

New Retirees as of 1/1/2024 (excludes Qwest Union Represented)

2024 Non-Medicare Medical Rates

- To determine your portion of the Total Monthly Cost shown below, please refer to the "New Retiree Healthcare & Life Insurance Eligibility Matrix"

2024 Total Cost Per Month	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
Medical Plan Options – Under Age 65						
Surest Health Plan	\$1,052.06	\$2,104.12	\$1,525.49	\$1,525.49	\$2,577.54	\$473.43
HDHP with Optional HSA	\$1,054.40	\$2,108.80	\$1,528.88	\$1,528.88	\$2,583.28	\$474.48
Doctors Plan (CO/AZ)	\$1,126.26	\$2,252.52	\$1,633.08	\$1,633.08	\$2,759.34	\$506.82
CDHP	\$1,170.61	\$2,341.23	\$1,697.39	\$1,697.39	\$2,868.00	\$526.78

2024 Retiree Medicare Advantage (MAPD PPO + Dental) Plan

Medicare eligible individuals have the option to elect the Group Retiree MAPD PPO + Dental plan in lieu of receiving HRA company contributions. 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
2024 Monthly Group Retiree MAPD PPO + Dental Contributions for Post-2003 Legacy CenturyTel Retirees											
Points											
65-69	\$87.20	\$87.20	\$174.40	\$251.52	\$391.52	\$164.32	\$304.32	\$164.32	\$304.32	\$77.12	\$217.12
70-74	\$60.80	\$60.80	\$121.60	\$167.28	\$307.28	\$106.48	\$246.66	\$106.48	\$246.48	\$45.68	\$185.68
75-79	\$34.40	\$34.40	\$68.80	\$83.04	\$223.04	\$48.64	\$188.89	\$48.64	\$188.64	\$14.24	\$154.24
80-84	\$0.00	\$0.00	\$0.00	\$0.00	\$54.56	\$0.00	\$73.33	\$0.00	\$72.96	\$0.00	\$91.36
85-89	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$28.48
90+	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Qwest Management	\$8.00	\$8.00	\$16.00	\$0.00	\$65.60	\$0.00	\$57.60	\$0.00	\$57.60	\$0.00	\$49.60

2024 Medicare Eligible Retiree HRA Company Contributions

- Group retiree medical/Rx coverage is terminated once you are eligible for Medicare, unless a retiree elects the new Group Medicare Advantage (MAPD PPO + Dental) plan described above. Otherwise, the company provides retirees a Health Reimbursement Account (HRA) that can be used to purchase private Medicare supplement type coverage. See below for the amounts of the company HRA annual contribution (which is pro-rated in the year of retirement). Retiree Dental coverage continues through the company sponsored group plan. Retiree dental rates are shown below.

Retiree Subsidy Annual		You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
2024 Subsidy for Post-2003 Legacy CenturyTel Retirees (Medical, Prescription & Dental)							
Points	Subsidy (To Cap)						
65-69	20.0%	\$792.00	\$1,584.00	\$1,735.20	\$1,735.20	\$2,527.20	\$943.20
70-74	30.0%	\$1,188.00	\$2,376.00	\$2,602.80	\$2,602.80	\$3,790.80	\$1,414.80
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
Qwest Management (Medical, Prescription)		\$1,740.00	\$3,480.00	\$5,016.00	\$5,016.00	\$6,756.00	\$3,276.00
Qwest Management (Dental)		\$240.00	\$480.00	\$420.00	\$420.00	\$660.00	\$180.00

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 the Group Retiree MAPD PPO + Dental plan.

2024 Dental Rates

- Pre 65: To determine your portion of the Total Monthly Dental Cost, refer to the "New Retiree Healthcare & Life Insurance Eligibility Matrix"
- Post 65: You pay the total monthly cost

2024 Total Cost Per Month	You Only or Spouse Only	You+Spouse	You+ Child(ren)	Spouse+ Child(ren)	You+Spouse+ Child(ren)	Child(ren) Only
Dental Plan						
Basic Dental Plan	\$37.79	\$75.59	\$66.14	\$66.14	\$113.38	\$28.35

- Please note: Lumen reserves the right to modify, suspend, change or terminate the plans, benefits and contributions described in this overview at anytime.