



# 2025 Benefit Plan Option

**Lumen Retiree Medicare Advantage PPO + Dental  
(Lumen MAPD + Dental)**

Fall 2024

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United  
Healthcare

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## Original Medicare Basics

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## Medical, Dental, Prescription Drug and Additional Services: Benefits, Programs and Features

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## How to Enroll

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## What to Expect Next

# Why we are here today

- ❖ Lumen continues to offer plan options to eligible retirees and dependents in 2025, including:
  1. The “Lumen Retiree Medicare Advantage PPO + Dental” (**Lumen MAPD + Dental**) plan from UnitedHealthcare
  2. Health Reimbursement Account (HRA)/SHARE and Lumen Retiree Dental plan
  3. No Medical Coverage - Suspend or/Waived
- ❖ Vast majority of Lumen retirees will be better off realizing significant out-of-pocket savings by enrolling in the **Lumen MAPD + Dental plan**
- ❖ Dedicated UHC Customer Service number for retirees of Lumen:

**844-588-5873, TTY: 711,  
8 am - 8 pm local time, Monday – Friday**

*Available now for questions or personal needs assessment*





# Original Medicare Basics

# When are you eligible for Medicare?



**You're 65  
years old**

**OR**



**You qualify on the  
basis of disability or  
other special situation**

**AND**



**You're a U.S. citizen or a  
legal resident who has lived  
in the United States for at  
least 5 consecutive years**

**If you (or your spouse) have contributed payroll taxes to Medicare throughout your working life, you are eligible for Medicare when you reach age 65 — regardless of your income or health status**



# Understanding Original Medicare's rules

- **You must be entitled to Medicare Part A and/or enrolled in Medicare Part B** and continue to pay your Medicare Part B premium
- **You can only be in one Medicare Advantage plan at a time.** Enrolling in another plan will automatically disenroll you from any other Medicare Advantage or prescription drug plan.
- **If/When you are a member,** you are encouraged to read the plan's Evidence of Coverage (EOC), including appeals and grievance rights, which can be found at [Lumen.com/MAPD](https://www.lumen.com/MAPD)
- **The EOC also covers** specific plan benefits, copays, exclusions, limitations and other terms
- **Please review the full text of the Statement of Understanding** in your 2025 enrollment plan guide



# Understanding your Medicare choices

Step

1

Enroll in  
Original Medicare

## Original Medicare

Provided by the federal government



### Part A

Helps pay for hospital stays and inpatient care



### Part B

Helps pay for doctor visits and outpatient care

After you enroll in Original Medicare (Parts A and B), you may choose to enroll in additional Medicare coverage.



# Understanding your Medicare choices

## Step 2

Decide if you need more coverage

### Option 1

Add 1 or both of the following to Original Medicare

#### Medicare Supplement plan

Offered by private companies



Helps pay for some or all of the out-of-pocket costs that come with Original Medicare

#### Medicare Part D plan

Offered by private companies



Helps pay for prescription drugs

### Option 2

Choose a Medicare Advantage (Part C) plan

#### Medicare Advantage plan

Offered by private companies



#### Part C

Combines Part A (hospital insurance) and Part B (medical insurance) in 1 plan



#### Part D

Usually includes prescription drug coverage



Provides additional benefits, services and programs not provided by Original Medicare





# Medicare Advantage plan highlights



## All the benefits of Part A

- Hospital stays
- Skilled nursing
- Home health



## All the benefits of Part B

- Doctor visits
- Outpatient care
- Screenings and shots
- Lab tests



## Prescription drug coverage

Included in this Medicare Advantage plan



## Additional benefits, programs and features

Bundled with this plan

**Medicare Advantage (Part C) plans are provided through private insurers like UnitedHealthcare**





# **Lumen MAPD + Dental**

**Medical:  
Benefits, Programs and Features**

# Plan highlights



**\$950 annual out of pocket maximum**



**Prescription drug coverage**



**Wellness, vision, dental, hearing and chiropractic coverage**



**No referral needed to see a specialist**



**Worldwide emergency and urgent care coverage**

**A national plan covering you anywhere in the United States, and its territories**

Visit doctors, specialists and hospitals in or out of our network for the same cost share as long as they agree to see you and accept Medicare<sup>6</sup>



This is a **Group Plan** exclusive to eligible Lumen retirees and their eligible dependents



# Visit any doctor, specialist or hospital that accepts Medicare

- Even though you are not required to see a network provider, they may already be part of our network.
- To find out, search our online Provider Directory at [Lumen.com/MAPD](https://Lumen.com/MAPD) or call UnitedHealthcare Customer Service:

**844-588-5873, TTY: 711,  
8 am - 8 pm local time, Monday - Friday**

- With this plan, you pay the same share of cost in and out-of-network as long as the provider is eligible to participate in the Medicare Program.
- **If your provider is in-network, they must accept this plan if you are an existing patient. If your provider is out-of-network, they may choose not to treat you unless it is an emergency.**



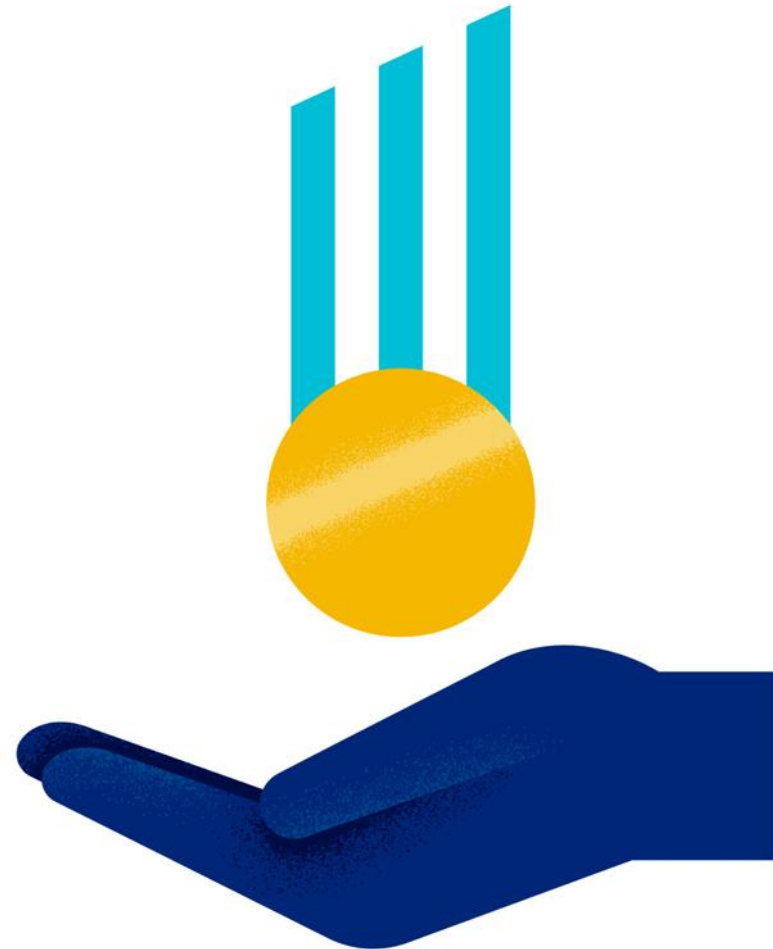
# Your annual costs

**Premiums** = vast majority of retirees will have minimal, if any monthly cost.








**No annual medical deductible**

**Annual out-of-pocket maximum = \$950**

**Lifetime maximum = None**








# Plan benefits

Benefit coverage	In and out-of-network
 Primary care provider (PCP) office visit	\$5 copay
 Specialist office visit	\$35 copay
 Urgent care	\$35 copay*
 Emergency room	\$90 copay*
 Inpatient hospitalization	\$250 per day, days 1-4, \$0 per day thereafter
 Outpatient surgery	\$150 copay
 Medical virtual visits	\$0 copay w/ AmWell, Doctor on Demand or Teladoc \$5 copay w/ your local provider









# Preventive services

Benefit coverage	In and out-of-network
 Annual Physical	\$0 copay
 Annual Wellness Visit	\$0 copay
 Immunizations	\$0 copay
 Breast cancer screenings	\$0 copay
 Colon cancer screenings	\$0 copay

# Additional benefits

Generally more generous than Original Medicare

Benefit coverage	In and out-of-network
 Routine podiatry	\$35 copay, 6 visits per year
 Routine chiropractic care	\$20 copay, 24 visits per year
 Routine acupuncture services	\$35 copay, 12 visits per year
 Routine vision services	\$0 copay - 1 exam per year. \$100 allowance towards eyeglasses or contact lenses
 Routine hearing services	\$0 copay- 1 exam per year \$500 allowance for hearing aids/3 years* <i>(combined for both ears)</i>
 Routine dental care	\$0 copay preventative services. <i>*See next slide for more detail</i>

*\*Hearing aids must be purchased through UHC Hearing*





# Dental coverage

With UnitedHealthcare® Dental, you'll have access to the industry's largest national MA dental network with 365,000 providers & locations.

- ✓ 100% coverage for exams, X-rays, cleanings and periodontal maintenance when you see a network dental provider
- ✓ 80% coverage for minor services, including fillings, pulp protection and nitrous oxide\*\*
- ✓ 50% coverage for major services, including crowns, root canals, dentures and more\*
- ✓ \$50 annual deductible and \$1,000 annual plan maximum (after max, remaining charges are member's responsibility)
- ✓ You can see any dentist who accepts the plan. You'll get greater savings from a network dentist
- ✓ Dental contact information can be found on the back of your UnitedHealthcare member ID card. **844-588-5873**, TTY 711, 8 a.m. - 8 p.m. local time, Monday - Friday



\*\*Provider network may vary in local market.

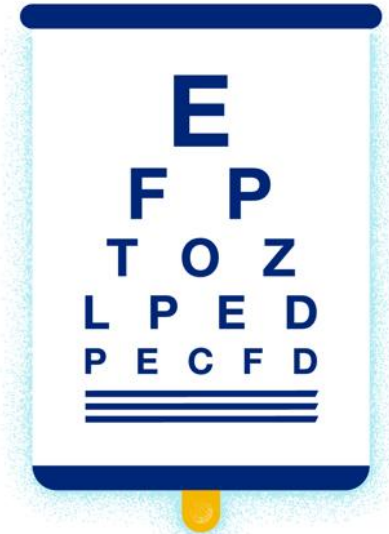
\*Please refer to your Summary of Benefits for details on your benefit coverage.



# Vision exam & eyewear\*

With the vision benefit, you'll have access to a nationwide network of providers with the freedom to see any participating vision provider.

- ✓ A routine eye exam once every 12 months with a \$0 copay
- ✓ \$100 allowance toward eyeglasses (frames and lenses), every 12 months
- ✓ \$100 allowance toward contact lenses instead of eyeglasses, every 12 months
- ✓ Out-of-network providers may require you to pay upfront and submit a reimbursement claim to UnitedHealthcare
- ✓ The network is UHC Medical Network



\*Please refer to your Summary of Benefits for details on your benefit coverage.



# Diabetes testing and monitoring supplies

When you use one of the approved meters and corresponding strips, your cost-share for diabetes testing and monitoring supplies is a \$0 copay.

These supplies also include any brand of:

- Lancets
- Lancing device
- Glucose control solution (to test accuracy of your meter)
- Replacement batteries for your meter

*To switch to one of the preferred brands, you may be required to get a new prescription from your doctor. A temporary supply of your current brand can be requested.*

**Plus, your plan provides coverage for many of the OneTouch<sup>®</sup> and ACCU-CHEK<sup>®</sup> blood glucose testing strips and meters\***

\*Other suppliers/vendors/providers are available in our network.





# **Lumen MAPD + Dental**

**Medicare Part D  
(Prescription Drug):  
Benefits and Features**

# Prescription drug coverage with UnitedHealthcare

- ✓ UnitedHealthcare has thousands of national, regional, local chain and independent neighborhood pharmacies in our network
- ✓ Thousands of covered brand-name and generic prescription drugs
- ✓ Check your plan's drug list at [lumen.com/MAPD](https://lumen.com/MAPD) or call Customer Service to see if your prescription drugs are covered



# Changes to Medicare Part D coverage— Inflation Reduction Act

## What is it?

The Inflation Reduction Act (IRA) was signed into law in 2022. All UnitedHealthcare Group Retiree Medicare Part D plans (MAPD and PDP) are impacted.

## What does this mean?

Beginning January 1, 2025:

- The coverage gap stage (donut hole) is eliminated. The drug stages will be the deductible, initial coverage stage and catastrophic coverage stage.
- Your 2025 total out-of-pocket costs for Part D prescription drug costs will be limited to \$2,000.  
That means that after you and others on your behalf have paid a combined total of \$2,000 for your Medicare Part D covered drugs, you will move from the initial coverage stage to the catastrophic coverage stage.
- All Medicare Part D enrollees will have the option to pay their out-of-pocket prescription drug costs in monthly installments over the course of the year. This is referred to as the Medicare Prescription Payment Plan.



# Medicare Prescription Payment Plan

## What is it?

The Medicare Prescription Payment Plan is a new program created under the Inflation Reduction Act that allows participants to spread their covered Part D out-of-pocket spending over the remainder of the calendar year.

## Who can participate in the Medicare Prescription Payment Plan program?

- All Part D enrollees in employer group plans are eligible to participate in the Medicare Prescription Payment Plan beginning on or after January 1, 2025. Information about the program is included in select plan materials.
- While this program is available to anyone with Medicare Part D, enrollees with high cost-sharing earlier in the plan year are more likely to benefit from the program.
- This program may not be a good fit for members who have low yearly drug costs, who are not likely to reach the \$2,000 annual out-of-pocket maximum, or who have Extra Help or another government program to help save on their prescription drug costs.

## How does it work?

- A member can opt-in to the program through the plan online, over the phone or by mail
- The member pays \$0 up front for their Part D medication, and the plan pays the pharmacy for the member's cost share
- The plan sends monthly bills to the member, which can be paid online, over the phone or by opting in to autopay
- Future payments increase as the member continues to fill prescriptions throughout the year
- The member won't pay interest or fees on the amount owed even if the payment is late



# Prescription Drug coverage integrated into the plan

## Drug payment stages:

### Annual deductible

This plan has a \$50 Rx deductible<sup>1</sup>. You pay the total cost of your drugs until you reach \$50. Then you pay the copay or coinsurance, and the plan pays the rest.

### Initial coverage

You pay a copayment or coinsurance (percentage of a drug's total cost) for covered drugs.

### Catastrophic coverage

After you and others on your behalf have paid a combined total of \$2,000 for your prescription drugs, you will pay \$0 for Medicare Part D covered drugs for the rest of the plan year.

<sup>1</sup>The deductible applies to tiers 3, 4, and 5 only which can contain both brands and generics





# Part D prescription drug benefits

Tier	Prescription drug type	Your costs	
		Retail <i>(30-day supply)</i>	Preferred Mail Order <i>(30/90-day supply)</i>
1	<b>Preferred Generic:</b> Lower-cost, commonly used generic drugs	\$0 copay	\$0 copay
2	<b>Generic:</b> Many generic drugs	\$8 copay	\$16 copay
3	<b>Preferred Drug:</b> Many common brand-name drugs and some higher-cost generic drugs	\$40 copay	\$80 copay
4	<b>Non-preferred Drug:</b> Non-preferred generic and non-preferred brand-name drugs, including <b>compounds</b>	\$90 copay	\$180 copay
5	<b>Specialty Tier:</b> Unique and/or very-high-cost brand-name generic drugs	30% coinsurance	30% coinsurance





# **Lumen MAPD + Dental**

## **Additional Services: Benefits and programs**

*All voluntary and included at no additional cost*

# HouseCalls brings yearly check-in care to you\*

Get a yearly in-home visit from one of our licensed health care practitioners at no additional cost to you. The visit includes:

- ✓ Up to an hour of 1:1 time with the health care practitioner
- ✓ Health screenings tailored to you
- ✓ A medication review
- ✓ A chance to get advice and ask questions to help you manage your health
- ✓ A visit summary that is sent to you and your primary care provider



## Prefer a video visit?

HouseCalls offers a video visit using a computer, tablet or smartphone to connect plan members with a health care practitioner. They will review your health history and current medications, discuss important health screenings, identify health risks and provide health education.

\*HouseCalls may not be available in all areas.



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# Renew Active®

**Renew Active is the gold standard in Medicare fitness programs and available at no additional cost to you.**

- ✓ Provides you the chance to stay physically fit with a free gym membership and access to our nationwide network of fitness centers
- ✓ Access to on-demand workout videos and livestreaming fitness classes if you want access to the benefit from your home
- ✓ Social activities at local health and wellness classes and events



Participation in the fitness program is voluntary. Consult your doctor prior to beginning an exercise program or making changes to your lifestyle or health care routine. The fitness program includes standard fitness membership and other offerings. Fitness membership equipment, classes, activities and events may vary by location. Certain services, discounts, classes, activities, events and online fitness offerings are provided by affiliates of UnitedHealthcare Insurance Company or other third parties not affiliated with UnitedHealthcare. Participation in these third-party services is subject to your acceptance of their respective terms and policies. UnitedHealthcare is not responsible for the services or information provided by third parties. The information provided through these services is for informational purposes only and is not a substitute for the advice of a doctor. Gym network may vary in local market and plan.



# Extra help recovering with UnitedHealthcare Healthy at Home

With UnitedHealthcare Healthy at Home you are eligible for the following benefits up to 30 days following all inpatient and skilled nursing facility discharges\*:



**28 home-delivered meals** when referred by a UnitedHealthcare Engagement Specialist



**12 one-way rides** to medically related appointments and to the pharmacy when referred by a UnitedHealthcare Engagement Specialist



**6 hours of non-medical personal care** provided through a professional caregiver to perform tasks such as preparing meals, bathing, medication reminders and more. A referral is not required.

\*A new referral is required after every discharge to access your meal and transportation benefit.



# More peace-of-mind with a Personal Emergency Response System (PERS)\*

With the Personal Emergency Response System (PERS), provided by Lifeline, help is a button push away.

- ✓ In-home medical alert monitoring system
- ✓ Quick access in any situation, whether an emergency or you just need a helping hand
- ✓ Provides safety, independence and peace of mind



**Help is just a push  
button away**

\*Benefits, features and/or devices vary by plan/area. Limitations and exclusions apply. You must have a working landline and/or cellular phone coverage to use PERS.



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# Well-tuned care for your hearing

**With UnitedHealthcare Hearing, you can receive a hearing exam and access to one of the widest selections of prescription and non-prescription hearing aids at significant savings.**

Plus, you'll receive personalized care and follow-up support from experienced hearing providers, helping you to hear better and live life to the fullest.

- ✓ Receive friendly expert advice through our national network of 6,500+ hearing providers\* — or try virtual appointments\*\*
- ✓ Get personalized support to help you adjust to your new hearing aids
- ✓ Choose from the latest technology from popular brands including Phonak, Starkey®, Signia, ReSound, Widex® and Unitron™
- ✓ **This plan includes a \$500 hearing aid allowance, combined for both ears, every 3 years.**



Save up to  
**50%**

To get started and save up to 50% off standard industry prices^ with exclusive pricing, go online or call UnitedHealthcare Hearing.

\*Please refer to your Summary of Benefits for details on your benefit coverage.

\*\*Select products and providers.

^Based on suggested manufacturer pricing.

Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply. Other hearing exam providers are available in the UnitedHealthcare network. The plan only covers hearing aids from a UnitedHealthcare Hearing network provider. Provider network size may vary by local market.



# Get care virtually anywhere

**With Virtual Visits, you're able to live video chat\* with a doctor or behavioral health specialist from your computer, tablet or smartphone anytime, day or night.<sup>5</sup>**

*You can ask questions, get a diagnosis or even get medication prescribed and have it sent to your pharmacy. All you need is a strong internet connection.*


**Virtual Doctor Visits may be good for minor health concerns including:**

- ✓ Allergies, bronchitis, cold/cough
- ✓ Fever, seasonal flu, sore throat
- ✓ Migraines/headaches, sinus problems, stomachaches

**Virtual Behavioral Health Visits may be best for:**

- ✓ Initial evaluation
- ✓ Behavioral health medication management
- ✓ Addiction
- ✓ Depression
- ✓ Trauma and loss
- ✓ Stress or anxiety



 **You can find a list of participating Virtual Visit providers by logging into the member website**

\*The device you use must be webcam-enabled. Data rates may apply. This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. Providers cannot prescribe medications in all states.







# How to Enroll

# Dates to Remember

## How to enroll and/or gather more information *Lumen's Annual Enrollment period is November 6<sup>th</sup> - November 20<sup>th</sup>*

- ❖ If you are interested in learning more about the Lumen MAPD + Dental plan.

UHC Customer Service at

**844-588-5873, TTY: 711,  
8 am - 8 pm local time, Monday - Friday**

- ❖ Two ways to enroll, beginning November 6<sup>th</sup> and ending on November 20<sup>th</sup>

Health Life website:

**[lumen.com/healthbenefits](https://lumen.com/healthbenefits)**      or

Call 833-925-0487

Monday – Friday 7 a.m. - 7 p.m. (CST)

- ❖ Attend one of the joint Lumen/UHC/BSC 'How To Enroll' teleconferences: *Details will be posted to **[Lumen.com/MAPD](https://lumen.com/MAPD)**.*

***NOTE: If you are currently enrolled in a Medicare Supplement Plan and wish to enroll in the MAPD + Dental plan, it is your responsibility to disenroll from the Medicare Supplement plan. The process is not automatic.***





# What to Expect Next

# What to expect after enrollment

1

## Read your Welcome Letter and get your new UnitedHealthcare member ID card

The Welcome Letter gives you more information on how your benefits work, some frequently asked questions about the Late Enrollment Penalty and plan coverage and Benefit Highlights. Your member ID card will be attached to a card carrier you get in a separate mailing.

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2

## Register online to access your plan information

After you receive your member ID card, you can register online at [lumen.com/MAPD](https://lumen.com/MAPD).

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3

## Start using your card

You can start using your member ID card as soon as your plan is effective, January 1, 2025.

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4

## Help us understand your unique health needs

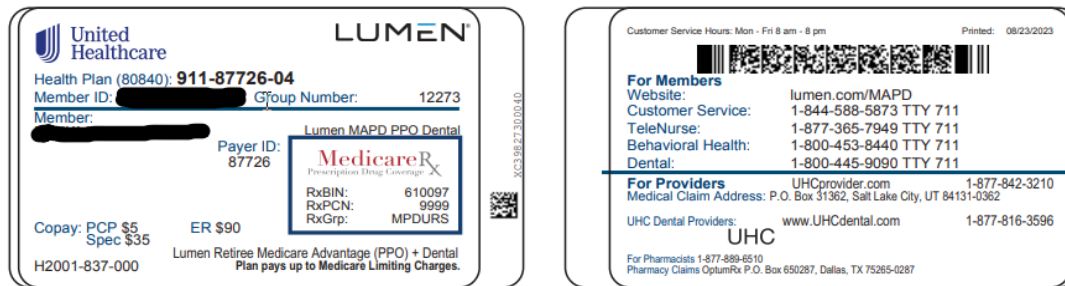
Soon after your effective date, we will contact you to complete a short health survey. Throughout the year, we'll also provide reminders about preventive care as well as offer programs and resources to help you live a healthier life.



# How to use your new UnitedHealthcare member ID card

Around mid to late December 2024, you and any Medicare-eligible dependent covered by the plan will get a Welcome Letter and UnitedHealthcare member ID card which is your confirmation of enrollment.\*

- ✓ Beginning January 1<sup>st</sup>, 2025, simply use your UnitedHealthcare member ID card each time you go to the doctor or hospital or get a prescription filled at the pharmacy
- ✓ The back of your member ID card lists important phone numbers you may need throughout the year
- ✓ Don't discard your red, white and blue Medicare card – **store it in a safe place**
- ✓ Keep this member ID in your wallet and show to providers and pharmacies



\*Retirees in the same household may receive these on different days, which is a normal part of the mail stream.



# Sign up for your secure personal online account

[lumen.com/MAPD](https://lumen.com/MAPD)

Follow these easy steps to sign up for your secure and personal online account:

- 1 Visit the website and click on the **Sign In/Register** button and then click **Register Now**
- 2 Enter your information (first and last name, date of birth, ZIP code, UnitedHealthcare member ID number) and click **Continue**
- 3 Create your username and password, enter your email address, and click **Create my ID**
- 4 For security purposes, you will need to verify your account by email, call or text

After you sign up, you can:

- ✓ Look up your latest **claim** information
- ✓ Review **benefit** information and plan materials
- ✓ Print a **temporary member ID card** and request a new one
- ✓ Look up **drugs** and how much they cost under your plan
- ✓ Search for network **doctors**
- ✓ Sign up to get your **Explanation of Benefits** online





# Questions and Answers



# Thank You

We look forward to welcoming you to our Medicare family



Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply.

The formulary, pharmacy network, and/or provider network may change at any time. You will receive notice when necessary.

You must continue to pay your Medicare Part B premium.

This document is available in alternative formats.

If you receive full or partial subsidy for your premium from a plan sponsor (former employer, union group or trust), the amount you owe may be different than what is listed in this document. For information about the actual premium you will pay, please contact your plan sponsor's benefit administrator directly.

<sup>1</sup>Optum Home Delivery is a service of Optum Rx pharmacy. Optum Home Delivery Pharmacy and Optum Rx are affiliates of UnitedHealthcare Insurance Company. You are not required to use Optum Home Delivery Pharmacy for a 90-day supply of your maintenance medication. If you have not used Optum Home Delivery Pharmacy, you must approve the first prescription order sent directly from your doctor to the pharmacy before it can be filled. Prescriptions from the pharmacy should arrive within 5 business days after we receive the complete order. Contact Optum Rx anytime at 1-888-279-1828, TTY 711.

Out-of-network/non-contracted providers are under no obligation to treat Lumen members, except in emergency situations. Please call our customer service number or see your Evidence of Coverage for more information[, including the cost-sharing that applies to out-of-network services.

The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities. We provide free services to help you communicate with us such as letters in other languages, Braille, large print, audio, or you can ask for an interpreter. Please contact Customer Service at 844-588-5873, TTY 711, 8 a.m.–8 p.m. local time, Monday - Friday, for additional information.

Plans are insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor. Enrollment in the plan depends on the plan's contract renewal with Medicare.

