

Q: When is Open Enrollment?

A: Open Enrollment for your 2025 benefits is Monday, Oct. 21 through Friday, Nov. 1, 2024.

Q: What's changing for 2025?

A: As healthcare costs continue to rise, we continue to look for ways to manage these increases for both Motorola Solutions and our employees. While we've been able to keep our medical plan designs mostly unchanged for the last few years, we are making some changes for 2025 to help manage these cost increases. Motorola Solutions will continue to pay 80% of the cost of coverage for your medical plans while also taking on part of the cost increase in order to keep your premiums as low as possible.

Here's what's changing for 2025:

- Medical premiums will increase slightly (as will Motorola Solutions' costs).
- Deductibles and out-of-pocket maximums will increase in several of our medical plans:

	•		
In-network	\$1,250 Deductible Plan (formerly the \$900 Deductible Plan)	\$2,250 Deductible Plan (formerly the \$1,850 Deductible Plan)	\$3,750 Deductible Plan (formerly the \$3,200 Deductible Plan)
Deductible (single/family)	\$1,250/\$2,500	\$2,250/\$4,500	\$3,750/\$7,500
Out-of-Pocket Maximum (single/family)	\$5,000/\$10,000	\$4,500/\$9,000	\$7,500/\$15,000

Note: If you take no action during Open Enrollment, your current medical plan election will carry over to 2025 with the new deductible/out-of-pocket maximum. For example, if you are currently enrolled in the \$900 Deductible Plan and take no action, you will be enrolled in the \$1,250 Deductible Plan for 2025.

• The prescription drug minimums and maximums will increase in the \$1,250 Deductible Plan:

	Retail (30-day) (In-Network and Out-of-Network)	Mail Order (90-day)
Generic	30% (\$20 min / \$40 max)	30% (\$50 min / \$100 max)
Formulary	30% (\$50 min / \$100 max)	30% (\$125 min / \$250 max)
Non-formulary/Specialty	45% (\$80 min / \$160 max)	45% (\$200 min / \$400max)

- We're introducing new programs to help you manage your health watch for more details early next year:
 - Virta, a new, personalized nutrition therapy and telehealth program designed to reverse type 2 diabetes, help lower blood sugar and safely deprescribe unwanted medications.
 - Carrum Health will now help eligible employees and their dependents access cancer care at far less cost as well as continuing to help with surgical care.

To learn more about your benefit options, visit <u>benefits.motorolasolutions.com</u>.

Q: Do I need to enroll?

A: Most of your benefits will carry over to the 2025 plan year, while others require you to actively elect coverage each year.

Benefits that require election each year:

- Health Care Flexible Spending Account (FSA)
- Dependent Care Flexible Spending Account
 Vision (FSA)
- Health Savings Account (HSA)*
- Commuter Spending Account*

Benefits that carry over:

- Medical
- Dental
- Supplemental Life
- Supplemental Accidental Death & Dismemberment (AD&D)
- Accident
- Critical Illness
- Hospital Indemnity

Keep in mind that you cannot make changes outside the Open Enrollment period unless you experience a qualified life event, so consider your options carefully before you enroll. Consider your future health care usage and confirm if you would like to make changes to your current coverage, such as add, change or remove dependents.

*Your current HSA and commuter contributions will not carry over into 2025. Any election you make to these contributions during Open Enrollment may be changed during the year, subject to rules and payroll timing.

Q: What is the life insurance special enrollment opportunity?

A: During this year's Open Enrollment, you have a one-time opportunity to enhance your life insurance protection without answering health questions. From Monday, Oct. 21 through Friday, Nov. 1, 2024, you can either elect for the first time or increase your existing supplemental coverage up to three times your covered annual earnings without answering health questions. To apply for additional coverage, you'll answer a few questions about your health history, along with height and weight.

Q: How much will my benefits cost?

A: The amount you pay for benefits varies depending on the plans you elect and your coverage level. Review your rates on the Aptia365 (formerly Mercer Marketplace 365+) website when you enroll and use the available cost comparison tools. Aptia365 can help you manage what you spend by:

- Clearly showing the costs associated with each plan.
- Offering a range of options at different prices.
- Helping you find the most cost-effective plan for your needs.
- Giving you access to group discounts on additional voluntary benefits

Q: Who is Aptia365?

A: Earlier this year, the Mercer Marketplace 365+ enrollment platform transitioned to Aptia365. You will begin seeing the Aptia365 name in communications you receive, on our benefits enrollment website and

when you call the call center. You will continue to receive the same exceptional services and features, but now with a new look and feel.

Q: Why is the \$500 Deductible Plan only for employees making \$60,000 or less?

A: Everyone deserves quality health insurance – regardless of income. We are committed to providing high quality healthcare to all employees. That is why we offer the \$500 Deductible Plan with lower contributions and a lower deductible to employees who make \$60,000 or less a year.

Q: Which plan is best for me?

A: Now is the time to re-evaluate your current level of coverage to determine whether your needs are being met or if you're paying for more coverage than you are using. There are many things to consider before you make your elections, such as:

- Your medical needs for the coming year.
- Access to care (for instance, whether your current provider is in-network).
- How much you are willing to pay out-of-pocket for insurance and services.

It's important to take the time to review this information. If you cover a spouse or other decision-maker in your family, share this information with them and discuss your coverage options together. When you enroll through the Aptia365 website, you'll have the support and resources you need to understand your options and make the best decisions for you and your family.

- Best match suggestions Using the Expert Guidance feature, you can answer a few short questions, such as how many people you'll cover, your anticipated health care needs and how you prefer to pay for health care services. Aptia365 will then build you a personalized benefits package, which you can review and customize further as needed.
- Plan compare On the Choose your medical plan page, check the Compare box next to each plan you want to look at, and then click the Compare plans & estimate your cost button to see up to four medical plans side by side.
- Cost estimator As you review your options on the Choose your medical plan page, each medical plan shows an Estimated Annual Cost (your premiums + out-of-pocket costs for care) based on U.S. averages. You can use the sliders in the Personalize your estimated cost box on the top of the page to adjust these annual cost estimates based on your specific health care needs. You can also estimate your tax savings from using an HSA or FSA.

Q: How can I best avoid common pitfalls?

A: We want you to feel confident in the choices you're making when thinking about your health care coverage. Here are a few helpful reminders as you enroll for your benefits:

- Remember to elect a contribution to your HSA, FSA or Commuter Spending Account. These elections do not roll over automatically.
- Add, change or remove dependents. Determine your dependents for 2025 and ensure you select the correct coverage level. If you're adding a dependent, you must submit their verification documents in order for them to receive coverage.
- Review your benefits and submit by the deadline. Make sure to review the benefits in your shopping cart before submitting, and make sure you check out before the deadline.

- Save a copy of your elections. After you check out, review your benefits summary for accuracy, then save a copy for your records. You can find your summary on the homepage next to the Dashboard tab.
- Confirm your coverage. When you receive your first paycheck in January, review your pay statement to confirm that all your benefit elections are shown correctly. If you discover an error, contact the Motorola Solutions Benefits Center at (855) 727-8189.

Q: I live in Utah. How can I check to see if my providers are in one of the Utah-only networks? A: You can use the Provider Lookup tool on Aptia365 to easily find in-network doctors, or see whether your current providers participate in the available carrier networks, including the BlueCross BlueShield Preferred Blue and Cigna PPO networks.

Q: What voluntary benefits are available through Aptia365?

A: You have access to a range of employee-paid benefits for added protection and support. Your options include:

- Accident
- Critical illness
- Hospital indemnity
- Identity theft protection
- Legal benefits
- Auto and home insurance
- Pet insurance
- Supplemental Term Life
- Supplemental AD&D Insurance

Q: Where can I learn more about my benefit options for 2025?

A: When you enroll with Aptia365 you'll have the support you need to understand your options and make the best decisions for you and your family. The updated online Decision Guide is now available at <u>benefits.motorolasolutions.com</u>. You'll get an in-depth look at the benefits available to you, as well as the enrollment process. You can access this guide from work or from home, 24/7, so your family members can learn and get involved in choosing and customizing your benefits for 2025.

Additionally, beginning Monday, Oct. 21, benefits counselors will be available to provide personalized support, answer questions about your benefits and help you enroll. Benefits counselors will be available Monday through Friday, 6 a.m. – 8 p.m. Central time, and Saturday, 9 a.m. – 1 p.m. Central time. Connect by phone at (855) 727-8189, or via live chat on the Aptia365 website at <u>https://aptia365.com/msi</u>. During Open Enrollment, you can explore all the benefits we offer and find helpful resources by visiting the virtual benefits fair. <u>Click here</u> to access the virtual benefits fair.

Q: How do I enroll?

A: Beginning Monday, Oct. 21, you can enroll in 2025 benefits by logging on to the Aptia365 website at <u>https://aptia365.com/msi</u>, where you will be guided through the enrollment process. As you move through the site, you will see coverage details and costs for each plan clearly displayed in your shopping

cart. When you check out, you'll have a chance to review your selections and see your total cost. Pro tip: Save a PDF copy of your 2025 elections. <u>Click here</u> for enrollment instructions.

Q: When do my benefit elections become effective?

A: Benefit elections take effect Jan. 1, 2025, and remain in effect through Dec. 31, 2025, as long as you are an active employee.

Q: When and how would I use each of the benefits-related websites during enrollment? A: You have a few resources available to you:

U.S. Benefits BatChat page: Log onto BatChat and type "U.S. Benefits" in the search box. Refer to this page year-round to:

- Access Aptia365 (formerly Mercer Marketplace 365+) via single sign-on
- Find timely updates about using your benefits
- Get answers to frequently asked questions

2025 Online Decision Guide: Visit <u>benefits.motorolasolutions.com</u> to:

- Compare your benefit options
- Review how to enroll
- Visit the virtual benefits fair

Aptia365

Log onto <u>https://aptia365.com/msi</u> (single sign-on from the U.S. Benefits BatChat page) to:

- Enroll in your 2025 benefits between Monday, Oct. 21 and Friday, Nov. 1, 2024
- Find helpful cost transparency tools
- Speak to licensed benefits counselors

Q: What does it mean if a medical plan has a "true family" deductible or out-of-pocket maximum? A: A "true family" deductible is when coinsurance will not begin until the entire family deductible is met, even if all claims are incurred by one member. The entire "true family" deductible must be met before benefits begin to pay out for any family member. If you are enrolled in the \$2,250 Deductible Plan, you have a "true family" deductible and out-of-pocket maximum.

Q: What happens to my current FSA balance at the end of the year?

A: Unused money does not carry over at the end of each year; you must "use it or lose it." All qualified FSA expenses must be incurred by Dec. 31, 2024, and submitted for reimbursement by March 31, 2025.