

2024 Retiree & COBRA Rates – Qwest Non-Union

01/01/2024



Qwest Non-Union Retiree rate sheets included in this document:

1. 100% Pay – No Company Subsidy
2. Qwest Non-Union Retiree Rates
3. COBRA Active Rates
4. COBRA Retiree Rates (excluding Qwest Union Represented)

Please locate your applicable Qwest Non-Union Retiree Rate sheet below. If you have trouble determining which rate sheet applies to you, please refer to the [Retiree Healthcare Matrix](#) to determine your group.

2024 Retiree Rates - 100% Pay – No Company Subsidy

2024 Non-Medicare Retiree Medical Plans & Total Monthly Rates

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Surest Health Plan	\$1,052.06	\$1,052.06	\$2,104.12	\$1,525.49	\$1,525.49	\$2,577.54	\$473.43
HDHP w/ Optional HSA	\$1,054.40	\$1,054.40	\$2,108.80	\$1,528.88	\$1,528.88	\$2,583.28	\$474.48
Doctors Plan (CO/AZ)	\$1,126.26	\$1,126.26	\$2,252.52	\$1,633.08	\$1,633.08	\$2,759.34	\$506.82
CDHP	\$1,170.61	\$1,170.61	\$2,341.23	\$1,697.39	\$1,697.39	\$2,868.00	\$526.78

2024 Medicare Advantage Plan Medical + Dental Plan & Total Monthly Rate

2024 Total Cost Per Month	Per Covered Medicare Individual in MAPD
Group Retiree MAPD PPO + Dental	\$140.00

2024 Retiree Dental Plan Total Monthly Rates

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Retiree Dental	\$37.79	\$37.79	\$75.59	\$66.14	\$66.14	\$113.38	\$28.35

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 Retiree Rates - Qwest Non-Union

2024 Non-Medicare Retiree Medical and Dental Plans & Total Monthly Rates

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Surest Health Plan	\$1,052.06	\$1,052.06	\$2,104.12	\$1,525.49	\$1,525.49	\$2,577.54	\$473.43
HDHP with Optional HSA	\$1,054.40	\$1,054.40	\$2,108.80	\$1,528.88	\$1,528.88	\$2,583.28	\$474.48
Doctors Plan (CO/AZ)	\$1,126.26	\$1,126.26	\$2,252.52	\$1,633.08	\$1,633.08	\$2,759.34	\$506.82
CDHP	\$1,170.61	\$1,170.61	\$2,341.23	\$1,697.39	\$1,697.39	\$2,868.00	\$526.78
Retiree Dental	\$37.79	\$37.79	\$75.59	\$66.14	\$66.14	\$113.38	\$28.35
LQ Mgmt Company Subsidy Cap	\$390.00	\$390.00	\$780.00	\$663.00	\$663.00	\$1,053.00	\$273.00

2024 Non-Medicare Retiree Monthly Contribution

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Surest Health Plan	\$662.06	\$662.06	\$1,324.12	\$862.49	\$862.49	\$1,524.54	\$200.43
HDHP with Optional HSA	\$664.40	\$664.40	\$1,328.80	\$865.88	\$865.88	\$1,530.28	\$201.48
Doctors Plan (CO/AZ)	\$736.26	\$736.26	\$1,472.52	\$970.08	\$970.08	\$1,706.34	\$233.82
CDHP	\$780.61	\$780.61	\$1,561.23	\$1,034.39	\$1,034.39	\$1,815.00	\$253.78
Retiree Dental	\$17.79	\$17.79	\$35.59	\$31.14	\$31.14	\$58.38	\$13.35

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
Qwest Non-Union	\$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 Health Reimbursement Account (HRA) Annual Company Subsidy

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
<i>Medical HRA Subsidy</i>	\$1,740	\$1,740	\$3,480	\$5,016	\$5,016	\$6,756	\$3,276
<i>Dental HRA Subsidy</i>	<u>\$240</u>	<u>\$240</u>	<u>\$480</u>	<u>\$420</u>	<u>\$420</u>	<u>\$660</u>	<u>\$180</u>
Overall Medical & Dental HRA Subsidy	\$1,980	\$1,980	\$3,960	\$5,436	\$5,436	\$7,416	\$3,456

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 Total Monthly Active COBRA Rates

Medical 2024 COBRA Rates	Total Monthly Cost			
	Employee	EE+Spouse	EE+Children	EE+Family
Surest Health Plan	\$760.12	\$1,596.29	\$1,368.27	\$2,204.40
HDHP with Optional HSA	\$751.92	\$1,579.04	\$1,353.46	\$2,180.60
Doctors Plan (CO/AZ)	\$802.59	\$1,685.46	\$1,444.69	\$2,327.52
CDHP	\$839.12	\$1,762.16	\$1,510.45	\$2,433.48
Dental 2024 COBRA Rates	Total Monthly Cost			
	Employee	EE+Spouse	EE+ Children	EE+Family
Dental Option 1	\$30.63	\$70.52	\$76.64	\$116.51
Dental Option 2	\$37.88	\$87.19	\$94.77	\$144.02
Vision 2024 COBRA Rates	Total Monthly Cost			
	Employee	EE+Spouse	EE+Children	EE+Family
Vision	\$7.38	\$15.49	\$13.35	\$21.42

2024 Total Monthly Retiree COBRA Rates (excluding Qwest Union Represented)

2024 Non-Medicare Medical COBRA Rates

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Surest Health Plan	\$1,073.10	\$1,073.10	\$2,146.20	\$1,556.00	\$1,556.00	\$2,629.09	\$482.90
HDHP w/Optional HSA	\$1,075.49	\$1,075.49	\$2,150.98	\$1,559.46	\$1,559.46	\$2,634.95	\$483.97
Doctors Plan (CO/AZ)	\$1,148.79	\$1,148.79	\$2,297.57	\$1,665.74	\$1,665.74	\$2,814.53	\$516.96
CDHP	\$1,194.02	\$1,194.02	\$2,388.05	\$1,731.34	\$1,731.34	\$2,925.36	\$537.32

2024 Medicare Advantage Plan Medical + Dental COBRA Rate

2024 Total Cost Per Month	Per Covered Medicare Individual in MAPD
Group Retiree MAPD PPO + Dental	\$142.80

2024 Dental Plan COBRA Rates

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Retiree Dental	\$38.55	\$38.55	\$77.10	\$67.46	\$67.46	\$115.65	\$28.91