increases to \$30,000 or more, a surcharge may apply based on how you answer the statement.</p> <p>The amount you pay for your medical coverage is determined by your base pay, the medical plan selected, and the coverage level (e.g., Employee only, Employee + Spouse/Domestic Partner, etc.) elected. If your base pay increases or decreases during the year, you may see a change to your bi-weekly premiums at which time you will receive an email notification sent to your personal email address indicating you have an updated Benefit Summary available on the Health and Life website.</p>

<p>Part-time, Term Part-time or Qwest Union Represented Seasonal employees</p>	<p>As a Part-time, Term Part-time or Seasonal employee, you and your eligible dependent(s) may enroll in:</p> <ul style="list-style-type: none"> • Medical • Employee Assistance Program (Emotional Wellbeing Solutions). Employees are automatically enrolled even if not enrolled in a Lumen medical plan; all family members in your household are eligible to participate • Flexible Spending Accounts (Health Care, Limited Purpose Health Care, and Dependent Day Care) • Health Savings Account (HSA). Available when enrolled in the High Deductible Health Plan with Optional Health Savings Account • Well Connected Wellness Program (Employees don't need to be enrolled in the medical plan to participate in the Wellness Program) • Short-term and Long-term Disability (available to Part-time Non-Union employees); not Term Part-time or Seasonal employees. 	<p>Premiums are 150% of the Full-time rates depending on how you answer the Tobacco usage and Working Spouse/Domestic Partner Surcharge statements for the Lumen medical plans will determine whether you will have additional deduction(s). The Tobacco surcharge is \$80 bi-weekly and the Working Spouse/Domestic Partner surcharge is \$100 bi-weekly.</p> <p>If your base pay is less than \$30,000 regardless of how your answer the Working Spouse/Domestic Partner Surcharge statement, you will not be subject to the surcharge. If your base pay changes mid-year and increases to \$30,000 or more, a surcharge may apply based on how you answer the statement.</p> <p>The amount you pay for your medical coverage is determined by your base pay, the medical plan selected, and the coverage level (e.g., Employee only, Employee + Spouse/Domestic Partner, etc.) elected. If your base pay increases or decreases during the year, you may see a change to your bi-weekly premiums at which time you will receive an email notification sent to your personal email address indicating you have an updated Benefit Summary available on the Health and Life website.</p>
<p>Temporary Full-time, Temporary Part-time and Qwest Union Represented Incidental employees</p> <p>Note: > or = 20 hours but <30 hours per week</p>	<p>As a Temporary Full-time, Temporary Part-time or a Qwest Union Represented Incidental employee, you and your eligible dependent(s) may enroll in:</p> <ul style="list-style-type: none"> • Medical • Employee Assistance Program (Emotional Wellbeing Solutions). Employees are automatically enrolled even if not enrolled in a Lumen medical plan; all family members in your household are eligible to participate. • Health Savings Account (HSA). Available when enrolled in the High Deductible Health Plan (HDHP) with Optional HSA 	<p>Premiums are 100% of the total cost</p> <p>Note: The Tobacco Surcharge and Working Spouse/Domestic Partner Surcharge does not apply.</p>

Plan and program overviews

Summary of benefit plans and programs

The below information provides a brief summary of the benefit plans or programs that may be available to you and/or your eligible dependent(s). You can find additional details including Summary Plan Descriptions (SPDs) and Summary of Material Modifications (SMMs) for the benefit plans or programs at lumenbenefits.com.

ALEX is an interactive tool that helps you make a decision on which benefits may be best for your and your eligible dependent(s). ALEX provides estimates and suggestions, but you make the final decision on which plans you want elect.

Option/Program	Benefit information
401(k)	<p>401(k) Plan - Non-Union Employees</p> <p>For newly hired employees, the Plan eligibility date will be your hire date. Once Principal (the 401(k) administrator) has been notified that you are a new employee or newly eligible (via weekly updates), you will receive an enrollment packet via email from Principal containing your 401(k) information. After reviewing this information, you may login to the Principal website and make your plan election. You can begin participating in the Plan as soon as administratively possible after your hire date and enrollment in the Plan. The 401(k) Savings Plan has automatic enrollment at 3%, but you can opt out of the Plan by changing the deferral election to 0% or by electing a different percentage or deferral election within 30 days of employment. Your contributions will begin on the first full payroll following your affirmative election or auto-enrollment.</p> <p>401(k) Investment Options</p> <p>A variety of investment funds are available. Investment options include three different levels of choices to meet your individual needs and goals. These three levels include: Target Date Funds, Core Funds (both passive and actively managed fund options available) and a Self-Directed Brokerage Account through the Personal Choice Retirement Account (PCRA) provided through Charles Schwab. You may direct the investment of your Plan Account into one or any combination of these investment options. Each of the Plan's investment funds offers different opportunities and levels of risk. Choices should be made carefully on the basis of your personal financial situation and goals.</p>
Commuter Spending Account (Mass Transit and Parking)	<p>You can contribute to a Qualified Transportation Account (aka Commuter Spending) that can be used to pay for mass transit (Private or Public) — including passes, fare cards or vouchers for the bus, ferry, rail, subway, or vanpool (not to be confused with carpooling). This account can also be used for qualified parking expenses — including parking vouchers, direct pay parking and pre-tax cash reimbursement as part of your daily commute to and from work (for example, a train station). You can contribute up to \$325 per month on a pre-tax basis for each account: mass transit and parking during the calendar year and then reimburse yourself for expenses incurred. If you remain a Full-Time employee but at any time elect to drop/end your mass transit or parking account and there is still money remaining in the Plan, you will be required to submit claims for reimbursement within six months of the “end date” of the Plan. This is an IRS regulation.</p> <p>Contribution limits are defined by the IRS and are subject to change.</p>
Dental	<p>There are two dental plan options to choose from. However, you can waive your dental coverage. Both of these options cover exams, cleanings and fillings, as well as comprehensive dental work - such as crowns and root canals for covered participants. Both of the dental plan options are offered by MetLife.</p>
Dependent Eligibility	<p>Your dependent(s) will not be enrolled in coverage until they are approved through the Dependent Verification process. You must provide documentation to confirm eligibility under the Plan in a timely manner. If your documentation is not approved, your dependent(s) will not be enrolled.</p>

Option/Program	Benefit information
Employee Assistance Program (EAP) - offered through Emotional Wellbeing Solutions	<p>The EAP provides confidential professional counseling, education, and referral services to you and your family members. EAP provides up to eight (8) Counseling Sessions per situation per year, by either Face-to-Face, Telephonically, or by Video Counseling. Personal counselors will help you decide which counseling option fits your needs. You can review articles, resources and enroll in webinars as well on the EAP website.</p> <p>Important: This benefit is available to all employees and any family members in the household even if not enrolled in any benefit plan.</p>
Flexible Spending Accounts (FSAs)	<p>You must positively enroll each year to contribute to a Dependent Day Care or Health Care (traditional/general purpose, or limited purpose) FSA. Contributions are pre-tax and are fully funded by you. FSA limits are determined by the IRS and are subject to change.</p> <p>Note: If you enroll in the High Deductible Health Plan (HDHP with an Optional Health Savings Account (HSA)) and elect a Health Care FSA, you will be automatically enrolled in the Limited Purpose FSA regardless if you contribute to the Health Savings Account (HSA).</p> <p>Dependent Day Care FSA - You can contribute between \$150-\$5,000 each Plan year. You can use this FSA for eligible out-of-pocket day care expenses for eligible dependent(s) so you (and your spouse, if married) can work or attend school Full-time. Funding is available as contributions are deducted from your paycheck and uploaded to UnitedHealthcare's system after each pay period processes.</p> <p>Traditional/General Purpose Health Care FSA - You can contribute between \$150-\$3,300 each Plan year. You can use this FSA for a range of eligible out-of-pocket health care expenses not covered by medical, prescription drug, dental or vision for you and any eligible dependent(s), even those not enrolled in a Company health care (e.g., medical, dental, or vision) plan option. The amount you elect to contribute is available to use on Jan. 1 of each Plan year.</p> <p>Limited Purpose FSA (for those enrolled in the HDHP) - You can contribute between \$150-\$3,300 each Plan year. You can use this FSA for eligible out-of-pocket dental and vision care expenses, including deductibles, copayments and coinsurance not covered by other plans. Medical and prescription drug expenses are not eligible for reimbursement until your deductible has been satisfied. The amount you elect to contribute is available to use on Jan. 1 of each Plan year.</p>
Health Savings Account (HSA)	<p>HSAs are designed to help you save for qualified medical expenses if you are enrolled in the High Deductible Health Plan (HDHP with Optional HSA), including prescriptions and eligible dental and vision expenses. You can use your HSA money tax free for medical expenses for your dependents whether or not they are enrolled your health insurance. An HSA allows you to set aside pre-tax money from your paycheck to pay for expenses you will have now and in the future. This account rolls over from year to year and the money in the account is 100% yours. You can open up an HSA at any time throughout the year. The effective date will be based on when you are vetted through Optum Bank.</p> <p>Health Savings Accounts are the most tax advantaged account ever created (three tax advantages in one account). Tax deductible, tax free growth, and tax free distribution.</p> <p>Important Note: This program is not a Company-sponsored plan or benefit. It is not a plan covered under the federal law known as "ERISA." The Company has simply chosen to allow Optum Bank to make its programs available to Lumen employees, but please be advised that this is a voluntary program and only you can decide whether the benefits provided are appropriate for you and your eligible dependent(s). You are encouraged to research all suitable alternatives and consult with your personal and financial advisors. The Company is not able to provide you with advice. Your participation is your decision, completely voluntary and at your own expense.</p> <p>You can choose to establish your HSA with any financial institution; however, Lumen partners with Optum Bank to allow your contributions to be set up as pre-tax through bi-weekly payroll deductions.</p>

Option/Program	Benefit information
Imputed Income	<p>Imputed Income is income that the IRS requires you to be taxed on in certain circumstances as noted below:</p> <ul style="list-style-type: none"> • Your company-paid Employee basic life insurance is over \$50,000. • Your company-paid Short-Term Disability election if Post-tax. • You enroll your Domestic Partner or your Domestic Partner’s child/ren under the Medical, Dental and/or Vision plans. • You receive Wellness rewards via gift card (calculated each quarter). • Your company-paid Incentive Award based on a recognition.
Life & Accidental Death & Dismemberment (AD&D)	<p>The Lumen Life and AD&D Insurance Plans provide a wide range of benefits in the event of death or covered losses.</p> <p>Coverage and benefit premium deductions may increase or decrease throughout the year in certain situations (for example, if you have a change in pay or change in age brackets; age brackets are updated every 5 years: 30, 35, 40, 45, etc.).</p> <p>For certain elections, you may be required to provide Evidence of Insurability (EOI).</p>
Lifestyle Reimbursement Program	<p>To promote employee health and wellbeing, we will reimburse employees for a portion of the cost for individual fitness membership and class fees as well as certain activities that promote and support financial, mental, physical, and occupational well-being.</p> <p>All Full-time employees, as well as spouses/domestic partners enrolled in a Lumen medical plan are eligible.</p> <p>Note: The IRS considers this reimbursement a taxable fringe benefit. Applicable taxes will appear under the imputed income section on your paycheck.</p>
Long-Term Disability (LTD)	<p>LTD insurance is designed to pay a monthly benefit to you in the event you cannot work because of a covered illness or injury. This benefit replaces a portion of your income, helping you to meet your financial commitments in a time of need. Supplemental LTD insurance offers you the opportunity to choose a higher amount of LTD coverage.</p> <p>You are automatically enrolled after one year of service and satisfy all other Plan eligibility requirements.</p> <p>The Basic LTD policy is Company paid and provides a basic level of LTD coverage. The Supplemental LTD option is paid by you and provides a higher level of LTD coverage.</p> <p>You are eligible to enroll in Supplemental LTD after completing one year of service, during Annual Enrollment. If you become eligible after Annual Enrollment ends, you will have the opportunity to enroll prior to the end of the Plan year by calling the Service Center.</p> <p>Note: Union Represented employees should refer to their Collective Bargaining Agreement (CBA) for details on paid time off and leave management programs.</p>
Out of Area Plan	<p>If you live outside the HDHP or Surest Plans network area and enroll in a medical plan, you will be automatically enrolled in the Out of Area Plan. The Out of Area Plan is designed to help those who live in rural areas and/or areas that have no access to adequate provider networks and facilities that are contracted with Surest or UnitedHealthcare. For the HDHP, you may be required to pay the provider at the time of service and then submit a medical claim to UHC for processing and reimbursement. Under this plan, you must satisfy your annual deductible first, before the Plan pays 80 percent coinsurance for most covered services. Preventive care services are covered at 100 percent with no deductible. Covered services will be subject to Allowed Amounts charges, and you are responsible for any amount over the Allowed Amount.</p>
Medical Note: If you are an employee eligible for benefits, a resident in Hawaii, and enroll in medical coverage, you will automatically be enrolled in Blue Cross/Blue Shield.	<p>Medical</p> <p>Lumen offers you and your eligible dependents the below medical plan options:</p> <ul style="list-style-type: none"> • Surest Health PPO • Surest Select Health PPO • High Deductible Health Plan (HDHP) with optional Health Savings Account (HSA)

Option/Program	Benefit information
	<p>Surest Plans</p> <p>With the Surest Plans, you can see treatment options and costs before getting treatment or choosing a doctor. With this information, you can make informed decisions and find savings opportunities.</p> <p>How it works:</p> <ul style="list-style-type: none"> Coverage starts at your first doctor’s appointment or prescription fill because the Surest Plans are a \$0 deductible plan. Clear, upfront prices for treatments, doctors and prescription drugs. Know before you go what your health care choices will cost. Get the coverage you’d expect from the UnitedHealthcare Choice Plus national provider network. Copays are lower as an indication of higher-value care, based on quality, efficiency and overall effectiveness. <p>High Deductible Health Plan (HDHP) with Optional Health Savings Account (HSA)</p> <p>You can choose your healthcare providers; however, the Plan pays a greater benefit when you use providers that are in the network.</p> <p>You pay the full cost of the medical expenses until your deductible is met. You can also pay for covered services with money you have set aside in your HSA.</p> <p>For prescriptions that are considered preventive under the Plan, the deductible is waived, and coinsurance applies. For non-preventive medications you will be responsible for the cost of the medication until you have met or satisfied your deductible. To help reduce costs and make filling your medications more convenient, maintenance medications must be filled by mail order. You may also pay for covered services with money you have set aside in your HSA.</p> <p>For more information on the Optional Health Savings Account (HSA), please refer to the HSA section.</p> <p>Note: Temporary Full-time, Temporary Part-time and Incidental employees are not eligible to open up an HSA but can still enroll in the HDHP with Optional Health Savings Account; only the HSA will have no contributions.</p>
<p>Prescription Drug</p>	<p>There is one prescription drug administrator regardless which medical plan you elect; OptumRx. In addition, OptumRx is our mail order administrator. If your medication requires you to go through home delivery (maintenance medication taken regularly such as for diabetes, high cholesterol, hypertension, etc.), you cannot opt-out of using OptumRx. Home delivery is required for the Surest Select Health PPO and the HDHP. Home delivery is not required for the Surest Health PPO.</p> <p>You can use the pricing tool on the following websites based on the medical plan</p> <ul style="list-style-type: none"> HDHP with Optional HSA - Visit the OptumRx website Surest Health PPO and Surest Select Health PPO - Visit the OptumRx website <p>Important: Prescription drug is not a separate plan option. You are automatically enrolled if you elect a Lumen medical plan.</p>
<p>Pension</p>	<p>Once you have five or more years of vesting service under one or more of the Components in the Lumen Combined Pension Plan, you are “vested,” which means you have a right to receive benefits from the Plan.</p>
<p>Paid Time Off Plan - Non-Union and Union Represented Employees</p>	<p>The Paid Time Off (PTO) Plan gives you the flexibility to decide how to use your time away from work. Under this plan you have a bank of hours, accrued each pay period, that you can use for vacation, short-duration illness or injury, family illness or other personal time off. Employees will receive a PTO accrual every pay period, which will increase with your length of service with the Company.</p> <p>Note: Select Non-Union employees have access to the Flexible Time Off program, which gives you the flexibility to take time off or shift schedules as needed with your manager’s approval. Payroll does not track time off for those positions. Exceptions are short-term disability, extended maternity coverage, and time off scheduled through the Family Medical Leave Act. In addition, any absence in excess of ten consecutive business days will require approval from your second level manager.</p>

Option/Program	Benefit information
Short-Term Disability (STD) Plan	<p>Short-Term Disability Benefits provide financial support in cases of a disability lasting longer than seven (7) consecutive full or partial days, but generally not more than 182 days (6 months), which excludes the 7-day wait period.</p> <p>You are automatically enrolled after one year of service and satisfy all other Plan eligibility requirements.</p> <p>If you are a Union Represented Employee, refer to your respective Collective Bargaining Agreement to determine the appropriate STD waiting period (or such similar term describing the required period before payments of STD Benefits commence) and the amount of benefit available.</p> <p>You may elect to have STD paid on a pre-tax basis, which means STD benefits are taxed. If an election is not made, you will default to an post-tax premium basis which means STD benefits are not taxed. Changes between pre-tax to post-tax or vice versa can only be made during Annual Enrollment.</p>
Survivor Benefit Plan* <small>*For active Full-time Non-Union employees only</small>	<p>The Survivor Benefit Plan will pay your eligible designee three months of your base salary in the unlikely event of your death as an active Full-time employee. Refer to the Policy for more details.</p>
Tobacco Surcharge Note: If you are enrolled in the Hawaii Medical Services Association (HMSA) Plan, you will not be subject to the surcharge.	<p>Medical - If you and your eligible dependent(s), if applicable, enroll in a Lumen medical plan and are non-tobacco users or are enrolled in a Company-recognized tobacco cessation program, you are not subject to the tobacco surcharge. If you and your eligible dependent(s), if applicable, enroll in a Lumen medical plan and are tobacco users (just one individual that uses would mean you are tobacco users) and are not enrolled in a Company-recognized tobacco cessation program, you are subject to the \$80 tobacco surcharge, which will be added to your bi-weekly medical cost on your paycheck.</p> <p>What is a Tobacco Product?</p> <p>Tobacco products include but are not limited to the following: chewing tobacco, cigarettes, cigars, e-cigarettes, hookahs, nicotine gels/dissolvables, pipe tobacco, tobacco snuff, vapors and other products associated with tobacco.</p> <p>Voluntary Lifestyle Benefits - Your answer may also impact your rate if you enroll in the Critical Illness Insurance or Universal Life Insurance with Long-Term Care through the Voluntary Lifestyle Benefits Program. Be sure to read and answer each Tobacco Surcharge question as rules differ based on the benefit program.</p> <p>Note: Temporary Full-Time, Temporary Part-Time and Incidental employees are not subject to the Tobacco Surcharge.</p>
Transgender and Gender Diverse Services	<p>The Resource Guide for Transgender and Gender Diverse Services is available to employees and their eligible dependent(s) enrolled in a Lumen medical plan. This guide will include but is not limited to:</p> <ul style="list-style-type: none"> • Family Building; • Transgender-inclusive Healthcare; and • HIV treatment/prevention.
Vacation and Personal Days - Qwest Union Represented Employees	<p>At the beginning of each year you will be provided a set number of vacation and personal days. The exact amount of vacation and personal time you will receive is based upon your Years of Service and employee status.</p>
Vision	<p>There is one vision plan option. However, you can elect to waive your vision coverage. The vision plan is offered by EyeMed (First American Administrators/EyeMed Vision Care, LLC.).</p> <p>You can save money if you select "INSIGHT" (in-network). You can receive access to enhanced benefits and save even more if you choose to visit an in-network PLUS Provider within the INSIGHT network. Your vision care services include but are not limited to contact lenses, eye exams, glasses (frames and lenses), retinal screening and laser vision correction.</p>

Option/Program	Benefit information
Voluntary Lifestyle Benefits	<p>Voluntary Lifestyle Benefits provides you and your eligible dependent(s) with voluntary benefits programs, in addition to your Lumen Health & Life Benefits options, at affordable rates.</p> <p>Critical Illness Insurance and Universal Life Insurance with Long-Term Care benefit premiums are determined based on how you answer the tobacco usage questions during your enrollment.</p> <p>The voluntary programs include:</p> <ul style="list-style-type: none"> • Accident Insurance • Airvet • Critical Illness Insurance • Disaster Insurance • Employee Perks • Home and Auto Insurance • Hospital Indemnity Insurance • Identity & Fraud Protection • Legal Services • Pet Insurance • Purchasing Power • Universal Life Insurance <p>Note: Not all programs are available to all Full-Time employees. Answering the enrollment questions and where you reside will determine your eligibility.</p>
Well Connected Wellness Program	<p>The Well Connected program is designed to help you achieve a state of balance in your personal and professional life. It doesn't matter if you are working on your physical wellness, financial wellness, or another area, the wellness program is designed to help you live an optimal life. The Well Connected program provides access to a number of resources and activities to support your health and performance.</p>
Well Connected Rewards	<p>The Well Connected program can improve your wellbeing and you can earn up to \$600 each Plan year for you or \$1,200 for you and your covered spouse/domestic partner enrolled in one of the Lumen medical plan options. You may select Gift Card or Health Account (Health Savings Account - HSA) for your Well Connected Rewards option based on your medical election.</p> <p>Selecting Gift Card will apply an imputed income calculation that will reflect on your paycheck. In addition, you must follow the Gift Card rules.</p> <p>Selecting Health Accounts will not be taxable; the rewards will be added to your medical account to use for deductible and out-of-pocket expenses. Any rewards contributed to a Health Account apply to the yearly maximum contribution amount and will follow the specific Health Account rules and guidelines.</p> <p>Note: If you are a Company Couple, and your spouse/domestic partner is enrolled as a dependent under your medical plan benefit option, your spouse/domestic partner will only be eligible for wellness rewards in the form of a gift card.</p>
Working Spouse/Domestic Partner Surcharge	<p>You will need to answer the working spouse/domestic partner surcharge question either online or with an advocate through the Service Center if you enroll your spouse/domestic partner in a Lumen medical plan option. If you need to update your Working Spouse/Domestic Partner Surcharge answer, select Edit on the medical page of the Health and Life website or contact the Lumen Health and Life Service Center.</p> <p>A \$100 surcharge per pay period may apply.</p> <p>Note: Temporary Full-Time, Temporary Part-Time and Incidental employees are not subject to the Working Spouse/Domestic Partner Surcharge.</p>

Medical plan overviews

Surest Health PPO, Surest Select Health PPO and HDHP with Optional HSA

This chart is only a snapshot summary of medical benefits.

	Surest Health PPO		Surest Select Health PPO		HDHP with Optional HSA	
HSA Contributions	Not Applicable - Refer to the Flexible Spending Account (FSAs) section of this guide for more information		Not Applicable - Refer to the Flexible Spending Account (FSAs) section of this guide for more information		With Employee-Funded HSA (maximum contribution): <ul style="list-style-type: none"> \$4,300 Employee \$8,550 Employee + one or more dependent(s) enrolled Note: If you are 55 or older, you can contribute an extra \$1,000 “catch-up” contribution.	
You Pay	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
	Annual Deductible (The Deductibles are separate for In-Network and Out-of-Network providers and are not combined)					
	Employee		Employee		Employee	
	\$0	\$0	\$0	\$0	\$1,650	\$3,300
	Employee + Child/ren		Family		Family (Employee + one or more dependents)	
	\$0	\$0	\$0	\$0	\$3,300	\$6,600 (deductible must be satisfied before coinsurance applies; no individual limits)
	Annual Out-of-Pocket Maximum					
	The In-Network copays apply towards the In-Network and Out-of-Network Out-of-Pocket Maximum.				The In-Network and Out-of-Network Out-of-Pocket Maximums are separate and are not combined.	
	Employee		Employee		Employee	
	\$3,600	\$7,200	\$3,200	\$6,400	\$3,600	\$7,200
	Employee + Spouse/Domestic Partner		Employee + Spouse/Domestic Partner			
	\$5,400	\$10,800	\$4,800	\$9,600		
Employee + Child/ren		Employee + Child/ren				
\$5,400	\$10,800	\$4,800	\$9,600			
Family		Family		Family (Employee + one or more dependents)		
\$6,850	\$14,400 (Entire family out of pocket must be satisfied before eligible expenses are 100% covered)	\$6,400	\$12,800 (Entire family out of pocket must be satisfied before eligible expenses are 100% covered)	\$6,850	\$14,400 (Entire family out of pocket must be satisfied before eligible expenses are 100% covered)	
Coinsurance	100% covered		100% covered		<ul style="list-style-type: none"> 85% covered (Tier 1 Premium Provider) 80% covered (Network Provider) 	50% covered (you may be responsible for any amount over the eligible expense)

	Surest Health PPO		Surest Select Health PPO		HDHP with Optional HSA	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Primary care visit to treat an injury or illness	\$20 - \$90	\$180	\$10 - \$65	\$180	<ul style="list-style-type: none"> 85% covered (Tier 1 Premium Provider) 80% covered (Network Provider) 	50% covered (you may be responsible for any amount over the eligible expense)
Specialist Visit	\$20 - \$90	\$180	\$10 - \$65	\$180	<ul style="list-style-type: none"> 85% covered (Tier 1 Premium Provider) 80% covered (Network Provider) 	50% covered (you may be responsible for any amount over the eligible expense)
Preventive Care: (No Deductible)						
Preventive care/screening/immunization	100% covered	100% covered	100% covered	100% covered	100% covered	Not covered
Inpatient (Facility), Office Visit, Outpatient (Facility), Prescriptions, Urgent Care						
Outpatient Lab and Pathology	\$0	\$0	\$0	\$0	85% covered	50% covered (you may be subject to balances over the eligible expense)
Outpatient Surgery	\$150 - \$3,000	\$2,500 - \$7,200	\$75 - \$2,500	\$1,500 - \$5,400	<ul style="list-style-type: none"> 85% covered (when performed at an Ambulatory Surgery Center) 80% covered (if performed as outpatient in a hospital) 	Not covered
Emergency Room Services	\$500	\$500	\$375	\$375	80% covered after deductible is met	
Inpatient Hospital Care	<ul style="list-style-type: none"> Up to \$3,000 \$1,400 for Inpatient Emergency Admit 	<ul style="list-style-type: none"> Up to \$7,200 \$2,800 for Inpatient Emergency Admit 	<ul style="list-style-type: none"> Up to \$2,500 \$1,400 for Inpatient Emergency Admit 	<ul style="list-style-type: none"> Up to \$5,400 \$2,600 for Inpatient Emergency Admit 	80% covered after deductible is met	50% covered after deductible is met

		Surest Health PPO		Surest Select Health PPO		HDHP with Optional HSA	
		In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Prescription Drugs	Tier 1 Drugs						
	<ul style="list-style-type: none"> \$10 for up to a 30 day retail supply \$25 for up to a 90 day retail/home delivery supply \$200 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery available, but not required.</p>	<ul style="list-style-type: none"> \$10 for up to a 30 day retail supply \$25 for up to a 90 day supply for home delivery \$200 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>	<ul style="list-style-type: none"> 85% covered; minimum copay of \$10 for retail, \$25 for home delivery, \$200 for Specialty; after deductible is met. Up to 31 day retail supply/90 day for home delivery (In-Network) For certain preventive medications the deductible is waived Specialty medications are limited to a 31 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>				
Prescription Drugs	Tier 2 Drugs						
	<ul style="list-style-type: none"> \$45 for up to a 30 day retail supply \$112.50 for up to a 90 day retail/home delivery supply \$225 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery available, but not required.</p>	<ul style="list-style-type: none"> \$45 for up to a 30 day retail supply \$112.50 for up to a 90 day supply for home delivery \$225 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>	<ul style="list-style-type: none"> 80% covered; minimum copay of \$45 for retail, \$112.50 for home delivery, \$225 for Specialty; after deductible is met. Up to 31 day retail supply/90 day for home delivery order (In-Network) For certain preventive medications the deductible is waived Specialty medications are limited to a 31 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>				
Prescription Drugs	Tier 3 Drugs						
	<ul style="list-style-type: none"> \$150 for up to a 30 day retail supply \$375 for up to a 90 day retail/home delivery supply \$300 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery available, but not required.</p>	<ul style="list-style-type: none"> \$150 for up to a 30 day retail supply \$375 for up to a 90 day supply for home delivery \$300 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>	<ul style="list-style-type: none"> 70% covered; minimum copay of \$150 for retail, \$375 for home delivery, \$300 for Specialty; after deductible is met. Up to 31 day retail supply/90 day for home delivery (In-Network) For certain preventive medications the deductible is waived Specialty medications are limited to a 31 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>				

		Surest Health PPO	Surest Select Health PPO	HDHP with Optional HSA
Prescription Drugs	Tier 4 Drugs	<ul style="list-style-type: none"> \$300 for up to a 30 day retail supply \$750 for up to a 90 day retail/home delivery supply \$400 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery available, but not required.</p>	<ul style="list-style-type: none"> \$300 for up to a 30 day retail supply \$750 for up to a 90 day supply for home delivery \$400 (In-Network) for Specialty Retail Pharmacy Specialty medications are limited to a 30 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>	<ul style="list-style-type: none"> 60% covered; minimum copay of \$300 for retail, \$750 for home delivery, \$400 for Specialty; after deductible is met. Up to 31 day retail supply/90 day for home delivery (In-Network) For certain preventive medications the deductible is waived Specialty medications are limited to a 31 day supply <p>Note: Home delivery required after two refills at a retail pharmacy for maintenance prescriptions.</p>
	Tier 1, 2, 3 and 4 - Certain life saving/emergency medications on the Vital Medication list are covered at no cost to you.			
	Specialty Medications	No Out-of-Network coverage for Specialty Medications.		

Surest Health PPO and the Surest Select Health PPO - You can review treatment options and costs before receiving treatment or choosing a provider. Here's how it works:

- Coverage starts at your first visit or prescription fill because this is a \$0 deductible plan.
- Clear, upfront prices for treatments and doctors. Know before you go what your healthcare choices will cost.
- Get the coverage you would expect from the UHC Choice Plus National Provider Network.
- Shop by quality - Copays are lower for providers and locations evaluated as high-quality, based on quality, efficiency, and overall effectiveness of care.

Refer to the below examples to see how one of the Surest plans can work for you.

Find doctors, treatments, or procedures in the Surest App, or on the website. Download the Surest App, available for free in the App Store and Google Play. To check on costs, see if your provider is in-network or to review additional information, visit lumen.com/joinsurest.

The information below assumes In Network (UHC Choice Plus) charges.

Surest plans offer 'copay ranges' for many services. To get started from your Surest App, use the Search bar, type in your condition, or symptoms like "my head hurts". Results will show care options and you can select a doctor or location to see the copay. You can also search by provider name. You also have the option to turn on filters like specialty, gender, and distance. By evaluating providers, locations, and costs in advance, you can make more informed decisions for you and your eligible dependent(s).

Childbirth	Surest Health PPO	New - Surest Select Health PPO
Copay - labor and delivery	As low as \$500	As low as \$400
Copays include: hospital charges, OB, anesthesiologist, epidural, emergency C-section, baby's stay (if discharged with mother)		

Emergency Room	Surest Health PPO	New - Surest Select Health PPO
Copay (copay is waived if admitted)	\$500	\$375
Copays include: hospital/facility charges, attending physician, radiologist, X-rays, splint		

Knee Arthroscopy	Surest Health PPO	New - Surest Select Health PPO
Copay range	\$1250 - \$2600	\$700 - \$1950
Copays include: facility charges, attending physician, radiologist, x-rays		

Pink Eye	Surest Health PPO	New - Surest Select Health PPO
Primary (PCP) or urgent care virtual visit	\$0	\$0
Office visit (and/or virtual visit)	\$20 - \$90	\$10 - \$65
Office visit copays include: blood work, x-rays and standard labs		

The \$20 copay for the Pink Eye example in the range above represents what you would pay if you chose the highest quality provider or facility. Conversely, the \$90 copay in the range represents a lower quality provider or facility.

HDHP with Optional HSA - If you enroll in this plan, you can choose your healthcare providers; however, the Plan pays a greater benefit when you use providers that are in the network. You can elect a Health Savings Account (HSA) to help you save for qualified medical expenses, including prescription drugs and eligible dental and vision expenses. An HSA allows you to set aside pre-tax dollars from your paycheck. This account rolls over from year to year and the money in the account is 100% yours even if you leave the company. You can enroll in an HSA any time throughout the year, but you do not need to contribute when you elect HDHP with Optional HSA.

The HSA is not a Company-sponsored plan or benefit and is not covered under ERISA. The Company has chosen to allow Optum Bank to offer its program available to Lumen employees, but this is a voluntary program and only you can decide whether the benefits provided by this program are appropriate for you and your eligible dependent(s). You are encouraged to research all suitable alternatives and consult with your personal advisors. The Company, including the Service Center, is not able to provide you with advice regarding this program.

If you elect a Health Care Flexible Spending Account (FSA), it will be automatically a Limited Purpose FSA and can only be used for eligible out-of-pocket dental and vision care expenses until your medical deductible has been satisfied. After your deductible has been satisfied, you can use the FSA for eligible medical and prescription drug expenses as well as dental and vision expenses. Refer to the FSA and HSA section in this guide for more information.

Dental Plan overviews

You can choose between two dental plan options; Option 1 or Option 2 or you can waive this coverage. These plan options differ in terms of the amount of the annual benefit maximum, annual deductibles, orthodontia coverage, coverage levels and your share of the cost of coverage. Both of the Dental Plan options are administered by MetLife.

This chart is only a snapshot summary of dental benefits.

Dental Option 1	Dental Option 2 (with orthodontia)
Passive PPO In and Out-of-Network (Your Dental PPO plan is passive, meaning that you will pay the same coinsurance levels, have the same deductible requirements and be allotted the same Benefit Maximum value regardless of going In or Out-of-Network. In-Network services are subject to MetLife's negotiated Plus network rates. Out-of-Network services will be subject to the reasonable and customary charges. You may have additional out of pocket costs for services received from Out-of-Network providers.)	
Plan Year Benefit Maximum (per person)	
\$1,000 (does not include oral surgery)	\$2,000 (does not include oral surgery or orthodontia)
Orthodontia Lifetime Benefit Maximum	
N/A	\$1,500 (separate from annual individual benefit maximum)
Plan Year Deductible (per person)	
\$25 for general care and major and restorative; no deductible for diagnostic, preventive or oral surgery	\$50 for general care and major and restorative (does not include orthodontia); no deductible for diagnostic, preventive or oral surgery
Lifetime Orthodontia Deductible (per person)	
N/A	\$50
Plan Pays (after deductible)	
Diagnostic and Preventive (cleanings and exams) – No deductible	
100%* up to maximum allowable amount; two visits per year	100%* up to maximum allowable amount; two visits per year
X-rays	
Full mouth X-rays covered once every 60 months; bitewing X-rays covered once per year, except for dependent children under age 26 who are eligible for bitewing X-rays twice per year.	Full mouth X-rays covered once every 60 months; bitewing X-rays covered once per year, except for dependent children under age 26 who are eligible for bitewing X-rays twice per year.
General Care (fillings, root canals and periodontics)	
50%* up to maximum allowable amount	80%* up to maximum allowable amount
Major and Restorative (crowns, dentures and bridges)	
50%* up to maximum allowable amount	50%* up to maximum allowable amount
Oral Surgery – No deductible	
80%* no limit	80%* no limit
Orthodontia (adult and children)	
Not covered	50%* up to the maximum allowable amount after the \$50 lifetime orthodontia deductible, per person (separate from annual deductible)

*Up to the Plan maximum allowable amount. Subject to MetLife Preferred Dental Provider pre-negotiated fees or reasonable and customary charges if you see an Out-of-Network provider.

Vision Plan overview

The vision care benefit has one option offered by EyeMed (aka EyeMed Vision Care/First American Administrators) or you can waive this coverage. Staying In-Network helps you save money on eye exams, contact lenses, and frames and lenses with a variety of options through the Insight (name of the in-network benefit) network to help save you even more. Since PLUS Providers are already through the Insight network, the additional perks are built right into your vision benefits. No promo codes, no coupons, no paperwork but you still have the same vision benefits, plus a little more savings.

This chart is only a snapshot summary of the available vision benefits.

Vision Care Services	In-Network Cost Using PLUS Providers. PLUS Providers are distinguished on EyeMed's website when looking for a provider in a specified area.	In-Network Cost	Out-of-Network Reimbursement
Examination Services			
Exam (with Dilation as necessary)	\$0 copay	\$10 copay	Up to \$40
Retinal Imaging	\$0 copay	\$0 copay	Up to \$20
Low Vision Supplemental Exam/Testing	\$0 copay	\$0 copay	Up to \$125
Low Vision Aids	25% copay up to a maximum of \$1,000	25% copay up to a maximum of \$1,000	25% copay up to a maximum of \$1,000
Contact Lens (allowance includes materials only)			
Conventional	\$0 copay; 15% off balance; over \$150 allowance	\$0 copay; 15% off balance; over \$150 allowance	Up to \$105
Disposable	\$0 copay; 100% of balance over \$150 allowance	\$0 copay; 100% of balance over \$150 allowance	Up to \$105
Medically Necessary	\$0 copay; paid-in-full	\$0 copay; paid-in-full	Up to \$210
Contact Lens Fit And Two (2) Follow-Ups (in lieu of lenses)			
Fit and Follow-Up - Premium	Up to \$40	Up to \$40	Not covered
Fit and Follow-Up - Premium	10% off retail price	10% off retail price	Not covered
Frame (any available frames at Provider locations)			
Frame	\$0 copay; 20% off balance over \$185 allowance	\$0 copay; 20% off balance over \$160 allowance	Up to \$112
Standard Plastic Lenses (in lieu of contacts)			
Single Vision	\$25 copay	\$25 copay	Up to \$30
Bifocal	\$25 copay	\$25 copay	Up to \$50
Trifocal	\$25 copay	\$25 copay	Up to \$70
Lenticular	\$25 copay	\$25 copay	Up to \$70
Progressive - Standard	\$25 copay	\$25 copay	Up to \$50

Vision Care Services	In-Network Cost Using PLUS Providers. PLUS Providers are distinguished on EyeMed's website when looking for a provider in a specified area.	In-Network Cost	Out-of-Network Reimbursement
Progressive - Premium Tier 1	\$110 copay	\$110 copay	Up to \$50
Progressive - Premium Tier 2	\$120 copay	\$120 copay	Up to \$50
Progressive - Premium Tier 3	\$135 copay	\$135 copay	Up to \$50
Progressive - Premium Tier 4	\$200 copay	\$200 copay	Up to \$50
Lens Options			
Anti Reflective Coating - Standard	\$45 copay	\$45 copay	Up to \$5
Anti Reflective Coating - Premium Tier 1	\$57 copay	\$57 copay	Up to \$5
Anti Reflective Coating - Premium Tier 2	\$68 copay	\$68 copay	Up to \$5
Anti Reflective Coating - Premium Tier 3	\$85 copay	\$85 copay	Up to \$5
Photochromic - Non-Glass (Plastic)	\$0 copay	\$0 copay	Up to \$5
Polycarbonate - Standard	\$40 copay	\$40 copay	Not covered
Polycarbonate - Standard - under 19 years of age	\$0 copay	\$0 copay	Up to \$5
Scratch Coating - Standard Plastic	\$15 copay	\$15 copay	Not covered
Tint - Solid or Gradient	\$0 copay	\$0 copay	Up to \$5
UV Treatment	\$15 copay	\$15 copay	Not covered
All Other Lens Options	20% off retail price	20% off retail price	Not covered
Low Vision			
Supplemental Exam/Testing	\$0 copay	\$0 copay	Up to \$125 allowance (no reimbursement)
Aids	25% copayment up to the maximum of \$1,000	25% copayment up to the maximum of \$1,000	25% copayment up to the maximum of \$1,000
Member Savings (enrollees who register on EyeMed's website receive additional savings)			
Additional Pairs of Glasses, Conventional Lenses	40% off glasses; 15% discount on lenses (once funded benefit is used)	40% off glasses; 15% discount on lenses (once funded benefit is used)	Not covered

Vision Care Services	In-Network Cost Using PLUS Providers. PLUS Providers are distinguished on EyeMed's website when looking for a provider in a specified area.	In-Network Cost	Out-of-Network Reimbursement
Non-Prescription Sunglasses and other items not covered by Plan* *Note: Safety Glasses and Provider's professional services or contact lenses are not eligible for coverage under the Plan	20% off	20% off	Not covered
Hearing Care from Amplifon Hearing Health Care Network (Call 877-203-0675)	40% off hearing exam and low price guarantee on discounted hearing aids (Up to 64% off aids at thousands of convenient locations nationwide.)	40% off hearing exam and low price guarantee on discounted hearing aids (Up to 64% off aids at thousands of convenient locations nationwide.)	Not covered
LASIK or PRK from U.S. Laser Network (Call 800-988-4221)	15% off retail or 5% off promotional price	15% off retail or 5% off promotional price	Not covered
Frequency (Adults and Children)			
Exam	Once every plan year		
Frame	Once every plan year		
Lenses (in lieu on Contact Lenses)	Once every plan year		
Contact Lenses (in lieu of Lenses)	Once every plan year		
Low Vision	Once every other plan year		

Definition of Contact Lens Fit

- **Standard Contact Lens Fit** - Clear, soft, spherical, daily wear contact lenses for single vision prescriptions. Standard Contact Lens does not include extended or overnight wear lenses, which are intended to be worn during periods of sleep.
- **Premium Contact Lens Fit** - Toric, multifocal, monovision, post-surgical, gas permeable contact lenses, and other non-Standard Contact Lenses. Premium Contact Lens includes extended and overnight wear lenses, which are intended to be worn during periods of sleep.

1. In certain states, Members may be required to pay the full retail rate and not the negotiated discount rate with certain participating Providers. Please refer to EyeMed's website and search Providers to determine which participating Providers have agreed to the discounted rate.
2. Discounts on vision materials may not be applicable to certain manufacturers' products.

You are responsible to pay the Out-of-Network provider in full at the time of service and then submit an Out-of-Network claim for reimbursement. You will be reimbursed up to the amount shown within the Summary of Benefits section. For prescription contact lenses for only one eye, the Plan will pay one-half of the amount payable for contact lenses for both eyes. **Note:** The benefit does not cover Safety eyewear, solutions, cleaning products or frame cases. For other Limitations and Exclusions, refer to the Vision Summary Plan Description.

Life, Accidental Death and Dismemberment, Business Travel Accident

You must be a Full-Time or Qwest Term Full-Time employee to be eligible for Life and Accidental Death & Dismemberment Insurance benefits. Life Insurance is a cost effective way to help ensure your short-term as well as long-term financial obligations are met if something unforeseen happens.

Note: Eligible pay is the employee’s annual base pay plus anticipated target incentive (Short-Term Incentive (STI)), pay and annualized commissions for Employee Basic Term Life, Employee Basic Accidental Death & Dismemberment (AD&D), Employee Supplemental AD&D and Business Travel Accident. If you are a sales-related employee, as determined by the Company, eligible pay is the employee’s annual base pay plus target incentive pay and annualized commissions, excluding other compensation, such as shift differentials, overtime, and special allowances as determined by the Company.

Employee Basic Term Life Insurance	Employee Supplemental Term Life Insurance
<p>Company-paid Employee Basic Life Insurance is equal to 1x eligible pay rounded up to the next higher \$1,000 up to \$2,000,000 maximum and is payable to your beneficiaries in the event of your death. Coverage is automatic.</p>	<p>You may purchase coverage for yourself in an amount equal to 1x, 2x, 3x, 4x, 5x, 6x, 7x or 8x Base Pay (not eligible pay) rounded up to next higher \$1,000 up to \$2,000,000 maximum. You may also purchase coverage for your spouse/domestic partner equal to \$5,000, \$10,000, \$25,000, \$50,000, \$75,000, \$100,000 or \$200,000 (cannot be more than 100% of Employee Basic Life + Employee Supplemental Life coverage). You may purchase Child Supplemental Life Insurance equal to \$3,000, \$5,000, \$10,000 or \$20,000 for each eligible child (cannot be more than 100% of the Employee Basic Life + Employee Supplemental Life coverage).</p> <p>Note: You cannot select different coverage amount per child. The elected amount will be for each child you select to enroll.</p>
Employee Basic Accidental Death & Dismemberment Insurance (AD&D)	Employee Supplemental Accidental Death & Dismemberment
<p>Company-paid Employee Basic AD&D is equal to 1x eligible pay rounded up to the next higher \$1,000 up to \$2,000,000 maximum and is payable to your beneficiaries in the event of your death or sustain if certain physical losses as the result of an accident. Coverage is automatic.</p>	<p>You may purchase coverage for yourself in an amount equal to 1x, 2x, 3x, 4x, 5x, 6x, 7x or 8x eligible pay rounded up to next higher \$1,000 up to \$2,000,000 maximum. You may also purchase coverage for your spouse/domestic partner equal to 50% of the amount you choose for yourself up to \$750,000 and 25% of the amount you choose for yourself for each eligible child up to \$100,000.</p>
Business Travel Accident Insurance (BTA)	
<p>The Business Travel Accident plan provides additional financial protection in case of accidental death or injury while you are traveling on Company business. Benefits equal 3x your eligible pay rounded up to the next higher \$1,000 up to a maximum of \$500,000. Coverage is automatic.</p>	

Additional Life Insurance is available where you pay the cost: Employee Supplemental Term Life, Employee Supplemental AD&D, Spouse/Domestic Partner Supplemental Term Life Insurance, Spouse/Domestic Partner (AD&D) Child Supplemental Term Life and Child Supplemental (AD&D).

Questions About The Life And Accident Plans? Detailed plan information can be found on lumenbenefits.com.

Amazing Benefits at Lumen

Lumen offers a wide range of Health, Life and Voluntary Lifestyle benefits that enhance your physical, mental, emotional, and financial wellbeing. Beyond the comprehensive benefits package, employees are eligible for additional benefits and perks (such as Employee Concessions, Advocacy Services and more).*

Programs listed below are offered to U.S. based employees only.

Core Benefits

- Business Travel Accident (BTA)
- Commuter Spending Account
- Dental
- Flexible Spending Accounts
- Health Savings Account
- Life Insurance
- Long-Term Disability
- Medical/Prescription Drug
- Short-Term Disability
- Survivor Benefit (Non-Union employees)
- Virtual Care
- Virtual Primary Care
- Vision
- Workers Compensation

Earn Rewards with the Well Connected Program

- Personal or Digital Coaching
- Rally (through Rally, Lumen employees and their covered spouses/domestic partners can each earn up to \$600 per Plan year in wellness rewards.)

Environmental Wellness

- Lumen employees can achieve optimal health through environments that enhance the well-being of individuals and communities.
- External Environment
- Personal Environment

Executive Wellness

- Executive Wellness Program
- Supplemental Savings Plan

401(k), Pension and Financial Wellness

- 401(k) Savings Plan
- Employee Assistance Program (EAP) financial resiliency resources
- Financial Fitness Checkups
- Financial Wellness Week
- MetLife Legal Plan

- Optum Bank
- Pension
- Principal's Retirement Wellness Planner
- Restricted Stock (part of the compensation program)
- SmartPath

Fitness Programs

- Active&Fit Direct gym discounts
- Lifestyle Reimbursement Program
- One Pass

Mental Wellness

- AbleTo (8 week virtual program)
- Calm
- Calm Health
- Child and Family Behavioral Coaching
- Empathy - Bereavement support
- Employee Assistance Program (EAP)
- Grief Counseling
- Mental and Emotional Wellbeing
- RethinkCare
- Self-care (Engaging strategies)
- Sleep
- Stress Management
- Talkspace
- Uptime
- Virtual Behavioral Coaching (VBC)

On-Site Programs

- Biometric Screenings
- Cor Medical Clinic (Monroe, LA)
- Flu Shot Programs
- Wellness Champions
- Virtual Health Fair

Quit Alcohol or Tobacco

- Pelago (Program to reduce or eliminate alcohol, cannabis, opioid or tobacco use.)
- Quit for Life® Tobacco Cessation
- Tobacco Surcharge doesn't apply if you are in a household that is tobacco free

Resources While at Work

- Corporate Social Responsibility
- Early Intervention Program (EIP)
- IDEAS (Inclusion, Diversity, Equity, Allyship and Social Impact)
- Milk Stork for nursing mothers (Non-Union employees)
- Nursing Mother's Rooms

Service and Retirement Recognition

- Lumen Stars
- Phased Retirement Program
- Retiree perks and reward programs
- Service anniversary recognition

Time Away from Work

- Bereavement
- Civic Duties
- Family and Medical Leave (FMLA)
- Flexible Time Off (Non-Union employees)
- Global Wellness Day
- Holidays
- Inclement Weather
- Military Leave
- Paid Time Off (Union Represented employees)
- Parental Leave
- Religious Observances
- Your Own Disability

Total Population Health Management

- 2nd.MD Expert Second Opinion Service
- 24-Hour Nurse Line
- ABA Therapy for Autism Spectrum Disorder
- Advocacy Services
- Cancer Resources
- Complex Care Concierge (C3)
- Condition Management
- Diabetes Programs
- Fertility Programs
- Gender Dysphoria and Transgender Services
- Genetic Risk Program
- Healthy Pregnancy Programs
- Lumen Nurse Team
- MyEvive (Customized benefits portal)
- Neonatal Resource Services (NRS)
- Premium Providers
- Preventive Exams/Screenings
- Solutions for Nursing Mothers
- Specialist Management Solutions (SMS)

- Transplant Resource Services
- Virtual Physical Therapy
- Visana

Voluntary and Additional Benefits

- Adoption Assistance
- Bridging of Service
- Bright Horizons Family Solutions
- College Coach Program (Non-Union only)
- Discounts on Products & Services
- Educational Assistance
- Employee Concessions
- Employee Referral Rewards Program

Voluntary Lifestyle Benefits

- 24/7 Virtual Pet Care
- Accident Insurance
- Critical Illness Insurance
- Disaster Insurance
- Employee Perks
- Home and Auto Insurance Program
- Hospital Indemnity Insurance
- Identity and Fraud Protection Program
- Legal Services
- Pet Insurance
- Purchasing Power Program
- Universal Life

Weight Loss

- Immersion Program
- Real Appeal - Digital weight loss program
- Weight Watchers
- Wondr™ and Wondr Advanced - Digital weight loss programs

* For additional benefit program details, refer to lumenbenefits.com.