



# 2025 enrollment action guide

**For participants in the management retiree plan design\***

\*Includes COBRA and Family Security Program (FSP) participants

2025-MNGR

NOKIA

# 2025 annual open enrollment period

**Important:** This guide is intended for multiple audiences. Some information in this guide may 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 14, 2024 – October 25, 2024

**The 2025 annual open enrollment period begins on Monday, October 14, 2024, at 9:00 a.m., Eastern Time (ET), and ends on Friday, October 25, 2024, at 5:00 p.m., ET.**

You may learn about your 2025 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](https://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 5.
- You cannot use the YBR website or call the Nokia Benefits Resource Center to enroll in or make changes to your coverage for 2025 — or call the Nokia Benefits Resource Center to ask questions about your 2025 plan options and pricing — until Monday, October 14, 2024, at 9:00 a.m., ET.

**You must take action before Friday, October 25, 2024, at 5:00 p.m., ET. Late enrollments will not be accepted.**

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

<b>What’s changing for 2025</b> See what’s new with your benefits this coming year.	<b>2</b>	<b>Important reminders</b> Things to keep in mind during the annual open enrollment period — and all year.	<b>10</b>
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# What's changing for 2025

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.

The following changes to benefits coverage under the Nokia health and welfare benefit plans (the "Plans") will take effect on January 1, 2025.

## For all participants

### 2025 contribution amounts

Please visit the YBR website at [digital.alight.com/nokia](https://digital.alight.com/nokia) during the annual open enrollment period to see your 2025 contributions.

### Participants eligible for Medicare

Monthly contributions for the UnitedHealthcare® Group Medicare Advantage Preferred Provider Organization (PPO) option with prescription drug coverage will increase for 2025.

### Participants not eligible for Medicare

Monthly contributions for coverage in the Enhanced Point of Service (POS), Standard POS and Traditional Indemnity (TI) options will increase in 2025.

## The Kaiser Health Maintenance Organizations (HMOs) and Medicare HMOs will no longer be offered

Due to low enrollment and/or high premium costs, the following HMOs and Medicare HMOs will no longer be available, effective January 1, 2025:

- Kaiser of Northern California
- Kaiser Permanente of Hawaii

If you are currently enrolled in one of these HMOs or Medicare HMOs and choose to remain enrolled in Nokia medical coverage for 2025, you and any covered dependents will be automatically assigned medical coverage (i.e., enrolled in default coverage) for 2025, as follows:

- **Participants eligible for Medicare:** UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage
- **Participants not eligible for Medicare:** Enhanced POS through UnitedHealthcare or, if you do not live in a POS service area or you are a Family Security Program (FSP) participant, TI through UnitedHealthcare

For more information about default coverage, see "Check your default coverage" on page 6.

### Important information about 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 2025 if you **do not** take any action during the annual open enrollment period. **It is your responsibility to confirm that your 2025 default coverage shown on the YBR website is the coverage you want for 2025.**

**Confirming your default coverage is quick and easy.** See "Check your default coverage" on page 6 to find out how to confirm your default coverage starting Monday, October 14, 2024.

### Tip: Use Web Chat to get instant help during annual open enrollment

Have questions? Get real-time answers through the **Web Chat feature** when you visit the YBR website.

Web Chat will be available during annual open enrollment **only**, during regular Nokia Benefits Resource Center hours: 9:00 a.m. to 5:00 p.m., ET, Monday through Friday.

From the home page, click "Chat With Us" under "Quick Links" to connect with a representative.

## The Aetna Dental Maintenance Organization (DMO) option will no longer be offered

Due to limited availability and low enrollment, the Aetna DMO option will no longer be available, effective January 1, 2025. If you remain enrolled or newly enroll in retiree dental coverage for 2025, your dental coverage will be provided through the Dental PPO option as of January 1, 2025.

For a summary of the Dental PPO option's main provisions, refer to *Benefits at-a-glance and resource contact information 2025* on the BenefitAnswers Plus website. For more information, review the *Dental Expense Plan for Retired Employees Summary Plan Description (SPD)* on the BenefitAnswers Plus website or visit [www.aetna.com](http://www.aetna.com).

**Note:** You can see your 2025 dental contributions on the YBR website at [digital.alight.com/nokia](http://digital.alight.com/nokia) during the annual open enrollment period.

## Aetna will offer the Dental PPO option in the US and US territories *only*


Due to ongoing global data privacy legislation changes, effective January 1, 2025, Aetna will offer the Dental PPO option only to participants who have a US or US territory address, as their address of record, on file with the Nokia Benefits Resource Center.

If you are currently enrolled in the Dental PPO option and remain enrolled through the end of 2024, and you do not have a US or US territory address on file with the Nokia Benefits Resource Center, dental coverage for you (and any covered dependent[s]) will end on December 31, 2024. Starting January 1, 2025, you will no longer be eligible for retiree dental coverage through Nokia.

### 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 as soon as possible to request a new one.**

- 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.<sup>1,2</sup> **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.<sup>1</sup>**
- 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.<sup>2</sup> **It may take up to 10 days to receive your temporary PIN through the mail.**

**Tip: Do not wait until you need your PIN to add your preferred phone number to your personal information on file.** If you have not done so already, log on to the YBR website today, select the profile icon  at the top right of the page and then “Personal Information,” and enter your preferred phone number where indicated.

<sup>1</sup>Standard text message rates apply.

<sup>2</sup>For security purposes, access codes cannot be sent via email.

## For participants eligible for Medicare

### Changes to the UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage

Effective January 1, 2025, due to the Inflation Reduction Act of 2022, Medicare Part D coverage will change in three main ways:

- The coverage gap, or “donut hole,” will be eliminated. As a result, the three Part D prescription drug coverage stages will be the:
  - Yearly deductible stage,
  - Initial coverage stage, and
  - Catastrophic coverage stage.
- The Plan’s annual prescription drug deductible will increase to \$590 per individual. This amount is the Centers for Medicare & Medicaid Services (CMS) statutory Medicare Part D prescription drug deductible for 2025.
- Once you reach the \$590 per individual deductible, you will move from the yearly deductible stage to the initial coverage stage. The Plan begins to contribute, and you pay a copayment for the cost of Medicare-covered Part D prescription drugs until you reach the annual out-of-pocket maximum of \$2,000 per individual.
- Once you reach the annual out-of-pocket maximum of \$2,000, you enter the catastrophic coverage stage, and 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.

For more information about how the Plan works, see *Benefits at-a-glance and resource contact information 2025* on the BenefitAnswers Plus website and the *Evidence of Coverage (EOC)* document provided by the UnitedHealthcare Group Medicare Advantage (PPO).

## Introducing the Medicare Prescription Payment Plan

### What it is and how it works

The Medicare Prescription Payment Plan is a new payment option to help you manage your prescription drug costs. Starting January 1, 2025, you can choose to spread out the out-of-pocket costs of your Part D prescription drugs over the course of the calendar year. It is important to know that this program does not lower prescription drug costs. This program applies only to prescriptions covered by Medicare Part D. Non-Part D drugs and Part B drugs are excluded.

If you opt in to the Medicare Prescription Payment Plan, you will no longer pay the pharmacy when you fill a covered Part D prescription. Your plan will pay the pharmacy on your behalf and send you a monthly bill for your prescription drug costs. Your monthly bill will be based on what you owe for your prescriptions divided by the number of months left in the year. You will continue to receive a separate bill for your monthly plan premium if you have one.

### Should you opt in?

The optional Medicare Prescription Payment Plan is designed to help if you have high out-of-pocket prescription drug costs earlier in the plan year and like the idea of spreading your payments out more evenly during the year. However, you may not want or need to opt in if your yearly drug costs are low, relatively the same each month and not likely to reach the \$2,000 annual out-of-pocket limit.

To learn more about the Medicare Prescription Payment Plan, visit [retiree.uhc.com/nokia](https://retiree.uhc.com/nokia) or call 1-888-980-8117 (TTY 711).



## 24/7 access to virtual doctor visits will replace 24/7 Telephonic Nurse Support

Effective January 1, 2025, 24/7 access to virtual doctor visits will replace Telephonic Nurse Support. You can talk with a doctor about your medical concerns using your computer, tablet or smartphone anytime, day or night—at **no cost to you**. Choose from:

- \$0 virtual visits with Amwell and Doctor On Demand®
- \$0 virtual and phone visits with Teladoc Health

To learn more, see “Virtual Doctor Visits” in your EOC document provided by the UnitedHealthcare Group Medicare Advantage (PPO).

## If you and/or your covered dependent(s) are denied enrollment in the UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage

Medicare rules require CMS to approve your enrollment in the UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage. As a result, if your enrollment and/or that of your dependent(s) in the UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage is denied, **Nokia will send you a letter in mid-February 2025 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) with prescription drug coverage.

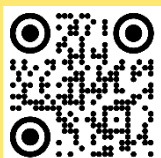
## For participants not eligible for Medicare

### The Rally® wellness program will no longer be offered

Effective January 1, 2025, UnitedHealthcare will no longer offer Rally as part of medical coverage through the Enhanced POS, Standard POS or TI option. If you are currently participating in Rally, be sure to redeem any outstanding points by December 31, 2024.

### Access your benefits and enroll through the Alight Mobile app!

Connect with your Nokia benefits on the YBR website anytime, anywhere through the Alight Mobile app. Use the 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 the appropriate app store for your device,
- Go to the [App Store](#) or [Google Play](#) and search for “Alight Mobile,” or
- Visit [alight.com/app](https://alight.com/app).

Once you have downloaded the app, follow these steps:

- 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!

# 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 2025 if you do not take any action during the annual open enrollment period.**

Because your default coverage for 2025 may, in some cases, be different from your 2024 coverage, **it is your responsibility** to confirm that your 2025 default coverage shown on the YBR website during the annual open enrollment period is the coverage you want for 2025.

**Here is how to find your default coverage starting Monday, October 14, 2024.**

**1. Visit the YBR website at [digital.alight.com/nokia](https://digital.alight.com/nokia).**

- From the home page, select the “Annual Enrollment” tile to go to the “Annual Enrollment” page.
- You will see a series of four steps. Click step 4, “Enroll in Your Benefits.” A green bar entitled “Enroll Now (View Coverage/Make Changes)” will appear immediately below.
- Click the green bar to be taken to the “Enroll in Your Benefits” page.
- Under “Current vs. New Coverage and Costs,” you will see a table that displays the coverage that will be effective as of January 1, 2025. This is the default coverage you will receive for 2025 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.”
- Follow the prompts to authenticate your identity.
- After you hear the “it’s annual enrollment time” message, say “annual enrollment” 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](https://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 14, 2024**, 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.”
3. Follow the prompts to authenticate your identity.
4. After you hear the “it’s annual enrollment time” message, say “annual enrollment” 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 14, 2024:**

- Through the YBR website at [digital.alight.com/nokia](https://digital.alight.com/nokia) or via the Alight Mobile app (see page 5), or
- By calling the Nokia Benefits Resource Center.

**Remember: You must take action before Friday, October 25, 2024, at 5:00 p.m., ET. Late enrollments will not be accepted.**

### Do you need to take action?

You may already be enrolled in the right coverage for yourself and your family and may 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 6),
- Add<sup>3</sup> or remove dependent(s) from coverage, and/or
- Make any other changes to your health and welfare benefits coverage for 2025.

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 8.)

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.


<sup>3</sup>Make sure your dependents are eligible under the Nokia eligibility rules before you add them to your coverage. You can view eligibility rules on the YBR website. You will be asked to verify the eligibility of the dependent(s) you enroll for coverage.

### Reminder

When enrolling dependents, please be sure to review the Nokia Dependent Eligibility Rules at [www.benefitanswersplus.com/retired\\_m/ded.html](https://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.




- **You have the option to choose** how you prefer to receive communications from the Nokia Benefits Resource Center. 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, please follow the instructions outlined in “If you need a copy of your annual open enrollment kit” on page 6.
- **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 25, 2024, at 5:00 p.m., ET) even if you have already completed your enrollment.
- **You may save or print your elections** if you 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.

## Have you forgotten your YBR website User ID and/or password?

If so, go to the YBR website, select “Forgot User ID or Password?” and follow the prompts to get a new one.

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 are 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.)

**Tip:** If you have not done so already, add your preferred phone number — home or mobile — to your personal information in your YBR website profile today. Log on to the YBR website, select the profile icon  at the top right of the page and then “Personal Information,” and enter your phone number where indicated.

**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.

**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.

# 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](https://digital.alight.com/nokia) or by calling the Nokia Benefits Resource Center, regardless of your Medicare eligibility.
- When you opt out of medical coverage (which includes prescription drug benefits) you can still keep your dental coverage, and vice versa.
  - **Please note:** If you are Medicare eligible, 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 medical coverage (which includes prescription drug benefits). **You must actively disenroll from Nokia medical coverage (which includes prescription drug benefits) through the YBR website or by calling the Nokia Benefits Resource Center.** Note that if you disenroll from Nokia medical coverage, you will also be disenrolled from prescription drug coverage. For more information about Medicare, see "What you need to know about Medicare" beginning on page 14.
- You may be eligible to opt back in to medical coverage (which includes prescription drug benefits) 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 medical coverage for any reason at any time, you can **never** re-enroll.

## 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 benefits), 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 benefits) 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 medical coverage (which includes prescription drug coverage). Your enrollment in Nokia 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 medical coverage, you will also be disenrolled from prescription drug coverage. For more information about Medicare, see "What you need to know about Medicare" beginning on page 14.

# 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) with prescription drug coverage

- Re-enrolling in, being defaulted into, or enrolling in the UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage for the first time for 2025?
  - CMS requires that you provide a street address, and not a PO Box, to process your enrollment in this option.
  - After annual open enrollment ends, UnitedHealthcare will mail additional information, along with new member ID cards, to **all** UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage members for 2025. **You will use your new member ID card for both your medical and prescription drug coverage in 2025.** You will not receive a separate prescription drug member ID card.

### Concerning the POS and TI medical plan options

- What you need to know about your medical and prescription drug member ID cards:
  - If you are keeping your UnitedHealthcare medical plan option for 2025, continue to use your current medical plan member ID card in 2025. You will not receive a new medical plan member ID card.
  - If you are enrolling in UnitedHealthcare medical coverage for the first time for 2025, you will receive a new medical plan member ID card from UnitedHealthcare by January 1, 2025. You will also receive a new prescription drug member ID card from CVS Caremark by January 1, 2025.
  - CVS Caremark will not provide current members with new prescription drug member ID cards for 2025. Please continue to use your current CVS Caremark member ID card in 2025.
  - If you have not received your new cards by January 1, 2025, 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): [www.myuhc.com](http://www.myuhc.com)
    - Prescription drug (CVS Caremark): [Caremark.com](http://Caremark.com)

Contribution costs for Nokia health and welfare coverage are either deducted from monthly pension payments or directly billed.

Retirees who want to switch from direct billing to pension deductions should call the Nokia Benefits Resource Center.

Participants who are directly billed may go to the YBR website to elect the Direct Debit or Pay Now method of payment.

### The importance of using your Nokia prescription drug program

Your Nokia prescription drug coverage offers many advantages when filling prescriptions. In addition to ensuring that you are using the lowest-cost drug for your condition, the prescription drug program has safeguards in place to make sure that:

- Your medication is being used correctly and safely for the condition for which it is prescribed;
- You are advised of any side effects of your medication;
- You are advised of any interactions between the medications you are taking;
- You are advised whether the drug may be a high-risk medication for patients ages 65 and older;
- Safe dosing levels of opioids are monitored; and
- Long-term opioid use is minimized.

To learn more:

- **UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage members:** Call UnitedHealthcare at 1-888-980-8117 (TTY 711) or visit [retiree.uhc.com/nokia](http://retiree.uhc.com/nokia).
- **POS or TI option members:** Call CVS Caremark at 1-800-240-9623 or visit [Caremark.com](http://Caremark.com).

- **Is a POS option not listed as a coverage option on the YBR website?** You may live in an area with limited access to doctors and hospitals in a POS network. If a POS option is not shown as an available option on the YBR website at [digital.alight.com/nokia](https://digital.alight.com/nokia) and you are not eligible for Medicare, you can still enroll in a POS option if you are comfortable with the distance between yourself and POS network doctors and hospitals. If you are currently enrolled in a POS option for 2024 under these circumstances, your POS coverage **will not** automatically carry over to 2025. You must take action to re-enroll.
  - **If you are eligible to enroll in a POS option for 2025 and it is not listed as a coverage option on the YBR website, call the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711) during the annual open enrollment period to enroll. Please note: POS options are not available to Medicare-eligible participants nor to participants in the Family Security Program (FSP).**
- **Looking for an in-network UnitedHealthcare POS provider?** Use the information below when you are looking for an in-network POS provider on the UnitedHealthcare website (remember, you can also find in-network providers using the YBR website):
  - On [www.myuhc.com](https://www.myuhc.com), click “Find a Provider,” and then choose the type of provider and your plan. If you live in Maine, Massachusetts or New Hampshire, choose “Choice Plus with Harvard Pilgrim.” If you live in any other state, choose “Choice Plus.”

### **When caller ID says “UnitedHealthcare,” please answer the phone**

If you are enrolled in a UnitedHealthcare medical plan option, you may receive a call from a UnitedHealthcare nurse. Why? Because you or a covered family member has been identified as someone who could benefit from a telephone conversation with a 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 UnitedHealthcare 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 is dedicated to safeguarding your privacy and does 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](https://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.

## Dental-specific reminders

- **Re-enrolling, being defaulted into, or enrolling in the Dental PPO option for the first time for 2025?**
  - **Aetna does not issue dental member ID cards.** You do not need to present an ID card to receive services under the plan. However, if you would like to have a member ID card, you can print one out from [www.aetna.com](http://www.aetna.com). Your group number is 700140.
  - **To get the most from your dental coverage, visit [www.aetna.com](http://www.aetna.com).** Learn how your coverage works, find network dentists and access claims information.

## General reminders



- **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: Changes in your doctor’s or healthcare provider’s network participation are not considered qualified status changes.** Medical 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. Visit the YBR website at [digital.alight.com/nokia](http://digital.alight.com/nokia) (select “Life Events”) for more information about qualified status changes.
- **Interested in the Vision Discount Program or the other “voluntary benefits” offered by Added Benefits?** Keep the following in mind:
  - **Vision Discount Program:** As a Nokia retiree, the Vision Discount Program is automatically available to you at **no cost**, and enrollment is not required. You can enjoy discounts on a wide variety of eye care services, including comprehensive eye exams, eyeglasses, contact lenses and LASIK surgery at participating providers. You can print your Vision Discount Program ID card from [www.addedbenefitsaccess.com](http://www.addedbenefitsaccess.com).
  - **Identity theft protection services, auto and home insurance, and pet insurance:** You may also be eligible for these additional voluntary benefits. You can enroll in or drop these coverages anytime during the year.

To learn more or to enroll, visit [www.addedbenefitsaccess.com](http://www.addedbenefitsaccess.com) or call Added Benefits at 1-800-622-6045.

As a reminder, Nokia does not make any endorsement of or representation regarding any product or service provided under any voluntary benefits program. Note that the enrollment information in this guide does not apply to your voluntary benefits.

- **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 2024 tax year to participants, as applicable, no later than March 2, 2025.
- **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](http://www.benefitanswersplus.com).



- **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](https://digital.alight.com/nokia). Select the profile icon  at the top right of the page and then select “Beneficiaries” 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](https://www.metlife.com/mybenefits) directly, but you must register and create a 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.
  - **For the savings plan:** Log on to the YBR website at [digital.alight.com/nokia](https://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).
- **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.** 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.
- **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](https://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](https://www.benefitanswersplus.com).

# 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 U.S. 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](http://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. The UnitedHealthcare Group Medicare Advantage (PPO) also provides prescription drug coverage to Nokia members.

### 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) with prescription drug coverage **at any time during the year** by calling the Nokia Benefits Resource Center at 1-888-232-4111 (TTY 711). (During annual open enrollment, you may also disenroll through the YBR website.) However, CMS approval is required. As a result, all elections and effective dates of coverage are driven by CMS.

## 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 option...	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...
<b>UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage</b>	UnitedHealthcare Group Medicare Advantage (PPO) with prescription drug coverage	Enhanced POS medical and CVS Caremark prescription drug coverage, if there is a UnitedHealthcare Enhanced POS network in your area; otherwise, TI medical and CVS Caremark prescription drug coverage

### If you are not eligible for Medicare

If you enroll in the following medical option...	Then coverage for you and your dependent(s) not eligible for Medicare will be...	And coverage for your Medicare-eligible dependent(s) will be...
<b>Enhanced or Standard POS</b>	Enhanced or Standard POS medical and CVS Caremark prescription drug coverage	TI medical, with Medicare primary, and CVS Caremark prescription drug coverage
<b>TI</b>	TI medical and CVS Caremark prescription drug coverage	

**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. Representatives are available from 9:00 a.m. to 5:00 p.m., ET, Monday through Friday.

# Resources for now and later

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

Your Benefits Resources (YBR) website <a href="https://digital.alight.com/nokia">digital.alight.com/nokia</a> (personalized and password-protected)	BenefitAnswers Plus website <a href="https://www.benefitanswersplus.com">www.benefitanswersplus.com</a> (non-personalized — no password required)
<ul style="list-style-type: none"><li>• View your current coverage.</li><li>• Review and compare your 2025 healthcare options and contribution costs — <b>and enroll online! (October 14, 2024 – October 25, 2024)</b></li><li>• Opt out of your 2025 coverage.</li><li>• Find a doctor or healthcare provider.</li><li>• Learn more about your Nokia benefits.</li><li>• Review, add or change the information on file for your dependent(s).</li><li>• Understand how a life event may change your benefits.</li></ul>	<ul style="list-style-type: none"><li>• See benefit news and updates, including coverage tips and reminders.</li><li>• Get your enrollment materials.</li><li>• Find answers to your benefit questions.</li><li>• View plan-related documents such as Summary Plan Descriptions (SPDs) and Summaries of Material Modifications (SMMs).</li><li>• Find carrier contact information throughout the year.</li></ul>

## Coming in January: Updated Summary Plan Description (SPD) for the Nokia Dental Expense Plan for Retired Employees

An updated SPD for the Nokia Dental Expense Plan for Retired Employees, part of the Nokia Retiree Welfare Benefits Plan (RWBP), will be available on the BenefitAnswers Plus website at [www.benefitanswersplus.com/retired\\_m/spd.html](https://www.benefitanswersplus.com/retired_m/spd.html) in January 2025.

You have the right to receive, upon written request, a hard copy of your SPD. Your request should be sent to:

Nokia of America Corporation  
Dental Plan Administrator  
600-700 Mountain Avenue  
Room 6D-401A  
Murray Hill, NJ 07974

## More to come

Be sure to check out the BenefitAnswers Plus website at [www.benefitanswersplus.com](https://www.benefitanswersplus.com) in December for important coverage reminders and tips on using your benefits in 2025.

This communication is intended to highlight some of the benefits provided to eligible participants under the Nokia health and welfare plans. More detailed information is provided in the official plan documents. In the event of a conflict between any information contained in this communication and the terms of the plans as reflected in the official plan documents, the official plan documents shall control. The Board of Directors of Nokia of America Corporation (the “Company”) (or its delegate[s]) reserves the right to modify, suspend, change or terminate any of the benefit plans at any time. Participants should make no assumptions about any possible future changes unless a formal announcement is made by the Company. The Company cannot be bound by statements about the plans made by unauthorized personnel. This information is not a contract of employment, either expressed or implied, and does not create contractual rights of any kind between the Company and its employees or former employees.

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