2023 Retiree Rates – CenturyTel (Z4)

• Better of: Years of Service Matrix or Points Matrix (Z4)

2023 Non-Medicare Retiree Medical Plans & Total Monthly Rates (Z4)

2023 Total Cost Per Month	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
Surest Health Plan	\$1,056.28	\$2,112.55	\$1,531.60	\$1,531.60	\$2,587.87	\$475.32
HDHP with Optional HSA	\$1,058.63	\$2,117.25	\$1,535.01	\$1,535.01	\$2,593.63	\$476.38
Doctors Plan (CO/AZ)	\$1,130.78	\$2,261.57	\$1,639.64	\$1,639.64	\$2,770.43	\$508.85
CDHP	\$1,175.31	\$2,350.62	\$1,704.21	\$1,704.21	\$2,879.52	\$528.89

Surest Health Plan: Non-Medicare Monthly Contribution (Z4)

Points	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
75-79	40.0%	\$656.28	\$1,312.55	\$918.96	\$918.96	\$1,552.72	\$285.19
80-84	60.0%	\$456.28	\$912.55	\$612.64	\$612.64	\$1,035.15	\$190.13
85-89	80.0%	\$256.28	\$512.55	\$306.32	\$306.32	\$517.57	\$95.06
90+	90.0%	\$156.28	\$312.55	\$153.16	\$153.16	\$258.79	\$47.53
Years of Service	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
15-19	40.0%	\$656.28	\$1,312.55	\$918.96	\$918.96	\$1,552.72	\$285.19
20-24	60.0%	\$456.28	\$912.55	\$612.64	\$612.64	\$1,035.15	\$190.13
25-29	80.0%	\$256.28	\$512.55	\$306.32	\$306.32	\$517.57	\$95.06
30+	90.0%	\$156.28	\$312.55	\$153.16	\$153.16	\$258.79	\$47.53

HDHP with Optional HSA: Non-Medicare Monthly Contribution (Z4)

Points	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
75-79	40.0%	\$658.63	\$1,317.25	\$921.00	\$921.00	\$1,556.18	\$285.83
80-84	60.0%	\$458.63	\$917.25	\$614.00	\$614.00	\$1,037.45	\$190.55
85-89	80.0%	\$258.63	\$517.25	\$307.00	\$307.00	\$518.73	\$95.28
90+	90.0%	\$158.63	\$317.25	\$153.50	\$153.50	\$259.36	\$47.64
Years of Service	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
15-19	40.0%	\$658.63	\$1,317.25	\$921.00	\$921.00	\$1,556.18	\$285.83
20-24	60.0%	\$458.63	\$917.25	\$614.00	\$614.00	\$1,037.45	\$190.55
25-29	80.0%	\$258.63	\$517.25	\$307.00	\$307.00	\$518.73	\$95.28
30+	90.0%	\$158.63	\$317.25	\$153.50	\$153.50	\$259.36	\$47.64

Points	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
75-79	40.0%	\$730.78	\$1,461.57	\$983.78	\$983.78	\$1,662.26	\$305.31
80-84	60.0%	\$530.78	\$1,061.57	\$655.85	\$655.85	\$1,108.17	\$203.54
85-89	80.0%	\$330.78	\$661.57	\$327.93	\$327.93	\$554.09	\$101.77
90+	90.0%	\$230.78	\$461.57	\$163.96	\$163.96	\$277.04	\$50.89
Years of Service	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
15-19	40.0%	\$730.78	\$1,461.57	\$983.78	\$983.78	\$1,662.26	\$305.31
20-24	60.0%	\$530.78	\$1,061.57	\$655.85	\$655.85	\$1,108.17	\$203.54
25-29	80.0%	\$330.78	\$661.57	\$327.93	\$327.93	\$554.09	\$101.77
30+	90.0%	\$230.78	\$461.57	\$163.96	\$163.96	\$277.04	\$50.89

Doctors Plan (CO/AZ): Non-Medicare Monthly Contribution (Z4)

CDHP: Non-Medicare Monthly Contribution (Z4)

Points	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
75-79	40.0%	\$775.31	\$1,550.62	\$1,022.52	\$1,022.52	\$1,727.71	\$317.33
80-84	60.0%	\$575.31	\$1,150.62	\$681.68	\$681.68	\$1,151.81	\$211.55
85-89	80.0%	\$375.31	\$750.62	\$340.84	\$340.84	\$575.90	\$105.78
90+	90.0%	\$275.31	\$550.62	\$170.42	\$170.42	\$287.95	\$52.89
Years of Service	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
15-19	40.0%	\$775.31	\$1,550.62	\$1,022.52	\$1,022.52	\$1,727.71	\$317.33
20-24	60.0%	\$575.31	\$1,150.62	\$681.68	\$681.68	\$1,151.81	\$211.55
25-29	80.0%	\$375.31	\$750.62	\$340.84	\$340.84	\$575.90	\$105.78
30+	90.0%	\$275.31	\$550.62	\$170.42	\$170.42	\$287.95	\$52.89

New in 2023 for Medicare Individuals—Retiree Medicare Advantage (MAPD PPO + Dental) Plan

Starting in 2023, Medicare eligible individuals will have a new option to elect the Group Retiree MAPD PPO + Dental plan in lieu of receiving HRA company contributions as described below. Monthly employee contributions for this plan are shown below.

Monthly Contributions for MAPD PPO + Dental Plan	You Only	Spouse Only	You + Spouse	You + Spouse + Child	You + Spouse + Children	You + Child	You + Children	Spouse + Child	Spouse + Children	Child Only	Children Only
Points											
75-79	\$44.40	\$44.40	\$88.80	\$113.04	\$263.04	\$68.64	\$218.89	\$68.64	\$218.64	\$24.24	\$174.24
80-84	\$0.00	\$0.00	\$0.00	\$0.00	\$94.56	\$0.00	\$103.33	\$0.00	\$102.96	\$0.00	\$111.36
85-89	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$48.48
90+	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$17.04

 Confidential -Disclose and Distribute only to Lumen Employees and authorized persons working for Lumen.
Disclosure outside of Lumen is prohibited without authorization.

Points	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
75-79	40.0%	\$1,584.00	\$3,168.00	\$3,470.40	\$3,470.40	\$5,054.40	\$1,886.40
80-84	60.0%	\$2,376.00	\$4,752.00	\$5,205.60	\$5,205.60	\$7,581.60	\$2,829.60
85-89	80.0%	\$3,168.00	\$6,336.00	\$6,940.80	\$6,940.80	\$10,108.80	\$3,772.80
90+	90.0%	\$3,564.00	\$7,128.00	\$7,808.40	\$7,808.40	\$11,372.40	\$4,244.40

Medicare Eligible Health Reimbursement Account (HRA) Annual Company Subsidy

Retiree Dental

2023 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	\$36.43	\$72.86	\$63.75	\$63.75	\$109.29	\$27.32

Non-Medicare Retiree Monthly Dental Contribution

Points	Subsidy (To Cap)	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
65-69	20.0%	\$29.23	\$58.46	\$51.00	\$51.00	\$87.69	\$21.86
70-74	30.0%	\$25.63	\$51.26	\$44.62	\$44.62	\$76.89	\$19.12
75-79	40.0%	\$22.03	\$44.06	\$38.25	\$38.25	\$66.09	\$16.39
80+	50.0%	\$18.43	\$36.86	\$31.87	\$31.87	\$55.29	\$13.66



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
All		\$36.43	\$72.86	\$63.75	\$63.75	\$109.29	\$27.32

 Medicare eligible retirees or dependents should contact Via Benefits at 888-825-4252 to enroll in a Medicare Supplement Plan if not otherwise enrolling in new Group Retiree MAPD PPO + Dental plan.