2027 Retiree and COBRA Premiums Qwest Non-Union (Management)

January 1, 2027

Qwest Non-Union (Management) Retiree and COBRA premium rate sheets included in this document:

- Qwest Non-Union (Management) Protected Participant – Group 9-1
- Qwest Non-Union (Management) – Access Only, Group 9-2
- Qwest Non-Union (Management) Protected Participant Retiree Optional Term Life Insurance Premiums
- COBRA Premiums for former Active employees
- COBRA Premiums for Retirees

Please locate your applicable premium rate sheet. If you have trouble determining which Premium rate sheet applies to you, please refer to the **Retiree Health Care, Life Insurance and Survivor Benefits Guide** on lumenbenefits.com or in the **Reference Center** on the Health and Life website to determine your group.

Note: References to a Spouse in the charts include an eligible/enrolled Domestic Partner (DP).

Important information for the Medical Plans:

- The Retiree must be enrolled for a Spouse, Domestic Partner (DP) and/or Child(ren) to be covered. If the Retiree suspends or waives, dependents will be automatically suspended or waived, respectively.
- Premiums for Spouse only, Child(ren) only, and Spouse & Child(ren) are based on split-families where families have both Medicare eligible and non-Medicare eligible participants.
- **Access Only, Group 9-2:** When the Retiree becomes Medicare eligible, all coverage ends for the Retiree and their dependent(s), even if the dependent(s) are not Medicare eligible. If the dependent(s) becomes Medicare eligible before the retiree, the dependent(s) coverage will end.

You can contact Via Benefits at 888-825-4252 to enroll in an individual Medicare policy.

You can contact MetLife: 844-2METDEN (844-263-8336) to enroll in a MetLife TakeAlong Dental plan option. Contact MetLife within 30 days of losing coverage and confirm eligibility requirements directly with MetLife.

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Qwest Non-Union (Management) Protected Participant Retiree Group 9-1

Retiree non-Medicare Medical Plans (total cost)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Surest Health PPO	$1,437.60	$1,437.60	$2,875.20	$2,084.52	$2,084.52	$3,522.12	$646.92
Surest Select Health PPO	$1,466.38	$1,466.38	$2,932.76	$2,126.25	$2,126.25	$3,592.63	$659.87
High Deductible Health Plan (HDHP)	$1,423.24	$1,423.24	$2,846.48	$2,063.70	$2,063.70	$3,486.96	$640.48
LQ Mgmt Company Non-Medicare Medical Subsidy Cap	**$390.00**	**$390.00**	**$780.00**	**$663.00**	**$663.00**	**$1,053.00**	**$273.00**
LQ Mgmt Company Non-Medicare Dental Subsidy Cap	**$20.00**	**$20.00**	**$40.00**	**$35.00**	**$35.00**	**$55.00**	**$15.00**

Retiree Non-Medicare Medical plans (your cost)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Surest Health PPO	$1,047.60	$1,047.60	$2,095.20	$1,421.52	$1,421.52	$2,469.12	$373.92
Surest Select Health PPO	$1,076.38	$1,076.38	$2,152.76	$1,463.25	$1,463.25	$2,539.63	$386.87
High Deductible Health Plan (HDHP)	$1,033.24	$1,033.24	$2,066.48	$1,400.70	$1,400.70	$2,433.96	$367.48

Retiree non-Medicare Dental Plan (total cost)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Dental	$43.13	$43.13	$86.26	$75.47	$75.47	$129.38	$32.34

Retiree non-Medicare Dental Plan (your cost)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
Dental	$23.13	$23.13	$46.26	$40.47	$40.47	$74.38	$17.34

Note: Dependents who are not Medicare eligible can remain on the non-Medicare plan even after the retiree becomes eligible for Medicare.

Premiums for Spouse only, Child only, and Spouse & Child(ren) are based on split-families where families have both Medicare eligible and non-Medicare eligible participants. The retiree's dependents who are not Medicare eligible can remain in Dental coverage until they become Medicare eligible.

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Retiree Medicare Advantage PPO Medical + Dental Plan and Lumen Part D Prescription Drug Plan (MA+PDP)

Medicare eligible individuals have the option to elect the MA+PDP plan in lieu of electing the Lumen Medicare Health Reimbursement Account (HRA) - company contributions. Retiree's monthly premiums for this plan are:

Monthly premiums for the MA+PDP 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	$114.30	$114.30	$228.60	$244.50	$490.80	$130.20	$376.50	$130.20	$376.50	$15.90	$262.20

Medicare Health Reimbursement Account (HRA) total Annual Company Subsidy

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

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Qwest Non-Union (Management) – Access Only, Group 9-2

Retiree non-Medicare Medical Plans (total cost/your cost)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	$1,437.60	$1,437.60	$2,875.20	$2,084.52	$2,084.52	$3,522.12	$646.92
Surest Select Health PPO	$1,466.38	$1,466.38	$2,932.76	$2,126.25	$2,126.25	$3,592.63	$659.87
High Deductible Health Plan (HDHP)	$1,423.24	$1,423.24	$2,846.48	$2,063.70	$2,063.70	$3,486.96	$640.48

To elect the non-Medicare Medical plan, you must first enroll in COBRA and can enroll in a non-Medicare Medical plan after exhausting COBRA. You must still be non-Medicare eligible after 18 months of COBRA.

Note: Retirees pay total monthly premiums and are not eligible for Medicare coverage.

If you have questions regarding eligibility, please contact the Lumen Health and Life Service Center at 833-925-0487.

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Qwest Non-Union (Management) Protected Participant Retiree Optional Term Life Insurance Rates

Age for Retiree	Retiree Monthly Rates per $1,000 Coverage
<25	$0.097
25-29	$0.101
30-34	$0.120
35-39	$0.127
40-44	$0.138
45-49	$0.238
50-54	$0.378
55-59	$0.702
60-64	$1.105
65-69	$1.987

Age reduction and limiting age rules will automatically apply according to the Plan provisions.

For more information, refer to the Lumen Life Insurance Plan Summary Plan Description (SPD) available on lumenbenefits.com or in the **Reference Center** on the Health and Life website.

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COBRA Premiums for former Active employees

Medical	Employee	EE+ Spouse	EE+ Child(ren)	EE+ Family	Spouse Only	Spouse+ Child(ren)	Child(ren) Only
Surest Health PPO	$1,074.96	$2,257.41	$1,934.95	$3,117.39	$1,182.46	$2,042.43	$859.99
Surest Select Health PPO	$1,096.45	$2,302.56	$1,973.66	$3,179.75	$1,206.11	$2,083.30	$877.21
HDHP with Optional HSA	$1,064.21	$2,234.85	$1,915.61	$3,086.23	$1,170.64	$2,022.03	$851.40

Dental	Employee	EE+ Spouse	EE+ Child(ren)	EE+ Family	Spouse Only	Spouse+ Child(ren)	Child(ren) Only
Dental Option 1	$34.14	$78.56	$85.38	$129.78	$44.42	$95.65	$51.24
Dental Option 2 (includes orthodocntia)	$42.20	$97.12	$105.59	$160.48	$54.93	$118.28	$63.39

Vision	Employee	EE+ Spouse	EE+ Child(ren)	EE+ Family	Spouse Only	Spouse+ Child(ren)	Child(ren) Only
Vision	$10.17	$21.33	$18.28	$29.46	$10.17	$18.28	$18.28

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COBRA Premiums for Retirees

Non-Medicare Medical Plans

	Retiree only	Spouse /DP only	Retiree & Spouse	Retiree & Chlid(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	$1,466.35	$1,466.35	$2,932.70	$2,126.21	$2,126.21	$3,592.56	$659.86
Surest Select Health PPO	$1,495.71	$1,495.71	$2,991.42	$2,168.78	$2,168.78	$3,664.48	$673.07
High Deductible Health Plan (HDHP)	$1,451.70	$1,451.70	$2,903.41	$2,104.97	$2,104.97	$3,556.70	$653.29

Retiree Medicare Advantage PPO Medical + Dental Plan and Lumen Part D Prescription Drug Plan (MA+PDP)

	Per Covered Medicare Individual in the MA+PDP Plan
MA+PDP	$251.23

Non-Medicare Dental Plan

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Dental	$43.99	$43.99	$87.99	$76.98	$76.98	$131.97	$32.99

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