

2025 Retiree and COBRA Premiums CenturyTel

Jan. 1, 2025



CenturyTel Retiree Premium rate sheets included in this document:

- CenturyTel Non-Union (Access Only Groups 2-AZ and Group 12)
- CenturyTel (Group 1-ZM)
- CenturyTel (Groups 3 and 4 - Z4)
- CenturyTel (Group 4-Z9)
- COBRA Active Premiums
- COBRA Retiree Premiums

Please locate your applicable CenturyTel Retiree Premium rate sheet. If you have trouble determining which Premium rate sheet applies to you, please refer to the **Retiree Healthcare and Life Benefits Matrix** on lumenbenefits.com or in the **Reference Center** on the [Health and Life website](#) to determine your group.

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

CenturyTel Non-Union (Access Only Group 2-AZ and Group 12)

Retiree Non-Medicare Medical plans and total monthly premiums

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	\$1,236.84	\$1,236.84	\$2,473.68	\$1,793.42	\$1,793.42	\$3,030.26	\$556.58
Surest Select Health PPO	\$1,261.60	\$1,261.60	\$2,523.21	\$1,829.32	\$1,829.32	\$3,090.92	\$567.72
High Deductible Health Plan	\$1,224.49	\$1,224.49	\$2,448.99	\$1,775.52	\$1,775.52	\$3,000.01	\$551.03

Dental Plan total monthly premium

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Dental	\$39.87	\$39.87	\$79.75	\$69.78	\$69.78	\$119.62	\$29.90

Important: 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 also be suspended or waived.

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. If the Retiree enrolls in the Lumen Medicare Advantage PPO plus Dental (MAPD) Plan, they will suspend the Dental plan because the MAPD Plan offers Dental coverage. The retiree's dependents who are not Medicare eligible can remain in Dental coverage. If the Retiree suspends Dental coverage for reasons other than enrolling in the MAPD Plan, the retiree's dependents will also be suspended.

Note: Access Only - Medicare Eligible - no longer eligible for Lumen retiree healthcare benefits when you become Medicare eligible. i.e. medical (MAPD), HRA, CDHP HRA or Dental.

2025 Retiree Premiums - CenturyTel (ZM)

Retiree Non-Medicare Medical plans and total monthly premiums (ZM)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	\$1,236.84	\$1,236.84	\$2,473.68	\$1,793.42	\$1,793.42	\$3,030.26	\$556.58
Surest Select Health PPO	\$1,261.60	\$1,261.60	\$2,523.21	\$1,829.32	\$1,829.32	\$3,090.92	\$567.72
High Deductible Health Plan (HDHP)	\$1,224.49	\$1,224.49	\$2,448.99	\$1,775.52	\$1,775.52	\$3,000.01	\$551.03

Surest Health PPO: Non-Medicare monthly contribution (ZM)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
65-69	20.0%	\$1,036.84	\$1,036.84	\$2,073.68	\$1,434.74	\$1,434.74	\$2,430.26	\$445.26
70-74	30.0%	\$936.84	\$936.84	\$1,873.68	\$1,255.39	\$1,255.39	\$2,130.26	\$389.61
75-79	40.0%	\$836.84	\$836.84	\$1,673.68	\$1,076.05	\$1,076.05	\$1,830.26	\$333.95
80-84	60.0%	\$636.84	\$636.84	\$1,273.68	\$717.37	\$717.37	\$1,230.26	\$222.63
85-89	80.0%	\$436.84	\$436.84	\$873.68	\$358.68	\$358.68	\$630.26	\$111.32
90+	90.0%	\$336.84	\$336.84	\$673.68	\$179.34	\$179.34	\$330.26	\$55.66

Surest Select Health PPO: Non-Medicare monthly contribution (ZM)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) only
65-69	20.0%	\$1,061.60	\$1,061.60	\$2,123.21	\$1,463.46	\$1,463.46	\$2,490.92	\$454.18
70-74	30.0%	\$961.60	\$961.60	\$1,923.21	\$1,280.52	\$1,280.52	\$2,190.92	\$397.40
75-79	40.0%	\$861.60	\$861.60	\$1,723.21	\$1,097.59	\$1,097.59	\$1,890.92	\$340.63
80-84	60.0%	\$661.60	\$661.60	\$1,323.21	\$731.73	\$731.73	\$1,290.92	\$227.09
85-89	80.0%	\$461.60	\$461.60	\$923.21	\$365.86	\$365.86	\$690.92	\$113.54
90+	90.0%	\$361.60	\$361.60	\$723.21	\$182.93	\$182.93	\$390.92	\$56.77

High Deductible Health Plan (HDHP): Non-Medicare monthly contribution (ZM)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
65-69	20.0%	\$1,024.49	\$1,024.49	\$2,048.99	\$1,420.42	\$1,420.42	\$2,400.01	\$440.82
70-74	30.0%	\$924.49	\$924.49	\$1,848.99	\$1,242.86	\$1,242.86	\$2,100.01	\$385.72
75-79	40.0%	\$824.49	\$824.49	\$1,648.99	\$1,065.31	\$1,065.31	\$1,800.01	\$330.62
80-84	60.0%	\$624.49	\$624.49	\$1,248.99	\$710.21	\$710.21	\$1,200.01	\$220.41
85-89	80.0%	\$424.49	\$424.49	\$848.99	\$355.10	\$355.10	\$600.01	\$110.21
90+	90.0%	\$324.49	\$324.49	\$648.99	\$177.55	\$177.55	\$300.01	\$55.10

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

Lumen Medicare Advantage PPO plus Dental (MAPD) Plan total monthly premium

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

Monthly Contributions for the MAPD 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											
65-69	\$146.00	\$146.00	\$292.00	\$427.92	\$626.72	\$281.92	\$480.72	\$281.92	\$480.72	\$135.92	\$334.72
70-74	\$119.60	\$119.60	\$239.20	\$343.68	\$542.48	\$224.08	\$423.06	\$224.08	\$422.88	\$104.48	\$303.28
75-79	\$93.20	\$93.20	\$186.40	\$259.44	\$458.24	\$166.24	\$365.29	\$166.24	\$365.04	\$73.04	\$271.84
80-84	\$40.40	\$40.40	\$80.80	\$90.96	\$289.76	\$50.56	\$249.73	\$50.56	\$249.36	\$10.16	\$208.96
85-89	\$0.00	\$0.00	\$0.00	\$0.00	\$121.28	\$0.00	\$134.17	\$0.00	\$133.68	\$0.00	\$146.08
90+	\$0.00	\$0.00	\$0.00	\$0.00	\$37.04	\$0.00	\$76.39	\$0.00	\$75.84	\$0.00	\$114.64

Medicare Health Reimbursement Account (HRA) total Annual Company Subsidy (ZM)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree+ Spouse	Retiree + Child(ren)	Spouse + Child(ren)	Retiree + Family	Child(ren) only
65-69	20.0%	\$792.00	\$792.00	\$1,584.00	\$1,735.20	\$1,735.20	\$2,527.20	\$943.20
70-74	30.0%	\$1,188.00	\$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	\$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	\$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	\$3,168.00	\$6,336.00	\$6,940.80	\$6,940.80	\$10,108.80	\$3,772.80
90+	90.0%	\$3,564.00	\$3,564.00	\$7,128.00	\$7,808.40	\$7,808.40	\$11,372.40	\$4,244.40

Dental Plan total monthly premium (ZM)

	Retiree Only	Spouse /DP Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Dental	\$39.87	\$39.87	\$79.75	\$69.78	\$69.78	\$119.62	\$29.90

Important: 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 also be suspended or waived.

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. If the Retiree enrolls in the Lumen Medicare Advantage PPO plus Dental (MAPD) Plan, they will suspend the Dental plan because the MAPD Plan offers Dental coverage. The retiree's dependents who are not Medicare eligible can remain in Dental coverage. If the Retiree suspends Dental coverage for reasons other than enrolling in the MAPD Plan, the retiree's dependents will also be suspended.

Non-Medicare Retirees: monthly Dental contribution (ZM)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
65-69	20.0%	\$32.67	\$32.67	\$65.35	\$56.98	\$56.98	\$98.02	\$24.30
70-74	30.0%	\$29.07	\$29.07	\$58.15	\$50.58	\$50.58	\$87.22	\$21.50
75-79	40.0%	\$25.47	\$25.47	\$50.95	\$44.18	\$44.18	\$76.42	\$18.70
80+	50.0%	\$21.87	\$21.87	\$43.75	\$37.78	\$37.78	\$65.62	\$15.90

Medicare Retirees: monthly Dental contribution (ZM)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Medicare Retirees	\$39.87	\$39.87	\$79.75	\$69.78	\$69.78	\$119.62	\$29.90

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2025 Retiree Premiums - CenturyTel (Z4)

Z4 medical plan subsidies are based on the "Better Of" Years of Service or Years of Service plus Age.

Retiree Non-Medicare Medical plans and total monthly premiums (Z4)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	\$1,236.84	\$1,236.84	\$2,473.68	\$1,793.42	\$1,793.42	\$3,030.26	\$556.58
Surest Select Health PPO	\$1,261.60	\$1,261.60	\$2,523.21	\$1,829.32	\$1,829.32	\$3,090.92	\$567.72
High Deductible Health Plan (HDHP)	\$1,224.49	\$1,224.49	\$2,448.99	\$1,775.52	\$1,775.52	\$3,000.01	\$551.03

Surest Health PPO: Non-Medicare monthly contribution (Z4)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
75-79	40.0%	\$836.84	\$836.84	\$1,673.68	\$1,076.05	\$1,076.05	\$1,830.26	\$333.95
80-84	60.0%	\$636.84	\$636.84	\$1,273.68	\$717.37	\$717.37	\$1,230.26	\$222.63
85-89	80.0%	\$436.84	\$436.84	\$873.68	\$358.68	\$358.68	\$630.26	\$111.32
90+	90.0%	\$336.84	\$336.84	\$673.68	\$179.34	\$179.34	\$330.26	\$55.66
Or								
Yrs of Svc	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
15-19	40.0%	\$836.84	\$836.84	\$1,673.68	\$1,076.05	\$1,076.05	\$1,830.26	\$333.95
20-24	60.0%	\$636.84	\$636.84	\$1,273.68	\$717.37	\$717.37	\$1,230.26	\$222.63
25-29	80.0%	\$436.84	\$436.84	\$873.68	\$358.68	\$358.68	\$630.26	\$111.32
30+	90.0%	\$336.84	\$336.84	\$673.68	\$179.34	\$179.34	\$330.26	\$55.66

Surest Select Health PPO: Non-Medicare monthly contribution (Z4)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
75-79	40.0%	\$861.60	\$861.60	\$1,723.21	\$1,097.59	\$1,097.59	\$1,890.92	\$340.63
80-84	60.0%	\$661.60	\$661.60	\$1,323.21	\$731.73	\$731.73	\$1,290.92	\$227.09
85-89	80.0%	\$461.60	\$461.60	\$923.21	\$365.86	\$365.86	\$690.92	\$113.54
90+	90.0%	\$361.60	\$361.60	\$723.21	\$182.93	\$182.93	\$390.92	\$56.77
Or								
Yrs of Svc	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
15-19	40.0%	\$861.60	\$861.60	\$1,723.21	\$1,097.59	\$1,097.59	\$1,890.92	\$340.63
20-24	60.0%	\$661.60	\$661.60	\$1,323.21	\$731.73	\$731.73	\$1,290.92	\$227.09
25-29	80.0%	\$461.60	\$461.60	\$923.21	\$365.86	\$365.86	\$690.92	\$113.54
30+	90.0%	\$361.60	\$361.60	\$723.21	\$182.93	\$182.93	\$390.92	\$56.77

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High Deductible Health Plan (HDHP): Non-Medicare monthly contribution (Z4)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
75-79	40.0%	\$824.49	\$824.49	\$1,648.99	\$1,065.31	\$1,065.31	\$1,800.01	\$330.62
80-84	60.0%	\$624.49	\$624.49	\$1,248.99	\$710.21	\$710.21	\$1,200.01	\$220.41
85-89	80.0%	\$424.49	\$424.49	\$848.99	\$355.10	\$355.10	\$600.01	\$110.21
90+	90.0%	\$324.49	\$324.49	\$648.99	\$177.55	\$177.55	\$300.01	\$55.10
Or								
Yrs of Svc	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
15-19	40.0%	\$824.49	\$824.49	\$1,648.99	\$1,065.31	\$1,065.31	\$1,800.01	\$330.62
20-24	60.0%	\$624.49	\$624.49	\$1,248.99	\$710.21	\$710.21	\$1,200.01	\$220.41
25-29	80.0%	\$424.49	\$424.49	\$848.99	\$355.10	\$355.10	\$600.01	\$110.21
30+	90.0%	\$324.49	\$324.49	\$648.99	\$177.55	\$177.55	\$300.01	\$55.10

Lumen Medicare Advantage PPO plus Dental (MAPD) Plan total monthly premium

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

Monthly Contributions for the MAPD 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	\$93.20	\$93.20	\$186.40	\$259.44	\$458.24	\$166.24	\$365.29	\$166.24	\$365.04	\$73.04	\$271.84
80-84	\$40.40	\$40.40	\$80.80	\$90.96	\$289.76	\$50.56	\$249.73	\$50.56	\$249.36	\$10.16	\$208.96
85-89	\$0.00	\$0.00	\$0.00	\$0.00	\$121.28	\$0.00	\$134.17	\$0.00	\$133.68	\$0.00	\$146.08
90+	\$0.00	\$0.00	\$0.00	\$0.00	\$37.04	\$0.00	\$76.39	\$0.00	\$75.84	\$0.00	\$114.64

Medicare Health Reimbursement Account (HRA) total Annual Company Subsidy (Z4)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree+ Spouse	Retiree + Child(ren)	Spouse + Child(ren)	Retiree + Family	Child(ren) Only
75-79	40.0%	\$1,584.00	\$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	\$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	\$3,168.00	\$6,336.00	\$6,940.80	\$6,940.80	\$10,108.80	\$3,772.80
90+	90.0%	\$3,564.00	\$3,564.00	\$7,128.00	\$7,808.40	\$7,808.40	\$11,372.40	\$4,244.40

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Dental Plan Total monthly premium (Z4)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Dental	\$39.87	\$39.87	\$79.75	\$69.78	\$69.78	\$119.62	\$29.90

Important: 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 also be suspended or waived.

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. If the Retiree enrolls in the Lumen Medicare Advantage PPO plus Dental (MAPD) Plan, they will suspend the Dental plan because the MAPD Plan offers Dental coverage. The retiree's dependents who are not Medicare eligible can remain in Dental coverage. If the Retiree suspends Dental coverage for reasons other than enrolling in the MAPD Plan, the retiree's dependents will also be suspended.

Non-Medicare Retirees: monthly Dental contribution (Z4)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
65-69	20.0%	\$32.67	\$32.67	\$65.35	\$56.98	\$56.98	\$98.02	\$24.30
70-74	30.0%	\$29.07	\$29.07	\$58.15	\$50.58	\$50.58	\$87.22	\$21.50
75-79	40.0%	\$25.47	\$25.47	\$50.95	\$44.18	\$44.18	\$76.42	\$18.70
80+	50.0%	\$21.87	\$21.87	\$43.75	\$37.78	\$37.78	\$65.62	\$15.90

Medicare Retirees: monthly Dental contribution (Z4)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Medicare Retirees	\$39.87	\$39.87	\$79.75	\$69.78	\$69.78	\$119.62	\$29.90

2025 Retiree Premiums - CenturyTel (Z9)

Retiree Non-Medicare Medical plans and total monthly premiums (Z9)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	\$1,236.84	\$1,236.84	\$2,473.68	\$1,793.42	\$1,793.42	\$3,030.26	\$556.58
Surest Select Health PPO	\$1,261.60	\$1,261.60	\$2,523.21	\$1,829.32	\$1,829.32	\$3,090.92	\$567.72
High Deductible Health Plan (HDHP)	\$1,224.49	\$1,224.49	\$2,448.99	\$1,775.52	\$1,775.52	\$3,000.01	\$551.03

Retiree Non-Medicare Medical monthly contribution (Z9)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	\$236.84	\$236.84	\$473.68	\$0.00	\$0.00	\$30.26	\$0.00
Surest Select Health PPO	\$261.60	\$261.60	\$523.21	\$0.00	\$0.00	\$90.92	\$0.00
High Deductible Health Plan (HDHP)	\$224.49	\$224.49	\$448.99	\$0.00	\$0.00	\$0.01	\$0.00

Lumen Medicare Advantage PPO plus Dental (MAPD) Plan total monthly premium

Medicare eligible individuals have the option to elect the MAPD plan in lieu of electing the Lumen Medicare Health Reimbursement Account (HRA) - company contributions. Retiree's monthly contributions for this plan for Z9 retirees are:

Monthly Contributions for the MAPD Plan	You Only	Spouse Only	You + Spouse	You + Spouse /DP+ Child	You + Spouse + Children	You + Child	You + Children	Spouse + Child	Spouse + Children	Child Only	Children Only
CenturyTel (Z9)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Medicare Health Reimbursement Account (HRA) total Annual Company Subsidy (Z9)

	Retiree Only	Spouse Only	Retiree and Spouse	Retiree + 1 Child	Retiree + 2+ Children	Spouse + 1 Child	Spouse + 2+ Children	Retiree + Spouse + 1 Child	Retiree + Spouse + 2+ Children	Child(ren) Only
Medicare HRA	\$3,780.00	\$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

Dental Plan total monthly premium (Z9)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Dental	\$39.87	\$39.87	\$79.75	\$69.78	\$69.78	\$119.62	\$29.90

Important: 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 also be suspended or waived.

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. If the Retiree enrolls in the Lumen Medicare Advantage PPO plus Dental (MAPD) Plan, they will suspend the Dental plan because the MAPD Plan offers Dental coverage. The retiree's dependents who are not Medicare eligible can remain in Dental coverage. If the Retiree suspends Dental coverage for reasons other than enrolling in the MAPD Plan, the retiree's dependents will also be suspended.

Non-Medicare Retirees: monthly Dental contribution (Z9)

Points	Subsidy (To Cap)	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
65-69	20.0%	\$32.67	\$32.67	\$65.35	\$56.98	\$56.98	\$98.02	\$24.30
70-74	30.0%	\$29.07	\$29.07	\$58.15	\$50.58	\$50.58	\$87.22	\$21.50
75-79	40.0%	\$25.47	\$25.47	\$50.95	\$44.18	\$44.18	\$76.42	\$18.70
80+	50.0%	\$21.87	\$21.87	\$43.75	\$37.78	\$37.78	\$65.62	\$15.90

Medicare Retirees: monthly Dental contribution (Z9)

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Medicare Retirees	\$39.87	\$39.87	\$79.75	\$69.78	\$69.78	\$119.62	\$29.90

2025 Total Monthly Active COBRA Premiums

Medical	Employee	EE+ Spouse	EE+ Child(ren)	EE+ Family	Spouse Only	Spouse + Child(ren)	Child(ren) Only
Surest Health PPO	\$810.28	\$1,701.58	\$1,458.53	\$2,349.83	\$891.31	\$1,539.55	\$648.25
Surest Select Health PPO	\$826.49	\$1,735.62	\$1,487.70	\$2,396.83	\$909.14	\$1,570.34	\$661.22
HDHP with Optional HSA	\$802.18	\$1,684.58	\$1,443.94	\$2,326.33	\$882.40	\$1,524.16	\$641.76

Dental	Employee	EE+ Spouse	EE+ Child(ren)	EE+ Family	Spouse Only	Spouse + Child(ren)	Child(ren) Only
Dental Option 1	\$31.55	\$72.63	\$78.94	\$120.00	\$41.09	\$88.45	\$47.39
Dental Option 2	\$39.02	\$89.80	\$97.60	\$148.35	\$50.79	\$109.33	\$58.59

Vision	Employee	EE+ Spouse	EE+ Child(ren)	EE+ Family	Spouse Only	Spouse + Child(ren)	Child(ren) Only
Vision	\$7.98	\$16.73	\$14.41	\$23.12	\$8.75	\$15.15	\$6.44

2025 Total Monthly Retiree COBRA Premiums

Non-Medicare Medical plans and COBRA monthly premiums

	Retiree only	Spouse /DP only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Surest Health PPO	\$1,261.58	\$1,261.58	\$2,523.15	\$1,829.29	\$1,829.29	\$3,090.87	\$567.71
Surest Select Health PPO	\$1,286.83	\$1,286.83	\$2,573.67	\$1,865.91	\$1,865.91	\$3,152.74	\$579.07
High Deductible Health Plan (HDHP)	\$1,248.98	\$1,248.98	\$2,497.97	\$1,811.03	\$1,811.03	\$3,060.01	\$562.05

Lumen Medicare Advantage PPO plus Dental (MAPD) Plan monthly premium

Per Covered Medicare Individual in the MAPD Plan	
MAPD	\$202.78

Dental Plan COBRA monthly premium

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren) Only
Dental	\$40.67	\$40.67	\$81.34	\$71.17	\$71.17	\$122.01	\$30.50

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