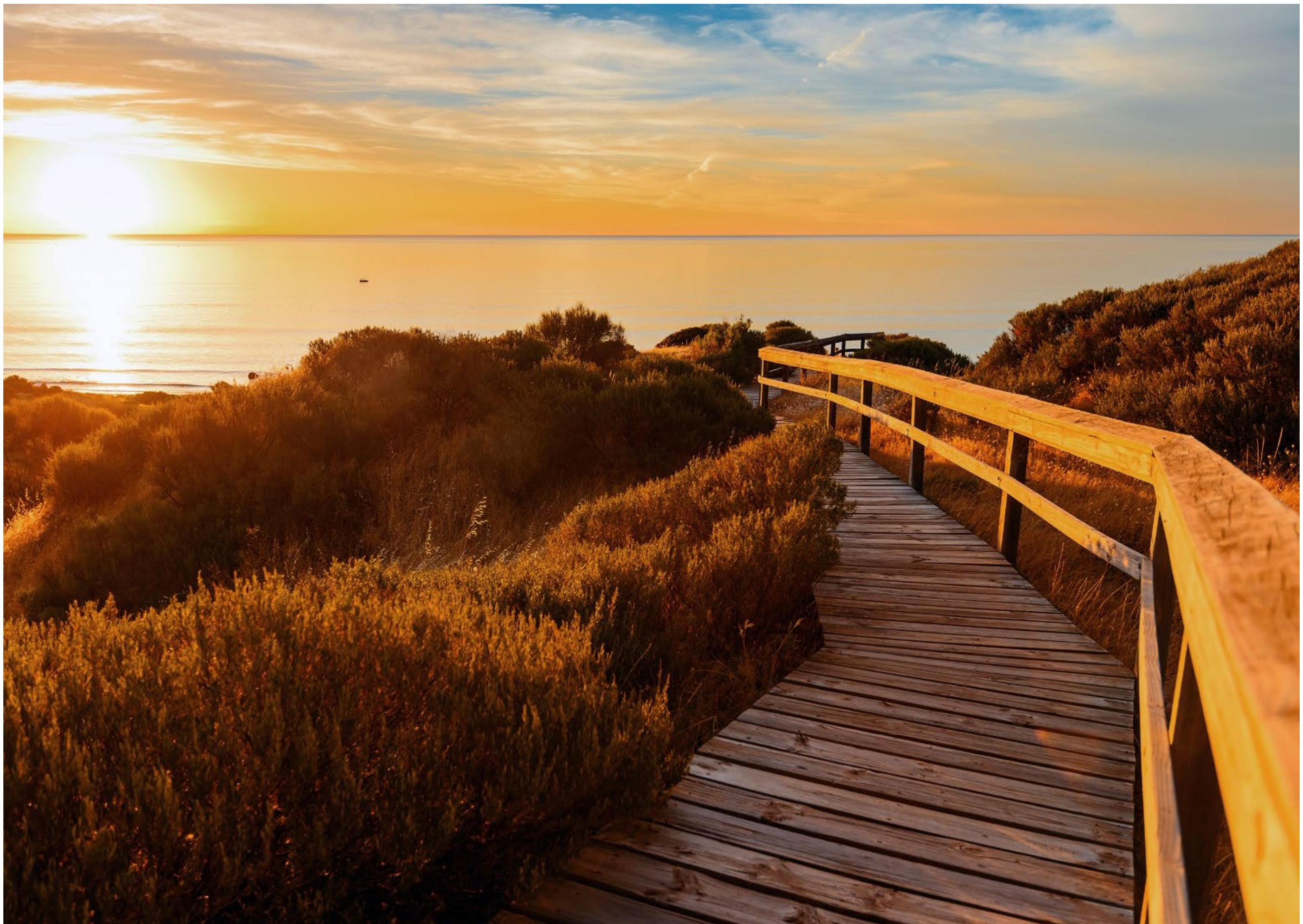

2027 enrollment action guide

For participants in the management retiree plan design*

*Includes COBRA and Family Security Program (FSP) participants

2027-MNGR

NOKIA

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2027 annual open enrollment period

Important: This guide is intended for multiple audiences. Some information in this guide might not apply to you. Please refer to the Your Benefits Resources™ (YBR) website during your annual open enrollment period to review Nokia health and welfare benefits eligibility for you and your dependents.

Online and phone enrollment period: October 12, 2026 – October 23, 2026

The 2027 annual open enrollment period begins on Monday, October 12, 2026, at 9:00 a.m., Eastern Time (ET), and ends on Friday, October 23, 2026, at 5:00 p.m., ET.

You may learn about your 2027 coverage choices and costs — as well as enroll in and/or change your Nokia health and welfare benefits coverage — online on the Your Benefits Resources™ (YBR) website at digital.alight.com/nokia or by calling the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711) during these dates and times. Representatives are available from 9:00 a.m. to 5:00 p.m., ET, Monday through Friday.

Please note:

- **The annual open enrollment period runs for two weeks.** You may enroll online or by phone during this time. You may also enroll using the Alight Mobile app. See "Access your benefits and enroll through the Alight Mobile app!" on page 13.
- You cannot enroll in or make changes to your 2027 coverage until annual open enrollment begins on Monday, October 12, 2026, at 9:00 a.m., ET. This also means you must wait until then to call the Nokia Benefits Resource Center with questions about your 2027 plan options and pricing.

You must take action before Friday, October 23, 2026, at 5:00 p.m., ET. Late enrollments will not be accepted.

Prepare to make your benefit decisions by reading the sections below.

What's changing for 2027

This section constitutes a Summary of Material Modifications (SMM) to the Summary Plan Descriptions (SPDs) of the health and welfare benefit plans referred to herein.

Except as noted below, there are no changes to the Nokia health and welfare benefit plans (the "Plans") for 2027.

Attention! If you are not yet eligible to enroll in Nokia's retiree health coverage

Each year, annual open enrollment materials are mailed to former employees who will be eligible for Nokia's retiree health coverage in the future. **These materials are informational only, and you do not need to take any action at this time.**

Direct billing will replace Nokia pension check deductions for payment of Nokia's health and welfare coverage

If contributions for your Nokia health and welfare coverage are currently deducted from your monthly Nokia pension check, those deductions will end effective December 31, 2026, and you will need to pay for your coverage directly. The payment for your December 2026 coverage will be your final Nokia pension check deduction.

As described further below, certain other deductions will also be ending, effective December 31, 2026. As a result, you will need to start making those contributions directly if you wish to continue them.

What this change means to you

Starting with your January 2027 coverage, you will need to pay for your Nokia health and welfare coverage directly. Beginning in December 2026, billing notices will be mailed to your address on file around the 15th of each month for coverage beginning on the first of the following month.

Your payment must be received by the 10th of each month to avoid a coverage interruption.

You can pay with a check or money order, but be sure to allow time for postal delivery.

If you are concerned about postal delays, you may prefer to pay by monthly direct debit (see below). With direct debit, your payment is automatically deducted on the 10th of each month from a checking or savings account you choose. You can confirm payment on the YBR website the next business day or by checking your bank statement or online banking account. Complete instructions for setting up direct debit will be included with your initial bill in mid-December. Note that once direct debit is set up, you will no longer receive a monthly billing notice by mail.

If you prefer to set up direct debit now

You do not need to wait until you receive your first direct billing notice for your January 2027 coverage to set up direct debit. To switch from pension payroll deductions to direct billing before January 1, 2027, call the Nokia Benefits Resource Center to request the change to direct billing and to have a direct debit authorization form mailed to you.

Once you receive the form, you can complete and return it using the enclosed return envelope, or you can call the Nokia Benefits Resource Center to have a representative help you set up direct debit over the phone. Please have your banking information available when you call.

For more information

If contributions for your Nokia health and welfare coverage are currently deducted from your monthly Nokia pension check, look for a mailing from Nokia in November with additional details.

In the meantime, if you have any questions about the upcoming change to direct billing or want to set up direct debit now, call the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711). After the welcome message, choose the option for “all other benefit questions” or press 3. Follow the prompts to authenticate your identity. After you hear the “it’s annual enrollment time” message, say “annual enrollment” or press star to reach a representative.

Important notes

- The change to direct billing **will not** affect your Nokia pension benefit tax-withholding elections. Any court-ordered garnishments currently deducted from your Nokia pension benefit will continue.
- The end of Nokia pension check deductions **will** affect other deductions you may be making, including:
  - Deductions for Added Benefits® voluntary benefits coverage (you should have received a mailing from Added Benefits in September about your 2027 coverage payment options),
  - Deductions made for Equitable and Minnesota Life coverages, and
  - Deductions for contributions to United Way.

  For those deductions, you will need to start making contributions directly to the provider or to United Way if you want to maintain coverage or continue contributing starting January 1, 2027.

Contribution amounts

- **Medical coverage contributions**
  - **For Medicare-eligible participants:** Monthly contributions for the UnitedHealthcare® Group Medicare Advantage Preferred Provider Organization (PPO), which include your contributions for prescription drug coverage, will decrease in 2027.
  - **For participants not eligible for Medicare:** Monthly contributions for coverage in the Traditional Indemnity (TI) option will increase in 2027.
- **Dental coverage contributions**
  - **For all participants:** Monthly contributions for the Dental Preferred Provider Organization (PPO) option will increase in 2027.

To see your 2027 coverage and contribution amounts, visit the YBR website at digital.alight.com/nokia during the annual open enrollment period.

Reminder

When enrolling dependents, please be sure to review the Nokia Dependent Eligibility Rules at www.benefitanswersplus.com/retired_m/ded.html.

The rules describe who is eligible to be covered under Nokia’s medical, dental and life insurance plans. With respect to children, the rules include various criteria, including age. As also described in the rules, if you have a child who is covered under the plan(s), is disabled and would otherwise lose coverage under the plans due to no longer satisfying the age limit for coverage, you have the ability to continue coverage beyond the stated age provided certain criteria are met. Among these is that you obtain medical certification of disability and that you start the certification process within 31 days of the date your child loses eligibility under the plan(s) due to age.

Changes to the UnitedHealthcare® Group Medicare Advantage (PPO) and UnitedHealthcare® MedicareRx for Groups (PDP) Plans

For Medicare-eligible participants, there are no changes to your UnitedHealthcare Group Medicare Advantage (PPO) medical coverage for 2027, and your medical member ID number will not change.

Due to adjustments made by the Centers for Medicare & Medicaid Services (CMS), the following changes to your UnitedHealthcare MedicareRx for Groups (PDP) prescription drug coverage will be effective January 1, 2027:

- **Annual prescription drug deductible:** Will increase to $700 per individual
- **Annual prescription drug out-of-pocket maximum:** Will increase to $2,400 per individual

Once you reach the annual out-of-pocket maximum of $2,400, your covered Part D drugs will have a $0 cost-share for the rest of the year. Non-Part D drugs and Part B drugs are excluded from coverage. Your prescription drug member ID number will not change.

To learn more about how the Plans work:

- See *Benefits at-a-glance and resource contact information 2027* on the BenefitAnswers Plus website at www.benefitanswersplus.com.
- See the UnitedHealthcare Group Medicare Advantage (PPO) and MedicareRx for Groups (PDP) coverage and benefit information at retiree.uhc.com/nokia/coverage-and-benefits. The 2027 plan guides will also be available there by early December. The *2027 Evidence of Coverage* documents will be available through the member portal (accessible via retiree.uhc.com/nokia) in early December. You can also call UnitedHealthcare at 1-888-980-8117 (TTY 711), 8:00 a.m. to 8:00 p.m., local time, Monday through Friday.

For information about opting out of coverage, see page 7.

Reminder: The Medicare Prescription Payment Plan can help you manage your costs

The Medicare Prescription Payment Plan (M3P) lets you spread out your Part D prescription drug costs over the year. It does not lower your drug costs and applies only to Part D prescriptions.

If you enroll, your plan pays the pharmacy, and you receive a monthly bill for your drug costs, divided by the remaining months in the year.

Should you opt in? It may make sense if you have high early-year drug costs and prefer even payments. It may not make sense if your costs are low, consistent and unlikely to exceed the $2,400 annual limit set for 2027.

You may enroll in or opt out of the M3P anytime. Your enrollment will be renewed automatically each year, unless you opt out.

To learn more, visit retiree.uhc.com/nokia or call 1-888-980-8117 (TTY 711).

How to enroll

Check your default coverage

Your default coverage is the Nokia health and welfare benefits coverage in which you and your covered dependent(s) will be enrolled automatically for 2027 if you do not take any action during the annual open enrollment period.

Because your default coverage for 2027 may, in some cases, be different from your 2026 coverage, **it is your responsibility** to confirm that your 2027 default coverage, as shown on the YBR website during the annual open enrollment period, is the coverage you want for 2027.

Here is how to find your default coverage starting Monday, October 12, 2026.

1. **Visit the YBR website at digital.alight.com/nokia.**
   - From the home page, select the “Annual Enrollment” banner.
   - Click the blue “Go to enrollment” bar to be taken to your “Benefits Summary.”
   - You will see a table that displays your current benefits and next year’s benefits side by side.
   - Under “Next Year’s Benefits” you will see the default coverage you will receive for 2027 if you do not make any changes during the annual open enrollment period.
2. **Alternatively, you may call the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711) to request that a copy of your default coverage record be sent to you.**
   - After the welcome message, choose the option for “all other benefit questions” or press 3.
   - Follow the prompts to authenticate your identity.
   - After you hear the “it’s annual enrollment time” message, say “annual enrollment” or press star to reach a representative. You can then request a copy of your default coverage record.

   The copy of your default coverage record will be mailed to your address on file within 7 to 10 business days.

Note: If you have signed up to receive communications from the Nokia Benefits Resource Center electronically, the copy will be sent to your Secured Participant Mailbox on YBR within one business day.

If you need a copy of your annual open enrollment kit

The easiest and most convenient way to access the information you need to enroll continues to be through the YBR website at digital.alight.com/nokia during the annual open enrollment period. However, if you do not have Internet access or you prefer to have a copy of the annual open enrollment kit sent to you, you can make your request through the Nokia Benefits Resource Center. Here is what you need to do:

1. **Starting October 12, 2026,** call the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711).
2. After the welcome message, choose the option for “all other benefit questions” or press 3.
3. Follow the prompts to authenticate your identity.
4. After you hear the “it’s annual enrollment time” message, say “annual enrollment” or press star to reach a representative. You can then request a copy of your annual open enrollment kit.

Your annual open enrollment kit will be mailed to your address on file within 7 to 10 business days. Note that annual open enrollment kits are always sent via US Postal Service mail, even if you have signed up to receive communications from the Nokia Benefits Resource Center electronically.

How to take action

If you decide to change your default coverage and take action during the annual open enrollment period, do it easily **starting at 9:00 a.m., ET, on Monday, October 12, 2026:**

- Through the YBR website at digital.alight.com/nokia or via the Alight Mobile app (see page 13), or
- By calling the Nokia Benefits Resource Center.

Remember: You must take action before Friday, October 23, 2026, at 5:00 p.m., ET. Late enrollments will not be accepted.

Do you need to take action?

You might already be enrolled in the right coverage for yourself and your family and might not need to take any action during the annual open enrollment period. However, you will need to take action to:

- Choose coverage other than your default coverage (see "Check your default coverage" on page 5),
- Add* or remove dependent(s) from coverage, and/or
- Make any other changes to your health and welfare benefits coverage for 2027.

If you do not take action during the annual open enrollment period, you will receive the default coverage shown on the YBR website during the annual open enrollment period.

Using YBR

Before you begin, make sure you have your User ID and password ready, along with any information — including Social Security number(s) — for any new eligible dependent(s) you may be adding to your coverage. (If necessary, see "Have you forgotten your YBR website User ID and/or password?" on page 9.)

Then, when you are ready to begin, keep in mind these helpful hints:

- **Set aside enough time** to complete the enrollment process without interruption. After 15 minutes of inactivity on the YBR website, you will automatically be logged off, and any elections made up to that point will not be saved.
- **The first time you log on from a particular device,** you will be prompted to choose and answer a series of security questions. This will register your device with the YBR website and provide additional protection for your personal information.
- **Review your dependent(s) on file for each of your benefit plans** — and make any updates or corrections.
- **Click "Complete Enrollment"** when you are done making your elections or if you must log off the YBR website before completing your elections; otherwise, your elections made up to that point will not be saved. You can log back on and make any additional changes before your enrollment deadline (Friday, October 23, 2026, at 5:00 p.m., ET) even if you have already completed your enrollment.
- **You may save or print your elections** if you would like. To do so, save or print the "Completed Successfully!" page for your records when you are finished taking action.
- **Log off the YBR website** when you are finished to prevent others from viewing your information. When "You've Logged Off" appears on the screen, you will know your information is protected.
- **Watch for your enrollment confirmation** in your email. If you have a preferred email address on file, a detailed confirmation of enrollment statement will be emailed to you after you have completed your enrollment on YBR. The statement will show all your benefit elections as well as their monthly costs. Be sure to save it for your records.

* Make sure your dependents are eligible under the Nokia eligibility rules before you add them to your coverage. You can view eligibility rules at www.benefitanswersplus.com/retired_m/ded.html. You will be asked to verify the eligibility of the dependent(s) you enroll for coverage.

Thinking of opting out of medical and/or dental coverage?

During the annual open enrollment period

- You have the option to opt out of your coverage during the annual open enrollment period on the YBR website at digital.alight.com/nokia or by calling the Nokia Benefits Resource Center, regardless of your Medicare eligibility.
- **If you are eligible for Medicare:**
  - If you opt out of UnitedHealthcare Group Medicare Advantage (PPO) coverage, you also automatically opt out of MedicareRx for Groups (PDP) coverage, and vice versa.
  - Keep in mind that enrolling in a private insurer's Medicare Part C or Medicare Part D option does not automatically disenroll you from Nokia's coverage. **You must actively disenroll from Nokia's coverage through the YBR website or by calling the Nokia Benefits Resource Center.**
- **Regardless of your Medicare eligibility:**
  - Your Nokia dental coverage election is separate from your Nokia medical and prescription drug coverage election. Whether you opt in to or out of Nokia's coverage, you can still keep your dental coverage, and vice versa.
- You may be eligible to opt back in to Nokia's medical coverage (which includes prescription drug coverage) and/or dental coverage during a future annual open enrollment period or if you have a qualified status change.

Attention Family Security Program (FSP) participants

- You cannot add new dependents to your Nokia medical coverage at any time.
- The FSP program does not provide dental coverage.
- If you drop or lose Nokia's medical coverage for any reason at any time, you can **never** re-enroll.

If you call the Nokia Benefits Resource Center to opt out of, disenroll from or drop Nokia's retiree health coverage

After the welcome message, choose the option for "all other benefit questions" or press 3. Follow the prompts to authenticate your identity. After you hear the "it's annual enrollment time" message, say "annual enrollment" or press star to reach a representative. **Note:** If you call outside of the annual open enrollment period, after you authenticate your identity, state the reason for your call when prompted to reach a representative.

Outside of the annual open enrollment period

- You can drop coverage at any time during the year.
- When you drop medical coverage (which includes prescription drug coverage), you can still keep your dental coverage, and vice versa.
- You may be eligible to opt back in to medical coverage (which includes prescription drug coverage) and/or dental coverage during a future annual open enrollment period or if you have a qualified status change.
- **To drop coverage outside of the annual open enrollment period, you must call the Nokia Benefits Resource Center.**
  - **If you are Medicare-eligible:** Enrolling in a private insurer's Medicare Part C or Medicare Part D option does not automatically disenroll you from Nokia's coverage. Your enrollment in Nokia's coverage is regulated by CMS, so when you call the Nokia Benefits Resource Center to drop your coverage, they will notify you of the earliest possible effective date for disenrollment (based on CMS guidelines). Please note that if you disenroll from Nokia's medical coverage, you will also be disenrolled from prescription drug coverage, and vice versa.

Important reminders

Take note of the following for the annual open enrollment period — and all year.

Medical option-specific reminders

Concerning the UnitedHealthcare Group Medicare Advantage (PPO) and MedicareRx for Groups (PDP)

For more information about Medicare

See "What you need to know about Medicare" beginning on page 12.

- **Re-enrolling in, being defaulted into, or enrolling in the UnitedHealthcare Group Medicare Advantage (PPO) and MedicareRx for Groups (PDP) for the first time for 2027?**
  - CMS requires that you provide a street address, and not a PO Box, to process your enrollment in this option.
  - Once your enrollment has been approved, UnitedHealthcare will mail additional information, along with new member ID cards, to **all** UnitedHealthcare Group Medicare Advantage (PPO) and MedicareRx for Groups (PDP) plan members. **You will receive two new member ID cards to use in 2027:** one for medical coverage through the UnitedHealthcare Group Medicare Advantage (PPO) and one for prescription drug coverage through the UnitedHealthcare MedicareRx for Groups (PDP).

- **What you need to know if you and/or your covered dependent(s) are denied enrollment in the UnitedHealthcare Group Medicare Advantage (PPO):**
  - Medicare rules require that your enrollment in the UnitedHealthcare Group Medicare plan be reviewed and approved by CMS. If your enrollment and/or that of your dependent(s) is denied, **Nokia will send you a letter in mid-February 2027 that includes the reason for the CMS denial and the deadline by when you must resolve the enrollment issue.**
  - **Note:** The above information does NOT apply to participants and dependents whose enrollment has been previously approved by CMS and are currently enrolled in the UnitedHealthcare Group Medicare Advantage (PPO).

Concerning the TI medical plan option

- **What you need to know about your medical and prescription drug member ID cards:**
  - If you are keeping your TI medical coverage for 2027, continue to use your current medical plan member ID card in 2027. You will not receive a new medical plan member ID card for 2027. CVS Caremark will not provide current members with new prescription drug member ID cards for 2027. Please continue to use your current CVS Caremark member ID card in 2027.
  - If you are enrolling in TI medical coverage for the first time for 2027, you will receive a new medical plan member ID card from UnitedHealthcare by January 1, 2027. You will also receive a new prescription drug member ID card from CVS Caremark by January 1, 2027.
  - If you have not received your new cards by January 1, 2027, or if you need new cards for yourself or additional cards for your dependents, you may print them from the applicable carrier's website:
    - Medical (UnitedHealthcare): myuhc.com (you may also access your member ID card using the UnitedHealthcare mobile app, available on the App Store and Google Play store)
    - Prescription drug (CVS Caremark): Caremark.com

General reminders

- **What you need to know about your dental member ID card.** MetLife will not provide current members who re-enroll in or default into dental coverage for 2027 with new dental member ID cards. Please continue to use your current MetLife member ID card in 2027. Only persons newly enrolling in dental coverage will receive member ID cards for 2027.
- **Have you forgotten your YBR website User ID and/or password?** If so, go to the YBR website, select "Don't have User ID" and/or "Forgot password" "and follow the prompts to get new ones.
  - If your preferred telephone number — home or mobile — is already on file with the YBR website, a one-time access code will be provided to you by telephone or text message, as applicable.
  - You may also answer your security questions if you have previously completed them.
  - If none of these is on file with YBR, you will need to request that a temporary password be sent to you by US Postal Service mail. **It may take up to 10 days to receive your password through the mail.** (For security purposes, access codes cannot be sent via email.) To review and/or update your permanent (mailing) address on file, see "Review your permanent address on file" on page 11.

  We strongly recommend that you add a mobile phone number to take advantage of additional security and text messaging capabilities — including the ability to quickly reset a forgotten YBR website User ID and/or password or Nokia Benefits Resource Center phone personal identification number (PIN) using a one-time access code that can be sent to your mobile phone via text message. Standard text message rates apply.

  - If you have not done so already, add your preferred phone number — home or mobile — to your personal information on file, as described in "Planning to call the Nokia Benefits Resource Center?" below.
  - **Please note:** If you have previously elected electronic delivery of benefit communications, adding your mobile phone number to your personal information on YBR will not affect email delivery of those communications. Benefit communications will continue to be sent to your email address on file.
- **Planning to call the Nokia Benefits Resource Center? Have your phone personal identification number (PIN) ready!** To access your personalized benefits information or to enroll by phone, you will need your phone PIN. **If you have forgotten your PIN, call the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711) as soon as possible to request a new one.**

  After the welcome message, choose the option for "all other benefit questions" or press 3. Follow the prompts to authenticate your identity. After you hear the "it's annual enrollment time" message, say "annual enrollment" or press star to reach a representative. **Note:** If you call outside of the annual open enrollment period, after you authenticate your identity, state the reason for your call when prompted to reach a representative.

  - If your preferred telephone number — home or mobile — is already on file with the YBR website, a one-time access code (temporary PIN) will be provided to you by telephone or text message, as applicable, so you can quickly reset your PIN. (For security purposes, access codes cannot be sent via email.) **We strongly recommend that you add a mobile phone number to your personal information on file to take advantage of text messaging and additional security capabilities.** Standard text message rates apply.
    - To add your mobile phone number to your personal information on file, log on to the YBR website, select the profile icon at the top right of the page, then "Personal Information" and enter your phone number where indicated.
  - If your preferred phone number is not on file, you will need to request that a temporary PIN be sent to you by US Postal Service mail. **It may take up to 10 days to receive your temporary PIN through the mail.**
- **You have the option to choose how you prefer to receive communications from the Nokia Benefits Resource Center.** Log on to the YBR website at digital.alight.com/nokia, select the profile icon at the top right of the page and then "Manage Communications." Scroll down to the "Delivery Preference" section to choose your preferred method of delivery (electronically or US Postal Service mail) and verify your contact information. **Please note:**
  - Communications delivered electronically will get to you faster, while communications delivered by mail may take up to 10 days.

- Your election for receipt of communications on the YBR website will not affect the method of delivery for your annual open enrollment kit. If you would like to have a copy of your annual open enrollment kit mailed to you, see "If you need a copy of your annual open enrollment kit" on page 5.

- **Are you dropping a dependent from coverage? Here is what you should know about COBRA.**
  - **COBRA continuation coverage is *not* offered to dependents removed from coverage during the annual open enrollment period.** If your dependent is experiencing a qualified status change (due to circumstances causing your dependent to no longer be eligible for coverage under the plan) and you remove that dependent from your coverage during the annual open enrollment period, your dependent will **not** be eligible for COBRA continuation coverage. Instead, if you have a dependent who experiences a qualified status change, for that dependent to be eligible for COBRA continuation coverage, you must report that change through the "Life Events" section on the YBR website (or call the Nokia Benefits Resource Center). Note: Typically, you must report all qualified status changes within 31 days of the change occurring.
  - **COBRA continuation coverage *is* offered to dependents who lose coverage due to reaching the age limit.** Dependents aging out of group health plan eligibility will maintain coverage through the end of the month in which they turn age 20, or age 24 if enrolled as a full-time student, at which point they will then become eligible for COBRA continuation coverage. If your dependent is aging out, you will receive communications about the loss of coverage and the applicable COBRA paperwork. (Your dependent will also receive the applicable COBRA paperwork.)
- **Keep in mind: Healthcare carriers' contracts with network providers may expire at any time during the year.** You cannot make changes to your coverage and/or add/drop dependents outside of the annual open enrollment period due to these types of changes because they are not considered qualified status change events. Visit the YBR website at digital.alight.com/nokia (select "Life Events") for more information about qualified status changes.
- **Do you receive a Form W-2?** The Affordable Care Act (ACA) requires that employers disclose the value of the employer-provided benefit for health insurance coverage on each participant's Form W-2.
- **You may receive the ACA-required Internal Revenue Service (IRS) Form 1095-C.** The ACA requires that employers provide Form 1095-C to certain (but not all) plan participants each year. The form serves as proof that you met the ACA's requirement for having qualifying healthcare coverage during the year. Employers must provide forms for the 2026 tax year to participants, as applicable, no later than March 2, 2027.
- **Basic Life Insurance coverage may be subject to reductions based on age or other plan provisions.** For details, please refer to the appropriate Summary Plan Description (SPD) on the BenefitAnswers Plus website at www.benefitanswersplus.com.

Attention UnitedHealthcare Group Medicare Advantage (PPO) members: When caller ID says "Optum," please answer the phone

If you are enrolled in the UnitedHealthcare Group Medicare Advantage (PPO), you may receive a call from Optum HouseCalls on behalf of UnitedHealthcare. Why? Because you or a covered family member has been identified as someone who could benefit from a telephone conversation with an Optum HouseCalls nurse. **This is not a sales call; no one will try to sell you anything.**

This telephone outreach service is an extension of your Nokia medical plan benefits and is designed to provide additional support to members. All Optum HouseCalls nurses who call will identify themselves, confirm they are speaking with the correct Nokia medical plan member, explain the reason for their call and give you the opportunity to call them back at your convenience. **You will not be asked to provide any personal health information.**

Your privacy is protected. UnitedHealthcare and Optum HouseCalls are dedicated to safeguarding your privacy and do not share your name or any other identifying information. Your conversations will remain confidential. Any health information collected as part of the assessment will be kept confidential in accordance with the Notice of Privacy Practices (available on the BenefitAnswers Plus website at www.benefitanswersplus.com); be used only for health and wellness recommendations or for payment, treatment or healthcare operations; and be shared with your health plan but not with Nokia.

- **Enrolled in Group Universal Life (GUL) Insurance?** Keep in mind that your coverage rates are age-based. As a result, your premiums for GUL coverage may reflect an increase if you are entering a new age bracket for a given plan year, even if coverage rates are not otherwise increasing.
- **Be sure your beneficiaries are up to date.** Take care of the people who matter most. Use this annual open enrollment opportunity to review, add or update your beneficiary designation(s) while you are on the YBR website as follows:
  - **For life insurance:** Complete MetLife's online beneficiary designation process. You can either:
    - Visit the YBR website at digital.alight.com/nokia. Select the profile icon at the top right of the page, then select "Beneficiaries" and then select "View/update your life insurance beneficiary designations" to be taken to the MetLife MyBenefits website. No additional User ID or password needed!

      OR
    - Go to the MetLife MyBenefits website at www.metlife.com/mybenefits directly using your MetLife User ID and password to access your information. You will need to enter your User ID and password to log on each time you visit the website. Be sure to enter "US-Nokia" in the "Employer or Association" field when signing in.
  - **For the Nokia Savings/401(k) Plan:** Log on to the YBR website at digital.alight.com/nokia to access your savings plan account. Select the profile icon at the top right of the page and then select "Beneficiaries." Or call the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711). After the welcome message, choose the option for "all other benefit questions" or press 3. Follow the prompts to authenticate your identity. After you hear the "it's annual enrollment time" message, say "annual enrollment" or press star to reach a representative. **Note:** If you call outside of the annual open enrollment period, after you authenticate your identity, state the reason for your call when prompted to reach a representative.
- **Report the death of a participant, including a covered dependent, as soon as possible by calling the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711); 1-212-444-0994 if calling from outside of the United States, Puerto Rico or Canada.** After the welcome message, say "report a death" or press 1. Representatives are available from 9:00 a.m. to 5:00 p.m., ET, Monday through Friday.
- **Review your permanent address on file.** As a reminder, the Nokia Benefits Resource Center recognizes your permanent address on file as your mailing address. That address also determines your eligibility for some benefit plan options. To confirm or update your permanent address on file, call the Nokia Benefits Resource Center. After the welcome message, choose the option for "all other benefit questions" or press 3. Follow the prompts to authenticate your identity. After you hear the "it's annual enrollment time" message, say "annual enrollment" or press star to reach a representative. **Note:** If you call outside of the annual open enrollment period, after you authenticate your identity, state the reason for your call when prompted to reach a representative.
- **The following materials are available on the BenefitAnswers Plus website:**
  - **The most current Summary Plan Descriptions (SPDs).** SPDs are summaries of the Nokia benefits offered to eligible participants under the applicable benefit plan. They are provided for informational purposes and are intended to comply with Department of Labor requirements. You can find these summaries and any applicable Summaries of Material Modifications (SMMs) on the BenefitAnswers Plus website at www.benefitanswersplus.com.
  - **The Nokia Health Plans' Notice of Privacy Practices.** Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Nokia health plans are required to provide you with a notice about their privacy practices, their legal duties and your rights concerning your health information. You can find this notice among your annual open enrollment materials on the BenefitAnswers Plus website at www.benefitanswersplus.com.
  - **The Section 1557 Nondiscrimination Notice.** Under Section 1557 of the Affordable Care Act, Nokia and UnitedHealthcare are required to provide you with notices ensuring that all individuals, regardless of race, color, national origin, age, disability or sex, are treated fairly and without discrimination under Nokia's health plans. (Note that UnitedHealthcare's notice applies to the TI option only.) You can find these notices on the BenefitAnswers Plus website at www.benefitanswersplus.com/retired_m/hmedical.html.

What you need to know about Medicare

Your Nokia medical and prescription drug coverage may be impacted by Medicare. Take note of these details if you and/or your dependent(s) are Medicare-eligible.

Medicare is the US federal government's health insurance program for people who are age 65 or older or who have certain disabilities. There are four parts to Medicare: **Part A** offers hospitalization benefits; **Part B** offers medical benefits, such as doctor and ambulance services; **Part C** offers the same services covered under Parts A and B, plus (sometimes) coverage for prescription drugs and dental, vision and hearing care; and **Part D** offers prescription drug coverage.

You must be entitled to Medicare Part A and enrolled in Medicare Part B

Under the Nokia plan provisions, Medicare-eligible participants must be entitled to Medicare Part A and enrolled in Medicare Part B to receive benefits coverage through the Plan.

Find out more details about Medicare

Review details about Medicare Parts A, B, C and D — including premium costs and any applicable deductibles, copayments and other costs, as well as any late enrollment penalties that may apply — in the *Medicare & You* handbook mailed to all Medicare households each fall. It is also available on the Medicare website at www.medicare.gov or by calling Medicare at 1-800-MEDICARE (1-800-633-4227) (TTY 1-877-486-2048), 24 hours a day, 7 days a week.

The UnitedHealthcare Group Medicare Advantage (PPO) — like other Medicare Advantage plans — is a Medicare Part C option. By enrolling in the UnitedHealthcare Group Medicare Advantage (PPO), you agree to receive standard Medicare Part A and Medicare Part B services through that option.

Enrollment and disenrollment are not solely within the control of Nokia and rely heavily on decisions made by CMS.

If you are Medicare-eligible, you can disenroll from the UnitedHealthcare Group Medicare Advantage (PPO) and MedicareRx for Groups (PDP) **at any time during the year** by calling the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711). (During annual open enrollment, or if you and/or your eligible dependent[s] experience a qualified status change during the year, you may also disenroll through the YBR website.) However, CMS approval is required. As a result, all elections and effective dates of coverage are determined by CMS.

When calling the Nokia Benefits Resource Center, after the welcome message, choose the option for "all other benefit questions" or press 3. Follow the prompts to authenticate your identity. Then:

- **During annual open enrollment:** After you hear the "it's annual enrollment time" message, say "annual enrollment" or press star to reach a representative.
- **Outside of the annual open enrollment period:** After you authenticate your identity, state the reason for your call when prompted to reach a representative.

Nokia coverage options for when you are eligible for Medicare but your dependent is not (and vice versa)

In most cases, covered dependent(s) must be enrolled in the same Nokia medical option and with the same healthcare carrier you choose for yourself. However, there are exceptions:

If you are eligible for Medicare

If you enroll in the following medical and prescription drug coverage…	Then coverage for you and your Medicare-eligible dependent(s) will be…	And coverage for your eligible covered dependent(s) not eligible for Medicare will be…
UnitedHealthcare Group Medicare Advantage (PPO) and Medicare Rx for Groups (PDP)	UnitedHealthcare Group Medicare Advantage (PPO) medical and UnitedHealthcare MedicareRx for Groups (PDP) prescription drug coverage	TI medical and CVS Caremark prescription drug coverage

If you are not eligible for Medicare

If you enroll in the following medical coverage…	Then coverage for you and your dependent(s) not eligible for Medicare will be…	And coverage for your Medicare-eligible dependent(s) will be…
TI, which includes CVS Caremark prescription drug coverage	TI medical and CVS Caremark prescription drug coverage	TI medical, with Medicare primary, and CVS Caremark prescription drug coverage

Access your benefits and enroll through the Alight Mobile app!

Connect with your Nokia benefits on the YBR website anytime, anywhere. Use the Alight Mobile app to review, enroll in or make changes to your benefits quickly and easily, at **your** convenience.

To download the Alight Mobile app on your mobile device:

- Scan the code at the lower left to be directed to your device's app store,
- Go to the App Store or Google Play and search for "Alight Mobile," or
- Visit alight.com/alight-mobile-app.

Once you have downloaded the app:

- Open the app, search for "Nokia," and tap the name.
- Enter your YBR User ID and password, and tap "Sign in" to log on. You are all set!

Resources for now and later

Nokia provides these year-round resources to help you conveniently manage your benefits.

Your Benefits Resources (YBR) website **digital.alight.com/nokia** (personalized and password-protected)	**BenefitAnswers Plus website** **www.benefitanswersplus.com** (non-personalized — no password required)
• View your current coverage. • Review and compare your 2027 healthcare options and contribution costs — **and enroll online! (October 12, 2026 – October 23, 2026)** • Opt out of your 2027 coverage. • Find a doctor or healthcare provider. • Learn more about your Nokia benefits. • Review, add or change the information on file for your dependent(s). • Understand how a life event may change your benefits.	• See benefit news and updates, including coverage tips and reminders. • Get your enrollment materials. • Find answers to your benefit questions. • View plan-related documents such as Summary Plan Descriptions (SPDs) and Summaries of Material Modifications (SMMs). • Find carrier contact information throughout the year.

Note: If you do not have access to the Internet, the Nokia Benefits Resource Center can help you resolve a unique benefits issue or enroll in or make changes to your coverage. Call 1-888-232-4111 (TTY 711); 1-212-444-0994 if calling from outside of the United States, Puerto Rico or Canada. After the welcome message, choose the option for "all other benefit questions" or press 3. Follow the prompts to authenticate your identity. After you hear the "it's annual enrollment time" message, say "annual enrollment" or press star to reach a representative. (If you call outside of the annual open enrollment period, after you authenticate your identity, state the reason for your call when prompted to reach a representative.) Representatives are available from 9:00 a.m. to 5:00 p.m., ET, Monday through Friday.

More to come

Visit the BenefitAnswers Plus website in December to see *"Get more from your 2027 Nokia benefits"* for important reminders and tips. The brochure will be available at www.benefitanswersplus.com/retired_m/index.html and www.benefitanswersplus.com/retired_m/other_resources.html.