

## Get More From Your 2019 Nokia Benefits



### Important Information About Using Your Benefits in 2019

For Participants in the Formerly Represented Retiree Plan Design

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# What You Need to Know About Your Member ID Cards

## UnitedHealthcare® Group Medicare Advantage (PPO) Members

As a reminder, you receive a new medical plan member ID card from UnitedHealthcare every year, not just when you enroll in the plan for the first time. There is a separate Express Scripts prescription drug member ID card.

- **Re-enrolled in the UnitedHealthcare Group Medicare Advantage (PPO) for 2019?** You will not receive a new prescription drug member ID card from Express Scripts. Continue to use your current Express Scripts prescription drug member ID card in 2019.
  - You should continue to use your current UnitedHealthcare Group Medicare Advantage (PPO) member ID card through December 31, 2018.
- **Enrolled in the UnitedHealthcare Group Medicare Advantage (PPO) for the first time?** You will also receive a new prescription drug member ID card from Express Scripts.

You can expect new medical and (if applicable) prescription drug member ID card(s) for your 2019 benefits to arrive in your mail at home by January 1, 2019.

### **Enrolled in Nokia Dental Coverage for 2019? 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](http://www.aetna.com).

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.

## Need to Schedule an Appointment But Do Not Yet Have Your New ID Card?

Starting in late December, you can print a copy of your 2019 medical plan member ID card from the UnitedHealthcare retiree website at [www.UHCRetiree.com/nokia](http://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](http://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 drug member ID card:** Express Scripts at [www.express-scripts.com](http://www.express-scripts.com) or 1-800-336-5934.

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

## POS, Traditional Indemnity and HMO/Medicare HMO Members

- **Re-enrolled in the Point of Service (POS) or Traditional Indemnity option?** Continue to use your current member ID cards from UnitedHealthcare (medical services) and Express Scripts (prescription drugs) in 2019. You will not receive new member ID cards.
  - **Important exception if you live in Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Idaho, Louisiana, Mississippi, Montana, Nevada, Oregon, Tennessee, Utah, Washington or Wyoming:** You will receive a new UnitedHealthcare member ID card in January to use for medical services in 2019.
- **Enrolled in the POS or Traditional Indemnity option for the first time?** You will receive new member ID cards from UnitedHealthcare (medical services) and Express Scripts (prescription drugs) by January 1.
- **Re-enrolled, or enrolled in an HMO/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 booklet available on the BenefitAnswers Plus website at [www.benefitanswersplus.com](http://www.benefitanswersplus.com).

### Need to Schedule an Appointment But Do Not Yet Have Your New ID Card?

If you are enrolled in the POS or Traditional Indemnity option for 2019, starting in late December, you can print a copy of your 2019 medical plan member ID card from the UnitedHealthcare website at [www.myuhc.com](http://www.myuhc.com). You will need to sign in or register in order to access the website. (Note that if you have re-enrolled in coverage for 2019, you may be prompted to set up a new username and password when you try to access the website.)

If you are enrolled in an HMO or Medicare HMO for 2019, 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 booklet on the BenefitAnswers Plus website at [www.benefitanswersplus.com](http://www.benefitanswersplus.com).

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.myuhc.com](http://www.myuhc.com), or by calling 1-800-577-8539 (if you are enrolled in the POS option) or 1-800-577-8567 (if you are enrolled in the Traditional Indemnity option).
- **Prescription drug member ID card:** Express Scripts at [www.express-scripts.com](http://www.express-scripts.com) or 1-800-336-5934.
- **HMO/Medicare HMO medical/prescription drug member ID card:** Contact your plan; 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 booklet on the BenefitAnswers Plus website at [www.benefitanswersplus.com](http://www.benefitanswersplus.com).

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

# Eligible for Medicare? You Have Received — or Will Receive — a New Medicare ID Card

As a reminder, federal law requires that Social Security Numbers (SSNs) be removed from Medicare ID cards. To comply, the Centers for Medicare and Medicaid Services (CMS) has implemented the SSN Removal Initiative (SSNRI). Under the SSNRI, the Social Security-based Health Insurance Claim Number (HICN) is being replaced by a Medicare Beneficiary Identifier (MBI) — a unique, randomly assigned string of numbers and letters — on all Medicare ID cards. CMS began mailing new ID cards in April 2018 and is scheduled to complete the process by April 2019.

## Enrolled in the 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 POS or Traditional Indemnity option, the UnitedHealth Premium<sup>®</sup> 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](http://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.

# 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 copayment you would pay for an office visit. Most visits take about 10 – 15 minutes. Doctors can write a prescription<sup>1</sup>, if needed, that you can pick up at your local pharmacy.

Log on to [www.myuhc.com](http://www.myuhc.com) (if you are enrolled in the POS or Traditional Indemnity option) or [www.UHCRetiree.com/nokia](http://www.UHCRetiree.com/nokia) (if you are enrolled in the UnitedHealthcare Group Medicare Advantage [PPO]) and choose from provider sites where you can register for a virtual visit. Register and 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.

<sup>1</sup> Doctors cannot prescribe medications in all states.

### OptumHealth™ NurseLine

Illness or injury can happen anytime, not just during your doctor's regular office hours. **If the situation is life- or limb-threatening, call 911 or go to the nearest emergency room (ER) immediately.** But if the 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 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](http://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.

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 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<sup>®</sup>, Your Plan's Fitness Benefit

The SilverSneakers fitness program<sup>2</sup> 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<sup>®</sup> 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](http://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.

<sup>2</sup> Availability 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 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<sup>®</sup>

You have access to UnitedHealthcare Rally, a user-friendly digital experience on **myuhc.com**<sup>®</sup> 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](http://www.myuhc.com) from your computer, tablet or smartphone anytime.

## Health4Me™ Mobile App

Think of the UnitedHealthcare Health4Me app as your go-to healthcare resource for whenever you are on the go. The Health4Me app makes it easy for you to access your healthcare information, anytime and anywhere, from your Apple® or Android™ mobile device.

Health4Me gives you tools to help you estimate costs, manage claims and find providers. You can:

- View and share health plan member ID cards via email or fax
- Check account balances and benefit amounts
- Collect, track and share past and current Personal Health Records
- View and manage claims
- Pay providers for out-of-pocket expenses
- Estimate costs of common procedures and conditions up front
- Find nearby providers, hospitals and quick care facilities
- Connect with helpful professionals 24/7

To download Health4Me, 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](http://www.myuhc.com) or the Health4Me app. (To log on to [www.myuhc.com](http://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 New Aetna Health<sup>SM</sup> 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 new, free Aetna Health app.

The new Aetna Health app will replace the current Aetna Mobile app starting January 1, 2019. Please continue to use the Aetna Mobile app through December 31, 2018.

The new Aetna Health app will be available 24/7 and work with most smartphones and tablets. You can download the new Aetna Health app now, but you will not have access to the information on the app until January 1.

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](http://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 Health4Me <sup>3</sup> 	Find in-network medical providers, estimate costs, view and manage claims, access your ID card and connect with customer service representatives.	Search for "Health4Me" on the App Store and Google Play
UnitedHealthcare Rally <sup>3</sup> 	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 drug member ID card.	Search for "Express Scripts" on the App Store and Google Play
<b>Coming January 1, 2019</b>  Aetna Health 	Find in-network dentists, check the status of a claim and view an ID card.  <b>Note:</b> Continue to use the current Aetna Mobile app through December 31, 2018. You can download the new Aetna Health app now, but you will not have access to the information on the app until January 1, 2019.	Search for "Aetna Health" on the App Store and Google Play

<sup>3</sup> Available 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 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\\_r/index.html](http://www.benefitanswersplus.com/retired_r/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 <http://resources.hewitt.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 2018 Form 1095-C no later than January 31, 2019.

Form 1095 indicates the months of the year that you (and your dependents, if applicable) were offered or were enrolled in medical coverage during 2018. You may need Form 1095 or the information it includes in order to file your federal tax return for 2018. 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.)

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.

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