

EXPERIENCES THAT MATTER

2025 BENEFITS ANNUAL ENROLLMENT GUIDE

Enrollment Period November 7 - 20, 2024

WELCOME

We understand the important role that benefits play in the lives of you and your family. Annual Enrollment is your once-a-year opportunity to review your benefit options for the coming year and select the coverages that will work best for you and your family.

This benefits guide can help to familiarize yourself with Avaya's benefit options. It also provides useful tips, tools and resources to help you think through your options and make thoughtful decisions about your financial health care needs.

WHAT HAPPENS IF YOU DON'T ENROLL?

You will not need to actively enroll in most benefits for 2025 if you do not wish to make changes, except for the following elections that do not carry over from year to year:

- Health Care or Limited Flexible Spending Account elections
- Dependent Care Flexible Spending Account elections
- Health Savings Account contributions

If you wish to make changes to your benefits for 2025, be sure to make your elections by **November 20, 2024**. Once Annual Enrollment ends, you may only change your benefit elections during the year if you experience a qualifying life event, such as

marriage or birth of a child. Information on qualified status changes is available in the Summary Plan Descriptions (SPDs) at avaya.com/benefitanswers.

GET MORE INFORMATION

If you want more information about your benefits, go to my.adp.com.



BENEFITS ENROLLMENT QUESTIONS

If you have questions or need assistance, you can:

- Contact the Avaya Health & Benefits Decision Center at **1-800-526-8056** (TDD 1-800-952-0450) or via e-mail at avayaservicecenter@adp.com.
- Call the Genius bar on November 7, 13, and 19 from 2 – 3 p.m. ET. See the Annual Enrollment email for details.

ELIGIBILITY

If you are an active, salaried employee, you are eligible for medical benefits. You can also enroll the following family members in the plans you choose for yourself:

- Your legal spouse
- Your domestic partner
- Your children up to age 26
- Your unmarried dependent children over age 26 who are incapable of self-care because of a disability and who rely on you for support

SPOUSAL SURCHARGE

If you choose to cover your spouse/domestic partner under an Avaya medical plan and your spouse/domestic partner has the opportunity to enroll in medical coverage through his/her employer, an additional \$100 per month will be added to your health insurance premium. This surcharge is waived if your spouse or domestic partner works for an employer who doesn't offer medical coverage, doesn't qualify for their employer's coverage, or is eligible for Medicare.

DEPENDENT VERIFICATION

If you choose to enroll an eligible dependent(s) that is not currently covered under Avaya's health benefits, you will be required to provide proof that they are your eligible dependent(s) per the Plan guidelines. **Dependent coverage will be pended until the appropriate documentation is received by ADP**, our Dependent Verification vendor. Upon completion of your enrollment, you will receive a verification link to submit your dependent documentation. Within the link will be a list of eligible documents. Verification is due by the deadline listed on the link.

NAMING BENEFICIARIES

Maintaining beneficiary information is an important part of your financial planning. Annual Enrollment is a good time to review your life and AD&D insurance beneficiaries. You can update life and AD&D insurance beneficiary information online at any time at my.adp.com by selecting "MANAGE" under the *Manage Information* tile on the home page. If you do not have Internet access, you may contact the Avaya Health & Benefits Decision Center at **1-800-526-8056** (TDD 1-800-952-0450) or via e-mail at avayaservicecenter@adp.com to obtain a beneficiary form.



WHAT'S NEW FOR 2025

To ensure our benefit offerings continue to support Avaya employees in the best way possible, we're pleased to announce some enhancements for 2025. Here's a quick overview of what's new for the coming year:

- **Changing premiums.** Rising healthcare costs along with the current economic conditions require us to raise employee contributions. Avaya continues to seek ways to keep cost increases as low as possible while maintaining high quality and features that are important to you. Please refer to the [contributions section](#) of this guide for additional information.
- **Expanded fertility benefit (all Aetna plans).** Effective January 1, 2025, an infertility diagnosis is no longer required to access fertility services under Aetna plans. IUI services no longer count toward any lifetime maximum for fertility benefits.
- **Introducing Aura Protection Plus identity protection coverage as a voluntary benefit offering.** Available through MetLife, Aura identity theft protection provides comprehensive coverage against identity theft, financial fraud and digital security, keeping you and your family protected. Refer to ADP for plan details and rates.

- **Adding Hinge Health's Women's Pelvic Health support (all Aetna plans).** Through their user-friendly digital app, you'll have access to personalized care and resources for pelvic strength, bladder control, pregnancy/postpartum and managing pelvic pain.
- **Removing Kaiser Georgia Plan.** To streamline administration and due to a lack of enrollment, Avaya will be discontinuing the Kaiser Georgia Plan for 2025.

- **Adding new Aetna Preferred Provider Organization (PPO) Plan.** To continue our commitment to provide meaningful choice for your healthcare coverage, all salaried employees will have access to elect the new Aetna PPO plan for 2025. This plan will be replacing the current Aetna POS plan that was available for employees hired prior to 2013. Refer to page 6 to learn more about this new plan option.



MEDICAL CONTRIBUTIONS

We offer medical coverage through Aetna and prescription drug coverage through Express Scripts. The Aetna Healthy Direction Consumer Driven Health Plan (CDHP) pairs with a Health Savings Account (HSA). In addition, a Kaiser Health Maintenance Organization (HMO) plan is offered in California, Colorado, Mid-Atlantic States (MAS) and Northwest (NW) region only, and an HMSA PPO plan is offered in Hawaii only.

Avaya reviews our benefit plans every year to ensure they remain comprehensive and competitive as possible. We strive to keep costs for you and the company manageable. We evaluate employee contributions each year against rising healthcare costs and the current economic conditions. This year, medical premiums are decreasing for employee only coverage and increasing for all other coverage tiers. The chart shows the monthly payroll deductions for each medical plan for 2025. These contributions will apply in your first paycheck of 2025.

 [Click here to view payroll contributions for HMSA \(Hawaii residents only\).](#)

Monthly Employee Payroll Deductions

Benefit Plan	Status	Employee Only	Employee + Spouse	Employee + Child(ren)	Family
Aetna CDHP Alternative	Salaried Non-Smoker	\$91	\$258	\$207	\$381
Aetna CDHP Alternative	Salaried Smoker	\$121	\$344	\$276	\$508
Aetna CDHP w/HSA	Salaried Non-Smoker	\$146	\$403	\$325	\$592
Aetna CDHP w/HSA	Salaried Smoker	\$195	\$537	\$433	\$789
Aetna Preferred Provider Organization (PPO)	Salaried Non-Smoker	\$205	\$596	\$466	\$868
Aetna Preferred Provider Organization (PPO)	Salaried Smoker	\$273	\$795	\$621	\$1,157
Kaiser (CA, CO, MAS and NW only)	Salaried Non-Smoker	\$203	\$541	\$465	\$814
Kaiser (CA, CO, MAS and NW only)	Salaried Smoker	\$271	\$721	\$620	\$1,085

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		HMSA (HI Residents Only)	
	Employee Only	Two-Person	Family
Salaried Non-Smoker	\$146	\$403	\$592
Salaried Smoker	\$195	\$537	\$789

MEDICAL PLANS

With all three Aetna plans, in-network care and routine labs are covered at 100%. You are responsible for most other expenses up to a certain dollar amount, known as the deductible. After you meet the deductible, you will share a percentage of the expenses with Avaya in the form of coinsurance. There is also an out-of-pocket maximum, which limits the total amount you could be responsible for in a given year. If you reach the out-of-pocket maximum, the plan pays in-network expenses at 100% from that point forward for the remainder of the year.

[View this table](#) for a high-level overview of the benefits available under each Aetna plan. For additional details about your medical plan coverage, please review the Summary of Benefits and Coverage, available at my.adp.com. Paper copies are also available, free of charge, by contacting the Avaya Health & Benefits Decision Center at **1-800-526-8056** (TDD 1-800-952-0450), or via e-mail at avayaservicecenter@adp.com.

Kaiser HMO and HMSA plan details can be found at my.adp.com under Forms & Plan Documents (scroll down to Summary of Benefits and Coverage).



Plan Feature	Aetna Salaried PPO ¹		Aetna Healthy Direction CDHP ¹ with HSA		Aetna CDHP Alternative ¹	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Company Contribution to HSA² (Single/All Other Tiers)	N/A		\$500/\$1,000		N/A	
Annual Deductible³ (Single/All Other Tiers)	\$500/\$1,500	\$1,000/\$3,000	\$2,000/\$4,000	\$3,375/\$6,750	\$3,400/\$6,800	\$6,800/\$13,600
Out-of-Pocket Maximum⁴	\$3,000/\$6,500	\$6,000/\$13,000	\$3,500/\$7,000	\$8,000/\$16,000	\$5,000/\$10,000 (embedded at \$7,150) ⁵	\$10,000/\$20,000
Office Visit (PCP / Specialist)	\$25 for PCP, \$35 for specialist	You pay 30% after deductible, plus anything over R&C	You pay 20% after deductible	You pay 35% after deductible, plus anything over R&C	You pay 20% after deductible	You pay 40% after deductible, plus anything over R&C
Coinsurance (Includes: labs and x-rays, surgery, anesthesia, physician hospital visits/consultations, room and board, maternity, radiation, therapy, chemotherapy)	You pay 10% after deductible	You pay 30% after deductible, plus anything over R&C				
Preventive Care	Covered at 100%; deductible does not apply	You pay 30% after deductible, plus anything over R&C	Covered at 100%; deductible does not apply	You pay 35% after deductible, plus anything over R&C	Covered at 100%; deductible does not apply	You pay 40% after deductible, plus anything over R&C
Emergency Room⁶	\$150 copay	\$150 copay	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible	You pay 20% after deductible
Urgent Care	\$35 copay	You pay 30% after deductible, plus anything over R&C				

Note: R&C = Reasonable and Customary

¹ If you do not have access to in-network providers, upon approval from Aetna, you may receive benefits at the in-network level.

² Company HSA contributions will be processed once annually for eligible employees according to the date your Health Savings Account with Fidelity is opened. Company HSA contributions will be deposited to your Fidelity HSA within 10 business days of the paycheck in which it was processed. If you leave the company (voluntarily or involuntarily), or your coverage under the Aetna Healthy Direction CDHP with HSA medical plan terminates for any reason before the normal payroll date the HSA funds would otherwise be processed for deposit, your employer and employee HSA contributions will not be deposited. Mid-year qualified status changes that result in a medical plan tier change will not result in an adjustment to your company HSA contribution.

³ For the CDHP plans, the health care deductible must be met before plan benefits are paid, including Prescription Drug Program benefits. Under the CDHP plans, for two-person or family coverage, the deductible is not satisfied for any family member until the two-person or family deductible is met. Under the PPO plan, for two-person or family coverage, the deductible is not satisfied for any family member until the two-person or family deductible is met.

⁴ Certain expenses (e.g., precertification penalties and any expenses in excess of the Reasonable & Customary charge) do not count toward the annual Out-of-Pocket Maximum.

⁵ Once one member of the family hits \$7,150 in combined medical/Rx expenses, that individual will no longer incur expenses towards the family out-of-pocket maximum and most covered expenses would be paid at 100% of the allowable amount for the rest of the calendar year for that family member; it would be up to the other covered members in the family to reach the remaining in-network out-of-pocket maximum (before their covered expenses would be paid at 100% of the allowable amount for the remainder of the calendar year).

⁶ Non-emergent Emergency Room or Ambulance services will be covered at the out-of-network level plus amounts over Reasonable & Customary.

PRESCRIPTION DRUGS

When you enroll in the Salaried PPO, CDHP with HSA or CDHP Alternative medical plan, you are automatically enrolled in the Prescription Drug Plan administered by Express Scripts, Inc. (ESI). You do not need to make a separate election to receive drug benefits. Note, there is no out-of-network pharmacy coverage.

Get more information on Prescriptions:

 [Prescription Drug Utilization Management Program](#)

 [Prescription Drug Home Delivery Program](#)

 [ESI SaveOnSP](#)

Plan Feature	Aetna Salaried PPO ¹	Aetna Healthy Direction CDHP ¹ with HSA	Aetna CDHP Alternative ¹
Retail Drugs (up to 30-day supply)	<p>Tier 1 (Generic): \$10 copay</p> <p>Tier 2 (Preferred Brand): 25% coinsurance; \$25 min/\$75 max</p> <p>Tier 3 (Non-preferred Brand): 40% coinsurance; \$40 min/\$100 max</p>	<p>Tier 1 (Generic): \$10 copay</p> <p>Tier 2 (Preferred Brand): 25% coinsurance; \$30 min/\$70 max</p> <p>Tier 3 (Non-preferred Brand): 50% coinsurance; \$50 min/\$90 max</p>	<p>Tier 1 (Generic): \$10 copay</p> <p>Tier 2 (Preferred Brand): 25% coinsurance; \$30 min/\$70 max</p> <p>Tier 3 (Non-preferred Brand): 50% coinsurance; \$50 min/\$90 max</p>
ESI Mail Order, Walgreens Retail, or CVS Retail Drugs¹ (up to 90-day supply)	<p>Tier 1 (Generic): \$25 copay</p> <p>Tier 2 (Preferred Brand): 25% coinsurance; \$50 min/\$187.50 max</p> <p>Tier 3 (Non-preferred Brand): 40% coinsurance; \$80 min/\$250 max</p>	<p>Tier 1 (Generic): \$20 copay</p> <p>Tier 2 (Preferred Brand): 25% coinsurance; \$60 min/\$175 max</p> <p>Tier 3 (Non-preferred Brand): 35% coinsurance; \$100 min/\$225 max</p>	<p>Tier 1 (Generic): \$20 copay</p> <p>Tier 2 (Preferred Brand): 25% coinsurance; \$60 min/\$175 max</p> <p>Tier 3 (Non-preferred Brand): 35% coinsurance; \$100 min/\$225 max</p>
Preventive Drugs	100% covered, deductible waived	100% covered, deductible waived	100% covered, deductible waived

¹ Mandatory home delivery through ESI or retail pick-up from either Walgreens or CVS applies to all long-term (maintenance) drugs.

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Prescription Drug Utilization Management Program

The Prescription Drug Utilization Management Program requires prior authorization for certain types of prescription drugs, including but not limited to Nonsedating Antihistamines and Antifungals. Prior authorization means that requirements must be met before the Prescription Drug Program will cover the prescription. After three fills at the retail level, the member will pay 100% of the Express Scripts-discounted cost for the medication for future retail fills not picked up at a Walgreens or CVS retail store. Out-of-pocket costs for long-term medications not ordered through ESI Home Delivery or CVS/Walgreens retail do not apply to the member/family deductible or out-of-pocket maximum. If you purchase a brand name medication when a generic medication is available, you will pay the generic copay plus the difference in cost between the brand name and the generic.

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Prescription Drug Home Delivery Program

If you are taking ongoing medication to manage a chronic health condition (such as diabetes or high blood pressure), you will need to use Express Scripts Home Delivery for maintenance prescriptions. There is no out-of-network option for home delivery. You can purchase up to a 90-day supply of medication through this program, which is less costly and very convenient. Use Express Scripts Home Delivery for maintenance medications and save — with home delivery service you receive a 90-day prescription for a lower price than 3 retail pharmacy copays.

Important: After your third consecutive fill of medication for the same dosage at retail, you must use the home delivery program for maintenance medication, or you will pay the full cost of your prescription. If you pay the full cost of your prescription, it will not apply to the deductible and/or out-of-pocket maximum.

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ESI SaveOnSP

Express Scripts SaveOnSP (Aetna PPO plans). This program utilizes plan-design changes to identify select drugs as non-essential health benefits. This allows for maximum savings (which could reduce your cost to as little as \$0) and reduces your share of costs for specialty medications. Contact SaveOnSP at **1-800-683-1074** to ensure you understand this change and can take advantage of your benefit without delay.

OTHER BENEFITS

BENEFITS ADVISOR TOOL

Need help choosing the right medical plan for you and your family? Try ALEX®, Avaya's interactive Benefits Advisor, available for Kaiser and Aetna members. ALEX explains your medical plan options, estimates your costs, explains how the plan works and can help you determine if you may benefit from contribution to a Flexible Spending Account or Health Savings Account. The tool is easy to use and confidential. Try ALEX today by visiting start.myalex.com/avaya. ALEX is best viewed in Google Chrome.

TELEMEDICINE

Telemedicine is a convenient alternative to costly urgent care and ER visits. With Teladoc, if you are enrolled in the Avaya medical plan with Aetna, you can connect with a board-certified doctor by phone, web or mobile app for help with a variety of medical issues, including general medicine, dermatology, and behavioral health (7 a.m. to 9 p.m. local time). You can access Teladoc providers by downloading the application on your smartphone or tablet or by visiting www.teladoc.com/Aetna. If you are enrolled in the Aetna CDHP with HSA or CDHP Alternative plans, you may find that your out-of-pocket costs are much lower if you seek care through Teladoc for things like cold, flu, sinus infections, allergies and rashes. The Avaya plans provide access to virtual care by U.S. board-

certified providers who practice in the areas of general medical, mental health and dermatology.

Avaya employees and dependents enrolled in Aetna medical coverage have access to Virtual Primary Care with Teladoc. Talk to a board-certified primary care doctor by phone or video and get dedicated, personalized support to help you get healthy and live healthy. Primary360 is fully covered by all Aetna plans. Use virtual primary care for:

- Annual checkups and preventive care
- Referrals to in-network specialists
- Prescriptions
- Support with common conditions like diabetes, hypertension and mental health
- Lab orders and recommended screenings

EARN INCENTIVES WITH AVAYA'S WELL-BEING PROGRAM

All Avaya employees have access to a complete wellness platform. Check out some additional tools that will get you closer to achieving your health goals. Track your activity, get wellness advice, find healthy recipes, earn incentives — and much more. Visit aetna.com. Note, the cutoff day for earning incentives for the 2025 plan year is November 30, 2025.

HINGE HEALTH

Join Hinge Health for exercise therapy without leaving home. No copays. No office visits. Reduce your back and joint pain in just 15 minutes a day. Best of all, there's no cost to you. Your Hinge Health benefit is covered 100% by Avaya for employees and dependents age 18 and older enrolled in an Aetna medical plan through Avaya. Join Hinge Health to help overcome pain or limited movement, recover from a recent or past injury, and keep your joints healthy and pain free. Visit hinge.health/avaya-oe or call **(855) 902-2777**.

New for 2025: Get access to Hinge Health's Women's Pelvic Health program for support with pelvic strength, bladder control, pregnancy/postpartum and managing pelvic pain.

METLIFE VOLUNTARY PLANS

Annual Enrollment is the one time of year you can enroll in (if not already enrolled) or drop the MetLife Voluntary Plans. To make changes or review voluntary plans, visit my.adp.com.

New for 2025: Aura Protection Plus identify protection coverage through Metlife. Get comprehensive coverage against identity theft, financial fraud and digital security, keeping you and your family protected. Refer to ADP for plan details and rates.

DENTAL PLANS

Regular dental exams can help you and your dentist detect problems in the early stages when treatment is typically easier and less expensive. Avaya offers two dental plans through Aetna that are designed to help you maintain a healthy smile through regular preventive dental care. Visit [aetna.com](https://www.aetna.com) to find an in-network provider.

This table provides a high-level overview of the benefits available under each dental plan as well as the monthly payroll deductions for the plans.



Plan Feature	Aetna DMO	Aetna PPO	
		In-Network	Out-of-Network
Annual Maximum Benefit	N/A	\$2,250 (excluding orthodontia)	
Deductible (waived for preventive services)	None	\$50 (individual) \$100 (family)	
Basic Services	100%	80% after deductible	70% of recognized charge after deductible
Major services	75%	50% after deductible	50% of recognized charge after deductible
Orthodontia	50%	50% up to \$1,750 maximum lifetime benefit	50% of recognized charge
Monthly Employee Contributions			
Employee Only	\$11	\$25	
Employee + Spouse	\$20	\$64	
Employee + Child(ren)	\$29	\$59	
Family	\$45	\$100	

Vision

VISION PLAN

You can purchase vision coverage through EyeMed. This coverage includes benefits for eye exams as well as eyeglasses, frames and contact lenses. EyeMed is dedicated to helping you see clearly — and that’s why they have built a network that gives you lots of choices and flexibility. Visit eyemedvisioncare.com to find an in-network provider.

This table provides a high-level overview of the benefits available under the vision plan as well as the payroll deductions each pay period for the plans.

Monthly Employee Contributions	
Employee Only	\$8.12
Two-Person	\$15.42
Family	\$22.64

Plan Feature	EyeMed	
	In-Network Member Cost	Out-of-Network Reimbursement
Exam	\$0 copay	Up to \$40
Retinal Imaging	Up to \$39	Not covered
Contact Lens Fit and Follow-Up (Standard/Premium)	Up to \$55/10% off retail price	Not covered/Not covered
Frames	\$0 copay; 20% off balance over \$120 allowance	Up to \$50
Lenses <ul style="list-style-type: none"> • Single vision • Bifocal • Trifocal • Lenticular • Progressive – Standard • Progressive – Premium 	<ul style="list-style-type: none"> • \$0 copay • \$0 copay • \$0 copay • \$0 copay • \$65 copay • \$65 copay; 20% off retail price less \$120 allowance 	<ul style="list-style-type: none"> • Up to \$40 • Up to \$75 • Up to \$100 • Up to \$100 • Up to \$75 • Up to \$75
Contact Lenses <ul style="list-style-type: none"> • Conventional • Disposable • Medically necessary 	<ul style="list-style-type: none"> • \$0 copay; 15% off balance over \$100 allowance • \$0 copay; 100% off balance over \$100 allowance <ul style="list-style-type: none"> • \$0 copay 	<ul style="list-style-type: none"> • Up to \$75 • Up to \$75 • Up to \$200
Frequency <ul style="list-style-type: none"> • Exam • Lenses • Frames • Contact lenses 	<ul style="list-style-type: none"> • Once every calendar year • Once every calendar year • Once every calendar year • Once every calendar year 	<ul style="list-style-type: none"> • Once every calendar year • Once every calendar year • Once every calendar year • Once every calendar year

HEALTH SPENDING ACCOUNTS

If you enroll in the Aetna Healthy Direction CDHP with HSA medical plan or the CDHP Alternative plan, you are eligible to open an HSA. An HSA is a savings account that belongs to you and is paired with your medical plan. It allows you to make tax-free contributions that you can use to pay for current and future medical expenses for you and your dependents. You can make contributions up to the IRS maximum and funds roll over from year to year to help you pay or save for future medical care.

Note: There is NO employer contribution to your HSA for enrollees of the CDHP Alternative Plan.

EMPLOYEE CONTRIBUTION PROCESS

From November 7 – 20, 2024, make your 2025 HSA election at my.adp.com. **Your HSA election does not roll over each year.** If you do not make a 2025 election, you will not contribute to the HSA or receive the Avaya contribution. Note, if you wish to receive the employer contribution but do not wish to contribute, you may elect \$0 for your HSA contributions.

If this is your first time enrolling, you will need to agree to Fidelity's terms and conditions. Then, in December, go to 401k.com to activate your HSA with Fidelity.

INVESTING YOUR HSA

An HSA is a great tool to help you accumulate money on a tax-advantaged basis to pay for out-of-pocket medical expenses. When you invest the funds, any investment gains aren't taxed, contributing to a compounding effect year over year and letting your money potentially accumulate. Fidelity has no minimum for investing, so any savings that is not needed for current qualified expenses can be invested. To pay for qualified medical expenses, you have a variety of options to access your funds, including using an HSA checkbook, online bill paying service or direct debit.

Coverage Level	2025 IRS Maximum Contribution ¹	Avaya Total Annual Contribution for CDHP with HSA Plan Enrollees ¹	Your 2025 Maximum Contribution ²
Employee	\$4,300	\$500	\$3,800
All Other Tiers	\$8,550	\$1,000	\$7,550

¹ Active employees are eligible for Avaya's HSA contribution based on the date your HSA is opened ([see table](#)), not the date you enroll in the Aetna Healthy Direction CDHP with HSA medical plan. Company HSA contributions will be deposited to your Fidelity HSA within 10 business days of the paycheck in which it was processed. Mid-year qualified status changes that result in a medical plan tier change will not result in an adjustment to your company HSA contribution. It is your responsibility to ensure you do not exceed the annual maximum contribution.

² If you will be 55 or older by the end of 2025, you may contribute an additional catch-up contribution of up to \$1,000 per year.

 [Click here for additional important reminders about HSAs.](#)

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For HSAs opened between these dates ...	You are eligible for this much ...	On the first normal payroll date in this month ...
On/before 1/9/2025	\$500/individual or \$1,000/family CDHP with HSA election tier	February
1/10/2025 - 4/10/2025	\$375/individual or \$750/family CDHP with HSA election tier	May
4/11/2025 - 7/11/2025	\$250/individual or \$500/family CDHP with HSA election tier	August
7/12/2025 - 10/10/2025	\$125/individual or \$250/family CDHP with HSA election tier	November
10/11/2025 or after	Funding will begin in 2026	

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- HSA contributions made by both you and Avaya will cease if you terminate employment or leave the Healthy Direction CDHP with HSA medical plan. You must be actively employed and enrolled in the CDHP with HSA medical plan on the normal payroll date your or the company HSA contributions would otherwise be processed to be eligible to receive them.
- If you are newly enrolling and opening an HSA with Fidelity for the first time, Section 326 of the U.S. Patriot Act requires that you verify your identity through the Customer Identification Process before the HSA can be opened. If you do not complete and pass the Customer Identification Process, you will not be eligible to make HSA contributions or receive Avaya's HSA contributions. Go to [401k.com](https://www.401k.com) and click on *Activate Health Savings Account* to complete the opening of your account.

FLEXIBLE SPENDING ACCOUNTS

Avaya offers additional tax-advantaged accounts to let you set aside pre-tax money each pay period to help you pay for eligible out-of-pocket expenses.

- **Health Care FSA (HCFSA)** — Can be used to reimburse yourself for out-of-pocket medical, prescription drug, dental and vision expenses.
- **Limited FSA (LFSA)** — Can be used to reimburse yourself for out-of-pocket dental and vision expenses. You must be enrolled in a High Deductible Health Plan to participate. This account is separate from the Health Savings Account.
- **Dependent Care FSA (DCFSA)** — Can be used to reimburse yourself for day care, after school care, and certain child care expenses for dependents under ages 13 and for the care of adult dependents who are physically or mentally unable to take care of themselves. Important: This account is NOT for health care expenses.

PLANNING TO ENROLL IN THE CDHP OR CDHP ALTERNATIVE MEDICAL PLAN IN 2025

If you enroll in either of Avaya's CDHP options through Aetna and plan to participate in the HSA (whether or not you are receiving Avaya's contribution dollars), you are not permitted to participate in Avaya's HCFSA. Per IRS guidelines, if you are contributing to or receiving contributions to an HSA, you may only be reimbursed for eligible dental and vision expenses (no medical or prescription drug expense reimbursement is allowed) from a Limited Flexible Spending Account. You are not able to enroll in Avaya's Limited Flexible Spending Account unless you are enrolled and participating in Avaya's HSA associated with either Aetna CDHP medical plan.

EMPLOYEE CONTRIBUTION PROCESS

If you wish to participate in the HCFSA, LFSA, and/or the DCFSA in 2025, you must re-enroll during Annual Enrollment. Your 2024 elections do not carry over to 2025.

The annual contribution maximum for Health Care or Limited FSA elections in 2025 is \$3,200. The Dependent Care FSA contribution limit is \$5,000. Please make your new election at my.adp.com.

BALANCE CARRYOVER

Avaya allows HCFSA and LFSA participants to carry over up to \$640 of unused funds into the following calendar year. If you have unused HCFSA or LFSA funds at the end of 2024, the rollover will happen for you automatically. Please factor this in to your 2025 elections to ensure you don't over-contribute in the upcoming year.



HELPFUL LINKS AND TOOLS

At Avaya, we're committed to providing you with valuable tools and resources. Here's a quick guide to help you take control of your health.

Taking Control of Your Health	Tool (click link)	Description
<ul style="list-style-type: none"> • Enroll in or change your benefits • Update your HSA contribution • Change a beneficiary • Find information on your medical carrier 	my.adp.com	<p>Your one-stop-shop for all of your benefit needs.</p> <p>Note: Need to update your HSA or HSA Catch-Up contribution mid-year or outside of Annual Enrollment? From my.adp.com, select "DECLARE AN EVENT" under the Report a Qualifying Change tile on the home page.</p>
<p>Choose the right medical plan for you and your family using ALEX, our interactive Benefit Advisor</p>	<p>start.myalex.com/avaya (Available to Kaiser and Aetna members) ALEX is best viewed in Chrome</p>	<ul style="list-style-type: none"> • Understand your medical plan options and determine which option may be best for you • See how you may benefit from contributing to a Flexible Spending Account and/or Health Savings Account
<p>Get the best price on health care services without sacrificing quality</p>	<p>aetna.com (for Aetna medical members)</p> <p>Login using your existing Navigator credentials or download the Aetna Health app at the App Store® or Google Play™ store</p>	<p>Search for doctors and health care services based on cost, quality and convenience.</p>

Taking Control of Your Health	Tool (click link)	Description
Locate Aetna in-network physicians or dentists where you need them	Current Aetna members may log on to their account at aetna.com Potential members may log on to aetna.com > Find a doctor > Under <i>Guests, select Plan from an employer</i> > When asked to <i>Select a Plan</i> , choose <i>Aetna Choice POS II (Open Access)</i>	Aetna's online participating directory allows you to locate physicians and other health care providers such as dentists and hospitals. Try the Aetna Mobile App for quick and convenient access to in-network providers. Participating physicians are also available 24/7 via phone or video chat through Teladoc, Avaya's telemedicine vendor through Aetna. You may download the Teladoc app on your smartphone or tablet or visit teladoc.com/Aetna for access.
Learn more about the Healthy Direction Consumer Directed Health Plan (CDHP) with HSA medical plan	Review the Medical Benefits — CDHP Newsletter under the <i>Forms & Plan Documents</i> tile on the home page at my.adp.com	A great way to set aside tax-favored dollars for future medical expenses.
Express Scripts (ESI) Annual Enrollment website	express-scripts.com/avaya	Annual Enrollment support including formulary lookup, pharmacy lookup and pricing medications.
Locate Kaiser physicians in your region	kp.org	It's important to find a doctor who's right for you. Choose or change doctors at any time, browse online profiles by region, or call Member Services in your area.
<ul style="list-style-type: none"> • Review your HSA balance • Send a payment to a provider • Update your notification settings 	401k.com	A Health Savings Account (HSA) is designed to help pay for your current eligible health care costs and save for future health care expenses. Your contributions, earnings and withdrawals are all tax-favored. It's a triple tax savings opportunity that can put more money in your pocket.
Wondering where to get your next EyeMed in-network eye exam?	eyemedvisioncare.com	EyeMed is dedicated to helping you see clearly — and that's why they have built a network that gives you lots of choices and flexibility.
Take control of your well-being with Avaya Wellness	aetna.com	All Avaya employees have access to a complete wellness platform. Check out some additional tools that will get you closer to achieving your health goals. Track your activity, get wellness advice, find healthy recipes, and much more.

Taking Control of Your Health	Tool (click link)	Description
What are Flexible Spending Accounts (FSAs)?	Go to the <i>Forms & Plan Documents</i> tile on the home page at my.adp.com .	An FSA (not to be confused with an HSA) may be used for reimbursement of eligible health care* expenses, and child or elder daycare expenses. The amount you decide to contribute to the account for the year is deducted from your salary before income taxes. This reduces your taxable income, saving you money on taxes. *If contributing to or receiving contributions to an HSA, medical expenses are not reimbursable under a general-purpose FSA. Let ALEX teach you about this at start.myalex.com/avaya ALEX is best viewed in Google Chrome.
Determine the right amount to contribute to your Flexible Spending Account	start.myalex.com/avaya	Now it's really easy to figure out how much you should contribute to your Health Care and/or Dependent Care Flexible Spending Account with this intuitive online tool. ALEX, our interactive Benefit Advisor start.myalex.com/avaya can also assist you with this decision! ALEX is best viewed in Google Chrome.
Save tax dollars on your commute to and from work every day!	Go to the <i>Forms & Plan Documents</i> tile on the home page at my.adp.com and download the Commuter Benefits Brochure.	<ul style="list-style-type: none"> • Saves you money on parking and transportation expenses to work • Lets you pay for certain commuting expenses with pre-tax dollars • A great way to LOWER your taxable income
Talk to someone about a personal issue	Member.MagellanHealthcare.com	The Employee Assistance Program (EAP) is available 24/7 to help you and your family successfully deal with life's problems and challenges. The EAP is a prepaid, confidential counseling and referral resource coordinated through Magellan Behavioral Health. Employees receive 5 free counseling sessions per topic.
Looking for childcare and eldercare resources?	Member.MagellanHealthcare.com	The Family Resource Program provides services to busy parents who are looking for help on issues such as adoption, senior care, and education resources.
Get digital musculoskeletal support and digital pelvic health support	hinge.health/avaya-oe	Join Hinge Health for free, personalized digital exercise therapy.
Avaya Discount Marketplace	avaya.savings.beneplace.com/home	Avaya Discount Marketplace brings you some of the hottest deals of the year.

OTHER RESOURCES

IMPORTANT CONTACT INFORMATION

Need help? [Click here](#) for a list of providers and their contact information.

LEGAL NOTICES

[Click here](#) for legally required notices.

