

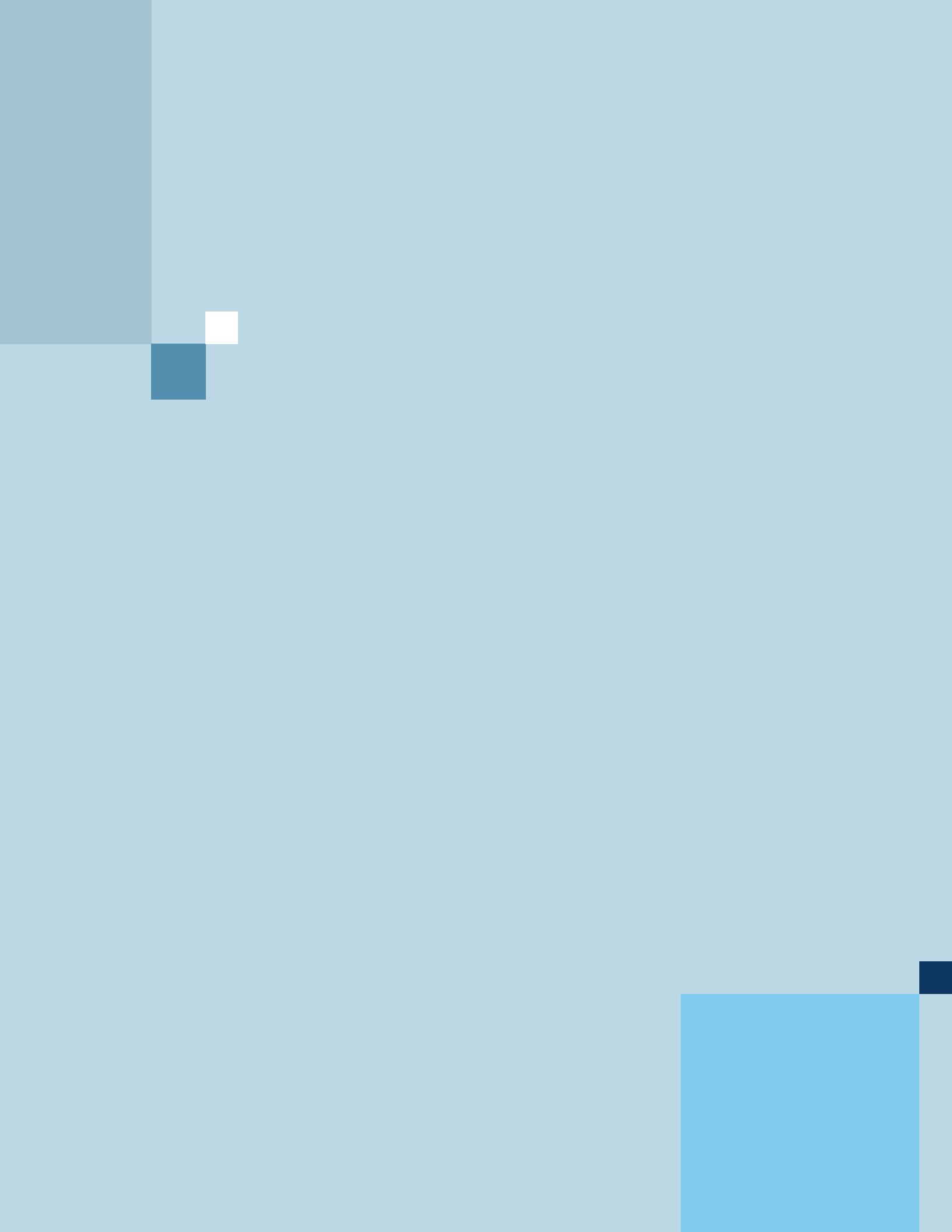


For New Intel Retirees

2024 Health Benefits Enrollment Guide

Understand your health benefit options

intel[®]



2024 Health Benefits Enrollment Guide

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Purpose

Congratulations on your retirement from Intel! Now that you are a retiree, it's time for you and your family to review the available Intel retiree health benefits and make decisions on health insurance.

Selecting health insurance is an important decision that requires careful consideration. Finding the plan that's right for you can be difficult as there are many options and each option has its pros and cons. This is especially true considering there can be differences in coverage, out-of-pocket cost (e.g., deductibles, co-pays), premiums, and provider networks.

This guide will provide you with information on the Intel Retiree Medical Plan (IRMP) options so you can compare them to the individual market or Medicare and choose the healthcare option that best suits your individual needs.

Contact information for each IRMP health insurance option is located throughout this guide if you have additional questions.



Section 1

The basics

This section references the information you'll receive, when you'll receive it, and the actions you need to take when you retire from Intel.

If you are enrolled in Intel health benefits as an Intel active employee, your active employee health benefit coverage ends on the last day of the month following your last day of work. For example, if your last day of work is Nov. 6, your active coverage ends on Nov. 30.

In addition to this guide, which describes the IRMP options and Sheltered Employee Retirement Medical Account (SERMA), you will also receive COBRA information from the Intel Health Benefits Center.

You may contact the Intel Health Benefits Center as early as the day after your retirement to review your Retiree health and COBRA options and make your enrollment elections to ensure there are no gaps in coverage.

COBRA

- Upon retirement, if you were covered under one of the active Intel medical/dental/vision options, the Health Flexible Spending Account ("Health FSA"), or the Limited Use Health Flexible Spending Account ("Limited Use Health FSA") as an active employee, you may elect COBRA to continue coverage for the remainder of the year in which you retire.
- You may also elect COBRA to continue your coverage for the Employee Assistance Plan (EAP).
- For residents in Arizona, New Mexico, and Oregon, if you want to continue accessing the Health for Life Centers after leaving Intel, you must elect COBRA for health plan coverage. Access to the Health for Life Center ends when your health plan COBRA coverage ends.
- If you choose to enroll in COBRA, you must enroll within 60 days of the date your active healthcare coverage ends.
- Coverage under COBRA is retroactive to your initial COBRA eligibility date to ensure no lapse in coverage.
- About 30 days prior to your COBRA coverage ending, it is your responsibility to notify the Intel Health Benefits Center so you can obtain an updated Retiree Enrollment Guide.

- **Caution:** Early termination of COBRA coverage prior to the end of the maximum COBRA coverage period, generally 18 months, may not be considered a special enrollment event that allows you to enroll in Affordable Care Act (ACA) Health Insurance Marketplace coverage, or another health plan.

For complete information on COBRA, please review Chapter 11 of the Pay, Stock and Benefits Handbook available on the My Health Benefits website at www.intel.com/go/myben or by calling 877-GoMyBen (466-9236).

COBRA and Medicare

It's important you understand how Medicare impacts your COBRA coverage. If you and/or your dependents are eligible for Medicare, enroll in Medicare Part A and Part B, even if you chose to elect COBRA coverage. COBRA/Medicare key points to consider are:

1. Do not wait to enroll in Medicare upon your retirement (if you are age 65 or older) or when you turn age 65 after retirement. COBRA is not considered active healthcare coverage. Your active healthcare coverage ENDS the last day of the month in which your employment with Intel terminates. If you delay your Medicare enrollment while on COBRA, you may incur a Medicare premium penalty.
2. COBRA pays eligible claims secondary to Medicare, regardless of whether or not you are enrolled in Medicare Part A and Part B. Your COBRA plan will automatically reduce claims payments for the amount covered by Medicare. If you are not enrolled in Medicare, you are responsible for the claims amount that Medicare would have paid if you were enrolled.
3. If you or your dependent become Medicare eligible while on COBRA, COBRA will assume you are enrolled in Medicare (e.g., age 65 and older or disabled) and will coordinate your benefits and coverage.

Medicare may give you an eight-month grace period (Special Enrollment Period (SEP)) to enroll in Medicare before assessing premium penalties. However, COBRA coverage does not provide a grace period for the processing of claims as secondary to Medicare. If you have Medicare questions, visit Medicare's website at www.medicare.gov or call 800-MEDICARE (800-633-4227).

IRMP options and SERMA

- You may enroll in the IRMP options within 30 days of a qualified change in status event (for example, the date your COBRA coverage ends).
- If you meet the SERMA eligibility rules, a SERMA will be established for you 60 days after retirement. SERMA may be used toward IRMP premiums or non-Intel sponsored health insurance premiums as identified on page 14.
- You have the option to elect COBRA and delay enrollment in IRMP or non-Intel sponsored health insurance until COBRA coverage ends.
 - For residents in Arizona, New Mexico, and Oregon, if you want to continue accessing the Health for Life Centers after leaving Intel, you must enroll in one of Intel's medical COBRA options. The IRMP options and non-Intel sponsored health insurance does not include access to the Intel Health for Life Centers. Access to the Health for Life Center ends when your COBRA coverage ends.
- If SERMA is established for you, you will not be eligible for an Affordable Care Act (ACA) Health Insurance Marketplace subsidy unless you opt-out of using SERMA. See "Temporarily Opting Out of SERMA" on page 14.

For additional details, see the IRMP and SERMA Summary Plan Description and Plan Document (SPD) located in the Reference Center on the My Health Benefits website, at www.intel.com/go/myben or by calling 877-GoMyBen (466-9236).

Important dates to consider

Key dates/deadlines	Considerations
End of month you retire	Active Intel health coverage ends
60 days after retirement	Deadline to enroll in IRMP
60 days after retirement	Deadline to elect COBRA
In the Fall (annually)	Annual Enrollment for Intel retirees for IRMP options and non-Intel sponsored health insurance

IRMP eligibility

It's your responsibility to ensure that only your eligible dependents are enrolled in IRMP.

Checking eligibility for the different IRMP options

The information below provides a summary of eligibility requirements for IRMP:

- You must retire as a US employee by meeting one of the retirement eligibility requirements to enroll in IRMP.
- Your eligible dependents may also enroll in the IRMP options.
- And:
 - For those who are Medicare eligible, Anthem Medicare Preferred 15P (PPO) and Anthem Medicare 25P (PPO). Eligibility requirements¹:
 - Must be eligible and enrolled in Medicare Part A and Part B.
 - Must live in United States and provide a physical address.
 - Must provide Medicare ID number to enroll.
 - For Anthem High Deductible Health Plan (HDHP):
 - You and/or your eligible dependents who are not Medicare eligible.
 - If you are Medicare eligible and your dependent is not, or vice versa, the Medicare-eligible person can enroll in either Anthem Medicare Preferred (PPO) option, while the non-Medicare eligible person can enroll in the IRMP Anthem HDHP.
 - You may enroll your eligible dependents in the IRMP medical or vision options even if you do not enroll.

For a complete description of IRMP eligibility, refer to the IRMP and SERMA SPD. For a copy of the SPD, contact the Intel Health Benefits Center at 877-GoMyBen (466-9236), or visit the Reference Center on My Health Benefits at www.intel.com/go/myben. If you're accessing the site for the first time, you must create a User ID and password to log on. The 2024 IRMP and SERMA SPD will be available in Q1 of 2024.

¹ Medicare must approve all enrollment submissions. Anthem will review your enrollment request and then send to Medicare to confirm eligibility. You will receive an enrollment confirmation letter upon Medicare acceptance. Anthem Medicare Preferred (PPO) premium is based on individual enrollment and will be calculated based on the number of Medicare eligible individuals enrolled.



Section 3

Medicare eligible

If you, your spouse (SP) or domestic partner (DP), or children are eligible and enrolled in Medicare (typically age 65 and older or disabled), you can enroll in the Anthem Medicare Preferred 15P (PPO) or Anthem Medicare Preferred 25P (PPO) option.

If you are a new retiree and are Medicare eligible, it is important that you enroll in Medicare Part A and Part B as soon as you are eligible. If you delay enrolling in Medicare Part A and B, it may delay or prevent you from enrolling in the Anthem Medicare Preferred (PPO).

Medicare may also assess premium penalties if you delay enrollment. If you have Medicare questions, visit Medicare's website at www.medicare.gov or call 800-MEDICARE (800-633-4227).

The Anthem Medicare Preferred (PPO) options includes a wide variety of programs and tools to help you make choices toward better health in all aspects of your life, including wellness programs like SilverSneakers fitness at no extra cost. It also includes access to discounts on weight loss programs, nutritional supplements, and more, like:

The House Calls* program offers a personalized visit in your home or other appropriate healthcare setting that can lead to a treatment plan tailored just for you. The House Calls program is available at no additional cost for members who qualify, based on their health needs.

Healthy Meals – If you are not able to prepare a meal for yourself after being discharged from the hospital, or if you have a body mass index (BMI) of 18.5 or less, or 25 or more, or an A1C level of more than 9.0%, the Healthy Meals Program will provide prepared meals that only need to be reheated, delivered directly to your home. You may receive up to 14 healthy meals per event, up to four events.

The Compassionate Support program provides access to thoughtful, compassionate support by highly trained specialists at no additional cost to members who qualify, based on their health needs. These specialists help to improve communication among members, family, and providers to empower members to fulfill their personal wishes in their end-of-life decision-making.

* House Calls program is administered by an independent vendor. It is available to members who qualify.

Anthem Medicare Preferred (PPO) comparison chart

The Anthem Medicare Preferred (PPO) options include many benefits and services that may not be included in a local/regional Medicare Advantage plan. Below is a summary of some of the IRMP Medicare Advantage value added benefits and services. For a complete description of the Anthem Medicare Preferred (PPO) plans, go to www.anthem.com/ca/intelretiree.

	Anthem Medicare Preferred 25P (PPO) ¹	Anthem Medicare Preferred 15P (PPO) ¹
Plan Costs		
Monthly Premium	\$199.68 per individual	\$372.97 per individual
Annual Deductible (Combined in- and out-of-network deductible. Prescription benefit deductible is not combined with Medical deductible)	\$300 per individual	\$500 per individual
Office Visit Copays (After deductible)	\$25 Primary Care Provider	\$15 Primary Care Provider
	\$40 Specialist	\$30 Specialist
Inpatient	\$750 copay per admission	\$500 copay per admission with a \$1,500 annual inpatient out-of-pocket maximum
Out-of-Pocket Maximum (Combined in- and out-of-network out-of-pocket maximum)	\$6,500 per individual	\$5,000 per individual
Prescription Benefits		
Annual Deductible	\$200	\$250
Select Generics	\$0	\$0
Generics	\$15	\$10
Preferred Brands	\$30	\$25
Non-Preferred Brands	\$60	\$50
Specialty	\$200	\$50
Other Plan Features		
National Network	✓	✓
Urgent and Emergency Care Outside the US	✓	✓
Routine Transportation (Up to 12 non-emergency trips per year)		✓
Routine Hearing Services	✓	✓
Routine Foot Care	✓	✓
Non-Medicare Covered Chiropractic		✓
Non-Medicare Covered Acupuncture		✓
Healthy Meals Program	✓	✓
SilverSneakers Fitness Program	✓	✓
One ID Card for Medical/Prescriptions	✓	✓
Dedicated Concierge Team – call 800-811-2711	✓	✓

¹ Medicare must approve all enrollment submissions. Anthem will review your enrollment request and then send to Medicare to confirm eligibility. You will receive an enrollment confirmation letter upon Medicare acceptance. Anthem Medicare Preferred (PPO) plan premium is calculated based on the number of Medicare eligible individuals enrolled.

Anthem Medicare Preferred (PPO) coverage effective date

The effective date of coverage for the Anthem Medicare Preferred 15P and 25P (PPO) options is the first day of the month following the date you complete your enrollment election and are approved for enrollment by Medicare. Medicare must approve all enrollment submissions. Anthem will review your enrollment request and then send it to Medicare to confirm eligibility. You will receive an enrollment confirmation letter upon Medicare acceptance.

Warning: Medicare allows prospective enrollment only; it does not allow retroactive enrollment into the Anthem Medicare Preferred (PPO). Therefore, your coverage effective date in an Anthem Medicare Preferred (PPO) option will be based on the timing of when you enroll and are approved by Medicare.

Medicare provides many choices

As a Medicare-eligible retiree, we encourage you to explore all available options. For more information, visit www.medicare.gov or call 800-633-4227.

If you or one of your dependents is Medicare eligible, here are a few more things to consider:

- To ensure NO GAP in coverage, complete your IRMP Anthem Medicare (PPO) election PRIOR to:
 - the last day of the month in which your ACTIVE or COBRA coverage ends, or
 - the first of the month in which you turn age 65.
- If you are currently enrolled in the IRMP HDHP, your coverage will end the last day of the month prior to your 65th birthday.
- Your coverage effective date for the Anthem Medicare Preferred (PPO) is dependent on the date you enroll and the date you are approved by Medicare. Per Medicare requirements, your coverage effective date is the first of the month following your enrollment date. For example, if you complete your election on March 20, and you are approved by Medicare, your coverage will be effective April 1.
- You may elect COBRA, if eligible, to cover the gap period. Note, it is your responsibility to cancel your COBRA election to ensure you do not have double coverage based on your Anthem Medicare Preferred PPO effective date.

Catastrophic Rx HRA

Capping your Medicare Part D out-of-pocket costs

Retirees and your eligible dependents enrolled in a Medicare Part D plan can take advantage of Intel's Catastrophic Rx HRA. The Catastrophic Rx HRA will reimburse you for the 5% coinsurance you pay after you have met your annual true out-of-pocket maximum. Retirees do not need to enroll or elect this benefit, but you (or your eligible dependent for whom you are seeking reimbursement) do need to be enrolled in a Medicare Part D Plan, such as an Anthem Medicare Preferred (PPO) option. To take advantage of this benefit, you can find the Catastrophic Rx claim form in My Health Benefits by visiting the reference center. You can also call the Intel Health Benefit Center at 877-GoMyBen (466-9236) and notify the team you



have exceeded the Medicare Part D coverage gap (also called the "donut hole") for assistance with submitting Catastrophic Rx claims.² All eligible dependents including domestic partners must be listed as your dependent on the My Health Benefits website (www.intel.com/go/myben) in order for Catastrophic Rx reimbursement to be processed. For more information visit My Health Benefits or call 877-GoMyBen (466-9236).

² Once you hit the out-of-pocket max, you pay a copayment (~5%) for each drug for the remainder of the year. You may submit this copayment to the Catastrophic Rx HRA to get reimbursed by Intel. The cap is set by Medicare and for 2022 is \$7,050. (Out-of-pocket varies depending on the Part D plan you have.)

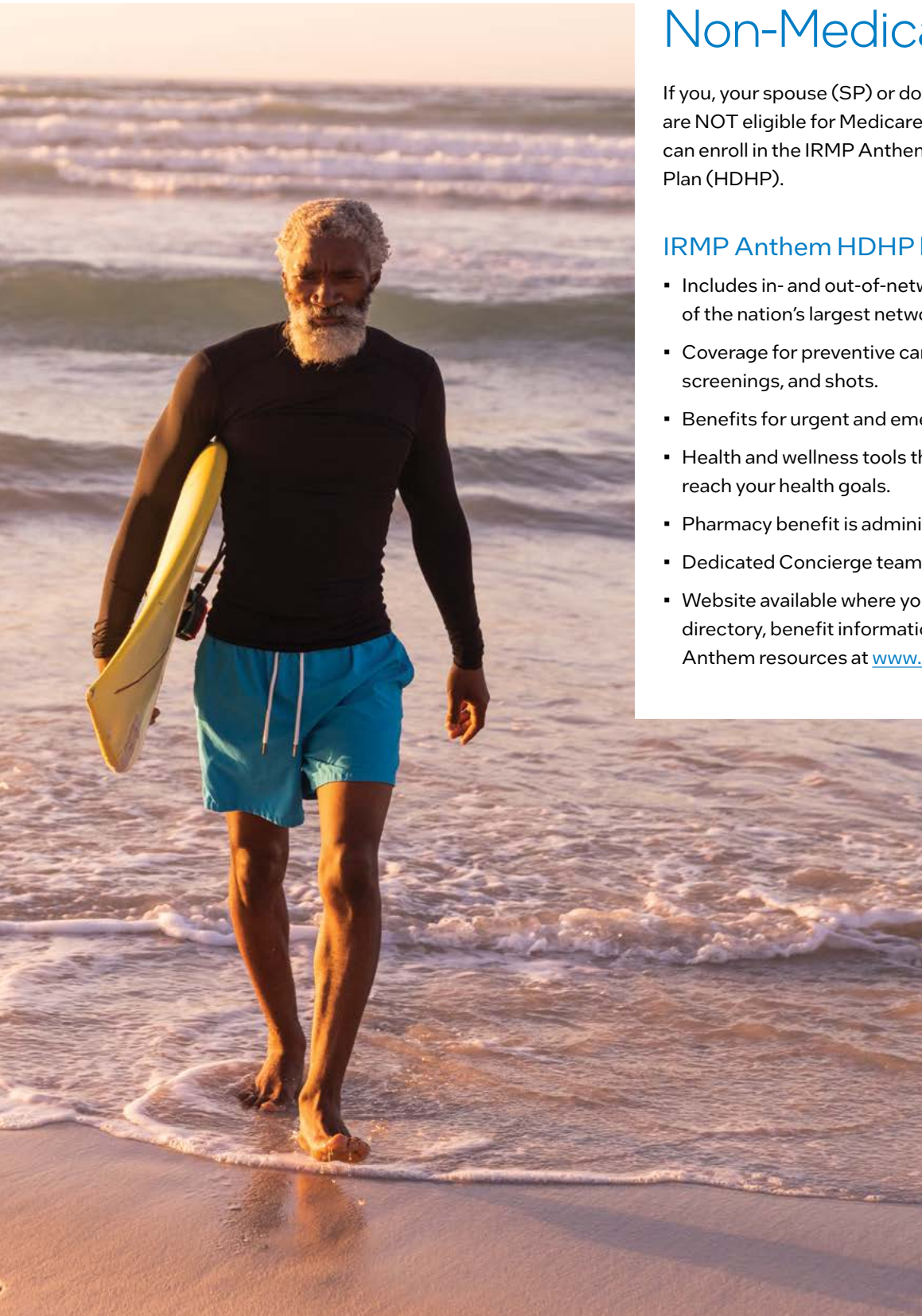
Section 4

Non-Medicare eligible

If you, your spouse (SP) or domestic partner (DP), or children are NOT eligible for Medicare (typically under age 65), you can enroll in the IRMP Anthem High Deductible Health Plan (HDHP).

IRMP Anthem HDHP key features

- Includes in- and out-of-network coverage and access to one of the nation's largest networks of doctors and hospitals.
- Coverage for preventive care, like regular checkups, screenings, and shots.
- Benefits for urgent and emergency care wherever you are.
- Health and wellness tools that help you stay healthy and reach your health goals.
- Pharmacy benefit is administered by Express Scripts.
- Dedicated Concierge team available at 800-811-2711.
- Website available where you can review the provider directory, benefit information, and Transition in Care Anthem resources at www.anthem.com/ca/intelretiree.



Monthly Premiums – IRMP Anthem HDHP ¹		
You Only, SP/DP Only, Child(ren) ² Only	You+ SP/DP or Child(ren) ² or SP/DP+ Child(ren) ²	You + SP/DP + Child(ren) ²
\$1,260	\$2,520	\$3,780

¹ For a complete description of benefits, refer to the IRMP and SERMA Plan Document and Summary Plan Description (IRMP and SERMA SPD) available on the My Health Benefits website.

² Same price for one child or multiple children.

IRMP Anthem HDHP Summary ³	
Annual Deductible (Combined in- and out-of-network deductible)	You only: \$1,680
	You + Child(ren): \$3,360
	You + SP/DP or Family: \$4,200
Coinsurance	10% in-network; 40% out-of-network
Prescription Benefit	<p>You are responsible for the actual cost of the drug until the deductible is met. You pay 10% coinsurance after the deductible is met. Once you have met the out-of-pocket maximum, 100% of the drug cost is covered.</p> <p>Prescription benefit administered by Express Scripts call 800-899-2713 or visit Express Scripts online at www.express-scripts.com/inteloe</p>
Out-of-Pocket Maximum ⁴ (Combined in- and out-of-network out-of-pocket maximum)	You only: \$2,510
	You + Child(ren): \$5,025
	You + SP/DP or Family: \$6,220

³ For more information on the IRMP Anthem HDHP go to www.intel.com/go/myben, review the IRMP and SERMA SPD, or call 877-GoMyBen (466-9236).

⁴ Out-of-network providers can charge you any amount, which may be higher than what in-network providers charge. When an out-of-network provider charges above the plan's maximum allowable amount, you are responsible for the difference. Amounts above the plan's maximum allowable amount do not count toward the plan out-of-pocket maximum.



Section 5

Health Savings Accounts

When enrolling in a High Deductible Health Plan—or HDHP—it's important to maximize your dollars and manage your budget by understanding how to use a Health Savings Account—or HSA. The basic concept of an HSA is that of a savings account used specifically for qualified medical expenses,¹ with preferential tax treatment.

What changes in 2024?

Annual HSA Contribution for 2024:

- \$4,150 – Individual
- \$8,300 – Family
- \$1,000 – Age 55+ Catch up contribution

Using your HSA or opening an HSA

If you are eligible, you can open an HSA with a provider of your choice. For administrative convenience, Intel has partnered with Fidelity, an HSA administrator, to establish HSAs² for participants of the IRMP HDHP. If you already have an existing Fidelity HSA, that HSA remains open and available to you. Intel will cover the administration fees on the Fidelity HSA as long as you remain enrolled in the IRMP Anthem HDHP.

HSA and Medicare

If you're enrolled in Medicare Part A or B, you can no longer contribute to your HSA. However, you can withdraw HSA money after you enroll in Medicare to help pay for qualified medical expenses, deductibles, premiums, copayments, and coinsurance.¹ If you use your HSA for qualified medical expenses, distributions are tax-free. Please consult with your tax advisor for more information. Also, make sure to stop contributing to your HSA before you plan to enroll in Medicare. The rules are complex.

HSA common questions:

Q: If I have a Fidelity HSA, and enroll in IRMP HDHP, do I need to do anything?

If you already have a Fidelity HSA and you enroll in IRMP HDHP you do not need to do anything. You may continue to use your HSA for eligible expenses.



Q: If I do not have a Fidelity HSA, what do I need to do to open an account?

You need to open your HSA online by following the steps outlined in the HSA Frequently Asked Questions located in the Intel Retiree and Health Benefits Documents at www.intel.com/go/myben.

Once your account is open, you will receive your HSA debit card in the mail. You can also request additional debit cards for your qualified dependents through the HSA "Paying" tab on Fidelity NetBenefits. You can call Fidelity to inquire about your account at 888-401-7377.

¹ Qualified medical expenses for you and your eligible dependents include insurance premiums for health insurance coverage under COBRA, copays, coinsurance, deductibles, Medicare (but not Medigap) premiums, long-term care insurance. Consult with Fidelity or your expert advisor and see IRS Publication 969 and 502 <https://www.irs.gov/publications/p969/ar02.html>.

² HSA is not an Intel-sponsored benefit. Eligibility requirements apply, and contribution limits are set by the IRS.

Vision

If you or your spouse (SP)/domestic partner (DP)/dependents are eligible for IRMP, you can enroll in IRMP VSP Vision.

IRMP Vision

You have two options for vision coverage:

- VSP Basic Vision
- VSP Vision Plus

You can enroll in an IRMP Vision option without having to also enroll in an IRMP medical option. IRMP Vision provides access to a large network of independent providers as well as these popular retail outlets: Costco, Walmart, Sam's Club. To locate a VSP doctor, go to www.vsp.com/advantage or call member services at 855-663-2836.

Monthly Premium – IRMP VSP Vision Benefits ¹			
Option	You Only, SP/DP Only, Child(ren) ² Only	You + SP/DP, You + Child(ren) ² , SP/DP + Child(ren) ²	You + SP/DP + Child(ren) ²
VSP Basic Vision	\$6.15	\$12.30	\$13.84
VSP Vision Plus	\$15.05	\$30.10	\$33.86

¹ For a complete description of benefits and eligibility requirements, refer to the IRMP and SERMA SPD available on the My Health Benefits website.

² Same price for one child or multiple children.

IRMP Vision Options		
Benefit Description	VSP Basic (In-Network)	VSP Vision Plus (In-Network)
Exam	Exam every 12 months	
Comprehensive Exam	\$0	\$0
Standard Contact Lens Fit	Up to \$55	Up to \$55
Eyewear	Frame every 24 months, lenses every 12 months	Frame and lenses every 12 months
Eyeglass Frames	\$150 allowance \$80 if Costco, Sam's Club, or Walmart	\$200 allowance \$110 if Costco, Sam's Club, or Walmart
Standard Single Vision	\$25 copay	\$10 copay
Standard Bifocal	\$25 copay	\$10 copay
Standard Trifocal	\$25 copay	\$10 copay
Standard Progressive	\$55 copay	\$55 copay
Premium Progressive	\$95–\$105	\$95–\$105
Anti-Reflective Coating	\$40 copay	\$40 copay
Polycarbonate Lens	\$31–\$35 copay	\$10 copay
UV Coating	\$0 copay	\$0 copay
Contact Lenses	Contact lenses every 12 months	
Contact Lenses (elective)	\$150 allowance	\$200 allowance
Lasik Surgery	Not Covered	\$2,000 lifetime

IRMP VSP Vision includes out-of-network coverage. Go to www.vsp.com/advantage or call member services at 855-663-2836 for more information.



Section 7

Voluntary benefits

More benefits available to Intel retirees

As an Intel Retiree, you may also participate in MetLife Dental and/or MetLife Legal. See below for more details.

MetLife Dental*

Intel partners with MetLife to offer retirees a voluntary plan that offers access to comprehensive dental coverage. You may use SERMA to get reimbursed for eligible dental premiums. If you're currently enrolled in MetLife Dental, your enrollment continues unless you opt out. If you're not enrolled, MetLife will send you a letter explaining how to enroll. For more information, call MetLife at 866-832-5756.

Thinking about joining a gym?

We have you covered.

Active&Fit Direct* gives you access to over 9,000 participating fitness centers. To learn more about Active&Fit and to find a participating gym near you, go to www.intel.com/retiree and click on the Discount Programs link.

MetLife Legal*

Upon retirement, if you were enrolled in MetLife Legal, your coverage will end on your retirement date. Retirees do have the option to continue their coverage. Contact MetLife Legal Plans at 800-821-6400 within 30 days of the retirement date to request retiree portability. You can port your coverage for the remainder of the year, paying for the remaining months upfront. In addition, your enrollment in an individual plan as an Intel Retiree will continue yearly unless you cancel the coverage by contacting MetLife Legal during annual enrollment.

* This plan or program is not an Intel-sponsored benefit or an Employee Retirement Income Security Act (ERISA) benefit.

Section 8

Sheltered Employee Retirement Medical Account (SERMA)

What is SERMA?

The Sheltered Employee Retirement Medical Account (SERMA)¹ is a Health Reimbursement Arrangement subject to IRS rules. The amount of SERMA credits available upon retirement are capped using eligible years of service up to the 2020 anniversary of your hire date. Eligible retirees may use SERMA toward medical insurance premium payments. Refer to IRMP and SERMA SPD (available in the Reference Center on My Health Benefits at www.intel.com/go/myben) for a list of qualified medical insurance premiums and for more information. See also IRS Publication 969, section on Health Reimbursement Arrangements (<https://www.irs.gov/pub/irs-pdf/p969.pdf>).

Who is eligible for SERMA?

Generally, if you were hired before Jan. 1, 2014, and are a US employee at the time you retire and meet the retirement eligibility rules, a SERMA will be established upon your retirement.

For complete eligibility information, review the IRMP and SERMA SPD.¹

Using SERMA to pay for health insurance

If eligible, you can use SERMA to pay for all or part of eligible insurance premiums for yourself and eligible dependents² such as IRMP or an insurance purchased outside of IRMP including through a Marketplace. If you're enrolled in IRMP, you can use SERMA to offset your monthly insurance premium for medical and/or vision coverage until you've fully exhausted your account. During enrollment, you can elect how much of your IRMP premium you'd like paid from your SERMA each month, i.e., 25%, 50%, 75%, or 100%. The percentage you elect for SERMA contribution for your IRMP insurance premium payments will be paid directly from your SERMA. The percentage you elect will apply to both you and any enrolled eligible dependent's premiums. If you choose a SERMA contribution other than 100%, you'll be responsible for paying the remainder of the insurance premium cost.



¹ For complete information on SERMA, such as eligibility or the amount of SERMA credits for eligible retirees, review the IRMP and SERMA SPD available at www.intel.com/go/myben. Click on the My Health Benefits website link, log in and select the "Plan Information" tile, or call 1-877-GoMyBen (466-9236).

² Reimbursements for a domestic partner (DP) and children of a DP are generally treated as taxable income unless your DP is a tax dependent. Intel will provide you with a 1099 for any reimbursements from SERMA for your DP's (or their children's) eligible expenses.

Additional eligible reimbursements include insurance premium payments for:

- Individual health, dental, and vision insurance
- Other employer retiree group plans³
- COBRA
- Medicare
- Medigap
- TRICARE
- Long-term care insurance premiums

All eligible dependents must be listed as your dependent on the My Health Benefits website in order for a SERMA reimbursement to be processed.⁴ For more information visit My Health Benefits or call 1-877-GoMyBen (466-9236).

Checking your SERMA balance

You may check your SERMA balance by calling the Intel Health Benefits Center at 877-GoMyBen (466-9236). Or, visit www.intel.com/go/myben to view your MyChoice Account. With MyChoice Accounts, you'll be able to submit reimbursement requests, track the statuses of claims and pay providers directly.

If you're accessing the site for the first time, you must register on the site by creating a user ID and password to log on. Review the "How to Log In" information in Section 9 of this guide.

Once logged in, you can:

- View your SERMA balance
- Submit claims (you have the option to submit claims online, by fax, or by mail)
- Check the status of your claims
- Learn more about eligible expenses

Temporarily opting out of SERMA

Retirees with access to SERMA will not qualify to receive federal premium tax credits. If you are considering using federal premium tax credits to reduce the cost of health insurance purchased through the Affordable Care Act (ACA) Health Insurance Marketplace, you should seek advice from a tax advisor.

If you are not Medicare eligible and you determine that you are eligible for the premium tax credit, you may choose to temporarily "Opt-Out" of SERMA prospectively in order to qualify.

When you "Opt-Out," your SERMA balance is frozen, and you will not be able to use SERMA to pay for Intel or non-Intel sponsored healthcare premiums mentioned on the previous page for you or your dependents. Your "Opt-Out" election will continue unless you "Opt-In."

There are online tools that help you identify if your income levels qualify for federal premium tax credits. If you want to learn more now, these sites are helpful: <https://www.healthcare.gov> and <http://kff.org/health-reform>.

If you have questions about the option to "Opt-Out" of your SERMA, please contact the Intel Health Benefits Center by calling 877-GoMyBen (466-9236). You must call to "Opt-Out" or "Opt-In" as it cannot be completed online.

SERMA claim timing and deadlines

The SERMA plan year runs Jan. 1 – Dec. 31 of each year. You may submit reimbursement for an eligible insurance premium expense incurred during the plan year as long as you are eligible for SERMA and:

- You have not opted out of SERMA for the period in which the claim was incurred.
- You file your claim AFTER your health insurance coverage began (i.e., insurance premium for February paid in January cannot be submitted for reimbursement until Feb. 1).
- You file your claim before the run-out period ends May 31 of the following year. For example, you have until May 31, 2024 to submit for reimbursement for 2023 eligible insurance premiums. The run-out period provides you extra time to submit your reimbursement request. If you do not submit your reimbursement request with complete supporting documentation by May 31 for previous year claims, your request will be denied.

Please review the IRMP and SERMA Plan Document and Summary Plan Description in the Reference Center on My Health Benefits for a complete description of SERMA eligibility, requirements, and benefits.

³ If you're enrolled in IRMP and your spouse (SP)/DP is enrolled in another retiree group health plan, you can use SERMA toward both your IRMP premium and your SP's/DP's employer's non-Intel retiree group insurance premium expense.

⁴ Reimbursements for a domestic partner (DP) and children of a DP are generally treated as taxable income unless your DP is a tax dependent. Intel will provide you with a 1099 for any reimbursements from SERMA for your DP's (or their children's) eligible expenses.

SERMA common questions

1. When does my SERMA end? What if I get another job?

Your SERMA is terminated when any of the following occur: you no longer have credits; the account has not been used after 20 consecutive years; or you and your eligible dependents die. There is no impact if you obtain a job with another employer.

2. Can I be enrolled in one of the IRMP medical options, and still use my SERMA to purchase other eligible insurance for myself or my eligible dependents? Yes. You can enroll in an IRMP medical option and also request SERMA reimbursement for other eligible insurance premium reimbursement such as the MetLife Dental Plan.

3. Can I be reimbursed from SERMA for individual insurance coverage for my spouse or eligible dependent children? Yes. The cost of eligible insurance premiums are eligible SERMA expenses for you, your SP/DP,⁵ and your eligible dependent children.

4. I am enrolled in my SP's employer group health plan. Can I be reimbursed from my SERMA account for the insurance premium? No. You may not use SERMA for another company's active employee group health plan.

⁵ Reimbursements for a DP and children of a DP are generally treated as taxable income unless your DP is a tax dependent. Intel will provide you with a 1099 for any reimbursements from SERMA for your DP's (or their children's) eligible expenses.

5. Can I use SERMA for coverage through a Healthcare Sharing Ministry/Group Share Costs/Discount Program? No. SERMA is a Health Reimbursement Arrangement (an "HRA") subject to Internal Revenue Service (IRS) rules for reimbursement of "qualified medical expenses." Expenses like those mentioned above are not considered qualified medical expenses by the IRS. See IRS publication 969 www.irs.gov/pub/irs-pdf/p969.pdf.

6. Can I be reimbursed for a bundled policy, such as health and non-health insurance? If you are enrolled in a policy that provides payments for other than healthcare insurance—such as life insurance or Accidental Death and Dismemberment—the healthcare cost must be separately stated in the insurance contract or statement. If you do not provide a premium break out, your request for SERMA reimbursement will be denied.

7. How do I find out more? Go to www.intel.com/go/myben and refer to the IRMP and SERMA Plan Document and Summary Plan Description located in the Plan Documents tile. You can also review IRS Publication 969, section on Health Reimbursement Arrangements: www.irs.gov/pub/irs-pdf/p969.pdf.

For information on DP SERMA reimbursement, go to www.intel.com/go/myben and click on the domestic partner tile.



Section 9

How to log in, enrollment information, and resources

Your Intel Benefits Center is your one-stop shop for information. Please call 877-GoMyBen (466-9236) or visit My Health Benefits at www.intel.com/go/myben.

How to log in

Create your new login

Step 1: Create your username and password

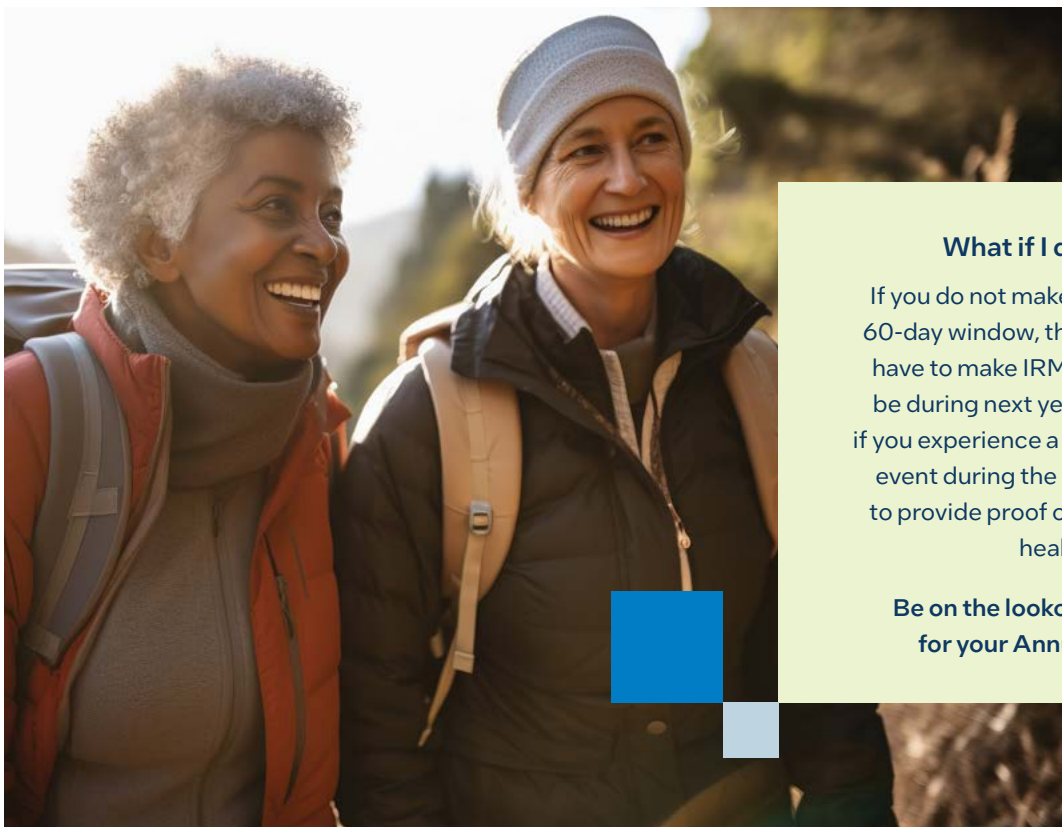
Visit <https://www.intel.com/go/myben> and click the "Register" button.

Step 2: Create your account

Follow the prompts to create your username, password, and security questions.

The screenshot shows the 'First time here?' registration page. It prompts the user to 'Register to create your user name and password.' with a 'Register' button. Below this is a multi-step form with tabs for 'Info', 'Create', 'Confirm', and 'Login'. The 'Info' tab is active, showing fields for 'SSN Last 4', 'Date of Birth', 'MM/DD/YYYY', 'ZIP', and 'Company Key'. A 'Directions' section on the right provides instructions: 'All fields are required. If you don't already have your Company Key, contact your benefits administrator. If you have any questions, you can call the Intel Health Benefits Center at 1-877-GoMyBen (466-9236).' At the bottom right are 'Cancel' and 'Continue' buttons.

You can make your elections online, or by calling the Intel Health Benefits Center at 877-GoMyBen (466-9236). **You must make your benefit elections within 60 days of either your retirement date or your COBRA coverage period ending.**



What if I don't take action?

If you do not make your elections within this 60-day window, the next opportunity you will have to make IRMP or SERMA changes will be during next year's Annual Enrollment, or if you experience a qualifying change-in-status event during the year. You may be required to provide proof of 18 months of continuous health coverage.

Be on the lookout in the Fall every year for your Annual Enrollment guide.

To enroll online:

- Go to www.intel.com/go/myben and click on “My Health Benefits website” then log on by entering your User ID and password.
- Click “Enroll” and select the medical plan or vision plan.
- Select the plan option you want to enroll in.
- Save your choices by selecting the “Complete Enrollment” button.
- Print a copy of your confirmed elections for your records. You can visit My Health Benefits at any time to view your elections.

Get answers to your questions

Contact the Intel Health Benefits Center at 877-GoMyBen (466-9236) about:

- Annual Enrollment
- IRMP medical and vision
- SERMA
- Catastrophic Rx HRA

Medicare eligible enrollment, timing, and coverage effective date

If you or one of your dependents are Medicare eligible, here are a few more things to consider:

- To ensure NO GAP in coverage, complete your IRMP Anthem Medicare Preferred (PPO)¹ election PRIOR to:
 - the last day of the month in which your ACTIVE or COBRA coverage ends, or
 - the first of the month in which you turn age 65.
- If you are currently enrolled in the IRMP HDHP, your coverage will end the last day of the month prior to your 65th birthday.
- Your coverage effective date will be dependent on the date you enroll. Per Medicare requirements, your coverage effective date will be first of the month following your enrollment date. For example, if you complete your election on March 20 and you are approved by Medicare, your coverage will be effective April 1.
- You may elect COBRA, if eligible, to cover the gap period. Note, it is your responsibility to cancel your COBRA to ensure you do not have double coverage based on your IRMP medical effective date.

¹ Medicare must approve all enrollment submissions. Anthem will review your enrollment request and then send to Medicare to confirm eligibility. You will receive an enrollment confirmation letter upon Medicare acceptance. Anthem Medicare Preferred (PPO) plan premium is calculated based on number of Medicare eligible individuals enrolled.

Resources

SERMA Claim Resources

If you meet the SERMA eligibility rules, a SERMA will be established for you 60 days after retirement. SERMA may be used toward IRMP premiums or non-Intel sponsored health insurance premiums as identified on page 14.

To setup auto-pay or SERMA reimbursement, review the instructions in My Health Benefits located on the Welcome page.

IRMP and SERMA Summary Plan Description (SPD)

For a copy, call the Intel Health Benefits Center at 877-GoMyBen (466-9236), or visit My Health Benefits at www.intel.com/go/myben.

Anthem Medicare Preferred (PPO) with Senior Rx Medical and Prescription Drug plans

For a complete description of benefits go to www.anthem.com/ca/intelretiree for the Pre-Enrollment Guide or call 800-881-2711 and select the Medicare option.

Anthem

Dedicated Concierge team available at 800-811-2711 or visit www.anthem.com/ca/intelretiree.

Vision

Call VSP at 855-663-2836 or visit VSP online at www.vsp.com/advantage.

Health Savings Account – Fidelity HSA

Call Fidelity at 888-401-7377 or visit Fidelity NetBenefits website <https://nb.fidelity.com/public/nb/intel/home>.

Medicare

Call 800-633-4227 or visit Medicare online at www.medicare.gov.

Health Insurance Marketplace

Contact your state’s Marketplace; www.healthcare.gov; Call Aon Retiree Health Exchange at 877-458-9659; <https://retiree.aon.com/intel>.

MetLife Dental

Call MetLife at 866-832-5756.

MetLife Legal

Call MetLife at 800-821-6400.

intel.com

Stay connected to Intel through the US Retiree web portal. You’ll find educational resources, news, information, and services to help you navigate retirement. Visit our page at www.intel.com/employee/retiree.



Learn how you can connect with other Intel retirees through the Intel Retiree Organization (IRO). Sign up today by visiting: <https://intelretiree.com/about-iro/request-to-join-iro/>

Connecting with Intel retirees

Tell me more

IRO provides members access to a website (intelretiree.com) focused on retirees where you can get answers to questions about healthcare benefits, discounts, volunteering for and donating to causes that interest you, or reconnecting with former colleagues and keeping up-to-speed about what others are doing. It's inspiring!

Plus, IRO (through its Mailbox program) connects you to an IRO volunteer who can help get answers to your individual questions, address issues, or give you additional Intel contacts.

Let's not leave out fun

Post COVID-19, IRO is back to holding informal retiree get togethers at Intel's major sites. When Intel returns to sponsoring camaraderie-focused events, we expect that Intel retirees will again enjoy our annual dinners with a fun-filled evening of gourmet dining, social connection, door prize giveaways, and an opportunity to hear from Intel executives about news and events.

More about IRO

IRO has now been serving official Intel retirees for 15 years. While its roots go back to 2001, IRO has been a sanctioned Employee Group of Intel since 2008 and its membership has grown to more than 7,000 retiree members. IRO is an all-volunteer organization that is governed by several committees overseeing communications, healthcare benefits, volunteering, website development and maintenance, and strategic planning.

The organization welcomes you into its membership and looks forward to benefiting from your experience, skills, and energy.



This Guide is intended to be a summary of your benefits. Intel reserves the right to modify, change, or discontinue benefit plans at any time, in its sole discretion.

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