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# **CWA STRONG UNION STRONG**

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## **Message from the 2019-2020 Bargaining Team:**

Attached are the details of the Tentative Agreement reached between CWA and CenturyLink on August 16, 2019.

Your CWA Bargaining Committee met August 13-16, 2019 with CenturyLink. We spent many hours reviewing healthcare data and wages. When we entered into early limited negotiations, we knew we had a limited amount of time together to address issues. Both sides brought multiple issues to the table. The Company came to the table with regressive proposals in regards to tuition assistance, pension, and healthcare. We reached a point where only healthcare and wages were on the table.

We continue to see healthcare costs rising and are unable to contain them. At this point the only way we saw to curb the increase, was to join the larger population of CenturyLink and participate in their benefits plan. By doing this we will no longer negotiate set rates; it will be determined with the rest of the Company. By having more participants in the plan, the costs are spread out to a larger group and it is reflected in better premiums for all.

We maintained all of our current job security language, 20% cap in contracting in field operations, call sharing language in consumer sales & care as well as repair. We have protected many benefits in our current contract by not opening it to full negotiations.

### **The Bargaining Committee Unanimously Recommends Ratification.**

**Brenda Roberts, Vice President**

**Susie McAllister, CWA Chair**

**Lisa Avila, CWA Co-Chair**

**Jake Williams, Local 7804**

**Valerie Packer, Local 7621**

**Jeremiah Clever, Local 7603**

**Gregg Sherwood, Local 7777**

### **NOTE:**

**The vote of the membership of each Local Union must be reported to the District 7 office by 12:00pm Noon MDT Wednesday September 18, 2019.**

## **Details of Tentative Agreement**

### **Contract Duration:**

Current contract extended to April 1, 2023 with the following revisions

### **Wages:**

Wage increases are for all titles and schedules.

3.0% June 14, 2020

2.5% June 13, 2021

2.5% June 12, 2022

### **Healthcare:**

Premium Rates and Plan Design Changes (See Attached). We previously negotiated 2020 rates with the 2017 contract those rates are attached for comparison of the newly negotiated rates and plans.

Our plan choices will be Premium CDHP, Standard CDPH and HDHP. The Premium CDHP aligns closely with the current CDHP. The PPO will no longer be an option.

There will be no monetary payment for anyone opting out of the healthcare coverage.

The Letter of Agreement regarding Retiree Health Care remains unchanged for the duration of this agreement.

If you currently have a HRA health reimbursement account, it will roll over to any of the new CDHP plans.

### **Article 10 Benefits-new language:**

**Section A10.5** Effective January 1, 2020, the Company agrees to provide employees covered by this Agreement the same options for group medical coverage, (to include prescription drug), group dental, group vision, employee life insurance, dependent life insurance, basic long-term disability insurance, supplemental long-term disability insurance, accidental death and dismemberment, health care flexible spending account and dependent day care flexible spending account, and at the same premiums, as the Company provides for its non-bargaining employees employed by the Company. The Company in its sole discretion may provide the coverage and benefits required by this Addendum through insurance and/or self-funded plans.

The Company will make available to employees and former employees, as outlined in the letter of agreement regarding retiree healthcare in Addendum 3 of the collective bargaining agreement, the same options for retiree health benefits as are offered to similarly-situated non-bargaining employees who retire from the Company. The retiree health benefits will be exclusively governed by the terms of the applicable plan(s) including eligibility criteria.

**The Short Term Disability benefits that were negotiated in 2017 remain as they are today.**

### **Arizona Fair Wages & Healthy Families Act:**

The Company will comply with the Fair Wages & Healthy Families Act effective January 1, 2020.

**Neutrality:**

We proposed improved neutrality and card-check language under Article 1.4 that would apply to employees in all CenturyLink subsidiaries. Our proposal was rejected.

**\*Newly Negotiate Premiums for 2020 Upon Ratification**

Full Time	2020 Total Bi-Weekly Contribution Non-Smoker				2020 Total Bi-Weekly Contribution Smoker			
	Employee	EE+Spouse	EE+Children	EE+Family	Employee	EE+Spouse	EE+Children	EE+Family
<b>2020 Premium CDHP</b>								
less than \$30,000	\$54.33	\$152.75	\$127.98	\$248.52	\$101.00	\$250.76	\$211.99	\$383.87
\$30,000 but less than \$50,000	\$63.80	\$170.23	\$143.40	\$274.03	\$110.47	\$268.24	\$227.41	\$409.38
\$50,000 but less than \$70,000	\$73.41	\$188.02	\$159.07	\$299.96	\$120.08	\$286.03	\$243.08	\$435.31
\$70,000 but less than \$100,000	\$82.87	\$205.67	\$174.59	\$325.74	\$129.54	\$303.68	\$258.60	\$461.09
<b>2020 Standard CDHP</b>								
less than \$30,000	\$25.80	\$92.84	\$76.63	\$165.78	\$68.19	\$181.86	\$152.94	\$288.72
\$30,000 but less than \$50,000	\$35.27	\$110.32	\$92.05	\$191.29	\$77.66	\$199.34	\$168.36	\$314.23
\$50,000 but less than \$70,000	\$44.88	\$128.11	\$107.72	\$217.22	\$87.27	\$217.13	\$184.03	\$340.16
\$70,000 but less than \$100,000	\$54.34	\$145.76	\$123.24	\$243.00	\$96.73	\$234.78	\$199.55	\$365.94
<b>2020 Savings HDHP</b>								
less than \$30,000	\$6.43	\$52.16	\$41.76	\$109.61	\$45.92	\$135.08	\$112.83	\$224.12
\$30,000 but less than \$50,000	\$15.90	\$69.64	\$57.18	\$135.12	\$55.39	\$152.56	\$128.25	\$249.63
\$50,000 but less than \$70,000	\$25.51	\$87.43	\$72.85	\$161.05	\$65.00	\$170.35	\$143.92	\$275.56
\$70,000 but less than \$100,000	\$34.97	\$105.08	\$88.37	\$186.83	\$74.46	\$188.00	\$159.44	\$301.34

**\*Previously Negotiated premium rates negotiated in 2017 for 2020 that will be replace with the above rates if the new agreement is ratified.**

2020									
Full Time Contributions		NonTobacco (Bi-Weekly)				Tobacco (Bi-Weekly)			
		EE	Sp	Ch	Fam	EE	Sp	Ch	Fam
PPO	< \$30k	\$53.21	\$162.42	\$146.69	\$291.59	\$57.58	\$175.74	\$158.72	\$315.50
PPO	30-49k	\$77.32	\$196.18	\$179.91	\$341.93	\$83.67	\$212.26	\$194.66	\$369.97
PPO	50-69k	\$101.42	\$229.93	\$213.15	\$392.27	\$109.73	\$248.78	\$230.63	\$424.44
PPO	70-99k	\$125.55	\$263.66	\$246.41	\$442.58	\$135.84	\$285.28	\$266.61	\$478.87
CDHP	< \$30k	\$46.98	\$143.38	\$129.48	\$257.38	\$50.83	\$155.14	\$140.10	\$278.49
CDHP	30-49k	\$68.25	\$173.14	\$158.80	\$301.81	\$73.85	\$187.34	\$171.82	\$326.56
CDHP	50-69k	\$89.53	\$202.93	\$188.14	\$346.25	\$96.87	\$219.57	\$203.57	\$374.64
CDHP	70-99k	\$110.80	\$232.73	\$217.50	\$390.65	\$119.89	\$251.81	\$235.34	\$422.68
HDHP	< \$30k	\$41.76	\$127.43	\$115.08	\$228.79	\$45.19	\$137.88	\$124.52	\$247.55
HDHP	30-49k	\$60.66	\$153.92	\$141.17	\$268.28	\$65.63	\$166.54	\$152.74	\$290.28
HDHP	50-69k	\$79.57	\$180.39	\$167.23	\$307.78	\$86.10	\$195.18	\$180.95	\$333.02
HDHP	70-99k	\$98.49	\$206.86	\$193.34	\$347.25	\$106.57	\$223.82	\$209.19	\$375.73

**Newly Negotiated Plan Design would be in effect January 1, 2020 upon ratification**

	CDHPs (includes HRA)		HDHPs (HSA Eligible)
Medical Benefits	Std Premium CDHP	Std Standard CDHP	Std Savings HDHP
Employee Premiums	Highest Cost Option	Mid Cost Option	Low Cost Option
Employer-Funded Account	\$1,000	\$500	\$0
Employee + 1	\$1,500	\$750	\$0
Employee + Family	\$2,000	\$1,000	\$0
Employee-Funded HS Acct Max:	n/a	n/a	\$3,550 single; \$7,100 family
EE Funded Annual Catch-up Contribution Max if 55+	n/a	n/a	\$1,000
Deductible Employee	\$1,500	\$1,500	\$1,500
Employee + 1	\$2,250	\$2,250	\$3,000
Employee + Family	\$3,000	\$3,000	\$3,000
Out-Of-Pocket Max Employee	\$3,200	\$3,600	\$3,600
Employee + 1	\$4,800	\$5,400	\$6,850
Employee + Family	\$6,400	\$6,850	\$6,850
Coinsurance	80%	80%	80%
Professional Service Physician Office Visit	85% Tier 1, 80% Other after deductible	85% Tier 1, 80% Other after deductible	85% Tier 1, 80% Other after deductible
- Office visit lab, x-ray, surg. Tray, etc.	85% FreeStanding Network Facility (80% Other) after deductible	85% FreeStanding Network Facility (80% Other) after deductible	85% FreeStanding Network Facility (80% Other) after deductible
Specialist Office Visit	85% Tier 1, 80% Other after deductible	85% Tier 1, 80% Other after deductible	85% Tier 1, 80% Other after deductible
Outpatient Services Surgery	85% FreeStanding Network Facility (80% Other) after deductible	85% FreeStanding Network Facility (80% Other) after deductible	85% FreeStanding Network Facility (80% Other) after deductible
Hospitalization Services Room & Board/Surgical Services	80% after deductible	80% after deductible	80% after deductible
Urgent Care Urgent Care Services	80% after deductible	80% after deductible	80% after deductible
Emergency Health Coverage Emergency Care Services	80% after deductible; 50% if non-emergency	80% after deductible; 50% if non-emergency	80% after deductible; 50% if non-emergency
Retail Rx Generic	80% after deductible	80% after deductible	80% after deductible
Brand Name Formulary	80% after deductible	80% after deductible	80% after deductible
Brand Name Non-Formulary	80% after deductible	80% after deductible	80% after deductible
Mail Order Rx Generic	80% after deductible	80% after deductible	80% after deductible
Brand Name Formulary	80% after deductible	80% after deductible	80% after deductible
Brand Name Non-Formulary	80% after deductible	80% after deductible	80% after deductible



Previous Plan design negotiated in 2017 if the contract is ratified this will be replaced

CenturyLink 2017 Medical Plan Designs (In-Network)

LQ Union

PPO Plans		CDHPs (Includes HRA)		HDHPs (HSA Eligible)	
Medical Benefits	LQ Union PPO	Medical Benefits	LQ Union CDHP	Medical Benefits	LQ Union HDHP
Employee Premiums	Highest Cost Option	Employee Premiums	Mid Cost Option	Employee Premiums	Lowest Cost Option
Employer-Funded Account Employee	n/a	Employer-Funded Account Employee	\$1,000	Employer-Funded Account Employee	\$0
Employee + 1	n/a	Employee + 1	\$1,500	Employee + 1	\$0
Employee + Family	n/a	Employee + Family	\$2,000	Employee + Family	\$0
Employee-Funded HS Acct Max:	n/a	Employee-Funded HS Acct Max:	n/a	Employee-Funded HSA Acct Max (2017):	\$3,400 single; \$6,750 family
EE Funded Annual Catch-up Contribution Max if 55+	n/a	EE Funded Annual Catch-up Contribution Max if 55+	n/a	EE Funded Annual Catch-up Contribution Max if 55+	\$1,000
Deductible Employee	\$500	Deductible Employee	\$1,500	Deductible Employee	\$1,500
Employee + Family	\$1,000	Employee + 1	\$2,250	Employee + 1	\$3,000
Out-Of-Pocket Max (includes deductible) Employee	\$3,900	Employee + Family	\$3,000	Employee + Family	\$3,000
Employee + Family	\$7,800	Out-Of-Pocket Max Employee	\$2,000	Out-Of-Pocket Max Employee	\$3,000
Coinsurance	80%	Employee + 1	\$3,000	Employee + 1	\$6,000
Professional Service Physician Office Visit	\$25 copay	Employee + Family	\$4,000	Employee + Family	\$6,000
- Office visit lab, x-ray, surg. Tray, etc.	100%	Coinsurance	80%	Coinsurance	80%
Specialist Office Visit	\$40 copay	Professional Service Physician Office Visit	85% Tier 1, 80% Other after deductible	Professional Service Physician Office Visit	85% Tier 1, 80% Other after deductible
Outpatient Services Surgery	85% FreeStanding Network Facility (80% Other) after deductible	- Office visit lab, x-ray, surg. Tray, etc.	85% FreeStanding Network Facility (80% Other) after deductible	- Office visit lab, x-ray, surg. Tray, etc.	85% FreeStanding Network Facility (80% Other) after deductible
Hospitalization Services Room & Board/Surgical Services	80% after deductible	Specialist Office Visit	85% Tier 1, 80% Other after deductible	Specialist Office Visit	85% Tier 1, 80% Other after deductible
Urgent Care Urgent Care Services	\$35 copay	Outpatient Services Surgery	85% FreeStanding Network Facility (80% Other) after deductible	Outpatient Services Surgery	85% FreeStanding Network Facility (80% Other) after deductible
Emergency Health Coverage Emergency Care Services	80% after deductible, not paid if not an emergency	Hospitalization Services Room & Board/Surgical Services	80% after deductible	Hospitalization Services Room & Board/Surgical Services	80% after deductible
Retail Rx2 30-day Generic	\$10 copay	Urgent Care Urgent Care Services	80% after deductible	Urgent Care Urgent Care Services	80% after deductible
Brand Name Formulary	70% (min \$35, max 60%)	Emergency Health Coverage Emergency Care Services	80% after deductible	Emergency Health Coverage Emergency Care Services	80% after deductible
Brand Name Non-Formulary	55% (min \$50, max \$100)	Retail Rx Generic	80% after deductible	Retail Rx Generic	80% after deductible
Mail Order Rx2 90 days Generic	\$25 copay	Brand Name Formulary	80% after deductible	Brand Name Formulary	80% after deductible
Brand Name Formulary	\$80 copay	Brand Name Non-Formulary	80% after deductible	Brand Name Non-Formulary	80% after deductible
Brand Name Non-Formulary	\$140 copay	Mail Order Rx Generic	80% after deductible	Mail Order Rx Generic	80% after deductible
		Brand Name Formulary	80% after deductible	Brand Name Formulary	80% after deductible
		Brand Name Non-Formulary	80% after deductible	Brand Name Non-Formulary	80% after deductible

Vision/Dental Newly Negotiated Premiums upon ratification

## Dental & Vision Contributions – Standard Plan

### Employee pay period contributions

Dental Bi-Weekly Full-Time	Total Premium				Employee Contribution				Employer Subsidy			
	EE	ES	EC	EF	EE	ES	EC	EF	EE	ES	EC	EF
2019 Basic Dental	\$12.44	\$28.62	\$31.10	\$47.28	\$6.22	\$13.51	\$10.88	\$18.17	\$6.22	\$15.11	\$20.22	\$29.11
Enhanced Dental	\$15.53	\$35.71	\$38.82	\$59.00	\$9.31	\$20.60	\$18.60	\$29.89	\$6.22	\$15.11	\$20.22	\$29.11
<b>No Increase in employee contributions</b>												
2020 Basic Dental	\$12.96	\$29.80	\$32.39	\$49.24	\$6.22	\$13.51	\$10.88	\$18.17	\$6.74	\$16.29	\$21.51	\$31.07
Enhanced Dental	\$16.17	\$37.19	\$40.42	\$61.44	\$9.31	\$20.60	\$18.60	\$29.89	\$6.86	\$16.59	\$21.82	\$31.55
\$ Change (Basic)	\$0.52	\$1.18	\$1.29	\$1.96	\$0.00	\$0.00	\$0.00	\$0.00	\$0.52	\$1.18	\$1.29	\$1.96
\$ Change (Enhanced)	\$0.64	\$1.48	\$1.60	\$2.44	\$0.00	\$0.00	\$0.00	\$0.00	\$0.64	\$1.48	\$1.60	\$2.44
% Change (Basic)	4.2%	4.1%	4.1%	4.1%	0.0%	0.0%	0.0%	0.0%	8.4%	7.8%	6.4%	6.7%
% Change (Enhanced)	4.1%	4.1%	4.1%	4.1%	0.0%	0.0%	0.0%	0.0%	10.3%	9.8%	7.9%	8.4%

Vision Bi-Weekly Full-Time	Total Premium				Employee Contribution				Employer Subsidy			
	EE	ES	EC	EF	EE	ES	EC	EF	EE	ES	EC	EF
2019 CenturyLink Basic	\$3.36	\$7.06	\$6.05	\$9.75	\$3.00	\$6.45	\$5.69	\$9.14	\$0.36	\$0.61	\$0.36	\$0.61
<b>No Increase in employee contributions</b>												
2020 CenturyLink Basic	\$3.44	\$7.23	\$6.20	\$9.99	\$3.00	\$6.45	\$5.69	\$9.14	\$0.44	\$0.78	\$0.51	\$0.85
\$ Change	\$0.08	\$0.17	\$0.15	\$0.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.08	\$0.17	\$0.15	\$0.24
% Change	2.4%	2.4%	2.5%	2.5%	0.0%	0.0%	0.0%	0.0%	22.2%	27.9%	41.7%	39.3%

Previously Negotiated Rates that will change to the above rates if the new agreement is ratified.

### 2020 Total Bi-Weekly Contribution

Full Time Employee  
2020 Contributions

	<u>Employee</u>	<u>EE+Spouse</u>	<u>EE+ Children</u>	<u>EE+Family</u>
Basic Dental	\$5.40	\$10.83	\$9.48	\$16.22
Enhanced Dental	\$8.06	\$16.06	\$14.07	\$24.13
Vision	\$2.18	\$5.42	\$4.52	\$7.36