

# 2022 Retiree Rates - CenturyTel (Z9)

Company subsidy is 100% for retiree and spouse coverage

#### 2022 Non-Medicare Retiree Medical Plans & Total Monthly Rates (Z9)

2022 Total Cost Per Month	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
Bind Health Plan	\$964.05	\$1,928.10	\$1,397.87	\$1,397.87	\$2,361.92	\$433.82
HDHP	\$982.62	\$1,965.24	\$1,424.80	\$1,424.80	\$2,407.42	\$442.18
CDHP Option 1	\$1,048.02	\$2,096.04	\$1,519.63	\$1,519.63	\$2,567.65	\$471.61
CDHP Option 2	\$1,104.85	\$2,209.70	\$1,602.03	\$1,602.03	\$2,706.88	\$497.18
	•					
No-Network PPO*	\$1,206.18	\$2,412.37	\$1,748.94	\$1,748.94	\$2,955.12	\$542.78

<sup>\*</sup>No-Network PPO is only available to certain retirees

#### 2022 Non-Medicare Retiree Medical Monthly Contributions (Z9)

2022 Contributions	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
Bind Health Plan	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
HDHP	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CDHP Option 1	\$48.02	\$96.04	\$0.00	\$0.00	\$0.00	\$0.00
CDHP Option 2	\$104.85	\$209.70	\$0.00	\$0.00	\$0.00	\$0.00
No-Network PPO*	\$206.18	\$412.37	\$0.00	\$0.00	\$0.00	\$0.00

### Medicare Eligible Health Reimbursement Account (HRA) Annual Company Subsidy

Retiree Subsidy Annual	You Only or Spouse Only	You+Spouse	You+ Child	You+ Children	Spouse+ Child	Spouse+ Children	You+Spouse + Child	You+Spouse +Children	Child(ren) Only
Medicare HRA	\$3,780.00	\$7,560.00	\$8,316.00	\$8,136.00	\$8,316.00	\$8,136.00	\$12,096.00	\$11,916.00	\$4,536.00

#### **Retiree Dental**

2022 Total Cost Per Month	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
Basic Dental Plan	\$35.80	\$71.60	\$62.65	\$62.65	\$107.40	\$26.85



## **Non-Medicare Retiree Monthly Dental Contribution**

Points	Subsidy	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
65-69	20.0%	\$28.64	\$57.28	\$50.12	\$50.12	\$85.92	\$21.48
70-74	30.0%	\$25.06	\$50.12	\$43.85	\$43.85	\$75.18	\$18.79
75-79	40.0%	\$21.48	\$42.96	\$37.59	\$37.59	\$64.44	\$16.11
80+	50.0%	\$17.90	\$35.80	\$31.32	\$31.32	\$53.70	\$13.42

 Medicare eligible retirees or dependents should contact Via Benefits at 888-825-4252 to enroll in a Medicare Supplement Plan.