

# Understanding Verizon Mid-Atlantic Retiree Pre-Medicare Medical Options

## Premium calculation

The total annual premium for each retiree medical plan option is determined before the start of the applicable plan year on an actuarial basis. This calculation is based in part on utilization, claims experience, and the number of covered lives (retirees and dependents) during the two preceding years. For example, 2026 premiums (calculated in 2025) are based in part on 2023 and 2024 utilization, claims, and covered lives data.

## Pre-Medicare retirees with an initial hire date prior to August 3, 2008

For pre-Medicare retirees with an initial hire date prior to August 3, 2008 (“Pre-2008 Retirees”), Verizon’s annual contribution toward retiree medical coverage is limited. These limits, referred to as the Company Retiree Contribution Caps or “caps”, are:

Retiree Only \$12,580	Retiree + 1 \$25,160	Retiree + Family \$31,450
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These contribution values subsidize the total annual premium cost of the Verizon medical plans. When the cost of the selected plan option exceeds the cap, the pre-Medicare retiree is assessed and billed the balance of the cost payable to Verizon.

## Pre-Medicare retirees with an initial hire date on or after August 3, 2008

For pre-Medicare retirees with an initial hire date on or after August 3, 2008 (“Post-2008 Retirees”), Verizon’s annual contribution toward retiree medical coverage is currently \$576 for each full year of net credited service (“NCS”) up to a maximum of 25 years.

## Alternative options

In past bargaining, CWA and Verizon agreed to explore additional medical plan options and/or a Health Reimbursement Account (HRA). For the 2026 plan year, the premiums for all Verizon-offered pre-Medicare medical plan options exceed the caps. As a result, CWA negotiated an additional plan option and an HRA, which are available to Pre-2008 and Post-2008 Retirees.

This document is provided for informational purposes only and is not intended to constitute a Summary Plan Description or other official Plan document. It is intended solely as a brief summary of updated medical contribution information and does not include all terms, conditions, limitations, exclusions, or eligibility requirements applicable under the Plan. The Plan is governed exclusively by the official Plan document and, where applicable, the Collective Bargaining Agreement. In the event of any inconsistency or conflict between this letter and the terms of the official Plan document or Collective Bargaining Agreement, the terms of the official Plan document and Collective Bargaining Agreement shall govern and control.

## **Additional medical plan option available in 2026**

The Surest Alternative Plan offers a lower premium, varying co-pays, no deductibles, and no coinsurance, but comes with an out-of-pocket maximum higher than the MCN and MEP PPO options. Co-pays vary depending upon the procedure, as well as the provider.

## **Health Reimbursement Account (HRA) options available in 2026**

HRA options are available as an alternative to Verizon medical plan coverage. Eligible Pre-2008 Retirees may elect to assign their cap value to an HRA. Eligible Post-2008 Retirees may elect to assign their NCS-based subsidy value to an HRA.

Two HRAs are available: the Pre-Medicare Exchange HRA and the Pre-Medicare HRA. The Pre-Medicare Exchange HRA offers access to medical plans offered by the individual marketplace. The Pre-Medicare HRA requires retirees to have non-Verizon sponsored medical coverage (e.g., through another employer, a spouse's employer, or the VA).

The HRAs can be used for reimbursement of certain out of pocket medical expenses such as after-tax premiums, co-pays, deductibles, and prescriptions, as well as certain dental and vision expenses, for the retiree and their eligible dependents.

NOTE: Retirees must elect the HRA as opting out of medical coverage does not automatically default to the HRA.

## **Verizon Benefits Center**

Retirees are strongly encouraged to contact the Verizon Benefits Center at 1-855-489-2367 or visit [verizon.com/benefits](http://verizon.com/benefits) connection for detailed information on specific options available to them.

## **Health Care Benefits Coordinator (HCBC)**

CWA has negotiated for a Health Care Benefits Coordinator (HCBC) to assist retirees with their retiree benefits. Tom Ballek, an active CWA member of Local 13500, serves as the HCBC for retirees. After speaking with the Verizon Benefits Center, retirees may contact Tom to address questions they may still have regarding specific benefit eligibility.

Tom Ballek

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