

Frontier Communications

Enhanced Voluntary Severance Plan CWA 1298

June 2022

ENHANCED VOLUNTARY SEVERANCE PLAN

- Enhanced Voluntary Severance Plan (“EVSP”) provides for a lump sum severance (less applicable taxes) to eligible employees based on completed years of net credited service.
- Includes 6 months of company subsidized COBRA Medical continuation for employees not eligible for retiree medical from the company, provided you are enrolled in the medical plan at the time of your separation.
- In order to receive the 6 months company subsidized medical COBRA coverage, you are required to actively enroll in COBRA medical coverage once you receive your COBRA Notice and follow the instruction in the COBRA Notice to pay your share of the 1st month of the COBRA coverage equal to the newly ratified medical contribution which is effective July 1, 2022, as follow:
 - EE Only= \$110
 - EE + 1 & EE + Family= \$220
- For the remainder of the 12 months of COBRA you will pay the full COBRA premium.
- The COBRA Notice will be mailed to your home address within 2 weeks of the COBRA Administrator (HealthEquity-WageWorks) receive your separation information from Frontier; the monthly COBRA premium information will be included in the COBRA Notice
- Medicare allows for an 8-month grace period to be enrolled after leaving an employer’s plan.

EVSP ELIGIBILITY

- Eligibility for the Voluntary Severance Plan
 - ✓ Regular Employee
 - ✓ Active or on Short Term Disability
 - ✓ On an approved Leave of Absence with re-employment rights
 - ✓ 1 year of net credited service
 - ✓ In a title that has had a surplus identified

- Elections for Voluntary Severance Plan are due by 11:59 pm on June 10, 2022

- Volunteers will be selected based on seniority

- If accepted for Voluntary Severance Plan exit from the company will be no later than 6/30/22

SEVERANCE AMOUNTS BASED ON CREDITED YEARS OF SERVICE

Completed Yrs. Of Net Credited Service	Amount of Lump Sum Payment (in weeks of Base Pay)
20 and over	52 weeks
19	46 weeks
18	42 weeks
17	40 weeks
16	38 weeks
15	36 weeks
14	34 weeks
13	32 weeks
12	30 weeks
11	28 weeks
10	26 weeks
9	20 weeks
8	18 weeks
7	16 weeks
6	14 weeks
5	12 weeks
4	8 weeks
3	6 weeks
2	4 weeks
1	2 weeks

2022 Retiree Medical Program

- **Employee Eligibility:** employee meets age and service requirements for a pension under Pension Plan. Employee is enrolled in Frontier's active medical plan.
- **Coverage upon retirement:**
 - Begins first of the month in which an employee who is retiring reaches at least **age 59½**
 - Employees who retire before reaching age 59½ will be eligible first of the month the retiree will turn 59½
 - Coverage ends when the retiree becomes eligible for Medicare
 - Coverage for non-Medicare eligible spouse and dependents ends when retiree attains Medicare eligibility
 - If eligible spouse or dependents become eligible for Medicare before the retiree becomes eligible than their coverage ends upon their eligibility for Medicare
 - If retiree dies, or becomes eligible for Medicare due to disability, before the date on which the retiree would have normally been Medicare-eligible, coverage for an eligible spouse and dependent continues through date the retiree would have been Medicare eligible, provided that such spouse or dependent otherwise remains eligible and covered under the terms of the Plan

2022 Retiree Medical Program

- Annual Caps on Company Cost of Retiree Medical Coverage (includes dental coverage)

Coverage Category	Annual Capped Company Contribution for Retiree Medical Benefits
Retiree only	\$15,000
Retiree plus one dependent coverage	\$30,000
Family coverage	\$37,500

- Employees hired as of 8/8/09 would be eligible for retiree medical coverage at age 59 1/2 subject to the annual Company contribution caps in the Table above.
- Employees hired after 8/8/09 and before 5/9/2013 will be eligible for 50% of the contribution caps in table above
- Employees hired after 5/9/2013 will not be eligible for a subsidy from the company
- Vision coverage would continue to be available at 100% of the premium
Monthly 2022 Premiums Retiree \$2.59 Retiree +1 \$4.66 Family \$7.25
- Retiree contributions would vary based on choice of plan and hire date
 - Active Medical and Dental Plan
 - Retiree Medical Access Plan (RMAP) and Dental
- Alternately, a retiree can choose a Health Reimbursement Account (HRA) based on the amount of the applicable annual Company contribution cap and the health coverage level prior to retirement (retiree, retiree+1 or family). If an employee retires prior to age 59 1/2 and returns to the plan at age 59 1/2 then the HRA option will be available for retiree and Non- Medicare eligible spouse and dependents.

Plans Available for retirements

(Anthem Blue Cross/Blue Shield Network)

In-network program	Active Plan as of 7/1/22	RMAP
Plan Features	In-Network	In-Network
Annual Deductible	Individual= \$550 You + 1 or more= \$1,100	\$1,000 / \$2,000 / \$3,000
Medical Annual OOP Max	Individual= \$2,000 You + 1 or more= \$4,000	\$5,000 / \$10,000 / \$15,000
Routine Physicals	100%	100%
Coinsurance	20%, after deductible	30% after deductible
Emergency Room	20%, after deductible	30% after deductible
In Patient Hospital	20%, after deductible	30% after deductible
Primary Care Physician	20%, after deductible	30% after deductible
Specialist Physician	20%, after deductible	30% after deductible
Mental Health Outpatient Services	20%, after deductible	30% after deductible -30 visits per year
Chiropractor Care	PPO- 20%, after deductible- limited to \$200 per calendar year HCN- 20% after deductible limited to 40 visits per year	30% after deductible -30 visits per year
Acupuncture	Not Covered	30% after deductible
Physical and Occupational Therapy	20%, after deductible	30% after deductible -40 visits per year
Hospice Services	20%, after deductible	30% after deductible

The Active Plan will be applicable to similarly-situated active employees including any plan design and contribution changes that may occur from year to year.

RX Retiree Medical Plan Design (Express Scripts)

In-network program	Active Plan as of 7/1/22	RMAP
Plan Features	In-Network	In-Network
Prescription Deductible	None	\$150
Prescription Out-Of-Pocket Max	Individual= \$1,200 Family= \$2,400	N/A
RX Retail (30 days)	\$12 Generic \$40 Formulary \$65 Non-Formulary	\$12 Generic \$35 Preferred Brand \$55 Non Preferred Brand \$75 Other Drugs
RX Mail (90 days) (obtain via ESI Mail Order Pharmacy or CVS Retail stores)	\$24 Generic \$80 Formulary \$130 Non-Formulary	\$30 Generic \$87.50 Preferred Brand \$137.50 Non Preferred Brand \$187.50 Other Drugs

The Active Plan will be applicable to similarly-situated active employees including any plan design and contribution changes that may occur from year to year.

Estimated Retiree Premiums for Employees hired as of 8/8/09

In-network program	Active Medical	RMAP
Coverage Available Starting at Age 59½	Premium estimates based on cap of Retiree \$15,000 Retiree +1 \$30,000 Family \$37,500	Premium estimates based on cap of Retiree \$15,000 Retiree +1 \$30,000 Family \$37,500
2022 Retiree	\$140	\$0
2022 Retiree + Spouse	\$281	\$0
2022 Family	\$351	\$0
2023 Retiree	\$227	\$0
2023 Retiree + Spouse	\$454	\$0
2023 Family	\$568	\$0
2024 Retiree	\$315	\$60
2024 Retiree+ Spouse	\$630	\$120
2024 Family	\$788	\$150

Premiums for 2023 and 2024 are estimated based on the value of the plans and the applicable caps. These premiums may vary based on any required medical changes through negotiation or legislation. The company and the union will meet each year to review the retiree programs.

HRA Option

- Eligible employees, at retirement or age 59 1/2, could **decline** Frontier Retiree Medical Plan coverage and elect a Health Reimbursement Account (HRA)
- This annual option would provide a retiree with a monthly HRA contribution, HRA option will be applicable to the level of coverage as an active employee. Provided spouse and dependents continue to be eligible for the plan.
- During each annual open enrollment, an eligible retiree can elect the HRA or select one of the two Frontier Retiree Medical Plan options (Active or RMAP)
- Electing the HRA requires proof of medical coverage outside of Frontier. Coverage under a spouse that works for Frontier is not eligible for the HRA.
- HRA funds not used are eligible to be rolled over for use in subsequent years and will also be available for use post Medicare eligibility.
- HRA allows for reimbursement of tax-deductible health expenses for eligible retirees and eligible spouses and dependents
 - Post-tax retiree medical premiums
 - Deductibles
 - Copays or Co-Insurance
 - Hearing aids
 - More details available in *IRS Publication 502*
- HRA contributions end when the retiree attains Medicare eligibility.

RETIREE LIFE INSURANCE

- If hired before 8/8/2009, Company Paid Life Insurance is 1x times your base pay as of 12/31/2009 rounded up to the next ten thousand. Company paid life insurance for employees over age 65 reduces at 10% each year until age 70. At age 70 the benefit is reduced by 50%.
- If hired after 8/8/2009, Company Paid Life Insurance is \$15,000
- Supplemental Life insurance is available for former employees prior to age 65. This benefit will not transfer automatically. You need to elect this benefit by contacting Milliman. Monthly premiums are required to continue Supplemental Life Insurance.
- Spouse Life and Child Life coverages can be converted to individual policies by contacting Securian at 866-365-2374.
- Former employees will need to elect a beneficiary for retiree life insurance

CONTACT NUMBERS

- Milliman Pension –1-866-333-2074 option 1
- Milliman Retiree Medical -1-866-333-2074 option 2
- Fidelity Investments - 1-800-835-5095
- Frontier Retirement Mailbox contact information retirementplans@ftr.com
- Frontier Active Benefit Plans questions: Frontier.Benefits.Team@FTR.com