



Issue 3 — 2026

THE RETIREE GUARDIAN

Newsletter of CenturyLink Retirees

www.cltiretires.org

MESSAGE FROM THE CHAIR

Good News Regarding HRA Benefits We are pleased and excited to announce that Lumen has confirmed approval of the HRA (Health Reimbursement Account) benefit for 2027. This means that your HRA accounts will remain in effect for the coming year.

Annual Meeting via Zoom The Board is also pleased to announce that we are planning our Annual Meeting via Zoom on Wednesday, September 16, 2026. Additional details about the meeting can be found elsewhere in this issue of the Retiree Guardian.

Pension Fund Update Some time ago, we stated that the Annual Funding Notice (AFN) which is sent to all who receive pensions should be updated. The NRLN was at the forefront of advocating for changes to both the presentation and timeliness of the data. As a result, the 2025 Combined Pension Fund AFN report is easier to read and provides more current information.

Board Transitions and Future Planning As we have noted in previous issues, the Board has been facing the possibility of member departures. We were fortunate to welcome Carol Rinker as a new Board member this year. Carol has been a valuable addition to the team. However, we may lose two Board members at the end of this year.

With a smaller Board, we will have fewer resources

and may not be able to continue all current activities in the same manner. Consequently, the Board is evaluating operational changes that will allow us to continue providing valuable information and services to our retirees in 2027. We expect to provide an update on these plans in the October issue of the Retiree Guardian.

With Gratitude As I close, I would like to extend my sincere thanks to our Board members, Retiree Advocates, and Medicare expert. They work diligently to bring helpful and timely information to our (cont' pg 3)

Health Reimbursement Arrangement (HRA) 2027 News!

Most retirees receive an important HRA benefit from Lumen. This plan started in 2012 for management and was guaranteed until April 2017. In 2013 the craft plan was included in the CWA contract. The management plan must be renewed annually. We are pleased to report that it has been approved for 2027!

News Alert! Act Now!
2026 Annual Meeting on Zoom
Wednesday, September 16, 2026
See Details on Page 2!

Inside this Edition ...

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Our Mission: To preserve and protect the pension and benefits we earned

Directions to RSVP for the Retiree Association Annual Meeting on ZOOM Wednesday, September 16, 2026

Action Required:

If you plan to attend, please respond by August 15.

There are three ways to respond listed below.



Get Ready for Fall Enrollment Periods

If you don't want to make any changes, do nothing.

Medicare Open Enrollment:
October 15 – December 7

Change or enroll in Part D Prescription Drug
Plan or Part C Medicare Advantage Plan for
2027.

Lumen Annual Enrollment:
November 4 – 19, 2026

Change your Lumen health benefits for 2027.
Look for more information in the fall issue of
The Retiree Guardian.

For help with Medicare, call your local SHIP
program at 1-877-839-2675

Help Fight Medicare Fraud!

Always review your Medicare Summary Notice and
your Explanation of Benefits from your insurance
company. Report any problems or errors you find to
SHIP 1-877-839-2675 or the Senior Medicare Patrol
1-877-808-2468.

We'll have speakers from Lumen/CenturyLink and
NRLN to address a variety of topics. A Telecom
History Group speaker will help us celebrate the 150th
anniversary of the invention of the telephone!

Here's how to get on the list of attendees to receive the
private link or phone number for the meeting.

There are three different ways to respond:

1. Go to our website and sign up there. CenturyLink
Retirees: ctlretirees.org
2. Send an email to us with your full name, city, state
and telephone number. ctlretirees@gmail.com
3. Call us and leave a message with your full name,
city, state and telephone number.
402-553-6316

We hope you'll make time to join the event! Please
respond by August 15.

Meeting Details:

1:00 p.m. to 2:30 p.m. CDT
12:00 p.m. to 1:30 p.m. MDT
11:00 a.m. to 12:30 p.m. PDT

**ZOOM link to be provided by early
September via your e-mail or telephone**

MESSAGE FROM THE CHAIR (continued)

(cont' pg 1)

retirees. Each person contributes unique skills, experience, and a genuine commitment to serving our retiree community. Thank you all for your dedication and outstanding work.

Notes from Shingle Creek As a personal update from along Shingle Creek, we are enjoying a busy season of wildlife. Hummingbirds, songbirds, baby ducks, and geese regularly visit, along with squirrels and rabbits that help themselves to the cracked corn on our patio. We also hear owls calling from the trees and hawks soaring overhead, hunting prey. The circle of life continues, and it is a pleasure to witness all of this activity.

Enjoy the summer, and God Bless.

Roger Borowicz



RETIREE LUNCHEON IN LONGMONT/BOULDER AREA

Thanks to Linda Hollard for the following pictures and invitation.

The monthly telephone luncheons have started back up in the Longmont / Boulder area. Attached are photos from the May luncheon.

Left to right: Linda and Paul Hollard, Patti Coleman, Ann Bengtson, Susan Cinnamon, Kathy and Bernie Vahling

Linda has also provided her phone number (303-507-1080) and her email address: **plholland@centurylink.net** for you to use to find out the details of when and where they are held if you are interested in joining this group.

Membership and Retiree Guardian Updates

By Clyde Just

This will be the second to last article that I will be writing for The Retiree Guardian newsletter. As I have said before, I will be leaving the Board of Directors at the end of 2026.

In the second quarter of 2026 we lost 13 retiree members of our association who have passed away. This leaves 1,594 paid members and a grand total of 1,642 members. Just as an FYI, of the 1642 members 421 have elected to not provide us their email address. This equates to 25.6% that cannot be reached by email.

One of the tasks that I have taken on is to try my best to insure that the 360 members who want to receive their newsletter by email each quarter get it. Here are the results of these efforts for Issue 2 of 2026. Paul Williams will use Constant Contact to send out 360 emails and after three weeks have expired he will pull a report that tells us who has not yet opened their email. I have found out that 43 members sometimes are on this list and sometimes they are not on the list. However, I have found that all of them do receive their email copy. So I have created a DO NO FOLLOW-UP list that I use to no longer check on these members.

For RG Issue 2 of 2026, which was sent out in early April, we had 60 names on the list of Did Not Open. However, 26 of them are on my NO FOLLOW-UP LIST so I only had to follow-up on 34 names. Here is the result of this follow-up: 1) Lumen employees - 2 which I did not call, 2) I called seven names however their telephone numbers were either never given by the retiree on their initial application or they have since been disconnected, 3) I found out by calling 8 retirees

that they had changed their email address but had not notified us – I then updated their email address in our data base, 4) the retiree could not remember if they received Issue 2 so I sent the four of them a new copy and reminded them that Issue 3 will be sent out in early July, 2026, 5) three had simply forgot to open their email (remember, this was three weeks after we sent it to them, 6) for 8 of them I left a voice mail message but none of the 8 returned my call, and finally the last two told me that they did get their email copy and had opened it. For these two I then added their names to my NO FOLLOW-UP list.

The last task that I do is to follow-up with a retiree where the US Post office returned their RG as not being deliverable. For Issue 2 we received seven returned RG's. In following up there were six that when I called them their phones were disconnected. The last one is a retiree that goes south for the winter and she forgot to change her mailing address. We visited about this issue and she will make this address change twice each year. Also, I did not find any obits on the six so my only assumption is these six most likely have simply moved to a new residence failed to tell us their new address I could not find a way to find out their new address.

Please keep your address and email information up to date in our records.

Concession Information for Retirees

By Kathleen Ells

For retirees with a CenturyLink landline or internet account, here is some helpful information regarding concession billing and customer service.

Your online bill may list the customer service number **1-800-244-1111**. If you call this number, you may be connected with a representative outside the United States. If you mention that you have a concession account, the representative may see that your account is tagged as an “**Employee Account**” and may direct you to a specialized team at **1-866-602-9376**.

This is what happened when I used the chat feature on the CenturyLink billing website. After calling the 866 number, I reached a representative named Otto in Guatemala who was familiar with concession billing. He was able to remove a \$6 late fee from my bill, which had resulted from a billing error that affected some retirees earlier this year.

However, I still recommend contacting the **Solutions Team at 1-800-577-4049** whenever possible. They are U.S.-based CenturyLink representatives who can assist with concession accounts, internet service, billing questions, and related issues.

For retirees who want more information about concession accounts:

- Visit the Service Centers homepage and select **Benefit Information**. (Direct link to the Businessolver website - <https://www4.benefitsolver.com/benefits/BenefitSolverView>)
- There you can find information about concession benefits and eligibility.

- You can also access a **Concession Form** if you believe your concession benefit is missing from your account.

I remember that during the billing issues in 2023, a representative from the Omaha Order Writing Department assured me that “No one loses their concession.”

If you believe your bill amount is incorrect, call **1-800-577-4049**. The representative can verify whether your concession benefit is attached to your account. If it is missing, they can submit the necessary form to have the concession reviewed and restored.

Also, if you continue reading the **Benefit Information** page, you will see the statement:

“Products and services may vary based on the service location of the primary residence.”

This helps explain why concession billing amounts may differ from one retiree to another.

National Retiree Legislative Network (NRLN) and Annual Funding Notices (AFN) about Pension Assets

AFN Information Now More Timely

The value of the NRLN's work with the U.S. Senate's Committee on Help, Labor, Education and Pensions (HELP) in 2022 appears in the 2025 Annual Funding Notices sent to pension plan beneficiaries in the spring of 2026.

The NRLN worked with the committee staff of Washington Senator Patty Murray, at that time Chair of the Committee on HELP. The NRLN's proposal on making AFN information clearer and timelier was in a bill introduced by Senator Murray and later incorporated with another Senate pension bill. The Senate passed the pension legislation as part of the omnibus appropriations bill. The House also passed pension legislation. Together, the 2022 major pension legislation is known as Secure 2.0.

Before the 2022 legislation, pensioners received an AFN which failed to provide a clear picture of how well or poorly a pension plan was funded. This was because by the time beneficiaries received an AFN in April, the assets data had been calculated 16 months earlier. The NRLN's common sense proposal included in the legislation was to use year-end valuation so the data on pension plan assets is only four months old.

Pension plan sponsors were given time to implement the change required by Secure 2.0. The AFNs that pension plan beneficiaries have received in 2026 show a pension plan's assets at fair market value as of December 31, 2025, rather than calculations from January 1, 2025.

In addition, the adopted NRLN's AFN proposal

simplified the document by moving relevant data to a table on page 1. The table shows current and past two years of plan participants; plan assets and liabilities; company funding obligations and contributions; interest rates used to calculate funding levels, and rate of return on plan investments over a three-year period.

The NRLN is now working with committee staff members on Capitol Hill on a Secure 3.0 in cases when a company sells its pension plan to an insurance company (de-risking). We are advocating that an annuity contract should include full reinsurance of the monthly benefit itself. We maintain only a group annuity contract that requires independent third-party reinsurance by a highly rated insurance company can reliably replace the Pension Benefits Guarantee Corporations' (PBGC's) protections for pension plan participants.

Bill Kadereit, President

National Retiree Legislative Network

Medicare 101 Webinar Series

Hosted by DRCOG/SHIP Program and Lumen

Knowing the facts about Medicare and how it may factor into your future is important to your overall retirement plan. Join one of these quarterly 60-minute Medicare webinars and learn from our Medicare experts:

- How Medicare works,
- More about your coverage choices,
- And other resources and tools to keep you informed.

Retirees and their spouses are invited to attend.

This webinar covers the basics of Medicare, the Federal government health insurance for people over age 65. The class is designed for people who are new to Medicare, but it also is a good refresher for people who are already on Medicare. It includes how and when to enroll, what Medicare covers, Medicare costs, and Medicare options and choices, including:

- Medicare's 2 paths
- Medicare Part A Hospital Insurance
- Medicare Part B Medicare Insurance
- Part C Medicare Advantage Plans
- Part D Prescription Drug Plans
- Medicare Supplement Plans (Medigap)

The class is taught by personnel from the Colorado State Health Insurance Assistance Program (SHIP), a national governmental program that educates people about Medicare, helps them understand their Medicare options, and assists with solving problems.

Select one of the below dates to register:

All classes are 11 AM to noon, Mountain time.

Click on the link, or copy it into your web browser to register for the class.

- September 18, 2026:
<https://tinyurl.com/ywh5w67x>
- December 17, 2027:
<https://tinyurl.com/psc4h3pn>

Thanks to Lumen Benefits for inviting retirees to attend these classes, which are also available to Lumen employees. They are a partnership between Lumen and the SHIP program where I volunteer, and I am pleased to be one of the presenters.

Barbara Wilcox

Stay Healthy, Stay Connected, Stay Informed

By Michele Freese and Kelly Candelaria

Lumen Benefits Analysts

Summer is here—a perfect time to enjoy longer days, warmer weather, and opportunities to focus on your health and well-being. Whether you're traveling, spending time with loved ones, volunteering, or simply enjoying the outdoors, staying active, connected, and informed can help support a healthy and fulfilling retirement.

Enjoy the Season of Summer

Take advantage of summer by finding simple ways to stay active and engaged. A daily walk, community activities, volunteer opportunities, learning a new hobby, or spending time with family and friends can benefit both your physical and emotional well-being.

As you enjoy the season, remember to stay hydrated, wear sunscreen, and take precautions during periods of extreme heat.

Keep Your Information Up to Date

Keeping your contact and beneficiary information current helps ensure you receive important benefit communications and that your benefits are distributed according to your wishes.

Update Your Email Address

To update or confirm your email address:

1. Log in to lumen.com/healthbenefits
2. Select Profile
3. Choose Contact Preferences
4. Select Edit
5. Update your email address
6. Mark it as your primary email
7. Save your changes

If you receive communications electronically, be sure to check your email regularly, review messages posted to your account, and check your spam or junk folder periodically.

Review Your Beneficiaries

Life changes such as marriage, divorce, the loss of a loved one, or other family changes may impact your beneficiary elections.

Take a few minutes each year to review:

- Beneficiary names and contact information
- Contingent beneficiary designations
- Any updates needed based on changes in your personal circumstances

Updating your beneficiary information can provide peace of mind for you and your loved ones.

Don't Forget Your Benefits Resources

Helpful retiree resources are available year-round at LumenBenefits.com, including benefits information, wellness resources, important announcements, and Retiree Benefits News articles to help you stay informed.

Need Help?

For retiree benefits assistance:

Lumen Health and Life Website: lumen.com/healthbenefits

Connect with Sofia, your virtual benefits assistant, for immediate support. If additional assistance is needed, Sofia can connect you with a live advocate Monday–Friday, 7 a.m.–6 p.m. CST.

Lumen Health and Life Service Center
833-925-0487
Monday–Friday, 7 a.m.–7 p.m. CST
Representatives can assist with benefit plans,
eligibility, beneficiary updates, and other retiree
benefit questions.

Looking Ahead

Annual Enrollment for 2027 is scheduled for
November 4–19, 2026.

Watch for additional information in the coming
months and be sure your contact information
is current so you receive important enrollment
communications.

Annual Benefits Checkup

- ✓ Confirm your email address
- ✓ Review your mailing address and phone
number
- ✓ Verify your beneficiaries
- ✓ Check your communication preferences
- ✓ Log in periodically to review important
messages

Wishing You a Safe and Healthy Summer

Small steps—staying active, maintaining
social connections, and keeping your benefits
information current—can help support a
healthier and more enjoyable retirement.
On behalf of the Lumen Benefits Team, we wish
you a safe, healthy, and happy summer.

Stay well. Stay active. Stay connected.

Your Lumen Benefits Team



Nelson Phelps

Nelson Blair Phelps, the first executive director of
our 14 state retirement association and the plaintiff
in the benefits lawsuit, passed away peacefully on
June 26, 2026.

Professionally, Nelson was a respected leader
who served as the Executive Director of Human
Resources at U S WEST, where his integrity
and dedication left a lasting impact on countless
colleagues throughout his career.

“In retirement Nels was a founder of the U S
WEST Retiree Association (now CenturyLink
Retirees Association) and it’s first Executive
Director. He lead the efforts to join the three
primary state-based retiree organizations (NWB,
Mountain and PNB) into one organization.

Nels realized by 1992 that, as a 1990 retiree,
the health care “promised” by U S WEST could
change because of benefit-plan language allowing
the company the discretion to make changes. He
was the named plaintiff in the Nelson case, brought
by Curtis Kennedy against U S West, that secured
lifetime health benefits to all retirees who retired
in 1990 or before (plus ERO retirees) That legal
action agreement is binding on all future mergers
of Qwest and CenturyLink.”

The End of POTS is Nigh. An Amateur's Professional Perspective: COMMENTARY.

By Chris Warren of the OFF GRID HAM Website. May 22, 2026

A generational split: There's good chance those under the age of 50 live in a home without a traditional, hard-wired dial up phone. If you're under the age of 40 you probably never, not once in your life, called through an operator, dialed 411, or used a payphone. Do you even know what 411 is? The decline of "plain old telephone service", or POTS in industry lingo, matters to radio amateurs in ways they may not realize.

Your grandad's Bell System: From its inception, the telephone system in the USA was deliberately set up as a "benevolent monopoly". It was not technically possible for different companies to run separate wires everywhere. In response, the government gave the respective Bell Operating Companies (BOCs) exclusive right to provide telephone service. At the same time, Western Electric was acquired in 1881 by what would ultimately become AT&T. Western Electric had exclusive right to manufacture and sell all the equipment used in the network. So not only was there a monopoly on telephone service itself, there was also only one company supplying the equipment. AT&T, the BOCs, and Western Electric were collectively known as the Bell System.

As a tradeoff for having a stronghold on every aspect of the market, the Bell System was subject to government regulation and price controls. This foundation was the genesis of the legendary, reliable, rock stable phone service. That reputation lives on to this day. Whether that image is still deserved or not is a different matter. This synergy worked well, more or less, until a 1982 landmark antitrust case busted up the monopoly. The court ruling took effect in 1984.

Amateur radio and POTS lines: For a long time, ham radio and telephones were complementary services. Hams would orchestrate "phone patches," interfacing radio with a phone line so those in faraway places without phone service, such as military members, could call home. Phone patches were also important during emergency situations. Likewise, many VHF and UHF repeaters had "auto patches" that allowed hams make phone calls from their radios.

Still today, many hams involved with EMCOMM and disaster preparedness insist that POTS lines are the "gold standard" of reliability, especially during power outages and in areas with poor cell coverage. If you still believe this once-true maxim, I'm here to bust it to pieces.

Many survival/preparedness blogs and internet forums have extolled the virtues of POTS lines, citing the usual tropes of reliability and stability. The problem with this conclusion is that POTS lines are quickly being phased out, and the ones that remain are hanging by a thread.

Ma Bell is in a nursing home: It's true that historically the telephone network was incredibly robust. Your dad, grandma, maybe even yourself, may recall having a home phone line for decades and it never once went down.

Today, if you have a dial up line that is still steady and working, you're just lucky! There are no phone switches less than twenty years old, and most of them are older than that. Spare parts are no longer manufactured; they are cannibalized from decommissioned equipment. The technicians who truly knew how to service phone switches retired years ago. Those who are left have to BS their way through maintenance tickets, sometimes even using Google and YouTube, because their employers never trained anyone behind the retirees. The copper wires POTS lines run on are decades old and no one is interested in spending the money to maintain them.

The court ruling from 1982 would have implications for equipment deployment that still ripple out over four decades later. Western Electric was no longer the exclusive supplier. That was good for innovation and keeping everyone competitive, but it also complicated the front line technicians' jobs because there was no longer a common standard. Every manufacturer had its own training methods, protocols, procedures, and in some cases specialized tools.

Universal Telephone Service and Carrier of Last Resort: As one of the regulatory conditions of holding monopoly status, the BOCs were required to provide

universal telephone service. This meant providing service, at regulated prices, to pretty much every customer who wanted it. If it meant running a wire miles and miles down a country road to serve a single remote farmer, the phone company had to do it. And they could not charge that farmer any more than everyone else.

Meanwhile, a parallel policy known as “carrier of last resort” (COLR) came into being. What that means is if no provider can or will supply service to a given area or customer, the COLR must do it, even if unprofitably. After that 1984 court ruling when many new phone companies known as competing local exchange carriers (CLECs) popped up, AT&T or one of the state BOCs was usually the COLR. It’s easy to see why the legacy Bells didn’t like this arrangement. Any CLEC could pick and choose, provide service only in densely populated, high profit areas and leave the scraps out in the country to the COLR. It wasn’t exactly a level playing field, but that’s how it worked.

- The COLR rules are complex and subject to change. This is the general regulatory status as of May 2024 based on those statutes, commissions’ orders, and industry filings. Always verify with the state commission for the most current requirements.

States where regulations or statutes still require traditional wired (landline) service as the basic COLR: WA, NV, AZ, LA, MI, IN, OH, PA, WV, SC, ME, NH, MA, RI.

States that explicitly allow COLR obligations to be met with wireless, VoIP, or other modern technologies: CA, CO, TX, IL, NY, FL.

States where COLR are in transition, partially waved, applied in limited areas, or under review: All other states and the District of Columbia

Sources:

- National Regulatory Research Institute (NRRI) COLR White Paper
- State Public Utility Commission websites and orders
- Federal Communications Commission (FCC) filings
- Industry reports and legal research (May 2024)

Changes to what COLR is will be the final death of POTS: For a long while “last resort” meant a wired POTS line. Now, several states have changed that expectation to mean almost anything else.

Only fifteen states explicitly require wired landlines as COLR service to all customers. All the other states either outright allow other services such as wireless or have varying degrees of exceptions. Technically, a cheap cellular flip phone would satisfy universal service and COLR regulations in most states.

At this point COLR rules are the only thing keeping POTS lines alive at all. The decline of traditional dial up phones will accelerate as states widen standards and allow other means of providing service.

The sunset of POTS matters to radio amateurs; Many public safety agencies are getting rid of their dial up landlines and going with internet based or wireless voice systems. To the radio amateur this may not directly matter, but they will be affected if those systems fail.

Many hams who are deeply involved with survival and preparedness swear by their trusty dial up POTS line as a complement to their radio setups. But as we’ve discussed, that image of rock steady, reliable phone service is largely nostalgia. The cellular network, which is modern and has a much higher priority for restoration during a disaster, is a far better bet.

I urge all ham operators to plan for the day, which is coming soon, when access to a dial up POTS line will not even be a third or fourth choice.

How I know all this: I am a recent AT&T 35-year retiree. Early on I was in customer service and writing software for ISDN circuits (if you know, you know). But for most of my tenure I was a technician in a central office. The central office is the engine room of the communications system. What was once dial tone and analog pulses is now internet and wireless. I’ve seen the evolution in real time.

I spent much of the last two years of my career ripping out obsolete dial up equipment. Lucent 5ESS, Nortel DMS, EWSD, Fujitsu FLM, Litespan...it’s all old, tired, band-aided together 1990s technology. Also consider copper cables that in some cases are over a half century old. This is what your dial up phone lines are still running on. It’s not getting any younger, and no new deployments are planned. Find alternatives, quick! When the guy who fixed the stuff tells you to get rid of it...listen to him.

Original story at Off Grid Ham <https://offgridham.com/>

Medicare's AI Push Snarls Patients and Doctors in Errors and Delays

This story was originally published by KFF Health News (<https://kffhealthnews.org/about-us/>) and re-published here with permission.

By: Darius Tahir - June 23, 2026

Bill Curry, 65, raises cattle on the same land in rural Oklahoma once owned by his father and generations before him. Each quarter, for several years, he has made the 2½-hour drive to Oklahoma City for an epidural in his spine to treat his back pain.

(This story also ran on CBS News. It can be republished for free.)

But this year, because of a new Medicare program, Curry has traveled a little more often.

In February, during one trip, he was told unexpectedly that he needed preapproval for the procedure. Then he went again a month or so later to get the injection, for a total of 10 hours on the road. His clinic wanted him to come in a third time, which they had never asked of him before. That appointment was “just to fill out a piece of paper to tell them how you feel again,” Curry said, so he hasn’t gone.

In January, Oklahoma became one of six states to begin a pilot program testing the use of preapprovals in traditional Medicare, the federal health insurance program for people 65 and older or with disabilities. Medicare had previously eschewed the practice — also known as prior authorization — which requires patients or someone on their medical team to seek insurance approval before proceeding with certain procedures, tests, and prescriptions.

Epidurals like Curry’s are among 13 medical services subject to the new program because the Trump administration says they’re prone to fraud or misuse. Powered by artificial intelligence, the program — called the Wasteful and Inappropriate Service Reduction Model, or WISeR — is intended to save the federal government money and protect patients from potentially unsafe or unneeded care.

Yet early reviews from Oklahoma and the other pilot states — Arizona, New Jersey, Ohio, Texas, and Washington — suggest WISeR’s rollout has not been smooth. Patients, doctors, and other healthcare professionals who spoke with KFF Health News say the effort has created confusion, errors, long wait times, and stress. Some described the rollout as “horrendous” and say people enrolled in Medicare in the pilot states are now getting ensnared in the same red tape as those with private insurance.

One key concern is that it all happened too hastily. WISeR was announced in June 2025 and launched in mid-January.

That was “quicker than normal” for the federal government, said Todd Baker, who recently stepped down as CEO of the Ohio State Medical Association. Doctors “just sort of had to figure it out,” added Jeb Shepard, director of policy at the Washington State Medical Association.

Government contractors have also acknowledged the rapid pace.

“We’ve had an aggressive rollout from the time of being notified to going live,” said Jeremy Friese, CEO of Humata Health, the vendor for Oklahoma. Tech executives servicing other states have said they were still adding features to their products in the spring.

Abe Sutton, director of the Center for Medicare and Medicaid Innovation, which is administering the program, didn’t comment on the rollout schedule. But he said in a statement that the goal of these reforms is to ensure that prior authorization is efficient, fast, and streamlined.

“The model aims to reduce inappropriate care without delaying appropriate care,” he said.

Mehmet Oz, the leader of the Centers for Medicare & Medicaid Services, told NewsNation in December that they were “rolling out some prior authorization on abused practices.”

“The purpose of these is not to deny care,” Oz continued. “It’s to make sure you get the care you need and deserve, not the care some unscrupulous doctor wants to use on you.”

Medicare has struggled in recent years with suspected fraud associated with particular services. The Department of Health and Human Services’ inspector general warned in September that the program’s spending on skin substitutes, for example, had surged nearly 700% over two years, raising “major concerns about fraud, waste, and abuse.” Skin substitutes are among the 13 therapies currently subject to review under WISeR.

The program also imposes prior authorization requirements for kyphoplasty, a surgery for spinal fractures, which a report by the Medicare Payment Advisory Commission flagged as overused.

Sutton acknowledged, however, that “the percentage of providers committing waste, fraud, and abuse is small.”

Consumers and clinicians largely detest prior authorization. Even as federal health officials test the process for Medicare, the Trump administration is trying to scale it back for those with private insurance. According to a KFF poll conducted in January, 69% of insured adults consider prior authorization a burden for care.

Through WISeR, doctors and their staff log in to online portals to submit medical records that justify the procedures. Using artificial intelligence, the systems quickly approve applications that meet the program’s criteria, Friese, Humata’s chief executive, told KFF Health News. He said there is an “immediate yes” in 88% of cases for which clinical data supports an approval.

CMS has touted the process as one in which decisions are returned within 72 hours. After that, clinicians receive a “universal tracking number,” which allows them to schedule the procedure and get paid. In practice, however, participants say the process is anything but easy.

The University of Washington's medical system alone had nearly 100 patients waiting earlier this year for epidural injections due to WISeR-related delays, according to an April report from the office of U.S. Sen. Maria Cantwell (D-Wash.) that drew on hospital association data. "Now, patients are subject to delays or denials which did not exist prior to the WISeR Model," the report said. Curry, the Oklahoma cattle farmer, said he might go to Kansas for future treatments to avoid the approval process. Dorota Gribbin, a New Jersey-based physical medicine and rehabilitation physician, said that by the time authorization came for one of her patients who needed a back pain procedure, the patient had gone to the hospital for more expensive care.

Jennifer Valle, a precertification and insurance supervisor at Clinical Radiology of Oklahoma, said when it comes to kyphoplasties, there has been a lot of "nitpicking" from reviewers. Other times, information her practice provides to CMS gets overlooked, she said, and reviewers ask for imaging that's already in the file.

Claims with no problems are supposed to be paid within 15 days, said James Webb, a musculoskeletal radiologist in Tulsa, Oklahoma, who has also been frustrated by the prior approval and reimbursement process for kyphoplasties. "Six- to eight-week delays is what we've been seeing," he said.

"It's been horrendous," said Jerry Sobel, a Phoenix-area pain management doctor. "Right from the beginning, there seemed to be no organization." Sobel said that as of May, he hadn't gotten paid by Medicare for nine epidurals.

"We continuously monitor operations and work closely with stakeholders to address questions and improve the provider experience," said Sundar Subramanian, the CEO of Zyter, which has the contract for Arizona.

During an April webinar, another Zyter executive acknowledged a large backlog in payments stretching to January. Those backlogs "are currently being resolved," Medicare's Sutton said, without providing further detail.

When asked about other issues — including what doctors suspect are AI-driven errors — Medicare's Sutton said the agency appreciates "feedback on provider experience." It will be used "to help providers better understand WISeR processes," he said.

Although CMS vendors say humans make the final decisions on approvals, doctors and their staffs believe artificial intelligence is playing a large role in the process and that denials are sometimes the result of AI hallucinations that garble or make up information.

One Arizona doctor, who wasn't authorized by his practice to speak, recalled a denial saying his patient wasn't eligible for procedures in the thoracic region, or mid-back. The patient needed an injection to the neck. Webb, the Oklahoma radiologist, documented four times that a patient lacked numbness, and yet his WISeR application was still denied, citing numbness, which, in the reviewer's interpretation,

would rule out the spinal surgery procedure.

Friese, Humata's CEO, said he hasn't heard about any AI hallucinations.

The process is also raising government costs. With more rejections, more appeals are being filed with Medicare's administrative contractors. The government pays the contractors to handle the appeals, and Medicare's Sutton acknowledged that the agency has "accounted for potential changes in the volume of Medicare appeals because of the WISeR program and its associated costs."

Eighty-four percent of commercial insurers already use AI tools, according to a survey released in 2025 by the National Association of Insurance Commissioners, though they have consistently said AI isn't used to deny prior authorization requests.

Its use in Medicare risks introducing friction and frustration into the program — and piling costs onto its beneficiaries. Prior authorization saves money for insurers partly by making patients pay a price in wait times and inconvenience, said Miranda Yaver, a University of Pittsburgh health policy researcher studying the technique.

"People will end up getting ensnared in a lot of red tape, having to be on hold, and getting rerouted," she said. She often wonders whether prior authorization simply shifts costs to patients and doctors, rather than saving them.

Some doctors involved in Medicare's prior authorization experiment believe it will inevitably expand beyond a few services officials in Washington consider fraud-prone.

"Everybody knows that if this pilot project works, it will be prior auth for basically all procedures," said Mary Clarke, a family practice physician in Stillwater, Oklahoma. "If they can show that they can save money, then that's going to be extrapolated and rolled out to other procedures and multiple other things in other states."

When asked whether CMS is considering expansion of its prior authorization pilot, Sutton said in his statement that there are "currently no changes" considered for the list of services subject to the WISeR program, "but CMS continues to assess whether any changes are warranted."

Do you have an experience with prior authorization you'd like to share? Click here to tell KFF Health News your story: <https://kaiserfamilyfoundation.wufoo.com/forms/w19lp8m31l8mow5/>

KFF Health News Southern correspondent Lauren Sausser contributed to this report.

Darius Tahir DariusT@kff.org

KFF Health News is a national newsroom that produces in-depth journalism about health issues and is one of the core operating programs at KFF — the independent source for health policy research, polling, and journalism.



Thank you for providing names and obits of friends and associates who have passed. Please ask your loved ones to include your telephone work history in your obit. It helps when the newspapers are scanned for past employees. Also, if someone's name is missing, please submit it again and we can list it in the next issue.

When reporting, please remember that more information is better. If you call, please spell the names and remember that the city and state are also needed in emails and calls.

3 Rivers Company LLC maintains the membership database and compiles the names for *Milestones*. They can be contacted at ctlretirees@3riversco.com or 763-432-2860. Greg Snyder can also be contacted at TPNupdate@gmail.com or 352-316-5872.

Thanks!
Greg Snyder

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- Knowles, Lillian Arlene “Lily”..... Denver
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- Rochholz, Norman “Richard” Wilton
- Sonnicksen, Daniel William “Dan”..... Waverly
- Thompson, Phyllis. Waukee
- Valentine, Judy Wynn..... Clive

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milestones ... continued from page 10

Vulich, Dolores Celestia "Laurie" Clinton
Wieser, Patricia "Pat" Des Moines
Zust, Robert James "Bob" Altoona
Zwaschka, Kenneth John "Ken" Clive
Zyzda, Marilyn Sioux City

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Bruns, Ruth Francis Stillwater
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* Coursolle, Constance "Rita" Crystal
Daggett, Karen Mae Detroit Lakes/Fargo, ND
* Dunbar, Marian Coon Rapids
Durfee, John Michael Cloquet
Evenson, Wendy J Faribault
Geditz, Mary K. St. Paul/Mansfield, SD
Gerber, Kathleen Plymouth
Hau, Nancy Jean Apple Valley
Haugh, Elizabeth Lou "Betty" Credit River
Hernandez, Joan Lakeville
Hood, Shirley E Eveleth
Johnson, Karla Louise Fergus Falls
Katalinich, Robert H "Cobbs" Pengilly
Kienitz, Joyce Marlene Maple Plain
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Modjeski, Geraldine A "Gerry" Winona
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Wilson, Lois Minneapolis
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Ziegler, George Eugene Burtum/Fridley, MN

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* Carlson, Anna Mae Eleanor Omaha
Pollock, Jacquelyn J "Jackie" Grand Island
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Wasikowski, Teresa Omaha

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Filloon, Charles R "Chuck" Fargo
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Sell, Donna Fargo

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Foltz, Roberta Joann Sioux Falls
Livingston, Eugene "Gene" Salem
* Meyer, Eugene R "Gene" . Sioux Falls/Willmar, MN
Palmer, Curtis "Jim" Pierre
Riley, Helen H Belle Fourche
Sullivan, Mary J Sioux Falls

Wyoming

Beinlich, Keith Lee Cheyenne
Ackerson, James Laramine

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Cortez, John Ignatius Cheyenne
Harr, Judy Lou Cheyenne
Johnson, Lois Lorraine Rock Springs/Deadwood, SD

Other

Bissing, Peggy Lou Moundridge/Denver
Carveth, John Walter. Smithfield/Lakewood, CO
Felice, Mary Kelly Whidbey
Ferrin, Lorel Don. Gilbert/Denver, CO
* Heithoff, Francis Wayne. . Fort Gratiot/Des Moines
Hood Jr, James Edward Ruidoso/St. Paul, MN
Johnson Lois Lorraine Salt Lake City/Deadwood, SD
Jones, Jerry Lee Ooltewah/Van Wert, IA
Kaldor, Daniel Morris Midway/St. Paul, MN
* Kollman, Duane Horseshoe Bay

Perry, Elizabeth Rene Seymour/Loveland, CO
* Roberts, Tom Scottsdale/Nebraska
* Tardy, Jerome "Jerry" Melbourne/Anoka, MN
Triggs, Pamela Jean Tucson/Fargo, ND
Vargo, Mary Beth. Superior/Minneapolis

TWO FRANK BOOMER STORIES

Thanks to James Bregel
From Windom, MN

Frank and the crew were wrecking a double arm toll lead. Frank climbed the pole and there was only about 6" of pole on top of the first cross arm. Frank put his safety strap on the top of the cross arm and when he leaned back he fell through the first cross arm of wires. As he hung there Mr. Miller, the foreman, pulled up and saw Frank hanging there. The foreman almost had a heart attack. But, they were able to get Frank back down the pole and everyone was okay.

The second story was when Frank got transferred to the Redwood Falls, MN crew. One morning, Frank and another lineman were to set a new dead end pole with a pair of wires and an anchor. They got the new pole set and wires and wires and anchor line transferred and it was then lunch time. So, Frank and the other lineman ate lunch in the truck. Lunch time was over so Frank starts the truck and pulls ahead. But, Frank forgot to take the winch line off of the pole and he pulled the new pole down. So, they had to totally start over on the project.

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Joybubbles movie getting attention

By Dave Felice, contributor to the Century Link Retirees

Originally published in the Telecommunications History Group's quarterly newsletter and published here with permission.
<https://www.telcomhistory.org/index.html>

The documentary film about phone phreak Joe Engressia is making its way in film festivals across the nation. The story of how the blind person—later known as Joybubbles—hacked into phone switches by whistling even has an arrangement for European distribution. Director Rachel Morrison says she's extremely pleased by the positive critical reception for the movie.



As a child in the 1950s, Engressia learned how to manipulate the global phone system by perfect-pitched whistling a 2600Hz (cycles per second) tone.

Joybubbles' eagerness for social connections sparked a subculture that had a monumental impact on modern technology. The personal response to loneliness led Joybubbles to become a leader in modern hacking culture described in Phil Lapsley's book, *Exploding the Phone*. The social aspects of the story are often overlooked in technology history.

Writing for the organization Disability Belongs™ (DisabilityBelongs.org), Senior Vice President Lauren A. quotes the film's producer, saying "...the compelling story is totally about blindness, but not about blindness, while putting accessibility at the forefront." William Butler, who is blind himself, says: "People with disabilities are so often on the cutting edge of technology and society and are responsible for so much positive change that happens in the world, but they do not often get the credit."

Lauren A. says blind and disabled people continue to face barriers in discrimination, unemployment, and being under-estimated. She praises the Joybubbles

movie for its accessibility efforts, notably closed captions and audio description devices. She says this provides an "equal opportunity...for viewers to completely immerse themselves in the experience." Commenting on production, Butler says "Creating an audio description track did not slow us down." Overall, reviews of the film are mixed. Some critics praise the documentary for its creative approach to highlighting disability and human connection, as the film uses archival audio and inventive visuals. Because Joybubbles veers away from traditional approaches, some critiques suggest the documentary is not cohesive.

A story in the Winter 2025 edition of *Connections News* talks more about Joe Engressia's life and exploits. Lapsley's book, considered the definitive work on phone hacking history, is available from many sources including the Connections Museum gift shop.



Original THG story by Dave Felice with material from multiple internet source

What to do when a retiree dies ...

Updated December 2025

General Directives

The purpose of this document is to use as the basis for a conversation with your dependents, family members, estate planners, investment and legal advisors, such as a certified elder-law attorney. This document is **not** legal advice, rather it is a summary of certain earned benefits to which a surviving spouse or qualified dependent(s) *may be entitled*, including those due to the designated beneficiary at the time of the retiree's death.

NOTE: It is important to notify WTW of the retiree's death by calling the Lumen Health and Life Center at 800-729-7526 and select Option 3 and then Option 1 as soon as possible after the death, but no later than one year.

Survivor Benefits

★ Contact the Lumen Health and Life Service Center at 800-729-7526 and select Option 2, then Option 1 and then Option 1 again. You may ask the Associate questions about the Group Term Life Insurance payout, as well as continuation of healthcare coverage.

★ For Survivor Annuity questions, contact the Lumen Health and Life Service Center and select Option 2 and then Option 3. You must provide certain information regarding the deceased along with copies of the death certificate sent to WTW.

Group Term Life Insurance

The Group Life Insurance policy is administered by MetLife and is not taxable income. This benefit was originally based on the annual pay of the retiree. Qwest reduced the value of the group policy to a flat \$10,000 for all retirees.

NOTE: It is important to have current beneficiary information on file at the Service Center. To do so, call 800-729-7526 and select Option 2; then Option 1; then Option 1 again.

Continuation of Healthcare Coverage

The Healthcare coverage plans provided by Lumen vary across several different retiree populations. The healthcare coverage for the surviving spouse and any eligible dependent(s) will be the same coverage options the retiree had at the time of his or her death.

The Survivor Guide on the Health and Life website contains a description of each population and should be viewed at lumen.com/healthbenefits by selecting Reference Center, then General Information, and then the Survivor Benefits folder.

Premiums must be paid in a timely manner or the coverage will be terminated and not re-instated.

Dental

If the surviving spouse was not eligible for Medicare, they may continue Dental coverage for 36 months under COBRA as long as the monthly premiums are paid.

Telephone Concession Service (also known as "discounted service")

If the retiree received concession telephone service provided by CenturyLink, it will terminate after two monthly billing periods from the date of the retiree's death.

Other Important Contacts

Social Security: Notify Social Security of the retiree's death by calling 1-800-772-1213, or at the website: www.SSA.gov. Hearing impaired number is 1-800-325-0778. Social Security notification of the retiree's death will end Medicare benefits.

Veterans Administration: If the deceased retiree was a veteran, the Veterans Administration should be contacted to advise them of the retiree's death and to determine if there are any eligible survivor benefits by calling 1-800-827-1000 or at the website: www.VA.gov.

Navigating the Service Center Voice Response System

Revised
December 2025

There are two telephone numbers to access the Lumen Service Center administering our benefits, dependent upon which benefit you are inquiring.

For matters relating to the Health Reimbursement Account the telephone number is 833-925-0487.

For All Other Retiree Benefits the telephone number is the same as it has been historically, 800-729-7526.

It is important that the first contact in receiving answers to your questions or seeking a resolution to an issue dealing with your benefits is the Service Center. The Guide below will assist you in reaching the appropriate representative for your issue. If you have difficulty using the Voice Response System or if you still need help with your issue, then contact your state's Retiree Advocate, listed below.

Guide to Navigating the Lumen Health & Life Service Center/Businessolver Voice Response System

For matters relating to your **Health Reimbursement Account**, call 833-925-0487 and press Option 3 for all HRA questions.

Then enter the last four digits of your Social Security number followed by your date of birth and your zip code.

Then press Option 2. To proceed to the main menu, press Option 2 again.

Then press Option 2 to make your appropriate selection:

- For the status of a recent claim, press Option 1.
- To check your account balance, press Option 2.
- For instructions on how to submit a reimbursement, press Option 3.
- To learn where to access an HRA claim form, press Option 4.
- For questions about eligible HRA expenses, press Option 5,

For matters relating to **All Other Retiree Benefits** call 800-729-7526. Then,

To report a death, press Option 3.

For questions related to other retiree benefits, press Option 2. Then:

- For Medical, Dental, Life and COBRA Insurance, press Option 1; then press Option 1 again.
- For Pension information, press Option 3.
- For Phone concession, press Option 6, then press Option 3

Then,

- For retirees living in a Legacy Century Tel or Embarq territory, press Option 1.
- For retirees living in a Legacy Qwest territory, press option 2.
- To report a Change of Address, press Option 7. Then related to: Health & Welfare benefits, press Option 2; Pension benefits, press Option 4; Optum Rx benefits, press Option 7.

If you prefer communicating by email, the email address is LumenRetireesHelp@businessolver.com.

Lumen Service Center 800-729-7526 or 833-925-0487

If you still have unresolved issues *after* calling the Service Center,
contact your **Retiree Advocate** as listed below.

Arizona	Kitty Kennedy	kkennedy404@gmail.com	520-444-6617
Idaho, Montana	Shirley Moss	samoss05@q.com	208-342-3449
New Mexico	Cassie Kelley	cassiek@comcast.net	505-298-8666
All other states	Jim Heinze	.jjonrr@centurylink.net	303-442-1831

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CenturyLink Retirees

(Please print)

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Address _____

City _____ State __ Zip Code _____ - _____

Phone _____

E-mail _____ *(please enter if you have one)*

Retired from (*Company*) _____ State __ Year ____

Save us print and postage; get your *Retiree Guardian* electronically? YES ____ or NO ____

Pledge to be an active NRLN Grassroots Network volunteer and correspond with my
Senators and Representative on issues important to retirees. YES ____ or NO ____

Send record updates to: CenturyLink Retirees
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☛ **Email: ctlretirees@3riversco.com** ☛

Phone: 763-465-0030