

# **2025 Retiree and COBRA Premiums Embarq**

Jan. 1, 2025

#### **Embarq Retiree Premium rate sheets included in this document:**

- Embarg eligible for SHARE (Group 8-E10)
- Embarq Supplemental/Optional Term Life Insurance Premiums
- COBRA Active Premiums
- COBRA Retiree Premiums (excluding Qwest Union Represented)

Please locate your applicable Embarq 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 <u>lumenbenefits.com</u> or in the **Reference Center** on the <u>Health and Life website</u> to determine your group.

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

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### 2025 Retiree Premiums - Embarq SHARE (Group 8-E10)

- Starting at age 50, Legacy Embarq employees earn \$1,600 per year toward your SHARE account until you reach 65 (maximum 15 years \$24,000).
- Full cost of non-Medicare medical and dental coverage can be withdrawn from your SHARE account. Premium deductions are not automatically taken out of your SHARE account. You must set this up online or through the Lumen Health and Life Service Center.
- Once Medicare eligible, the Lumen non-Medicare medical plan ends. Any remaining SHARE may be used towards an individual Medicare Supplement policy or towards the Lumen Medicare Advantage PPO plus Dental (MAPD) plan.
- Contact Via Benefits at 888-825-4252 to enroll in an individual Medicare Supplement policy if not otherwise enrolling in the MAPD plan.

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
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 plans and total monthly premiums**

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

	Per covered Medicare individual in the MAPD Plan
MAPD	\$198.80

### Dental Plan total monthly premium

	Retiree Only	Spouse Only	Retiree & Spouse	Retiree & Child(ren)	Spouse & Child(ren)	Retiree & Family	Child(ren)
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.

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### **Embarq Retiree Supplemental/Optional Term Life Insurance Rates**

Supplemen	Supplemental/Optional Term Life Insurance Rates \$1,000 of coverage							
Age for Retiree and Spouse	Retiree and Spouse monthly rates	Child Life Insurance monthly rates (Not Age-Based)						
<25	\$0.097							
25-29	\$0.101	* \$0.124 monthly						
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							
70-74	\$3.533							
75-79	\$3.533							

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

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## 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

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### **2025 Total Monthly Retiree COBRA Premiums**

### Non-Medicare Medical COBRA monthly premium

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

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