



FOR INTEL RETIREES



2018 ENROLLMENT GUIDE

Make quality choices to optimize your health benefits

PURPOSE AND CONTENTS

Congratulations on your retirement from Intel. Since you are no longer an active employee, it's time for you and your family to review the available retiree health plan choices and make your healthcare decisions to help power your best life in retirement.

In this guide, we review the decisions you need to make and provide plan features and cost comparison charts to help you make informed choices. If you want more, we outline the best venues for detailed information and how you can get your questions answered.

Decision-support tools within the My Health Benefits website and other resources are available to you and your eligible dependents. Take advantage of all the available resources to help you prepare.

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WHAT YOU RECEIVE, WHEN YOU RECEIVE IT, AND WHAT ACTIONS YOU NEED TO TAKE

SECTION 1

Your active employee healthcare coverage ends on the last day of the month after your official last day of work. For example, if the last day you work is November 6, your active coverage ends November 30.

Approximately two weeks AFTER your retirement, you will receive two packets from Alight:

Packet 1: Understanding COBRA

- Upon retirement, you become a qualified beneficiary and have the right to elect COBRA to continue your healthcare coverage if you were covered under one of the Intel medical/dental/vision options, the Health Flexible Spending Account (“Health FSA”), or the Limited Use Health Flexible Spending Account (“Limited Use Health FSA”) the day before your retirement.
- You also become a qualified beneficiary and have the right to elect COBRA to continue your healthcare coverage for the Employee Assistance Program (EAP) and the Health for Life Center (Arizona, New Mexico, and Oregon residents only).
- If you choose to enroll in COBRA, you must enroll within 60 days from 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 Health Enrollment Guide and trigger the 30 day window to enroll in IRMP or another health plan.

For complete information on COBRA, please review Chapter 11 in 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

If you and/or your dependents are eligible for Medicare, enroll in Medicare even if you chose to enroll in COBRA. It's important you understand how Medicare impacts your COBRA benefits. You're not required to be enrolled in Medicare to be eligible for COBRA, but there are a few things to consider:

1. COBRA isn't considered an active employee group health plan, and if you delay your Medicare enrollment while on COBRA, you could experience a Medicare premium penalty.
2. Medicare Part A & B becomes the primary payer upon the loss of your active group health plan and your COBRA Plan will assume you are enrolled in Medicare (age 65+) and will coordinate benefits and coverage as such. This means that your coverage via your COBRA Plan will reduce plan benefits to coincide with Medicare. If you're not enrolled in Medicare Part A & B, then your out-of-pocket expenses will increase to include what Medicare would have paid.
3. If you or your dependent become Medicare eligible while on COBRA, your COBRA Plan will assume you are enrolled in Medicare (age 65 or older) and coordinate benefits and coverage as such (see #2 for more details).

Since COBRA coverage is NOT considered an active employer group health plan, be sure to check with Social Security/Medicare if you decide to delay your Medicare enrollment while enrolled in COBRA. Medicare allows a delay of Medicare only if you're covered on an active employer group health plan as the employee or a dependent of an employee.

Packet 2: Plan information on the Intel Retiree Medical Plan (IRMP) and Sheltered Employee Retirement Medical Account (SERMA)

- You may enroll in IRMP within 30 days of a qualified change of status event (for example, your retirement date or the date your COBRA coverage ends).
- If you meet the SERMA eligibility rules, a SERMA will be established for you 30-45 days after retirement. SERMA may be used toward IRMP premiums or non-Intel sponsored health insurance premiums as identified on page 3.
- You have the option to elect COBRA and delay enrollment in IRMP or non-Intel sponsored health insurance until COBRA coverage ends.
- **Caution:** Early termination of COBRA coverage prior to the end of the maximum COBRA coverage period, generally 18 months, is not considered a Special Enrollment event that would allow you to enroll in Affordable Care Act (ACA) Health Insurance Marketplace coverage. For example, if you are eligible for three months of Intel paid COBRA and then choose to drop COBRA for the remainder of the COBRA period, you will not qualify for Special Enrollment in the Marketplace and will have to wait for the next ACA Health Insurance Marketplace Open Enrollment period.
- Also note that if you are retiring from Intel and have a SERMA balance, you may be eligible for ACA Health Insurance Marketplace coverage, but are not eligible for a Marketplace subsidy.
- For additional details regarding IRMP and SERMA, see the Intel Retiree Medical Plan and Sheltered Employee Retirement Medical Account Summary Plan Description ("the SPD") on the My Health Benefits website at www.intel.com/go/myben or by calling (877) GoMyBen (466-9236).

SECTION 2

INTEL RETIREE MEDICAL PLAN (IRMP) ELIGIBILITY

Make sure you and your family members are eligible for coverage.

- It's your responsibility to ensure that only your eligible dependents are enrolled in IRMP. If you are Medicare eligible and your dependent is not, or vice versa, the Medicare eligible person can enroll in one of the IRMP Indemnity options, and the non-Medicare eligible person can enroll in the IRMP Cigna HDHP. For a complete description of the dependent eligibility requirements, refer to the Intel Retiree Medical Plan and Sheltered Employee Retirement Medical Account Summary Plan Description (the "SPD"). For a copy of the SPD, contact the Intel Health Benefits Center at (877) GoMyBen (466-9236), or visit My Health Benefits at www.intel.com/go/myben, click on the My Health Benefits website link, log in and select the "Plan Information" tab, then "IRMP and SERMA Summary Plan Description" under Additional Information. If you're accessing the site for the first time, you'll need to create a user ID and password to log on.

SHELTERED EMPLOYEE RETIREMENT MEDICAL ACCOUNT (SERMA)

What is SERMA?

The Sheltered Employee Retirement Medical Account ("SERMA") is a Health Reimbursement Arrangement subject to IRS rules. Eligible retirees may use SERMA toward medical insurance premium payments. Refer to IRMP and SERMA SPD (available at www.intel.com/go/myben under the Plan Information tile) for a list of qualified medical insurance types 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?

- If you were hired before January 1, 2014, and if you are a U.S. employee at the time you retire and meet any of the retirement eligibility rules, a SERMA will be established upon your retirement.
- If you were hired, rehired, transferred to the U.S. (with no prior U.S. service), or transferred to Intel from a non-participating Intel subsidiary (i.e., Altera or Wind River) on or after January 1, 2014, you are not eligible for SERMA.
- For the rules on how service is determined for SERMA, review the IRMP and SERMA SPD, Section 8, *How Service is Determined for SERMA* available at www.intel.com/go/myben. Click on the My Health Benefits website link, log in and select the "Plan Information" tab.
- For complete information on SERMA, please review the IRMP and SERMA SPD on the My Health Benefits website at www.intel.com/go/myben or by calling (877) GoMyBen (466-9236).

Using Your SERMA

The SERMA gives eligible participants the ability to pay for a medical plan that best suits their needs. If eligible, you can use SERMA to pay for all or part of your health insurance premiums for both you and your eligible dependents—even if it's for a plan you purchased through an exchange.

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%. Your IRMP insurance premium payments will be paid

directly from your SERMA. The percentage you elect will apply to both you and any enrolled 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.

Additional eligible reimbursements include insurance premium payments for:

- Individual medical, dental, and vision insurance
- Other employer retiree group plans*
- COBRA
- Medicare
- Medigap
- TRICARE
- Long-term care insurance premiums

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

Checking Your SERMA

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, click the My Health Benefits website link, log in and select the "Your Spending Account" tab. If you're accessing the site for the first time, you need to create a user ID and password to log on.

Once logged in you can:

- View your SERMA
- 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



Opting Out of SERMA

If you're a non-Medicare retiree with access to SERMA, you will not qualify to receive federal premium tax credits. However, you may choose to "Opt Out" of SERMA for 2018 in order to qualify. When you opt out, your SERMA balance is frozen and you will not be able to receive any reimbursement from your SERMA for the year.

Online tools can help you identify if your income level qualifies for federal premium tax credits, and the Benefits Advisors at Aon Retiree Health Exchange can guide you through that process. Here are some helpful sites you can reference <https://www.healthcare.gov> and <http://kff.org/health-reform>.

If you're considering using federal premium tax credits to reduce the cost of health insurance purchased through the Health Insurance Marketplace, you should seek advice from a tax advisor. If you decide that the federal premium tax credit is the best option, call the Intel Health Benefits Center at (877) GoMyBen (466-9236) and select the "Your Spending Account" option to "Opt Out" of access to your SERMA for 2018. Your "Opt Out" election will carry over from year to year unless you "Opt In" again during the next Annual Enrollment by following the same process.

SERMA FAQs

1. Are SERMA credits taxed?

SERMA is not taxed, and has no cash value; therefore, you cannot receive cash in lieu of SERMA.

2. How long is SERMA balance available? What if I get another job?

Your SERMA is available as long as you have a balance and it does not exceed 20 consecutive years of inactivity. Upon your death, your SERMA balance will be transferred to your eligible surviving spouse or dependent. There is no impact if you obtain a job with another employer.

3. Can I be enrolled in IRMP, or IRMP Vision only, and use my SERMA to purchase other eligible insurance for myself or my eligible dependents?

Yes, you can enroll in any eligible option through IRMP and also request SERMA reimbursement for other qualified insurance premiums such as the MetLife Dental Plan.

4. Can I use SERMA to purchase coverage for my spouse or dependent children?

Yes, you can use your SERMA for the cost of insurance premiums for individual insurance for yourself, your spouse, and your eligible dependent children.

5. I am enrolled in my spouse's employer group health plan. Can I use SERMA to pay the insurance premium?

No, you may not use SERMA to reimburse yourself for another company's active employee group health plan.

6. Can I use SERMA for coverage through a Health Care Sharing Ministry?

No, SERMA is a Health Reimbursement Arrangement (an "HRA"). It is a tax favored health plan subject to the IRS rules for reimbursement of "qualified medical expenses." Specifically, qualified medical expenses from your HRA include "amounts paid for health insurance premiums." Health Care Sharing Ministries are not health insurance. See, IRS publication 969.

For more information about SERMA, please refer to the Intel IRMP and SERMA SPD at www.intel.com/go/myben in the Plan Information tab.

See also IRS Publication 969, section on Health Reimbursement Arrangements: <https://www.irs.gov/pub/irs-pdf/p969.pdf>.



NON-MEDICARE ELIGIBLE RETIREE

Are you under age 65 and not eligible for Medicare? If yes, this section is for you.

If you, your spouse, or dependents are not eligible for Medicare, you can enroll* in the IRMP Cigna High Deductible Health Plan (HDHP).

2018 Monthly Premium		
You Only, Spouse Only, Child(ren) Only**	You + Spouse, You + Child(ren), Spouse + Child(ren)	You + Spouse + Child(ren)
\$1,088	\$2,176	\$3,264

* You must enroll in IRMP to enroll your spouse or eligible dependent. For a complete description of the spouse and dependent eligibility requirements, refer to the IRMP and SERMA SPD available on the My Health Benefits website.

** Same price for one child or multiple children.

The IRMP Cigna HDHP

is most similar to a

GOLD PLAN

in the Marketplace. Individual Marketplace Gold plan premiums range between \$1,100 and \$1,500 per month.*

* Premiums vary based on home zip code.

Health Savings Account (HSA)* Option

With the IRMP Cigna HDHP, you can open a Health Savings Account (HSA) with HealthEquity and set aside tax-advantaged dollars you can use for qualified health and medical expenses. See Section 5 for more details.

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

SECTION 4

Benefit Summary – IRMP Cigna HDHP*

Additional details available at www.intel.com/go/myben or in the SPD; call Intel Health Benefits Center at (877) GoMyBen (466-9236) to request the SPD.

Benefits	In-Network IRMP and SERMA SPD	Out-of-Network Subject to Maximum Allowed Amount
Annual Deductible	<ul style="list-style-type: none"> • \$1,495 Individual • \$3,000 Individual + Child(ren) • \$3,755 Individual + Spouse, or Individual + Spouse and Child(ren) Combined in- and out-of-network deductible	
Out-of-Pocket Maximum	<ul style="list-style-type: none"> • \$2,245 Individual • \$4,485 Individual + Child(ren) • \$5,555 Individual + Spouse, or Individual + Spouse and Child(ren) Combined in- and out-of-network deductible	
Major Medical Lifetime Maximum	Unlimited	Unlimited
Inpatient Hospital/ Skilled Nursing Facility	10% coinsurance after deductible	40% coinsurance after deductible
Physician Office Visit	10% coinsurance after deductible	40% coinsurance after deductible
Outpatient Hospital/ Ambulatory Surgical Center	10% coinsurance after deductible	40% coinsurance after deductible
Emergency/Urgent Care (including outside the U.S.)	10% coinsurance after deductible	40% coinsurance after deductible
Routine Physical	Covered at 100%	Covered at 100%
Additional Benefits	In-Network	Out-of-Network Subject to Maximum Allowed Amount
Routine Chiropractic – Limited to 30 visits per year combined in- and out-of-network	10% coinsurance after deductible	40% coinsurance after deductible
Non-Emergency Transportation (preauthorization required)	10% coinsurance after deductible	40% coinsurance after deductible
Acupuncture – Limited to 30 visits per calendar year combined in- and out-of-network	10% coinsurance after deductible	40% coinsurance after deductible
Routine Hearing/Hearing Aid	10% coinsurance after deductible	40% coinsurance after deductible

* For more information on the IRMP Cigna HDHP, refer to the IRMP and SERMA SPD available on the My Health Benefits website; go to www.intel.com/go/myben or call the Intel Health Benefits Center at (877) GoMyBen (466-9236).

Prescription Benefits – IRMP Cigna HDHP: Administered by Express Scripts

	Retail Pharmacy (Up to 34-day supply)	Costco/Walgreens/Mail (90-day supply)	Retail Penalty* (Up to 34-day supply)
Generic/Preferred Brand/ Non-Preferred Brand	10% coinsurance after deductible		40% coinsurance after deductible
Formulary (list of plan approved drugs)	Please review at www.express-scripts.com/intel		40% coinsurance after deductible

* Penalty applies after the first two purchases of a maintenance (long-term) prescription at a retail pharmacy. Penalty out-of-pocket costs will not apply towards deductible/out-of-pocket maximums.



MEDICARE ELIGIBLE RETIREE

Are you eligible for Medicare, typically age 65 and older? If yes, this section is for you.

If you or your spouse/dependents are eligible for Medicare, you can enroll* in the IRMP Cigna Indemnity *with* Rx Plan or the IRMP Cigna Indemnity *without* Rx Plan. Both IRMP Cigna Indemnity plans coordinate with Medicare, which means the Indemnity plans do not pay benefits that are normally paid by Medicare.

- **IRMP Cigna Indemnity with Rx** (*includes prescription drug coverage*).
- **IRMP Cigna Indemnity without Rx** (*excludes prescription drug coverage*) – Because this option does not include prescription drug coverage, we strongly recommend that you purchase a Medicare Part D plan to obtain prescription drug benefits.
- **Catastrophic Rx HRA** – You also get peace of mind through the Catastrophic Prescription Health Reimbursement Arrangement (HRA). While no enrollment or election is necessary, you must be enrolled in Medicare Part D prescription drug coverage to receive reimbursement through the Catastrophic Rx HRA.

SECTIONS

* You must enroll in IRMP to enroll your spouse or eligible dependent. For a complete description of the spouse and dependent eligibility requirements, refer to the IRMP and SERMA SPD available on the My Health Benefits website.

2018 Monthly Premium – IRMP Cigna Indemnity with Rx		
You Only, Spouse Only, Child(ren) Only**	You + Spouse, You + Child(ren), Spouse + Child(ren)	You + Spouse + Child(ren)
\$665	\$1,330	\$1,995

2018 Monthly Premium – IRMP Cigna Indemnity without Rx		
You Only, Spouse Only, Child(ren) Only**	You + Spouse, You + Child(ren), Spouse + Child(ren)	You + Spouse + Child(ren)
\$188	\$375	\$562

** Same price for one child or multiple children.

There are many options available through the Medicare Exchange. As a Medicare eligible retiree, we encourage you to explore all your available options. Visit www.medicare.gov for more information, or call (800) 633-4227.

Resources are also available through the Aon Retiree Health Exchange to assist you. Benefits Advisors can help you navigate the many comparable plans. See page 15 for contact information.



CATASTROPHIC RX HRA

Capping Your Medicare Part D Out-of-Pocket Costs

If you are a retiree enrolled in Medicare Part D for prescription coverage, you will not spend more than the Medicare Donut Hole (Coverage Gap) annual maximum (\$5,000 in 2018). Medicare Part D plans cover a broad range of medications at a cost share that changes as your prescription drug costs increase during the year.

With Part D alone, once you hit the out-of-pocket maximum, you pay a copayment (~5%) for each drug for the remainder of the year. With Catastrophic Rx HRA, you may get reimbursed by Intel for your copayment. This means the annual maximum you could pay for prescription drugs is capped at \$5,000. Your actual out-of-pocket will vary depending on the Part D plan in which you enroll.

You don't need to enroll or elect this benefit during Annual Enrollment, but you do need to be enrolled in a Medicare Part D plan to be eligible for reimbursement under the Catastrophic Rx HRA.

To take advantage of this benefit, simply call the Intel Health Benefits Center at (877) GoMyBen (466-9236) and select the "Your Spending Account" option to notify the team you have exceeded the Medicare Part D Donut Hole. Your Spending Account representative will walk you through what you need to do to submit claims for reimbursement.

Plan Details

Benefit Summary – IRMP CIGNA Indemnity with Rx AND without Rx

Additional details available at www.intel.com/go/myben or in the SPD; call Intel Health Benefits Center at (877) GoMyBen (466-9236) to request the IRMP and SERMA SPD. Also refer to Medicare Part A & B (www.medicare.gov).

Benefits	Medicare*	IRMP Cigna Indemnity for Medicare-eligible Retirees
Annual Deductible	Part B Deductible = \$183 (See Inpatient Hospitalization section for Inpatient Deductible)	\$500 Individual/\$1,000 Family
Out-of-Pocket Maximum	Not applicable	\$2,000 Individual/\$4,000 Family
Major Medical Lifetime Maximum (if applicable)	Not applicable	Unlimited
Inpatient Hospital	\$1,316 deductible (Days 1–60); \$329 (Days 61–90); \$658 (Days 91–150)	20% of Medicare allowable after deductible is met
Physician Office Visit	20% of Medicare approved	20% of Medicare allowable
Emergency/Urgent Care Worldwide Coverage	Limited coverage outside U.S.	20% of Medicare allowable
Routine Physical	Limited coverage, see www.medicare.gov for more information	20% of Medicare allowable
Additional Benefits	Medicare*	Coinsurance applies after deductible is met
Chiropractic – Limited to 30 visits per calendar year	Not covered	20% of plan allowed; limited to 30 visits per calendar year
Non-Emergency Transportation	Not covered	20% of plan allowed
Acupuncture – Limited to 30 visits per calendar year	Not covered	20% of plan allowed; limited to 30 visits per calendar year
Routine Hearing	Not covered	20% coinsurance
Hearing Aid Allowance	Not covered	20% coinsurance

* 2018 Medicare benefits referenced. For complete details, visit www.medicare.gov, or call (800) 633-4227.

Prescription Coverage	Medicare	IRMP Cigna Indemnity with Rx	IRMP Cigna Indemnity without Rx
Medicare	Prescriptions are not covered (available via Medicare Part D)	See Prescription Benefit below	Prescriptions are not covered
Out-of-Pocket Maximum	Prescriptions are not covered (available via Medicare Part D)	None – See Prescription Benefit below	Prescriptions are not covered
Formulary (list of plan approved drugs)	Prescriptions are not covered (available via Medicare Part D)	Please review at www.express-scripts.com/intel	Prescriptions are not covered
Pharmacy Network	Prescriptions are not covered (available via Medicare Part D)	Please review at www.express-scripts.com/intel	Prescriptions are not covered

Prescription Benefits – IRMP Cigna Indemnity with Rx ONLY

	Retail Pharmacy (Up to 34-day supply)	Costco/Walgreens/Mail (90-day supply)	Retail Penalty* (Up to 34-day supply)
Generic	\$10	\$20	\$20**
Preferred Brand	\$20	\$40	\$40**
Non-Preferred Brand	\$30	\$60	\$60**

* Penalty applies after the first two purchases of a maintenance (long-term) prescription at a retail pharmacy.

** Penalty out-of-pocket costs will not apply towards deductible/out-of-pocket maximums.

A NOTE ON HOW THE CIGNA INDEMNITY PLANS WORK

The IRMP CIGNA Indemnity plans assume you are enrolled in Medicare Part A and B. If you're not enrolled in Medicare Part A & B, then your out-of-pocket expenses increase to include what Medicare would have paid. After you reach the plan deductible, the plan then pays a percentage of covered charges (based on Medicare allowable charges), and your coinsurance amount is 20 percent or a copayment based on the service received (see benefit summary on page 9 for details).

Here are two examples of how the plan works:

EXAMPLE 1:

You have met your annual IRMP deductible. You visit your doctor and the bill is \$100. Medicare considers \$65 of the charge an allowable Medicare reimbursement.

Doctor submits bill	\$100
Medicare allowable on this bill	\$65
Medicare pays 80% of allowed amount	\$52 (65 x .80)
Your coinsurance amount (20% of allowed amount)	\$13 (65 x .20)
IRMP Cigna Indemnity Plan pays	\$0
Your total out-of-pocket	\$13

Why does the plan pay \$0?

The IRMP Cigna Indemnity plan reimburses 80% of the \$65 allowed by Medicare. The IRMP Cigna Indemnity amount is reduced by the amount paid by Medicare. In this case, Cigna's benefit of \$52 (80% of \$65) is the same amount paid by Medicare, therefore, the amount paid by the IRMP Cigna Indemnity plan is \$0.

EXAMPLE 2:

You have met your annual IRMP deductible and out-of-pocket maximum. The hospital bill is \$56,557.14. Medicare considers \$44,528.71 as allowable Medicare reimbursement. The Medicare deductible for this hospitalization is \$1,316.00.

Hospital billed amount	\$56,557.14
Medicare discount	\$12,028.43
Medicare allowable	\$44,528.71
Medicare pays	\$43,212.71
Your Medicare Deductible This is the amount you would owe the provider if you were not enrolled in IRMP	\$1,316.00
IRMP Benefit	
Your IRMP Cigna annual deductible (\$500)/Coinsurance (20%)	\$0
Allowed amount applied to IRMP	\$1,316.00
IRMP Cigna Indemnity plan pays 100% based on Medicare allowable and balance due	\$1,316.00
Your total out-of-pocket on the IRMP Indemnity	\$0

Why does the member pay \$0?

Cigna pays the Medicare deductible of \$1,316.00, since the member met their annual out-of-pocket maximum, the member pays \$0.

BENEFITS OF THE IRMP CIGNA INDEMNITY PLANS

Once you meet the Indemnity plan out-of-pocket maximum, the plans pay 100% of your eligible expenses. Also the plans cover some non-Medicare eligible expenses such as hearing aids, chiropractic and acupuncture services, and prescriptions (creditable to Medicare Part D) for those enrolled in IRMP with Rx.



VISION AND DENTAL

IRMP Vision Plan

Vision Service Plan (VSP) provides you with two options for vision coverage:

- VSP Basic Vision
- VSP Vision Plus

Be sure to choose an option that's right for you and your family. Keep in mind that you can enroll* in IRMP Vision without having to purchase IRMP medical coverage. To locate a VSP doctor prior to enrollment, go to www.vsp.com/advantage or call member services at (855) 663-2836.

2018 Monthly Premium			
Option	You Only, Spouse Only, Child(ren) Only**	You + Spouse, You + Child(ren), Spouse + Child(ren)	You + Spouse + Child(ren)
VSP Basic Vision	\$6	\$12	\$13
VSP Vision Plus	\$16.50	\$33	\$37

* You must enroll in IRMP to enroll your spouse or eligible dependent. For a complete description of the spouse and dependent eligibility requirements, refer to the IRMP and SERMA SPD available on My Health Benefits website.

** Same price for one child or multiple children.

SECTIONS 6

Below is a summary of the IRMP Vision options. You can find additional details at www.intel.com/go/myben or in the IRMP and SERMA SPD available on the My Health Benefits website, www.intel.com/go/myben or call the Intel Health Benefits Center at (877) GoMyBen (466-9236) to request a copy of the SPD.

2018 IRMP VSP Vision Options				
Option	VSP Basic Vision (In-Network)	VSP Basic Vision (Out-of-Network*)	VSP Vision Plus	VSP Vision Plus (Out-of-Network*)
Exam	Exam every 12 months			
Comprehensive Exam	\$0	Reimbursed to \$40	\$0	Reimbursed to \$40
Standard Contact Lens Fit	Up to \$55	NA	Up to \$55	N/A
Eyewear	Frame every 24 months, lenses every 12 months		Frame and lenses every 12 months	
Eyeglass Frames	\$130 allowance \$70 if Costco affiliate	Reimbursed to \$70	\$200 allowance \$110 if Costco affiliate	Reimbursed to \$110
Standard Single Vision	\$25 copay	Reimbursed to \$30	\$10 copay	Reimbursed to \$30
Standard Bifocal	\$25 copay	Reimbursed to \$50	\$10 copay	Reimbursed to \$50
Standard Trifocal	\$25 copay	Reimbursed to \$70	\$10 copay	Reimbursed to \$70
Standard Progressive	\$55 copay	Reimbursed to \$50	\$55 copay	Reimbursed to \$50
Premium Progressive	\$95-\$105	Reimbursed to \$50	\$95-\$105	Reimbursed to \$50
Contact Lenses	Contact lenses every 12 months			
Contact Lenses (elective)	\$130 allowance	\$130	\$200 allowance	\$200
Lasik Surgery	n/a	\$2,000 lifetime allowance	n/a	\$2,000 lifetime allowance

*Allowances and out-of-network reimbursement apply to single purchase, no declining balance. For a complete list of covered services please refer to the SPD.

MetLife Dental

Intel partners with MetLife to offer retirees a voluntary dental plan that offers access to comprehensive dental insurance coverage. You may use SERMA to reimburse yourself for eligible dental insurance premiums. If you're currently enrolled in MetLife Dental, your enrollment will continue unless you disenroll. If you're not enrolled, MetLife will send you a letter outlining enrollment options. For more information, call MetLife at (866) 832-5756.

This voluntary dental plan is not an Intel-sponsored benefit and is not an Employee Retirement Income Security Act (ERISA) welfare benefit plan.

HEALTH SAVINGS ACCOUNTS (HSAs)

When moving to an HDHP, it's important to understand how to use a Health Savings Account to maximize your dollars and manage your budget. The basic concept of a Health Savings Account (HSA) is this: It's a savings account used specifically for health and medical expenses, with preferential tax treatment.

Advantages of Having an HSA:

	Non-Medicare Eligible	Medicare Eligible
Tax deductible contributions	Yes	No
Tax free withdrawals for qualified medical expenses*	Yes	Yes
Penalty free withdrawals for non-qualified medical expense	No	Yes

* Qualified medical expenses for you and your eligible dependents include insurance premiums for health insurance coverage under COBRA, copays, coinsurance, deductibles, healthcare coverage while receiving unemployment compensation, Medicare (but not Medigap) premiums, long-term care insurance. See IRS Publication 969 and 502 <https://www.irs.gov/publications/p969/ar02.html>.

HSA* and the IRMP Cigna HDHP

Upon enrollment in a HDHP, and if you meet HSA eligibility requirements, you may contribute to an HSA. For administrative convenience, the HSA trustee/administrator for the IRMP Cigna HDHP is HealthEquity.

Intel retiree, spouse, or surviving spouse who enroll (as the primary member) in the IRMP Cigna HDHP are auto-enrolled in the HealthEquity HSA and receive a welcome packet.

- If you have an existing HealthEquity HSA, you can keep your account and Intel will pay the monthly maintenance fee on your behalf while you are enrolled in the IRMP Cigna HDHP.
- If you don't have a HealthEquity HSA, or your HSA is with another financial institution, you can open a HealthEquity account or transfer your HSA to HealthEquity. You may incur a separate transfer fee through your existing HSA administrator, so check with your financial institution for details.

You must determine your eligibility to contribute to the HealthEquity HSA. Intel covers the HealthEquity HSA monthly fees for an Intel retiree or eligible spouse/surviving spouse enrolled in IRMP Cigna HDHP.

* HSA is not an Intel-sponsored benefit; eligibility requirements apply. Contribution limits are set by the IRS.

HSA and Medicare

If you're enrolled in Medicare Part A and/or B, you can no longer contribute pre-tax dollars to your HSA. In order to contribute pre-tax dollars to an HSA, you cannot have any other health insurance other than an HDHP. The month your Medicare begins, you are no longer eligible to make deposits into your HSA. However, you may continue to withdraw money from your HSA after you enroll in Medicare to help pay for medical expenses, such as deductibles, premiums, copayments, and coinsurances. If you use the account for qualified medical expenses, it will continue to be tax-free.

See IRS Publication 969 and 502 for details on how to use an HSA <https://www.irs.gov/publications/p969/ar02.html>.

SECTION 8

ENROLLMENT, INFORMATION, AND RESOURCES

Choose from Your IRMP Options

You can make your elections online, or by calling the Intel Health Benefits Center at (877) GoMyBen (466-9236). Here are the online steps to further guide you:

- Go to www.intel.com/go/myben and click on “My Health Benefits website” then log on by entering your User ID and password.
- If you’re using the site for the first time, you’ll need to create a User ID and password to log on:
 - To create your User ID, select “Create Your User ID” or “Are you a new user?” and follow the instructions.
 - You’ll be asked to create a password and answer a series of security questions.
 - A password is not required when calling or accessing your account by calling the Intel Health Benefits Center.
- 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. You may also make changes to your elections multiple times during Annual Enrollment.

If You Choose Options Through the Aon Retiree Health Exchange

Complete your enrollment online through eHealth at www.ehealthinsurance.com. If you need further assistance, call the Aon Retiree Health Exchange to speak with a Benefits Advisor who will work with an eHealth agent to help you navigate the website and complete your online enrollment.

- After calling the Intel Health Benefits Center at (877) GoMyBen (466-9236) and saying “Aon Retiree Health Exchange,” you have the option to “Reach your Benefits Advisor using their extension” (the extension will typically be given to you during your appointment) or obtain answers to any other questions.

Some Changes are NOT Available Online

You **must call** the Intel Health Benefits Center at (877) GoMyBen (466-9236) to complete your enrollment if:

- You have dependents with split eligibility (e.g., one who is Medicare eligible and one who is not Medicare eligible).
- You are enrolling in IRMP for the first time.
- You have experienced a qualifying change-in-status event (e.g., marriage).



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
- Online resources available at www.intel.com/go/myben
- The Aon Retiree Health Exchange to review options outside of IRMP

BENEFIT ELECTIONS

The benefit elections you make during your enrollment become effective the first of the month following your retirement or the first of the month after your COBRA coverage ends. 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.

Your Intel Benefits Center is typically your one-stop shop, but here are more resources if your questions are specific to a vendor or plan:



IRMP Medical Coverage

Call (800) 468-3510 or visit Cigna online at www.mycigna.com.



Medicare

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



Prescription Drug Coverage

Call Express Scripts at (800) 899-2713 or visit Express Scripts online at www.express-scripts.com/intel.



Health Insurance Marketplace

Call Aon Retiree Health Exchange at (877) GoMyBen (466-9236); <https://www.healthcare.gov> and <http://kff.org/health-reform/>.



Vision Coverage

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



Dental Coverage

Call MetLife (866) 832-5756.



IRMP and SERMA 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, log in and select "Plan Information," then "IRMP and SERMA Summary Plan Description" under Additional Information.



Intel.com

Stay connected to Intel through the U.S. 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.



WANT TO CONNECT WITH OTHER INTEL RETIREES?

Learn how you can connect with other Intel retirees through the Intel Retiree Organization (IRO). Go to <http://intelretiree.com/contact-us/join-iro/> to sign up today!

Tell me more...

The IRO provides members access to an exclusive website (intelretiree.com) where you can get answers to questions about healthcare, benefits, discounts, volunteering, reconnect with former colleagues, or hear about what others are doing, it's inspiring! Plus, the IRO connects you to a team volunteer who can help answer your questions, address issues, or give you additional Intel contacts.

And let's not leave out fun...

IRO sponsors an annual dinner event for members who have retired from one of the main U.S. Intel sites. Intel retirees experience 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 was formed in 2001, and membership has grown to more than 4,000 retiree members. Governed by a Board of Directors, there are several committees in the IRO for communications, health and benefits, volunteering, website development, and strategic planning. The organization is managed by retiree volunteers who have really helped pioneer the retirement experience for the company.

The information in this guide is a summary of your benefits. In the event of a discrepancy between the information in this guide and the 2018 Intel Retiree Medical Plan and Sheltered Employee Retirement Medical Account Summary Plan Description (SPD), the SPD will prevail. For a copy of the current SPD, contact the Intel Health Benefits Center at (877) GoMyBen (466-9236) or online at www.intel.com/go/myben. The SPD will be available with 2018 updates in Q1 2018. Intel reserves the right to modify, change, or discontinue benefit plans at any time, at its sole discretion.

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