

Get More From Your 2020 Nokia Benefits



Important Information About Using Your Benefits in 2020

For Participants in the Management Retiree Plan Design

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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 [UnitedHealthcare's preventive care guidelines for children and adults here](#).

What You Need to Know About Your Member ID Cards

UnitedHealthcare® Group Medicare Advantage (PPO) Members

Re-enrolled in the UnitedHealthcare Group Medicare Advantage (PPO) for 2020?

- You will receive a new medical plan member ID card from UnitedHealthcare to use in 2020. Continue to use your current UnitedHealthcare member ID card through December 31, 2019.
- You will not receive a new prescription plan member ID card from Express Scripts. Continue to use your current Express Scripts prescription plan member ID card in 2020.
- **Enrolled in the UnitedHealthcare Group Medicare Advantage (PPO) for the first time?**
 - You will receive new member ID cards from UnitedHealthcare (medical) and Express Scripts (prescription drug) to use in 2020.

You can expect new medical and (if applicable) prescription plan member ID card(s) for your 2020 benefits to arrive in your mail at home by January 1, 2020.

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.

Enrolled in Nokia Dental Coverage for 2020? Dental Plan Member ID Cards Are *Not* Required

Keep in mind that Aetna does not issue dental plan 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.

Starting in late December, you can print a copy of your 2020 medical plan member ID card from the UnitedHealthcare retiree website at www.UHCRetiree.com/nokia. You will need to sign in or register in order to access the website.

If you have not received your new ID card(s) by January 1, or if you have misplaced your card(s) and need new one(s), contact:

- **Medical plan member ID card:** UnitedHealthcare Customer Care (Member Services) at www.UHCRetiree.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.
- **Prescription plan member ID card:** Express Scripts at 1-800-230-0512 (TTY: 1-800-716-3231).

Starting in January, your healthcare provider or pharmacy should be able to confirm your coverage directly with UnitedHealthcare (medical) or Express Scripts (prescription drug).

Enhanced or Standard POS, Traditional Indemnity and HMO/Medicare HMO Members

- **Re-enrolled in the Enhanced POS, Standard POS or Traditional Indemnity option (all of which include prescription drug coverage)?**
 - If you have re-enrolled in the **Enhanced or Standard POS option**, you will receive a new medical plan member ID card from UnitedHealthcare by January 1, 2020.
 - If you have re-enrolled in the **Traditional Indemnity option**, continue to use your current UnitedHealthcare medical plan member ID card in 2020.
 - Regardless of which medical option you have re-enrolled in, you will not receive a new prescription plan member ID card. Continue to use your current Express Scripts prescription drug plan ID card in 2020.
- **Enrolled in the Enhanced POS, Standard POS or Traditional Indemnity option (all of which include prescription drug coverage) for the first time?**
 - You will receive new member ID cards from UnitedHealthcare (medical) and Express Scripts (prescription drug) by January 1, 2020.
- **Re-enrolled, or enrolled in a Health Maintenance Organization (HMO) or Medicare HMO for the first time?** Contact the HMO/Medicare HMO for any questions about member ID cards. You can find contact information on the back of your HMO/Medicare HMO member ID card (if you are currently enrolled) and in the *Benefits At-a-Glance and Resource Contact Information 2020* booklet available on the BenefitAnswers Plus website at www.benefitanswersplus.com.

If you have not received your new member ID card(s) by January 1, or if you have misplaced your card(s) and need new one(s):

- **If you are enrolled in the Enhanced POS, Standard POS or Traditional Indemnity option:** You may print them out from the applicable carrier's website:
 - Medical (UnitedHealthcare): www.myuhc.com. (You will need to sign in or register in order to access the website. Note that if you have not yet accessed the website, you will be prompted to set up a new username and password when you try to access it.)
 - Prescription drug (Express Scripts): www.express-scripts.com

You may also call UnitedHealth UnitedHealthcare Customer Care (Member Services) at 1-800-577-8539 (if you are enrolled in the Enhanced or Standard POS option) or 1-800-577-8567 (if you are enrolled in the Traditional Indemnity option) and/or Express Scripts at 1-800-336-5934.

- **If you are enrolled in an HMO or Medicare HMO:** Contact your plan for information. Contact information is available on the back of your HMO/Medicare HMO member ID card (if you are currently enrolled) and in the *Benefits At-a-Glance and Resource Contact Information 2020* booklet on the BenefitAnswers Plus website at www.benefitanswersplus.com.

Starting in January, your healthcare provider or pharmacy should be able to confirm your coverage directly with UnitedHealthcare (medical for the Enhanced POS, Standard POS and Traditional Indemnity options), Express Scripts (prescription drug for the Enhanced POS, Standard POS and Traditional Indemnity options) or your HMO/Medicare HMO (medical and prescription drug).

Enrolled in the Enhanced POS, Standard POS or Traditional Indemnity Option? Choose Premium Care Physicians

Choosing a doctor is one of the most important health decisions you will make. If you are enrolled in the Enhanced POS, Standard POS or Traditional Indemnity option, the UnitedHealth Premium® Program can help.

How the UnitedHealth Premium Program Works

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.

How 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, see [Find the Right Doctors: Use the UnitedHealth Premium® Program](#).

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 — **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 don't 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 or lower copayment than you would pay for an office visit. Most visits take about 10 – 15 minutes. Doctors can write a prescription¹, 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 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.
- **If you are enrolled in the UnitedHealthcare Group Medicare Advantage PPO**, log on to www.UHCRetiree.com/nokia and choose from provider sites where you can register for a virtual visit.

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.

¹ Doctors cannot prescribe medications in all states.

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 here.](#)

OptumHealth™ NurseLine²

Illness or injury can happen anytime, not just during your doctor's regular office hours. **If your situation is life- or limb-threatening, call 911 or go to the nearest emergency room (ER) immediately.** But if your situation is less serious, remember that the UnitedHealthcare OptumHealth NurseLine is a toll-free call away — 24 hours a day, seven days a week.

The NurseLine's experienced registered 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 the NurseLine:

- **If you are enrolled in the Enhanced POS, Standard POS or Traditional Indemnity option:**
Call 1-866-444-3011. You can also participate in an online Live Nurse Chat. Just log on to www.myuhc.com from any device with an Internet connection.
- **If you are enrolled in the UnitedHealthcare Group Medicare Advantage (PPO):**
Call 1-877-365-7949.

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

²This 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 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) Option Members Only

Step Into SilverSneakers®, Your Plan's Fitness Benefit

The SilverSneakers fitness program³ is designed for people at any level of fitness. It offers a no-cost, basic fitness center membership at any of more than 13,000 participating fitness centers nationwide.

If the nearest participating location is 15 or more miles from your home, you can register for the SilverSneakers Steps® program. This personalized, no-cost program provides tools, resources and information to help you track and increase your daily activity.

For more information, contact UnitedHealthcare Customer Care (Member Services) at www.UHCRetiree.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.

³Availability of the SilverSneakers program varies by plan/market. Refer to your Evidence of Coverage for more details. Consult a healthcare professional before beginning any exercise program. Tivity Health and SilverSneakers are registered trademarks or trademarks of Tivity Health, Inc. and/or its subsidiaries and/or affiliates in the USA and/or other countries. © 2018. All rights reserved.

Available to Enhanced POS, Standard POS and Traditional Indemnity Option Members Only

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 member ID cards
- View claims and account balances
- Estimate the costs of common procedures
- View your copay, coinsurance, annual deductible and/or out-of-pocket expenses

To download the UnitedHealthcare app, visit the App Store or Google Play.

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
- 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.

Make Managing Your Mail Order Prescriptions Even Easier: Sign Up for Text Message Notifications

When you call Express Scripts member services about the status of a mail order prescription purchase or shipment, or to update your communication preferences, you have the option to receive text message notifications to confirm the receipt of an order by Express Scripts and shipping information.

During your call, you will be asked if you would like to receive text messages regarding your prescriptions. If you reply "Yes," the Patient Care Advocate will provide all legal disclaimers and send you a confirmation text message. You must confirm by replying YES via text message. Once confirmed, you will receive text messages instead of automated phone calls or emails. If you reply "No," or if you do not offer a reply, you will not receive the confirmation text and you will continue to receive notifications as you do today.

Express Scripts plans to introduce additional text notifications in the future.

Manage Your Dental Benefits With the Aetna HealthSM App

Need to find an in-network provider? Want to check a claim or see your member 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 to download the app.

Step 2: Register directly on 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
UnitedHealthcare ⁴ 	Find in-network medical providers, estimate costs, view and manage claims, access your member ID card and connect with customer service representatives.	Search for “UnitedHealthcare” on the App Store and Google Play
UnitedHealthcare Rally ⁴ 	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
Express Scripts Express Rx 	Order prescription drug refills, get drug and pricing information, find a network pharmacy, track mail-order status and access your prescription plan member ID card.	Search for “Express Scripts” on the App Store and Google Play
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

⁴ Available to POS and Traditional Indemnity option members only.

Keep Your Life Insurance and/or Savings Plan Beneficiaries Up to Date

If you are eligible for and participate in the Nokia life insurance and/or Nokia Savings/401(k) Plan, it is important to keep your 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 change your beneficiary designations and contact information for:

- **Life insurance** — Complete and submit the form(s) available on the BenefitAnswers Plus website at http://www.benefitanswersplus.com/retired_m/index.html. Select “Forms” in the primary tiles and then select “Insurance Forms.” Or, contact MetLife at 1-888-201-4612.
- **Savings Plan** — Log on to the Your Benefits Resources™ (YBR) website at <https://digital.alight.com/nokia> to access your Savings Plan account. Select “Your Profile” in the primary tiles and then select “Beneficiaries.” Or, call the Nokia Benefits Resource Center at 1-888-232-4111.

Coming Your Way: Tax Form 1095

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 2019 Form 1095-C no later than January 31, 2020.

Form 1095 indicates the months of the year that you (and your dependents, if applicable) were offered or were enrolled in medical coverage during 2019. You may need Form 1095 or the information it includes in order to file your federal tax return for 2019. Nokia cannot offer tax advice, so you might consider consulting a tax advisor for further guidance on Form 1095. (**Please note:** Form 1095 will not replace any state forms you may receive that provide proof of medical insurance.)

New for 2020: New Jersey (NJ) and the District of Columbia (DC) will also require copies of the federal 1095 tax forms (used to report healthcare coverage) for residents during the tax year. For the 2019 tax year, filings are due by March 31, 2020, for NJ and by June 30, 2020, for DC. Nokia has partnered with Alight to ensure compliance with these new healthcare tax filing requirements, and 1095 data will be provided to NJ and DC residents as needed.

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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