

Get more from your 2024 Nokia benefits

Important information about using your benefits in 2024

For participants in the formerly represented retiree plan design*

*Includes Long-Term Disability (LTD), COBRA and Family Security Program (FSP) participants



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Now available: Expanded pharmacy network for UnitedHealthcare members

Due to the recent expansion of the pharmacy network available under the prescription drug program for the UnitedHealthcare[®] Group Medicare Advantage Preferred Provider Organization (PPO), Point of Service (POS) and Traditional Indemnity options, you may now fill your prescriptions:

- At any CVS retail pharmacy,
- At any Costco Pharmacy,
- · At any in-network pharmacy, or
- Through the CVS Caremark[®] Mail Service Pharmacy.

Use a CVS retail pharmacy and any in-network pharmacy (including a Costco Pharmacy) for short-term prescriptions, i.e., prescriptions of up to 30 days (90 days for insulin).

If you need to take a medication on an ongoing basis (maintenance medications such as those that are taken regularly for conditions like diabetes, high blood pressure, asthma, etc.), you can receive refills of 90-day supplies at a time by using the CVS Caremark Mail Service Pharmacy or a CVS retail pharmacy or any Costco Pharmacy. Prescription drug copayments will double after the third time you receive a 30-day supply of a maintenance medication at a retail pharmacy; for cost savings, use the

Reminder: Caremark® Cost Saver™ is available starting January 1, 2024

With Caremark Cost Saver, all UnitedHealthcare Group Medicare Advantage (PPO), POS and Traditional Indemnity option members automatically receive the best pricing, when available, on generic medications!

Starting January 1, you will automatically have access to GoodRx's discount pricing when filling generic prescriptions at any preferred in-network pharmacy. Just present your CVS Caremark prescription drug member ID card, and you will pay lower prices on select generic medications. No further action needed.

CVS Caremark Mail Service Pharmacy (or a CVS retail pharmacy or a Costco Pharmacy).

Note: This doubling of copayments is modified for certain states as follows:

- **Florida**: Participants residing in Florida can also obtain 90-day supplies of medications taken on an ongoing basis at any in-network retail pharmacy that fills 90-day supplies.
- **Minnesota:** Participants residing in Minnesota also have access to an expanded list of pharmacies from which to obtain 90-day supplies of medications they take on an ongoing basis. Log on to Caremark.com to find an in-network participating pharmacy.
- **Oklahoma:** Participants residing in or filling their prescriptions in Oklahoma can also obtain 90-day supplies of medications taken on an ongoing basis at any in-network retail pharmacy that fills 90-day supplies.
- **Tennessee:** Participants residing in Tennessee also have access to an expanded list of pharmacies from which to obtain 90-day supplies of medications they take on an ongoing basis. Log on to Caremark.com to find an in-network participating pharmacy.
- **West Virginia:** Participants residing in West Virginia will also have access to an expanded list of pharmacies from which to obtain 90-day supplies of medications they take on an ongoing basis. Log on to <u>Caremark.com</u> to find a participating pharmacy.

The above state rules are subject to modification from time to time. Also, other states may be added to this list. For a complete list, go to www.Caremark.com/PharmacyLocator.

The importance of preventive care

Protecting your and your family's health is one of the most important things you can do. Keeping a focus on regular preventive care can help you and your family get and stay healthier.

Preventive care, including regular medical checkups, screenings and immunizations, is important to maintaining your good health. It can help you avoid potentially serious health conditions and/or obtain early diagnosis and treatment. Generally, the sooner your doctor can identify and treat a medical condition, the better the outcome.

Talk with your doctor or other healthcare provider to determine the preventive care services that are appropriate for you and your family. Which services you should receive, and how often you should receive them, will depend on your current health, personal and family medical histories, age and gender, as well as any risk factors.

In addition, be sure to check with your carrier to confirm whether — and how — a particular preventive care service is covered.

Please note: If you are enrolled in a UnitedHealthcare medical plan option, you can review <u>UnitedHealthcare's</u> preventive care guidelines for children and adults here.

What you need to know about your member ID cards

UnitedHealthcare Group Medicare Advantage (PPO) members

If you are enrolled in the UnitedHealthcare Group Medicare Advantage (PPO) for 2024:

- UnitedHealthcare will mail additional information, along with new ID cards, to all UnitedHealthcare Group Medicare Advantage (PPO) members for 2024. (If you have re-enrolled in the plan, your group number will not change.)
- CVS Caremark will provide new members with new prescription drug ID cards for 2024. Current members will
 not receive new ID cards; please continue to use your current CVS Caremark prescription drug ID card in
 2024.
- If you have not received your new card(s) by January 1, 2024, or if you need new card(s) for yourself or additional cards for your dependents, you may print them from the applicable carrier's website:
 - Medical (UnitedHealthcare): <u>retiree.uhc.com/nokia</u>. You will need to log on or register to access the website. You can also call UnitedHealthcare Customer Care (Member Services) at 1-888-980-8117 (TTY 711).
 - Prescription drug (CVS Caremark): <u>Caremark.com</u>. You can also call CVS Caremark at 1-800-240-9623.

Be sure to have your ID cards handy when you receive healthcare services or fill a prescription so your provider/pharmacy can confirm your coverage and your claims can be processed correctly.

POS and Traditional Indemnity option members

UnitedHealthcare medical plan ID cards

Hardcopy medical plan ID cards

- If you are **currently enrolled** in the POS or Traditional Indemnity option and have **not** elected paperless delivery, you will continue to receive a hardcopy medical plan ID card in the mail, as applicable:
 - If you have changed your UnitedHealthcare medical plan option for 2024, you will receive a new hardcopy medical plan ID card from UnitedHealthcare by January 1, 2024.
 - If you have **not** changed your UnitedHealthcare medical plan option for 2024, continue to use your current hardcopy medical plan ID card in 2024. You will not receive a new medical plan ID card.

• If you have **newly enrolled** in the POS or Traditional Indemnity option for 2024, you will automatically receive a new hardcopy medical plan ID card in the mail.

Keep in mind:

- If you have not received your new hardcopy medical plan ID card (as applicable) by January 1, 2024, or if you
 need a new card for yourself or additional cards for your dependents, you may print them from
 www.myuhc.com.
- If you like, you may request a digital medical plan ID card anytime starting January 1, 2024. Log on to www.myuhc.com or the UnitedHealthcare app, elect paperless delivery of required communications and look for a follow-up email from UnitedHealthcare. See below for or more information about digital medical plan ID cards.

Digital medical plan ID cards

UnitedHealthcare recently introduced **digital medical plan ID cards** to current POS and Traditional Indemnity option members who have elected "paperless" delivery of required communications on www.myuhc.com or in the UnitedHealthcare mobile app.

- Please refer to the "welcome email" you should have received from UnitedHealthcare earlier this fall. The
 email explained how to access your card and add it to your Apple Wallet® or Google Wallet. It also included a
 link allowing you to opt out and continue to receive hard copies of your medical plan ID card in the mail.
- You can view your digital medical plan ID card through <u>www.myuhc.com</u> or the UnitedHealthcare app. Be sure to have your card handy when you receive healthcare services so your provider can confirm your coverage and your claims can be processed correctly.
- You can change your paperless delivery preference anytime on www.myuhc.com or in the UnitedHealthcare app. If you newly elect paperless delivery or make any changes to your family or plan status, you will receive an email from UnitedHealthcare with information about your new or updated digital medical plan ID card.

CVS Caremark prescription drug plan ID cards

- If you have newly enrolled in the POS or Traditional Indemnity option for 2024, you will receive a new prescription drug ID card from CVS Caremark by January 1, 2024.
- CVS Caremark will not provide current POS or Traditional Indemnity option members with new prescription drug ID cards for 2024. Please continue to use your current CVS Caremark ID card in 2024.
- If you have not received your new card (as applicable) by January 1, 2024, or if you need a new card for
 yourself or additional cards for your dependents, you may print them from <u>Caremark.com</u>.

HMO/Medicare HMO members

Contact the HMO/Medicare HMO for any questions about ID cards. You can find contact information on the back of your HMO/Medicare HMO ID card (if you are currently enrolled) and in *Benefits at-a-glance and resource contact information 2024* on the BenefitAnswers Plus website.

Enrolled in Nokia dental coverage for 2024? Dental plan member ID cards are *not* required

Keep in mind that Aetna does not issue dental plan ID cards; you do not need to present an ID card to receive services under the plan. (You may be asked to provide your group number, which is 700140.)

However, if you would like to have an ID card, you can print one out from www.aetna.com.

Attention UnitedHealthcare members: Take advantage of these tools and resources anytime

UnitedHealthcare offers a number of tools and resources to help you manage your and your family's health and healthcare. All are available at no additional cost to you.

Available to all UnitedHealthcare members

Virtual visits

When you do not feel well, the last thing you want to do is leave the comfort of home to sit in a waiting room. Good news! You do not have to. As part of your UnitedHealthcare medical benefits, you have an alternative for nonemergency care: Virtual visits.

A virtual visit lets you see and talk to a doctor from your smartphone, tablet or computer without an appointment, for the same as or less than you would pay for an office visit. Most visits take about 10 – 15 minutes. Doctors can write a prescription, ¹ if needed, that you can pick up at your local pharmacy.

To register for and request a virtual visit:

If you are enrolled in the UnitedHealthcare Group Medicare Advantage (PPO), log on to retiree.uhc.com/nokia and choose from provider sites where you can register for a virtual visit. Note: Virtual

retiree.unc.com/nokia and choose from provider sites where you can register for a virtual visit. **Note:** Virtual behavioral health visits are also covered. For information, visit www.UHCvirtualvisits.com.

• If you are enrolled in the POS or Traditional Indemnity option, log on to www.myuhc.com. In the center of your home page, you will see "My providers and facilities." Scroll to the right, select "Virtual Visits: Connect with a Doctor Online" and register for a virtual visit. Note: Virtual behavioral health visits are also covered.

Once registered, you can request a visit. Pay your portion of the service via credit or debit card according to the terms of your medical plan option. Then, enter a virtual waiting room. During your visit, you can talk to a doctor about your health concerns, symptoms and treatment options.

Not a UnitedHealthcare member? Check with your HMO or Medicare HMO to see if it offers a similar service.

Right care. Right place. Right savings.

Doctor's office. Virtual visit. Convenience care clinic. Urgent care center. Emergency room. You and your family have more options than ever when you need medical care.

UnitedHealthcare's **Check. Choose. Go.**® guide can help you make the right choice for your situation. You can access the guide directly at uhc.com/checkchoosego or here. (Note that the costs shown in these materials are not specific to the Nokia plans. See Benefits at-a-glance and resource contact information 2024 for your actual costs.)

¹ Doctors cannot prescribe medications in all states.

Live nurse assistance/telephonic nurse support²

Assistance from an experienced registered nurse is a toll-free call away — 24 hours a day, seven days a week.

Nurses can answer your questions about an illness, injury or medication; help you manage a chronic condition; provide information about a variety of healthcare topics; and more. Both English- and Spanish-speaking registered nurses are available.

To reach a nurse:

- If you are enrolled in the UnitedHealthcare Group Medicare Advantage (PPO): Call 1-877-365-7949. (This number also appears on the back of your UnitedHealthcare member ID card.)
- If you are enrolled in the POS or Traditional Indemnity option: Call the number on the back of your UnitedHealthcare member ID card and select the prompt to connect with a nurse. You can also participate in an online live nurse chat. Just log on to www.myuhc.com from any device with an Internet connection.

Not a UnitedHealthcare member? Check your medical plan ID card to see if your HMO or Medicare HMO offers a similar telephone or online nurse resource.

See your prescription drug savings on Caremark.com!

Your Nokia prescription drug coverage pays a major share of your prescription drug costs. Would you like to see how much you are saving? Log on to Caremark.com to see both the discounted and full costs of your prescriptions.

This cost information is available in your online statements and when you use the website's Check Drug Costs tool.

² This service should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through this service is for informational purposes only. The nurses cannot diagnose problems or recommend treatment and they are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. The service is not an insurance program and may be discontinued at any time.

Available to UnitedHealthcare Group Medicare Advantage (PPO) members only

The following is an overview of several resources and services covered by your plan. Please refer to your Evidence of Coverage for details.

New for 2024: Personal emergency response system benefit

As previously announced, the plan will provide covered members with a Lifeline personal emergency response system (PERS) at **no cost**, effective January 1, 2024.

A PERS is a lightweight, water-resistant help button that you can wear as a wristband or pendant. Just press the button to be quickly connected to the help you need in any situation, 24/7/365. A Trained Care Specialist will assess your situation and determine what help to send to you.

Note: Depending on the model you choose, it may even automatically detect falls — even if you are disoriented, immobilized or unconscious and unable to press the help button.

The PERS is compatible with both cellular and landline services, and works anywhere in the United States where current telephone service is provided.

To learn more and to enroll:

- Call 1-855-595-8485 (TTY 771); or
- Visit https://lifeline.com/uhcgroup.

Please be ready to provide the following member information:

- Address (where service will be provided);
- Telephone number (to enroll and schedule delivery);
- · Date of birth; and
- Preferred language.

UnitedHealthcare® HouseCalls visit

UnitedHealthcare HouseCalls offers yearly check-in care between regular provider visits to help you stay in good health. With no travel or waiting rooms required, a visit is quick to schedule, simple to complete and a great idea to help maintain good health.

Note: HouseCalls may not be available in all areas. For more information, contact UnitedHealthcare Customer Care (Member Services) at retiree.uhc.com/nokia or 1-888-980-8117 (TTY 711). Representatives are available from 8:00 a.m. to 8:00 p.m., local time, Monday through Friday.

UnitedHealthcare® Hearing

Get a hearing exam and access to brand-name and private-labeled hearing aids from any of more than 7,000 UnitedHealthcare Hearing providers nationwide. For more information, visit www.uhchearing.com/retiree or call 1-866-445-2071 (TTY 711).

Renew by UnitedHealthcare health and wellness experience

Live healthier with Renew. Available at no cost to you, Renew offers resources and activities designed to help support your health and wellness goals, including:

- Brain games,
- Recipes,
- · Learning courses,
- · Workout videos.
- · Renew magazine,
- And more!

Explore all that Renew has to offer. To log on or register, visit <u>retiree.uhc.com/nokia</u> and go to "Health & Wellness."

In-home, non-medical care services

Receive up to eight hours per month of in-home, non-medical care from CareLinx, UnitedHealthcare's national provider. Services include grocery shopping, meal preparation, bathing, personal care, medication reminders and more.

To learn more, visit www.carelinx.com/uhcgroup or call CareLinx at 1-833-253-5403. Representatives are available from 8:00 a.m. to 7:00 p.m., Central Time (CT), Monday through Friday, and from 10:00 a.m. to 6:00 p.m., CT, Saturday and Sunday.

Transportation to healthcare appointments

Get to your health-related appointments more easily through ModivCare. Receive up to 24 one-way trips per year to your healthcare appointments. To learn more or to schedule your ride, visit www.modivcare.com/BookNow or call ModivCare at 1-833-219-1182 (TTY 1-844-488-9724).

Home-delivered meals

Pay a \$0 copayment for 21 home-delivered meals every year. Restrictions and limitations apply. Call the customer service number on your UnitedHealthcare member ID card for more information and to place your meal orders.

Renew Active® fitness program

Renew Active by UnitedHealthcare focuses on better health for both your body and mind. It includes:

- Free gym membership from the program's nationwide network (including many premium gyms);
- On-demand digital workout videos and live streaming classes;
- Online Fitbit® Community for Renew Active (no Fitbit device needed);
- AARP® Staying Sharp® online brain health program; and
- · Local wellness classes and events.

You will need a confirmation code to get started. To obtain your code, log on to <u>retiree.uhc.com/nokia</u>, click "Health & Wellness" and look for "Renew Active," or call UnitedHealthcare at 1-888-980-8117 (TTY 711).

Available to POS and Traditional Indemnity option members only

UnitedHealth Premium® Program

Choosing a doctor is one of the most important health decisions you will make. The UnitedHealth Premium Program can help.

The UnitedHealth Premium Program uses evidence-based medicine and national standardized measures to evaluate physicians in various specialties. When you choose a Premium Care Physician, you can be sure that the doctor meets the program's criteria for providing quality and cost-effective care.

To find a Premium Care Physician, simply log on to www.myuhc.com and select "Find a Provider." Premium Care Physicians will be at the top of your search results. Look for two blue hearts and the words "Premium Care Physician" in the doctor's profile.

Keep in mind: If a doctor does not have a Premium designation, it does not mean that he or she provides a lower standard of care. It could mean that the data available to UnitedHealthcare was not sufficient to include the doctor in the program or that the doctor practices in a specialty not evaluated as a part of the Premium designation program. All doctors who are part of the UnitedHealthcare network must meet rigorous credentialing requirements, which are separate from the Premium program.

To learn more, visit the BenefitAnswers Plus website at www.benefitanswersplus.com. Select the "Carriers & Other Resources" tab, then "Other Resources & Information" and then the "Find the Right Doctors: Use the UnitedHealth Premium® Program" link.

Online submission of out-of-network claims and tracking of prior authorization requests

Enjoy the convenience of completing the following actions through **myuhc.com**:

- Submit claims for reimbursement of out-of-network medical services. To get started, log on to www.myuhc.com, select "Claims and Accounts" and follow the prompts to provide the necessary information and upload any required documentation.
- Track requests for prior authorization of outpatient medical services. View the details and status of your in-process requests, determination results (approved, denied, partially denied or canceled) and appropriate next steps. There is also an FAQs section to help answer common questions. To get started, log on to www.myuhc.com, select "Claims and Accounts" and follow the prompts.

Voice identification (ID)

When you call UnitedHealthcare at the number on the back of your member ID card, you can use a voice ID to authenticate yourself going forward. Here is how it works:

During your call, you will have the option to record a voice ID while speaking your date of birth. Then, whenever you call UnitedHealthcare in the future, the system will recognize you when you say your birthdate.

If you prefer not to record a voice ID, no problem! Simply follow the system prompts to authenticate your identity every time you call. The choice is yours.

Rally®

You have access to UnitedHealthcare Rally, a user-friendly digital experience on **myuhc.com** that will engage you by using technology, gaming and social media to help you understand, learn about and support you on your health journey.

Rally offers personalized recommendations to help you and your covered family members make healthier choices and build healthier habits, one small step at a time. It is available at no additional cost to you. You can access Rally at www.myuhc.com from your computer, tablet or smartphone anytime.

UnitedHealthcare mobile app

Think of the UnitedHealthcare app as your go-to healthcare resource for whenever you are on the go. The UnitedHealthcare app makes it easy for you to access your healthcare information, anytime and anywhere, from your mobile device.

The UnitedHealthcare app gives you tools to help you find care, manage your health plan details and stay on top of costs. You can:

- Find network care options for doctors, clinics and hospitals in your area;
- Talk to a doctor by video 24/7;
- · See reviews and ratings for doctors;
- · Generate and share digital health plan ID cards;
- · View claims and account balances;
- Estimate the costs of common procedures; and
- View your copayment, coinsurance, annual deductible and/or out-of-pocket expenses.

To download the UnitedHealthcare app, visit the App Store[®] or Google Play™ store.

myHealthcare Cost Estimator

You may be surprised to learn that different doctors, labs and hospitals can charge **different** rates for the **same** medical services — even when they are all in-network. The myHealthcare Cost Estimator gives you the information you need to make the best decisions for your health **and** your wallet.

The myHealthcare Cost Estimator can help you:

- Preview and compare your costs for a procedure or treatment at different providers and facilities;
- Choose the treatment option that is best for you;
- Plan your care; and
- Budget for your medical expenses.

You can access the myHealthcare Cost Estimator from www.myuhc.com or the UnitedHealthcare app. (To log on to www.myuhc.com, you will first need to register.)

Once you have accessed the myHealthcare Cost Estimator, just search for the condition (for example, back pain) or treatment (for example, physical therapy) for which you want a cost estimate. The myHealthcare Cost Estimator will show you doctors and locations that offer those services in your area. You can also learn about your treatment options, compare estimated costs, see quality and cost-efficiency ratings and map the location of the provider or facility. The cost estimator will even give you a personalized estimate of your out-of-pocket costs, based on your option's applicable deductible, coinsurance and/or out-of-pocket maximum.

Important reminders about your coverage for diabetic supplies and prescription drugs

Diabetic supplies and Medicare Part B-eligible medications are available through your CVS Caremark prescription drug coverage and, if you are enrolled in the UnitedHealthcare Group Medicare Advantage (PPO), the plan's Medicare Part B benefit. The available coverage is outlined below.

For all participants, regardless of Medicare eligibility

Obtaining diabetic supplies through your CVS Caremark prescription drug coverage

Show your CVS Caremark prescription drug ID card to purchase diabetic supplies at CVS Caremark network retail pharmacies (including both CVS and non-CVS pharmacies). You will be subject to the plan's regular deductibles and copayments. CVS Caremark is not able to process diabetic supplies through mail order. If you have any questions about your coverage for diabetic supplies, please call CVS Caremark at 1-800-240-9623.

For Medicare-eligible participants only

Obtaining Medicare Part B-eligible medications through your CVS Caremark prescription drug coverage

CVS Caremark processes Medicare Part B-eligible medications under Medicare as primary, at both retail pharmacies and through mail order. Medicare pays 80 percent of the cost, and the prescription drug program covers the remaining 20 percent so you do not incur a cost for your Medicare Part B-eligible medications. Here is an overview of the process:

- At any network retail pharmacy: You need to ask the pharmacy to process your prescription through
 Medicare first and provide both your Medicare Part B information and a diagnosis code from your provider.
 (Although the Part B information should be on file at a CVS pharmacy, you should also remind the
 pharmacist.)
- **Through mail order:** Your Medicare Part B information is already on file and you do not need to ask that your Part B claims be filed under Medicare as primary.

You can also submit your claims to CVS Caremark by mail or via the "Submit Prescription Claim" process on the CVS Caremark website and ask that they be processed with coordination of benefits.

If you have any questions about your coverage for Medicare Part B-eligible medications, please call CVS Caremark at 1-800-240-9623.

Obtaining diabetic supplies and Medicare Part B-eligible medications through the UnitedHealthcare Group Medicare Advantage (PPO)'s Medicare Part B benefit

If you are enrolled in the UnitedHealthcare Group Medicare Advantage (PPO), you may also obtain diabetic supplies and Medicare Part B-eligible medications through the plan's Medicare Part B benefit. By presenting your UnitedHealthcare medical plan ID card to the pharmacist at any retail pharmacy, you can obtain your diabetic monitoring supplies at no cost. You can also obtain certain Part B drugs at a 20 percent coinsurance without being subject to the deductible.

For more information, see the UnitedHealthcare Group Medicare Advantage (PPO)'s Evidence of Coverage document, which is available at retiree.uhc.com/nokia.

Manage your dental benefits with the Aetna HealthSM app

Need to find an in-network provider? Want to check a claim or see your ID card? You can — right from your smartphone — using the free Aetna Health app.

The Aetna Health app is available 24/7 and works with most smartphones and tablets. To get started, just follow these three easy steps:

Step 1: Search for "Aetna Health" on the App Store or Google Play store to download the app.

Step 2: Register directly in the Aetna Health app or at www.aetna.com from any computer. (Once you have registered, you can skip to Step 3 and simply log on to use the Aetna Health app.)

Step 3: Use your secure member website log-on information to access the app features.

There's an app for that!

Need benefits information on the go? With these free apps, you can manage your Nokia health and welfare benefits from your smartphone or tablet, anytime and anywhere.

Name of app	What you can do with it	Where to find it
Alight Mobile	Review, enroll in or make changes to your Nokia benefits on the YBR website.	Search for "Alight Mobile" on the App Store and Google Play store.
UnitedHealthcare	Find in-network medical providers, estimate costs, view and manage claims, access your ID card and connect with customer service representatives.	Search for "UnitedHealthcare" on the App Store and Google Play store.
UnitedHealthcare Rally³	Get personalized support and information to help you and your covered family members make healthier choices and build healthier habits.	Search for "Rally" on the App Store and Google Play store.
CVS Caremark CVS Caremark	Refill mail order service prescriptions, get drug and pricing information, find a network pharmacy, track order status, view prescription history and access your prescription plan ID card.	Search for "CVS Caremark" on the App Store and Google Play store.
Aetna Health	Find in-network dentists, check the status of a claim and view an ID card.	Search for "Aetna Health" on the App Store and Google Play store.

³Available to POS and Traditional Indemnity option members only.

Keep your life insurance and/or savings plan beneficiaries up to date

It is important to keep your Nokia life insurance and/or Nokia Savings/401(k) Plan beneficiary information up to date. This will help your loved ones avoid delays in receiving your Nokia benefits in the event of your death. You can change your beneficiary information at any time.

To designate or change your beneficiary designations and contact information for:

- Life insurance complete MetLife's online beneficiary designation process. You can either:
 - Visit the YBR website at 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 <u>www.metlife.com/mybenefits</u> 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.
- Savings plan log on to the Your Benefits Resources[™] (YBR) website at 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).

Coming your way: Tax Form 1095-C

As required by the Affordable Care Act (ACA; healthcare reform), employers must provide IRS 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. If this applies to you, you should expect to receive your 2023 Form 1095-C no later than March 2, 2024.

Form 1095-C indicates the months of the year that you (and your dependents, if applicable) were offered or were enrolled in medical coverage during 2023. You may need Form 1095-C or the information it includes to file your federal tax return for 2023. Nokia cannot offer tax advice, so you might consider consulting a tax advisor for further guidance on Form 1095-C. (**Please note:** Form 1095-C will not replace any state forms you may receive that provide proof of medical insurance.)

Please note: For the 2023 tax year, California (CA), the District of Columbia (DC), New Jersey (NJ) and Rhode Island (RI) require copies of the federal 1095 tax forms (used to report healthcare coverage) for retirees who are residents during the tax year. Nokia has partnered with Alight to ensure compliance with these healthcare tax filing requirements, and 1095 data will be provided to CA, DC, NJ and RI as required

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, subject to the terms of applicable collective bargaining agreements. 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.

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