



Your Benefits, Your Future

Ericsson Enterprise Wireless Solutions
2026 Benefits Guide



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Welcome to Your Benefits!

At Ericsson Enterprise Wireless Solutions, we are shaping a culture built on care, connection, and competitiveness, ensuring every employee and their family feels supported.

By uniting around a shared culture, we're building a foundation that helps every employee thrive, now and in the future. These benefits are one way we show our gratitude for all you contribute.

Let's move forward together and write the next chapter of our story.



Find Out More!

Scan the QR code or go to ericssonenterprisewirelessbenefits.com to get full benefit details.

Exciting Updates for 2026

As part of our commitment to making Ericsson Enterprise Wireless Solutions the best place to work, we are continuously looking for ways to bring you benefits that exceed expectations, in selection and value. Here are some changes and improvements for the new plan year:

- **Aligning with Ericsson Benefits** – We are working to fully align with Ericsson’s benefit programs, and in 2026, you’ll see lower deductibles and decreased out-of-pocket expenses for the Aetna Healthfund Plan, as well as some competitive changes to our vision benefits.
- **All Aetna Health Plans** – Starting January 1, your preventive care benefits will reset every calendar year instead of every 365 days.
- **Aetna Healthfund Plan:**
 - Starting in 2026, there will not be an individual deductible or individual out-of-pocket maximum for members of a family covered under the Aetna Healthfund Plan. This means the whole family deductible and/or out-of-pocket-maximum must be met before the plan pays for any individual family member’s care.
 - Deductibles are changing to \$2,000 Employee Only / \$4,000 Employee + One or more dependents (was \$3,300/\$6,600).
 - In-Network out-of-pocket maximum is changing to \$4,000 Employee Only / \$8,000 Employee + One or more dependents (was \$5,000/\$10,000).
- **Aetna Choice Plan** – In-Network out of pocket maximum will change to \$3,500 individual and \$7,000 family (was \$3,000/\$6,000).
Note: There are no changes to the low deductible of \$1,000 individual / \$2,000 family.
- **Women’s Health Resources** – We’ve expanded your Aetna medical plan benefits to include specialized care for women’s health, perimenopause, and menopause. This is in addition to the current Hinge Health digital program which includes Women’s Pelvic Health support by utilizing a personalized care plan that addresses unique symptoms at various life stages. Refer to [page 26](#) of this guide for additional details.
- **Two Vision Plan Options** – You now have more options when it comes to vision benefits, with two plans available: the Base VSP Plan and the Premier VSP Plan. Both VSP options offer coverage for eye exams, eyeglasses, and contacts. Both plans also offer VSP Lightcare which allows you to use the frame or contact lens allowance to purchase non prescription sunglasses or blue light filtering glasses. You may choose extra in-network coverage and increase the frequency you receive services and materials by electing the Premier option. If you enroll in vision coverage, you will pay the full cost of the benefit. These changes align with Ericsson’s benefit plan structure.
- **HSA Contributions** – Enterprise Wireless Solutions will continue to provide an HSA contribution to help cover your out of pocket expenses and to help you save for future healthcare costs. The Enterprise Wireless Solutions HSA contribution will change to \$1,000 individual / \$2,000 family in 2026 (was \$1,250/\$2,500). This change is due to the lower deductibles and out-of-pocket maximums that are being implemented for 2026 and to further harmonize with Ericsson benefits.
- **Voluntary Benefits** – Get extra protection for you and your family through MetLife accident, critical illness, hospital indemnity, legal, and Allstate identity protection with easy payroll deductions. Additional protection is also available through MetLife for your home, auto, and pets.
- **BenefitHub** – Enjoy exclusive savings at your favorite stores, restaurants, and more. Learn more on the [BenefitHub Discount Mall](#).

Our Harmonization Story

We are turning the page to a collective new chapter in our benefits. Over the next several years, Enterprise Wireless Solutions together with Ericsson and Vonage, will work to harmonize our US benefits programs. The goal: to unite as One Ericsson to provide a more consistent, streamlined experience for all employees, no matter where you work. Together, we're writing one unified benefits story that supports every employee, every family, every stage of life.

Why Harmonize?

Consistency

Everyone should have access to benefits that support their health, financial security, and well-being.

Simplicity

A harmonized benefits package reduces complexity, making it easier to understand, choose, and use your benefits.

Alignment

A unified program helps us consistently deliver benefits that reflect our shared culture, values, and goals.

What Does It Mean for You?

Clear Communication

You'll always know what's changing and when, with updates shared every step of the way.

Helpful Support

You'll have resources to understand your options and make confident choices.

Ongoing Stability

The core benefits you count on will stay in place, even as we bring plans into alignment.

Harmonization isn't just about our benefit programs; it's about our people and our united values. When our benefits reflect our shared culture, we all move forward together. This is just the beginning. As the chapters unfold, **you'll have the information, tools, and support you need, every step of the way.**

Note: The harmonization plan is subject to change as we continue to evaluate employee needs, market trends, and regulatory requirements.



Join Us on the Road Ahead!

We're part of a bigger journey—harmonizing benefits for thousands of US employees across the three entities. We're approaching harmonization in phases so that transitions are manageable and thoughtful. Over the next several years, you'll see gradual alignment in areas such as:

- Medical plan design and pharmacy coverage
- Retirement savings and increased company contributions
- Wellness and preventive care programs
- Voluntary benefits and protection plans

Each year, we will share updates during Open Enrollment and in your benefits guide, highlighting what's changing and what's staying the same.



The Basics

Eligibility

As an active, full-time employee working at least 30 hours per week, you are eligible for benefits on your date of hire. You may enroll your eligible dependents in the same plans you choose for yourself.

Eligible dependents include:

- Your legal spouse or domestic partner
- Your natural, adopted, or step-children up to age 26
- Children of any age, if incapable of self-support due to mental or physical disability

Enrolling & Making Changes

Your initial benefit choices remain for the plan year, so review your options carefully. You can enroll or change benefits:

- Within 30 days of eligibility
- During Open Enrollment
- Within 30 days of a qualified family status change

Examples of status changes include marriage, birth or adoption, death of a dependent, or changes in employment or Medicaid/Medicare eligibility. You may need to provide documentation like a marriage or birth certificate. Contact our [Employee Benefits Center](#) at 1-877-849-4605, within 30 days of the change (or 60 days for birth of a child, Medicaid, or CHIP events).

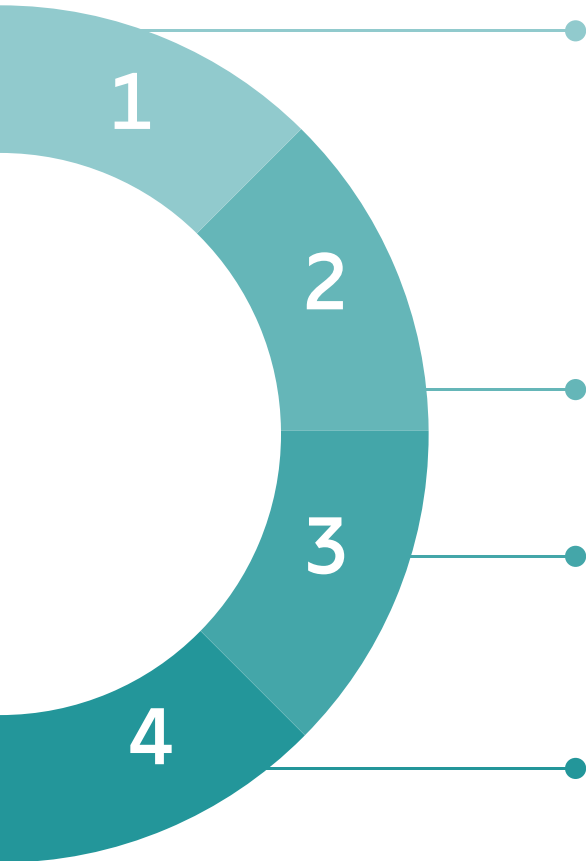


ENROLLMENT TIPS

- ✓ **Review Your Choices:** Don't stick to the same plan each year—life changes, and so should your benefits.
- ✓ **Consider the Whole Cost:** A lower premium may mean higher costs at the time of care, and vice versa.
- ✓ **Explore Voluntary Benefits:** A small investment now can make a big difference in a crisis.
- ✓ **Invest in Your 401(k):** Your contributions can grow significantly by retirement, with tax benefits, a non-discretionary company contribution, and company matching contributions.

How to Enroll

Follow these steps to enroll in your benefits:



Determine Your Needs

Be a smart healthcare shopper and ask yourself the following questions:

- **Who should I cover?** Evaluate your coverage options for all dependents who meet eligibility requirements.
- **How much did I spend on healthcare last year?** Consider your past expenses to help you plan for your future needs.
- **Will I need more, or less, health coverage next year?** Estimate the amount of healthcare you will require in the upcoming year.

Review Your Options

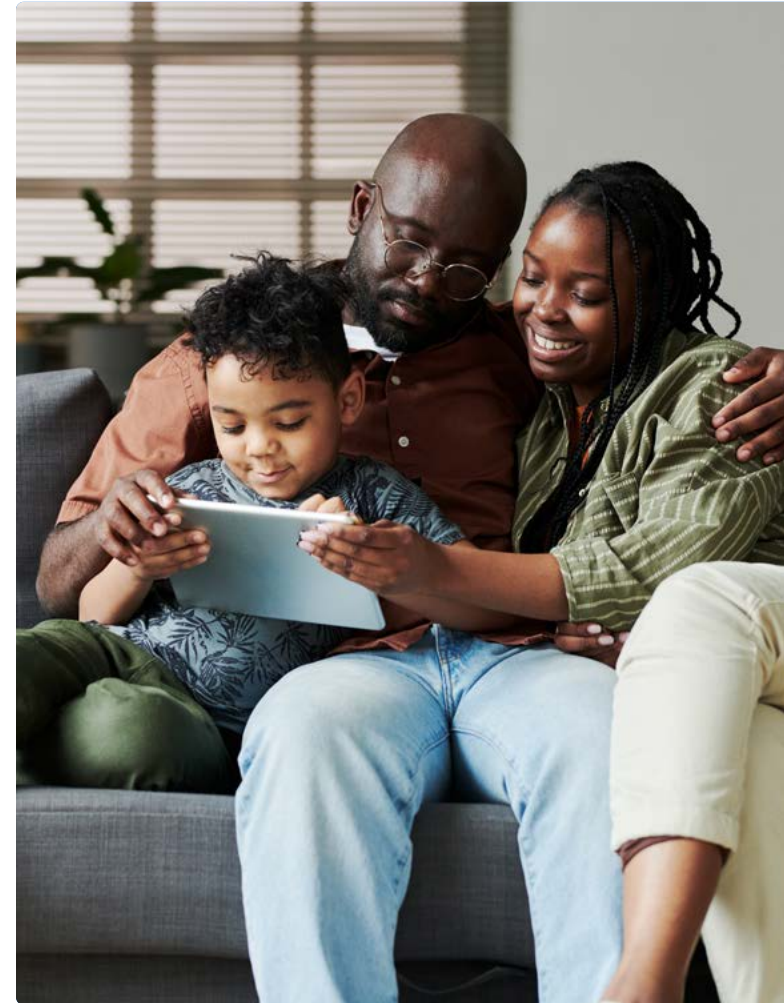
Review this Benefits Guide and ericssonenterprise.wirelessbenefits.com to compare your options and evaluate plan costs and potential savings.

Enroll in Benefits

Enroll in your benefits through the [Employee Benefits Portal](#). You'll be walked through the process to elect benefits. Be sure to "checkout" to confirm your benefit elections. Before you log out of the system, be sure to print a copy of your benefit confirmation statement for your records.

Confirm Your Elections

Review to make sure your benefits and dependent information are correct. Remember to print your confirmation statement for your records. Even if you aren't changing your benefits, be sure to review your beneficiary information for life insurance (including company-paid Life and AD&D).



Frequently Asked Questions

Q: Where can I learn more about my benefits?

A: The Enterprise Wireless Solutions benefits hub is your one-stop-shop for all things benefits. Find plan details, eligibility guidelines, enrollment instructions, carrier contacts, legal notices, and more. Visit our [Benefits Hub](#) any time, regardless of whether you're at work or at home.

Q: When can I make changes to my benefits?

A: Typically, you can change your benefits during Open Enrollment or after a qualified change in family status. You have a 30-day window to make changes to your benefits after experiencing a qualifying change. This includes events like marriage, divorce, or a change in employment status. You have 60 days to make changes related to the birth of a child, Medicaid, or CHIP events. You can change your benefits online through our [Employee Benefits Center](#) or call our team at 1-877-849-4605 to initiate the necessary changes.

Q: What information do I need to enroll my dependents in coverage?

A: You will need to provide their full legal name, Social Security number, and date of birth. You may also be required to submit documentation, such as a marriage certificate or birth certificate, to verify their eligibility.

Q: What does imputed income mean for domestic partners, and is it subject to taxes?

A: Imputed income refers to the value of certain benefits provided to domestic partners. While health benefits for legal spouses are typically tax-free, the IRS may consider the value of benefits provided to domestic partners as taxable income. That means the amount Enterprise Wellness pays toward a domestic partner is considered part of your compensation and is therefore taxable. Please consult your tax advisor to ask if imputed income for a domestic partner applies to you.

Q: How do I know which benefit plans are right for me?

A: This is an important consideration as a new hire or during Open Enrollment. When choosing your plans, consider your current and future health needs, and plan costs. Look at the full cost picture, including premiums, copayments, and deductibles. Don't forget family needs and network providers. The good news is, each year during Open Enrollment, you have the opportunity to make new benefit choices.

Q: What happens if I go out-of-network for care?

A: If you go out-of-network for care, your costs will generally be higher, and you have certain added responsibilities. You may be required to meet the out-of-network annual deductible and provide pre-authorization before the plan pays. The plan will not cover any benefit reductions due to failure to pre-authorize certain treatments. The plan will also not cover any charges above the allowable amount.

Q: What happens if my spouse and I are both employed by Enterprise Wireless Solutions and we enroll separately in a Health Savings Account (HSA) plan?

A: The company will treat married couples with individual benefit plans as a single tax unit and will cap the company HSA contributions at the family level of \$2,000.

Q: How is imputed income calculated for company-paid and voluntary life insurance coverage, and how does it affect my taxable income?

A: Any life insurance coverage over \$50,000, whether company-paid or voluntary, is considered imputed income. The IRS calculates a taxable value based on your age, and that amount is added to your paycheck as taxable income.

Benefit Acronyms

AD&D:

Accidental Death & Dismemberment

EAP:

Employee Assistance Program

FSA:

Flexible Spending Account

HMO:

Health Maintenance Organization

HSA:

Health Savings Account

LTD:

Long-Term Disability

OOPM:

Out-of-Pocket Maximum

POS:

Point of Service

PPO:

Preferred Provider Organization

STD:

Short-Term Disability

Terms & Definitions

To better understand your coverage, it's helpful to be familiar with benefits vocabulary. Take a moment to review these terms, which may be referenced throughout this guide.

Balance Bill When a healthcare provider bills a patient for the difference between what the patient's health insurance chooses to reimburse and what the provider chooses to charge.	Coinsurance The percentage paid for a covered service, shared by you and the plan. You are responsible for coinsurance until you reach your plan's out-of-pocket maximum.	Contribution What you pay from your paycheck to participate in each plan. You may share this cost with your employer or be responsible for the full amount.	Copay A fixed dollar amount you pay the provider at the time of service.
Deductible The amount you pay each plan year before the plan begins paying benefits. Not all covered services are subject to the deductible.	Emergency Room Care Care received at a hospital emergency room for life-threatening conditions.	Formulary A list of preferred drugs chosen by a panel of doctors and pharmacists. Both brand name and generic medications are included on the formulary.	In-Network Care Care provided by contracted doctors within the plan's network of providers. This enables participants to receive care at a reduced rate compared to care received by out-of-network providers.
Out-of-Network Care Care provided by a doctor or at a facility outside of the plan's network. Your out-of-pocket costs may increase, and services may be subject to balance billing.	Out-of-Pocket Maximum The maximum amount you pay per plan year before the plan begins paying for covered expenses at 100%. This limit helps protect you from unexpected catastrophic expenses.	Preventive Care Routine healthcare including annual physicals and screenings to prevent disease, illness, and other health complications. In-network preventive care is covered at 100%.	Urgent Care Urgent care centers are helpful when care is needed quickly to avoid developing more serious pain or problems. Visit urgent care for sudden illnesses or injuries that are not life-threatening.

Mental Wellbeing

The Enterprise Wireless Solutions overall wellness strategy focuses on **every part of you**—your mental, physical, and emotional wellbeing. These mental wellbeing programs are free for all employees and their tax dependents, and are available even if you aren't enrolled in any other Enterprise Wireless Solutions benefits.

Ericsson Care Line

The Ericsson Care Line, available through Workplace Option, is available to all employees, their immediate family (spouse and children up to age 26), and household members, regardless of medical plan enrollment.

To get started, contact Workplace Options by calling 1-888-851-7032 or visit global.helpwhereyouare.com (company code: Ericsson Enterprise). The Ericsson Care Line offers **FREE** and confidential access to:

Crisis or Short-Term Counseling

You have immediate counseling support in a crisis or emergency. If you or your family need short-term help with counseling services, you can receive up to 10 confidential counseling sessions, per person, per year (available in-person or online).

Child & Elder Care Referrals

Access to support for parenting, childcare, and elder care including helpful tools and referrals.

Employee Discounts

Enjoy exclusive savings on products, services, and experiences.

Identity Theft Services

Get round-the-clock access to identity theft protection services to help safeguard your personal information.

Note: This is in addition to any voluntary benefit coverage through Allstate identity protection services, which is a new voluntary benefit for employees.

Financial & Legal Resources

Get expert consultations and tools for budgeting, saving, and legal matters.

Empathy Support Services

Losing a loved one or facing a terminal illness is one of life's most difficult challenges. To help during these moments, Enterprise Wireless Solutions partners with MetLife and Empathy, a service that provides personalized, compassionate support, at **no cost to you**. Empathy offers:

- **Care manager:** A consistent point of contact who stays with you throughout the process.
- **Guidance:** A care plan tailored to your needs, with step-by-step support for decisions and tasks.
- **Practical Help:** A care plan tailored to your needs, with step-by-step support for decisions and tasks.
- **Emotional Support:** Tools include daily journals, guided meditation, and other coping resources.
- **Secure storage** of important documents, with electronic delivery to beneficiaries if needed.

Who Can Use Empathy?

- Beneficiaries after the loss of a loved one.
- Employees and eligible dependents diagnosed with a terminal illness who qualify for the Accelerated Benefit Option (ABO).*

To learn more about Empathy services, visit empathy.com/metlife.

***Important:** You do not need to file an ABO claim to access Empathy's services.

Aetna Resources

The resources below are only available to employees and dependents enrolled in an Aetna medical plan.

Talkspace*

Talkspace counseling services, available through Aetna, offer confidential and convenient mental health support via your phone or video. You can access counseling, therapy, and medication services with licensed professionals.

Key features:

- Access a network of verified therapists for issues like stress, anxiety, depression, and more.
- Start communication within days and schedule live sessions quickly.
- Get psychiatric evaluations and medication management.
- Utilize self-help tools designed by clinical experts.

To get started:

1. Visit talkspace.com/aetna and enter your member ID number found on the back of your medical card.
2. Complete the QuickMatch provider finding tool to review providers that best meet your needs.
3. Schedule a live session or send a message.

If you have additional questions, please email aetna-support@talkspace.com or visit talkspace.com/faq/aetna.

*Sessions may be subject to copays or deductibles.

Health Concierge

Need help understanding your plans but aren't sure where to turn? With Aetna Health Concierge, you have a dedicated resource to answer questions like:

- How do I find an in-network doctor?
- How do I find an in-network dentist?
- I have a diagnosis, but what do I do now?
- Is this covered by my health plan?
- How much is this going to cost me?

Your personal assistant is here to help you find care solutions that fit your needs and your budget. They can even help you schedule appointments. Enterprise Wireless Solutions wants you to understand your benefits and make them work for you. Your concierge can help. Call **1-833-915-3870** to get connected.

Don't forget to contact your concierge during Open Enrollment to help you enroll in the plans that best fit your needs!

Health Your Way

Looking for support in becoming your best self? Aetna Health Your Way provides personalized resources, medical coaching, and opportunities to earn rewards, while achieving your goals.

Visit aetna.com, sign in, and select Wellbeing Resources to get started!



DOWNLOAD THE APP

Download the Active Health app to start earning rewards with Aetna Health Your Way, today!





Physical Wellbeing

Telemedicine

Aetna Members

Option 1: CVS Virtual Care is available to all Aetna members, and those enrolled in the Healthfund plan will enjoy the added perk of a low copay. Skip the waiting room and connect with care anytime, anywhere. You can speak with a licensed physician, psychologist, or psychiatrist 24/7/365 via phone or computer. You have access to:

- Care for common conditions (colds, flu, allergies, rashes, etc.)
- Mental health support (anxiety, depression, stress, sleep; age 18+)
- Specialist referrals
- Prescriptions
- Perimenopause and menopause support resources

Option 2: As an Aetna member, you also have access to telemedicine services through Aetna providers under your medical plan. Log in to aetna.com to review the Aetna telemedicine provider directory.

Kaiser Members

You can get the care you need when and where you need it. For non-emergency medical advice and guidance, reach out to the doctors at Kaiser Permanente, any time of the day or night. Discuss your symptoms and treatment options via:

- Video visits
- Phone appointments
- In-person visits
- Email messages

CVS VIRTUAL CARE

Scan the QR code or visit cvs.com/virtual-care to schedule an appointment.

Download the app:



KAISER TELEMEDICINE

To schedule an appointment, contact Kaiser Permanente at:

- ✓ Northern CA: 1-866-454-8855 or kp.org/getcare
- ✓ Southern CA: 1-833-574-2273 or kp.org/getcare

Where to Go for Care

Need medical attention, but it's not a true emergency? Save time and money by using telemedicine services or visiting urgent care. Emergency room visits are expensive and can take hours! Telemedicine services and urgent care centers offer the same quality care as the ER for non-life-threatening issues. However, they can save you a lot of money and significantly reduce your wait time.



 Telemedicine/Virtual Visit	 Primary Care Provider (PCP)	 Urgent Care Center	 Emergency Room
Non-Life-Threatening	Non-Life-Threatening	Non-Life-Threatening	Life-Threatening
 	 	 	 
Benefit: - Lower cost - Speak to a doctor from anywhere - Reduced waiting room time	Benefit: - Reasonable price in-network - In-person examination - Establish better overall care by going to one doctor	Benefit: - Lower cost than ER visit (though more than PCP visit) - Same-day visits available (if you can't see your PCP)	Benefit: - Necessary for life-threatening conditions - Open 24/7/365

Which Medical Plan Is Right for You?

When deciding which medical plan is right for you and your family, it is important to consider the total cost of coverage. This includes what you pay in premiums and what you pay for services out of your pocket. While each medical plan covers in-network preventive screenings in full, the plans vary on annual deductibles, copays, levels of coinsurance, and HSA/FSA eligibility. The ideal medical plan should cover most of your health needs with out-of-pocket costs that fit within your budget. Check the [Cost for Coverage](#) page to view your medical, dental, and vision rates.

Plan Features	Aetna Choice POS	Aetna Healthfund Plan* (HSA Qualified)	Kaiser Deductible HMO
	In-Network	In-Network	In-Network
Annual Deductible What do I pay before my plan pays for certain eligible services?	\$1,000 individual \$2,000 family	\$2,000 Employee Only \$4,000 Employee + One or More	\$1,000 individual \$2,000 family
Employer HSA Contribution How much money will Enterprise Wireless Solutions give me for investing in my own healthcare account?	N/A	\$1,000 Self Only** \$2,000 Employee + One or More**	N/A
Out-of-Pocket Maximum What is the most I'll pay in a plan year for covered in-network services before my plan pays for everything?	\$3,500 individual \$7,000 family	\$4,000 Employee Only \$8,000 Employee + One or More	\$3,000 individual \$6,000 family
Copays vs. Coinsurance How do I pay for covered services?	Pay a copay for many services, including primary, specialist, and urgent care visits. Pay 20% coinsurance for hospitalization after a copay.	Pay the entire cost of services until the annual deductible is met, then pay 20% coinsurance.	Pay a copay for many services, including primary, specialist, and urgent care visits. Pay 20% coinsurance for hospitalization.
Employee Premium How much comes out of my paycheck bi-weekly for employee only coverage?	\$58 employee only See Cost for Coverage page for other coverage levels.	\$48 employee only See Cost for Coverage page for other coverage levels.	\$59 employee only See Cost for Coverage page for other coverage levels.
Plan Availability Is the plan open to employees in all states?	Yes	Yes	No, California residents only
HSA & FSA Eligibility May I enroll in the HSA or FSA?	HSA – No Health Care FSA – Yes Dependent Care FSA – Yes	HSA – Yes Health Care FSA – No Dependent Care FSA – Yes	HSA – No Health Care FSA – Yes Dependent Care FSA – Yes
The Bottom Line Why would I enroll in this plan?	You access care fairly regularly and you like the predictability of set copays, including for your prescriptions. You don't mind paying more out of each paycheck in exchange for a lower deductible.	You are either a low utilizer of care or you expect a large expense (like surgery or having a baby) in the future. You like the ability to save money in your HSA (including the contribution from Enterprise Wireless Solutions). You are willing to accept a higher deductible in exchange for smaller paycheck deductions.	You live in California and you like having a large network of connected providers to manage your total care.

*Important update: The Aetna Healthfund plan is moving from an embedded to a full family deductible and out of pocket maximum. This means the whole family deductible or out-of-pocket maximum must be met before the plan pays for any individual family member's care.

**Prorated for the year, depending on when your benefits begin.

Aetna Plan Comparison

Plan Features	Aetna Choice POS		Aetna Healthfund Plan (HSA Qualified)	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Enterprise Wireless Solutions Annual HSA Contribution Individual/Family	N/A		\$1,000 / \$2,000 Prorated for the year, depending on date of enrollment	
	You pay:		You pay:	
Annual Deductible	\$1,000 Individual / \$2,000 Family		\$2,000 Self Only* / \$4,000 Employee + One or More*	
Annual Out-of-Pocket Maximum	\$3,500 Individual / \$7,000 Family	\$6,000 Individual / \$18,000 Family	\$4,000 Self Only / \$8,000 Employee + One or More	\$6,000 Self Only / \$18,000 Employee + One or More
Preventive Care Visit	\$0 copay	40% after deductible	\$0 copay	40% after deductible
CVS Virtual Care - General Medical	\$0 copay	Not covered	\$55 copay, then 20% after deductible	Not covered
Physician Visit/Telemedicine	\$30 copay	40% after deductible	20% after deductible	40% after deductible
Lab & X-ray	Covered in full	40% after deductible	20% after deductible	40% after deductible
Urgent Care	\$30 copay	40% after deductible	20% after deductible	40% after deductible
Emergency Room	\$100 copay, then 20%, deductible waived		20% after deductible	
Inpatient Hospital	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Outpatient Mental Health	\$30 copay	40% after deductible	20% after deductible	40% after deductible
Chiropractic (35 visits/year)	\$30 copay	40% after deductible	20% after deductible	40% after deductible
Comprehensive Infertility	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Acupuncture (12 visits/year)	\$30 copay	40% after deductible	20% after deductible	40% after deductible
Hearing Exam (child & adult) 1 routine exam every 36 months	20% after deductible	40% after deductible	20% after deductible	40% after deductible
Hearing Aid (child & adult) 1 pair every 36 months	20% after deductible	40% after deductible	20% after deductible	40% after deductible

*This plan uses a family deductible, which means the total family deductible must be met before the plan begins paying for any individual's care.

Plan Features	Aetna Choice POS		Aetna Healthfund Plan (HSA Qualified)	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Prescription Drugs: Retail (up to a 30-day supply)				
Generic	\$0 copay	20%	Certain Preventive Medications* Deductible waived: Generic covered in full and Brand Name 20% All Other Medications Generic, Brand Name, and Specialty medications, 20% after deductible	40% after deductible
Preferred Brand	\$45 copay	20%		40% after deductible
Non-Preferred Brand	\$70 copay	20%		40% after deductible
Specialty**	20% to \$100 max	Not covered		Not covered
Prescription Drugs: Mail Order (up to a 90-day supply)				
Generic	\$0 copay	20%	Certain Preventive Medications* Deductible waived: Generic covered in full and Brand Name 20% All Other Medications Generic, Brand Name, and Specialty medications, 20% after deductible	40% after deductible
Preferred Brand	\$90 copay			
Non-Preferred Brand	\$140 copay			

*Review the list of Aetna covered medications at [aetna.com/individuals-families/find-a-medication/2025-aetna-standard-plan](https://www.aetna.com/individuals-families/find-a-medication/2025-aetna-standard-plan). You will also find the HSA list of Certain Preventive Medications on this site by scrolling down to "More Coverage Details" and clicking on "Other Plan Information" to find the HSA Preventive Medicine List.

**After first specialty drug fill at a retail or specialty pharmacy, subsequent fills must be through the Aetna Specialty Pharmacy network.

FIND A PROVIDER

To find an in-network provider, call the Aetna Health Concierge at 1-833-915-3870.

Get Your Meds for Less

Generic drugs have the same active ingredients and effectiveness as brand-name drugs, but usually cost less. They are just as safe, with the same benefits and risks. Your doctor may prescribe a generic or allow the pharmacist to substitute one when appropriate.

A generic drug is the same as a brand-name drug in:

- Dosage
- The way it works
- Safety
- The way it is taken
- Strength
- The way it should be used
- Quality

Mail Order Prescriptions

If you take daily maintenance medications for conditions like diabetes or asthma, you can get up to a 90-day supply delivered to your home or any address. CVS Caremark Mail Service Pharmacy provides this convenient service as part of your pharmacy benefits and insurance plan.

GoodRx

Aetna has partnered with GoodRx to ensure you get the best price on non-specialty generic drugs. Just present your Aetna ID card, and Aetna will automatically apply the lowest discount available—no additional steps needed from you!

Kaiser Plan Comparison

CA Employees Only

California employees can choose a Kaiser HMO plan, which offers a large network of doctors and specialists with coordinated care. This plan has low deductibles, low copays, free telehealth, but no out-of-network coverage—only Kaiser providers are covered. To find an in-network provider, visit healthy.kaiserpermanente.org/doctors-locations.



Medical Plan	
Plan Features	HMO
	In-Network Only
Enterprise Wireless Solutions Annual HSA Contribution Individual/Family	N/A
	You pay:
Annual Deductible Individual/Family	\$1,000 / \$2,000
Annual Out-of-Pocket Maximum Individual/Family	\$3,000 / \$6,000
Preventive Care Visit	Covered in full
Telehealth	Covered in full
Physician Visit	\$20 copay
Lab & X-ray	\$10 per encounter
Urgent Care	\$20 copay
Emergency Room	20% after deductible
Inpatient & Outpatient Hospital Services	20% after deductible
Outpatient Mental Health Services	\$20 copay
Chiropractic & Acupuncture (20 annual visits, combined limit)	\$15 copay
Comprehensive Infertility Services (Deductible waived, not subject to OOPM)	50% Limited to one treatment cycle per lifetime.

Prescription Coverage	
Plan Features	HMO
	In-Network Only
	You pay:
Prescription Drugs: Retail (up to a 30-day supply)	
Generic	\$10 copay
Preferred Brand	\$30 copay
Non-Preferred Brand	\$30 copay
Specialty	20% to \$250 max
Prescription Drugs: Mail Order (up to a 90-day supply)	
Generic	\$20 copay
Preferred Brand	\$60 copay
Non-Preferred Brand	\$60 copay

LIVE IN HAWAII?

If you live in Hawaii, please contact your benefits team or visit ericssonenterpriselessbenefits.com for detailed plan information about the Hawaii Kaiser medical plan.

Benefits in Action

When deciding which medical plan is the best fit for you and your family, it's important to consider the total cost of coverage. This includes what you pay in premiums and what you pay for services. The ideal medical plan should cover most of your healthcare needs at a reasonable cost. Let's look at three fictional employees to see how the HDHP (HSA qualified) fits their lifestyle:

Lindsay

Plan Usage: Low

Overall Health: Generally healthy, well-managed chronic condition.

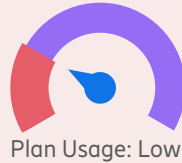
Coverage: Employee Only

Description: Lindsay is a weekend hiker who enjoys exploring new trails. She rarely visits the doctor except for her annual wellness exam and routine preventive care. She receives a monthly rescue inhaler for exercise-induced asthma, which is considered a preventive medication under the Aetna Healthfund (high-deductible) plan.

What Lindsay Wants Most in a Plan: Low premiums

Plan Selection: Lindsay chooses the Aetna Healthfund plan. Here's why:

- Lower healthcare contributions give her more of her paycheck to spend on other priorities.
- Preventive care is covered at 100% when she stays in-network and she can use CVS Virtual Care for other services, when needed, for a \$55 copay.
- The medication Lindsay takes is preventive and covered at 80% for brand name and the deductible is waived.
- She can use her HSA, funded by both her contributions and Enterprise Wireless Solutions,, to cover prescription costs and save toward future healthcare needs.
- The plan's Employee Only out-of-pocket maximum gives her financial protection if she ever needs significant medical care.



Estimated Treatments*	Aetna Choice POS	Healthfund Plan
In-Network Preventive Visits (Covered at 100%)	\$0	\$0
Annual Prescription Cost – Preferred Brand (\$92/prescription)	\$540.00 (\$45 copay x 12 prescriptions)	\$220.80 (\$18.40 x 12 prescriptions) Pay 20% (deductible waived) of the cost of the drug (\$92) for certain preventive medications
Total Spent at Time of Care	\$540.00	\$220.80
HSA Employer Contribution	N/A	\$220.80 Lindsay uses a portion of her employer HSA contribution to pay for her Total Spent at Time of Care and saves the rest for future medical expenses
Annual Premium Cost for Employee Only Coverage	\$1,512.68 (\$58.18 x 26 pay periods)	\$1,255.80 (\$48.30 x 26 pay periods)
Lindsay's Total Cost	\$2,052.68	\$1,255.80

*The numbers used are for illustrative purposes only. Actual prices are based on services rendered and discounted rates at the time of service. Actual savings will vary.

LINDSAY ADDS ACCIDENT INSURANCE!

Lindsay decides to enroll in accident insurance, through MetLife. Since she has the Aetna Healthfund Plan and loves outdoor adventures, she likes having a little extra cushion. If she's ever injured in a covered accident, she'll get a lump-sum cash payment—sent directly to her—that she can use for medical bills, everyday expenses, or anything else she needs.

Andrew

Plan Usage: Moderate

Overall Health: Moderate healthcare needs, regular primary care doctor visits, and multiple prescription medications.

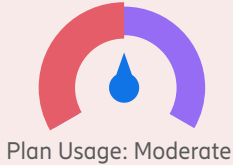
Coverage: Employee + Spouse

Description: Andrew and his wife, Grace, see their doctors several times a year and they take brand-name maintenance prescriptions that they receive monthly for migraines and anxiety. They prefer low predictable costs for visits and medications, rather than meeting a large deductible first.

What Andrew Wants Most in a Plan: Convenience, over cost

Plan Selection: Andrew chooses the Aetna Choice POS. Here's why:

- Predictable, low copays for visits and prescriptions.
- Higher premium offset by lower out-of-pocket costs throughout the year.
- Peace of mind knowing they won't face a large deductible before coverage kicks in.



ANDREW ADDS CRITICAL ILLNESS INSURANCE

Andrew and his wife decide to add critical illness insurance, available through MetLife, to their benefits package. They both deal with health concerns, have family that have suffered heart attacks and strokes, and want to be proactive as they get older. Critical illness coverage provides them a lump-sum cash benefit if they're diagnosed with a covered condition such as stroke, heart attack, kidney failure, major organ transplant, coma, or paralysis.

Estimated Treatments*	Aetna Choice POS	Healthfund Plan
In-Network Preventive Visits (Covered at 100%)	\$0	\$0
Primary Care Doctor Visits (6 visits at \$120 per office visit)	\$180.00 (\$30 copay x 6 visits)	\$720.00 (\$120 x 6 visits) Pay the full cost until deductible is met
Annual Prescription Cost – Non-Preferred Brand (2 prescriptions: Aetna Choice \$70 copay for each Rx; Aetna Healthfund: \$100 each Rx, applied to deductible)	\$1,680.00 (\$70 copay x 24 prescriptions)	\$2,400.00 (\$100 x 24 prescriptions) Pay the full cost until deductible is met
Total Spent at Time of Care	\$1,860.00	\$3,120.00
HSA Employer Contribution	N/A	\$2,000.00 Andrew uses his HSA funds to help pay for Total Spent at Time of Care
Annual Premium Cost for Employee + Spouse Coverage	\$4,033.12 (\$155.12 x 26 pay periods)	\$2,897.44 (\$111.44 x 26 pay periods)
Andrew's Total Cost	\$5,893.12	\$4,017.44

*The numbers used are for illustrative purposes only. Actual prices are based on services rendered and discounted rates at the time of service. Actual savings will vary.

Sofia

Plan Usage: High

Overall Health: Healthy, with two active children, occasional serious injuries.

Coverage: Employee + Family

Description: Sofia and her husband, Mark, have two adventurous kids who frequently need urgent care or ER visits. One child recently needed surgery, resulting in a short hospital stay. They like the flexibility of using HSA funds for both current and future healthcare costs.

What Sofia Wants in a Plan: Plan for now, save for the future.

Plan Selection: Sofia chooses the Aetna Healthfund Plan. Here's why:

- Enterprise Wireless Solutions HSA contribution plus her own savings cover medical costs now and later.
- Lower premiums free up more money for her HSA, which she uses to pay for expenses until she reaches the deductible.
- Family OOPM limits financial risk if major care is needed.



SOFIA ADDS HOSPITAL INDEMNITY INSURANCE!

Sofia adds hospital indemnity coverage, available through MetLife, on top of her Healthfund Plan because, with kids who seem to frequently get injured, she doesn't want to face her entire deductible all at once. Hospital indemnity pays Sofia's family cash benefits based on the number of days someone spends in the hospital. The money goes directly to her and can be used however she needs to use it—whether for medical bills, childcare, or everyday expenses.

Estimated Treatments*	Aetna Choice POS	Aetna Healthfund
In-Network Preventive Visits (Covered at 100%)	\$0	\$0
Emergency Room Visits (2 visits at \$3,400 per visit)	\$1,520.00 (\$100 copay + 20% of the remaining cost, deductible waived)	\$4,560.00 (full cost until deductible is met, then 20%)
Primary Care Visits for Children (5 visits at \$120 per visit)	\$150.00 (\$30 x 5 visits)	\$120.00 (20% coinsurance)
Hospitalization (\$5,000 for the entire stay)	\$1,800.00 (\$1,000 deductible, then 20% coinsurance)	\$1,000.00 (20% coinsurance, deductible already met)
Total Sofia Spends at Time of Care	\$3,470.00	\$5,680.00
HSA Employer Contribution	N/A	\$2,000.00 Sofia uses her HSA funds to help pay for Total Spent at Time of Care
Annual Premium Cost for Employee + Family Coverage	\$8,329.36 (\$320.36 x 26)	\$5,255.12 (\$202.12 x 26)
Sofia's Total Cost	\$11,799.36	\$8,935.12

*The numbers used are for illustrative purposes only. Actual prices are based on services rendered and discounted rates at the time of service. Actual savings will vary.

Health Savings Account (HSA)

If you enroll in the Aetna Healthfund Plan, you may be eligible to open an HSA through HealthEquity to help pay for eligible expenses not covered under your medical, dental, or vision plan. An HSA makes it easy to pay for current healthcare or save for future healthcare needs, even into retirement. Remember to adjust your HSA contributions if your family status changes mid-year to avoid exceeding the annual IRS maximum.

How the Aetna Health Fund Plan & HSA Work Together

Reach the Deductible

You pay all costs for care, except preventive care, until you reach your deductible. You can use your HSA funds* to help pay the costs.

Share the Cost

After you meet your deductible, you and the plan will share the cost of your healthcare. (You'll generally pay 20% and the plan will pay 80%.)

Reach the Limit

If you reach the out-of-pocket maximum, the plan will pay 100% of eligible medical and prescription costs for the rest of the plan year.

*For a complete list of eligible HSA expenses, see IRS [Publication 969](#) or contact the Benefits Team.

Why Enroll in the Aetna Healthfund Plan?

- **Free Money:** Enterprise Wireless Solutions contributes to your HSA. Amounts are prorated based on your benefits start date. Use this free money to pay for eligible medical, dental, and vision expenses.
- **Tax Benefits:** Contributions, interest, and qualified expenses are tax-free.*
- **Portability:** Your HSA goes with you if you leave or retire.
- **No Expiration:** Funds never expire—no “use it or lose it” rule.
- **Retirement Savings:** HSAs are a great way to prepare for future healthcare expenses.

*State taxes may apply in CA and NJ. Consult your tax advisor for details.



DOWNLOAD THE APP

Download the HealthEquity mobile app to make it easier to use your HSA.

You can also review your account balance, shop on [hsastore.com](#), or view a list of qualified medical expenses before you make a purchase.





FREE MONEY from Enterprise Wireless Solutions!

Enterprise Wireless Solutions provides a generous annual HSA contribution to help cover your healthcare costs, including your plan deductible. But your HSA isn't just for your medical plan—you can also use it for qualified dental and vision expenses, even if you're not enrolled in those plans. Or, you can let your HSA grow over time as a safety net for future or unexpected healthcare costs.

2026 HSA Contributions				
Coverage Type	Enterprise Wireless Solutions Contribution*	Your Maximum Contribution**	IRS Contribution Limits	55+ Catch-Up Contribution
Employee Only	\$1,000	\$3,400	\$4,400	Additional \$1,000
Employee + one or more dependents	\$2,000	\$6,750	\$8,750	

*Annual contributions are prorated based on when your coverage begins.

**Your annual maximum contribution may change if Enterprise Wireless Solutions annual HSA contribution is prorated.

Note: HSA IRS maximum contribution limits are subject to change. To view current limits, visit [irs.gov](https://www.irs.gov).

HSA INVESTMENT OPTIONS

HealthEquity provides different levels of investment guidance, based on your needs.

- 1. GPS:** Get algorithm-based HSA investment guidance, offering recommendations tailored to your age, goals, and investment experience.
- 2. AutoPilot:** Manage your portfolio with intelligent technology that creates a risk profile based on your input, automatically selects investments, and rebalances your portfolio, making it easy to invest confidently.
- 3. Self-Driven:** Research and make all HSA investment decisions yourself, with access to mutual fund data and performance insights.

Visit healthequity.com for more information.

Dental Coverage

With your PPO dental plan you may visit any dentist of your choice, but you'll receive the highest coverage when you use an in-network provider. Find an in-network provider by calling the Aetna Health Concierge at **1-833-915-3870**.

Plan Features	Aetna Dental PPO Plan	
	In-Network	Out-of-Network
Calendar Year Benefit Maximum	Plan pays \$2,000 per covered individual	
Orthodontia Lifetime Maximum	\$2,000	
You pay:		
Calendar Year Deductible (waived for Preventive & Orthodontia Services)	\$50 Individual / \$100 Family (Basic and Major Services only)	
Diagnostic & Preventive Services (e.g., x-rays, cleanings, exams)	0%	20%
Basic & Restorative Services (e.g., fillings, extractions, root canals)	20% after deductible	30% after deductible
Major Services (e.g., dentures, crowns, bridges)	50% after deductible	60% after deductible
Dental Implant Surgery	50% after deductible	60% after deductible
Orthodontia for Adults & Children	50%	



DOWNLOAD THE APP

Download the Aetna Health app to find in-network providers, access your ID cards, submit and view claims, review your current coverage, and more!

Vision Coverage

With the Vision Plan offered through VSP, you can choose to receive care from a VSP provider or a non-VSP provider. If you choose a VSP provider, your provider will file a claim on your behalf and receive payment directly from VSP. For non-VSP providers, the plan reimburses you up to a set amount for covered care and materials. You may select extra in-network coverage and increase the frequency of services and materials by electing the Premier option. You can use your benefits at your eyecare provider, as well as Costco Optical, Visionworks, Walmart and Sam's Club.

Visit vsp.com for call VSP's Member Services at 1-800-877-7195 for more information and to find a VSP Provider.

Plan Features	VSP Base Plan	VSP Premier Plan
	In-Network*	In-Network*
Exam	\$10 copay (every calendar year)	\$10 copay (every calendar year)
Frames	\$20 copay (every other calendar year)	\$10 copay (every calendar year)
Frame Allowance	\$120 allowance, plus 20% off out-of-pocket costs (Costco: \$65; Walmart/Sam's Club: \$120)	\$170 allowance, plus 20% off out-of-pocket costs (Costco: \$65; Walmart/Sam's Club: \$170)
Lenses Single vision Bifocal Trifocal Lenticular	\$20 copay	\$10 copay
Lens Enhancements (every calendar year)	Polycarbonate lenses, Lightcare (non-prescription blue light filtering glasses or sunglasses)	Progressive lenses, anti-reflective coating, Polycarbonate lenses, Lightcare (non-prescription blue light filtering glasses or sunglasses)
Contact Lenses (every calendar year, in lieu of lenses and frames)	Up to \$60 copay, plus amount over \$120 allowance	Up to \$60 copay, plus amount over \$170 allowance
VSP Lightcare (every calendar year)	\$20 copay, plus amount over \$120 allowance	\$10 copay, plus amount over \$170 allowance

*In-network costs are shown. Review your plan details for out-of-network costs.



PROTECT YOUR EYES, INDOORS AND OUT

With VSP LightCare, you and your dependents can get ready-made sunglasses or blue light filtering glasses, even if you don't need prescription lenses.

Use your frame allowance at a VSP network doctor or online at [Eyeconic](#).

DID YOU KNOW?

Blue light glasses reduce eye strain from screens, and sunglasses with full UVA/UVB protection shield your eyes from harmful rays and help prevent cataracts.

Cost for Coverage

Below is your bi-weekly cost for medical, dental, and vision coverage.

Your Cost for Medical Coverage			
Enrollment Tier	Aetna Choice POS	Aetna Healthfund Plan	Kaiser HMO
Employee Only	\$58.18	\$48.30	\$59.13
Employee + Spouse	\$155.12	\$111.44	\$183.18
Employee + Child(ren)	\$173.97	\$145.66	\$120.66
Employee + Family	\$320.36	\$202.12	\$242.79

Your Cost for Dental Coverage	
Enrollment Tier	Aetna Dental Plan
Employee Only	\$7.49
Employee + Spouse	\$14.98
Employee + Child(ren)	\$22.41
Employee + Family	\$30.95

Your Cost for Vision Coverage		
Enrollment Tier	VSP Base Plan	VSP Premier Plan
Employee Only	\$4.84	\$9.63
Employee + Spouse	\$7.03	\$14.00
Employee + Child(ren)	\$12.59	\$25.04
Employee + Family	\$12.59	\$25.04



ENTERPRISE WIRELESS SOLUTIONS SHARES THE COST

Enterprise Wireless Solutions subsidizes a significant portion of the cost of your benefits. When elect coverage through the online benefits portal, you will see the total cost of benefits, plus the amount the company pays on your behalf.

FREE BENEFITS!

Did you know Enterprise Wireless Solutions covers the cost of the Employee Assistance Program, Basic Life and Accidental Death & Dismemberment, Short-Term Disability, and Basic Long-Term Disability? We also offer Supplemental Life and AD&D to you at group rates.

Additional Aetna Benefits

If you are enrolled in an Aetna medical plan, you have access to the following benefits and resources.

Aetna's Specialized Personal Health Advocate

Aetna's Specialized Personal Health Advocate gives you one-on-one support for unique health needs—from fertility and premature baby care to transgender services, emotional wellbeing, or genetic testing. Call the Concierge at **1-833-915-3870** to get connected.

Hinge Health

Hinge Health helps you move better, reduce pain, and improve your quality of life—at **no cost to you**. This digital program, fully covered for employees and dependents 18+ on an Aetna medical plan, provides personalized support for chronic pain, peak performance, and women's pelvic health, including care for pelvic floor disorders at any stage of life. No copays. No office visits. Just personalized support for chronic pain or peak performance. Call **1-855-902-2777**, email hello@hingehealth.com, or visit hinge.health/ericssonenterprise to request a call with a Hinge Health professional.

Transform Oncology

Transform Oncology works with Aetna to assist you after a cancer diagnosis. You may be eligible to receive:

- Free hereditary cancer screening to check if you need genetic testing. You can find the screening link in the digital Cancer Support Center within Aetna Health.
- Information about and access to next-generation sequencing. If you're in a clinical trial, this won't cost you anything.
- Help with keeping your infusion treatment costs down through Site of Care.

Reach out to an Aetna Personal Navigator if you need assistance. Look for the *Request a call* button in the digital Cancer Support Center within Aetna Health.



MinuteClinic Women's Health Services

With MinuteClinic, you have access to a wide range of women's health services at MinuteClinic—available in person or virtually. Services include annual exams, reproductive and family planning support, menopause care, mental health counseling, and more than 195 additional offerings.

Learn more at minuteclinic.com/womenshealth.

Gennev

As an Aetna member, you have access to Gennev, a virtual platform that provides specialized menopause care from board-certified OB/GYNs and Registered Dietitian Nutritionists. You'll receive evidence-based treatment plans to manage symptoms and support long-term health. Get started at gennev.com.

Midi Health

Midi Health offers expert, personalized care for women in midlife, including perimenopause and menopause. Care Plans may include prescriptions, supplements, lifestyle coaching, and wellness therapies, all delivered through convenient virtual visits. Visit joinmidi.com to learn more.



Financial Wellbeing

Flexible Spending Accounts (FSAs)

HealthEquity FSAs let you use pre-tax dollars for eligible health and dependent care expenses, reducing taxable income. Elect your annual contribution, but remember, unused funds are forfeited. Visit healthequity.com/learn/flexible-spending-account to view the HealthEquity toolkit which offers a tax savings calculator to maximize your FSA. Visit HealthEquity online for eligible expenses, videos, and planning resources.

Health Care FSA		Dependent Care FSA	
Eligible employees who are not actively contributing to an HSA	Eligibility	Any employee who has eligible dependents with daycare or home care needs.	
\$3,300	Annual Contribution Limit	\$5,000 (\$2,250 if married and filing separately)	
Healthcare plan deductibles, copays, coinsurance, and prescriptions, including dental and vision hardware and expenses	Eligible Expenses*	Daycare for children age 13 and under, disabled children, and dependent adults to allow you and your spouse to attend work or school	
The full annual amount you elect is available on your plan effective date	Availability of Funds	You can be reimbursed up to the amount available in your account	
Debit card** or reimbursement	Payment or Reimbursement Options	Reimbursement	
12/31/2026	Deadline to Incur Services	3/15/2027	
4/30/2027	Deadline for Submission for Reimbursement	4/30/2027	

*Refer to IRS Publication [502](#) and [503](#) for a complete list of eligible expenses.

**Save your receipts when you use your debit card; you may be asked to verify card use transactions, per IRS guidelines.

Note: FSA IRS maximum contribution limits are subject to change. To view current limits, visit irs.gov.



HSA vs FSA

You may be wondering how an HSA differs from a Health Care FSA. While both allow you to set aside pre-tax dollars to use on qualified medical, dental, and vision expenses, the accounts have some key differences, and are able to be used with certain medical plans. Use this chart to determine which may be the best fit for you.

Questions	HSA	Health Care FSA
What is this account?	An account that allows you to put aside money to use for healthcare expenses, now or in the future.	An account with money that you lose if you don't spend it within the plan year or you change jobs.
Who owns it?	Employee	Employer
Who can contribute?	Employee & Employer	Employee
Can you take funds with you when you change jobs?	Yes	No
What are the contribution limits?	\$4,400 per person or \$8,750 per family	\$3,300 per person per year*
What are the tax implications?	Contributions are tax-deductible	Employee contributions are tax-free
Are there any investment opportunities?	Yes	No
Is there a minimum balance needed to start investing?	Yes, a minimum of \$1,000	No
What medical plans are eligible for this account?	Aetna Healthfund Plan	Any plan (You cannot contribute to an HSA and a Health Care FSA)
Can funds carry over, from year to year?	Yes	No
What are the catch-up contributions for people age 55 and over?	\$1,000 on top of the contribution limits	None
Can you use funds to pay for premiums?	No	No
Can you use funds for non-healthcare purposes if you're under 65?	Yes, but you are subject to a tax penalty of at least 20%	No
Can you use funds for non-healthcare purposes if you're 65 or over?	Yes, but the funds are considered taxable income	No

*The IRS maximum is current as of this publication. For the latest limit, visit [irs.gov](https://www.irs.gov).

Life Insurance

Life insurance provides financial security for you and your family if you pass away or become seriously injured.

Basic Life Insurance

Enterprise Wireless Solutions provides Employee Basic Life insurance equal to 2x your base pay. This benefit, through MetLife, is offered at **no cost to you**.

Supplemental Life Insurance

You may purchase Supplemental Life insurance for yourself, your spouse/domestic partner, and your dependent child(ren) at reduced group rates. Depending on the amount you choose, Evidence of Insurability (EOI) may be required. If you enroll in Child Life coverage, all of your children must be covered.

Benefit Features	Supplemental Life		
	Employee	Spouse/Domestic Partner	Dependent Child(ren) (up to age 26)
Coverage Options	Up to 8x benefits pay	\$10,000 increments	\$5,000 increments, per child
Maximum	\$2,000,000 (including employee Basic Life)	\$200,000 (not to exceed 100% of employee's coverage)	\$25,000 per child
EOI Required	Dependent upon amount	Over \$20,000	No

Note: EOI requires providing health information to qualify for a certain volume of insurance. If you choose Supplemental Life coverage above the guaranteed limit or after the initial period, you'll need to complete a health questionnaire. MetLife will review your information and notify you of their decision.



CHOOSING A BENEFICIARY

You can name anyone as the beneficiary of your Life and AD&D policy. Review and update your beneficiaries in your company's online enrollment portal as needed, to ensure your beneficiaries are reflective of your wishes.



Accidental Death & Dismemberment (AD&D) Insurance

The AD&D plan pays benefits if you (or your eligible dependents, should you cover them) die or suffer an accidental dismemberment or loss of use resulting from an injury caused by a covered accident. Benefits are paid only if the death or loss takes place within 365 days of the date of the accident that caused the injury. Some plan exclusions exist.

Basic AD&D Insurance

Enterprise Wireless Solutions provides \$25,000 of Basic AD&D insurance at **no cost to you**.

Supplemental AD&D Insurance

You may purchase Supplemental AD&D insurance for yourself, your spouse, and your dependent child(ren) at reduced group rates.

Benefit Features	Supplemental AD&D		
	Employee	Spouse/Domestic Partner	Dependent Child(ren)* (up to age 26)
Coverage Options	Up to \$975,000	50% of employee amount	10% of employee amount
Maximum	\$1,000,000 (including Basic AD&D)	\$500,000	\$100,000

*Rate for dependent children includes an equal amount of AD&D coverage for all eligible children.

Disability Coverage

Disability benefits provide you with financial stability by replacing a portion of your income if you are unable to work for an extended period of time due to an injury or illness.

Short-Term Disability (STD)

STD provides income if you're unable to work and are approved for benefits by Sedgwick, at **no cost to you**. Benefits may be reduced by state disability plans. You're eligible after five consecutive business days of disability or immediately if hospitalized. Refer to the chart below to see the number of weeks you'll receive STD benefits at 100% of your salary, based on your years of service.

Note: Disability benefits for maternity leave may be paid at 100% for up to 10 weeks with no service requirement. After the disability period, you are eligible for our Paid Parental Leave benefit, which will offer 6 weeks 100% paid leave, which you can use in up to two blocks of time. For details, visit the Paid Parental Leave Instruction on the Time Off page of ericssonenterprise.wirelessbenefits.com.

STD Benefits													
Years of Service*	0-1	1<2	2<3	3<4	4<5	5<6	6<7	7<8	8<9	9<10	10<11	11<12	12+
Weeks at 100% Salary	2	4	6	8	10	12	14	16	18	20	22	24	26

*Enterprise Wellness may recognize your service date with a prior company if you are part of an acquisition group.

Long-Term Disability (LTD)

LTD provides part of your monthly pay if you're unable to work for over six months due to a qualifying disability and are approved by Prudential. There are two options:

- **50% pay replacement:** Provided at no cost, up to \$15,000 per month.
- **70% pay replacement:** You can purchase additional coverage to replace a greater portion of your pay, up to \$15,000 per month.

LTD benefits coordinate with Social Security, Worker's Compensation, and similar benefits, continuing until you are no longer disabled or reach normal retirement age.



DISABILITY CLAIMS

If you need to utilize disability benefits, contact the Enterprise Wireless Solutions leave administrator at absenceone.com/ericsson. If you are on Medicare or Medicaid, make sure you have your Plan Benefit Package (PBP) number available.

Travel & Emergency Services

Group Travel Accident (GTA)

When you travel for business, you're covered by Enterprise Wireless Solutions GTA insurance, available to eligible employees. Coverage starts when you leave your home or worksite and ends when you return, whichever is later. **Note:** Regular commutes to and from work are not covered.

Travel Assist	
Personal Assistance	Medical Assistance
- Lost baggage service - Translation and interpretation - Lost document replacement	- Emergency referrals - Medical evacuation - Hospital admission - Emergency dental treatment

Emergency Relief Program

Employees who have experienced severe economic hardship and significant damage to personal property due to a natural disaster can receive financial assistance and/or additional days of paid leave.

Travel & Lodging

If you are enrolled in an Aetna medical plan, you can be reimbursed for travel and lodging expenses if covered medical care is not available within 100 miles of your home from an Aetna network provider.



LEARN MORE

For additional information about these benefits, please contact the Enterprise Wireless Solutions Benefits Team at bews.total.rewards@ericsson.com.

401(k) Plan

Start saving now with the Enterprise Wireless Solutions 401(k) Plan, managed by T. Rowe Price. Your contributions can be made on a pre-tax (Traditional) or after-tax (Roth) basis. You will become eligible to participate in the plan on the first of the month following your start date. At that time, you will be automatically enrolled in the Traditional pre-tax plan at 6% of your base earnings. The company matches your contributions, up to 4%, to boost your retirement savings. You can adjust contributions, beneficiaries, and distributions anytime at rps.troweprice.com.

 Matching Contribution	 IRS Maximum	 IRS Catch-Up Contribution Maximums	 Plan Types	 Eligibility	 Vesting
Enterprise Wireless Solutions matches your contributions* \$ for \$ of the first 3% and then 50% of the next 2% .	You can contribute up to \$23,500 in 2026.**	Age 50 or over: Contribute an extra \$7,500 ***	Choose Traditional Pre-Tax -or- Roth After-Tax	You are eligible on the first of the month following your start date.	Your personal funds and the company's contributions are 100% yours and there is no vesting period .

*You must contribute at least 5% to get the full Enterprise Wireless Solutions contribution of 4%.

**You are automatically enrolled in the Traditional Pre-Tax plan at 6% of your base earnings.

***Catch-up contributions are made to your Roth account. If you do not have a Roth account, one will be setup for you.



401(K) FAST FACTS

- ✓ In 2026, you may contribute up to 100% of your compensation up to the IRS maximum of \$23,500.
- ✓ Make sure you stay under the maximum. Failure to do so may result in a tax penalty.
- ✓ You are automatically vested in your contributions as well as Enterprise Wireless Solutions' matching contributions.
- ✓ In order to receive the company match you must actively contribute to the account.

Voluntary Benefits

Accident Insurance

Accidents can happen any time. As an eligible employee, you can enroll in MetLife accident insurance and receive benefits for specific injuries and events resulting from a covered accident that occurs on or after your effective date. Accident insurance pays in addition to your medical plan and benefits are payable regardless of any other insurance plans.

The benefit amount is determined by the injury and medical care received and paid in a lump sum amount. You can use that money to help pay for deductibles, groceries, gas, and utilities, or however you see fit. Employees are responsible for the cost of this benefit, and you may sign up for coverage for yourself, your spouse, and your children.

Critical Illness Insurance

Are you protected if you experience a critical illness? As an eligible employee, you can enroll in MetLife critical illness insurance and receive a lump sum payment upon diagnosis of a covered disease or condition after your effective date, such as a heart attack, coma, kidney failure, or cancer. Critical illness insurance pays in addition to your medical plan and benefits are payable regardless of any other insurance plans.

Use the money to pay for expenses not covered under your medical plan such as deductibles, lost wages, child care, travel, home, healthcare costs, or any of your regular household expenses. Employees are responsible for the cost of this benefit. Coverage is available for employees, spouses, and their children. When you enroll, you also have access to a health screening benefit which provides an annual benefit if you complete a health screening test, regardless of whether there were any out-of-pocket costs.

Hospital Indemnity Insurance

An unexpected hospital stay can be expensive, even with medical insurance. As an eligible employee, you can enroll in MetLife hospital indemnity insurance to help pay for expenses and bills related to being admitted or confined in a hospital, critical care unit, or rehabilitation facility on or after your plan effective date. Maternity admissions are covered day one and benefits are paid directly to you, and the funds can be used as you see fit.

Employees are responsible for the cost of this benefit and it is available for employees, spouses, and children.



REMINDER

When you are enrolling yourself and your family in the voluntary benefits, be sure you are covering all your dependents under the “coverage level” section of the benefit enrollment portal when you are electing these voluntary benefits.

Everyday Protection Plans

Identity Protection

With Allstate identity protection, get identity and cyber protection features designed to help you defend yourself from today's risks. The identity protection program provides you with access to personal case managers who offer step-by-step assistance and guidance if you experience identity theft. You have access to services including cyber protection, scam protection, family digital safety, credit monitoring, and credit card fraud assistance.

For more information, call **1-800-789-2720**, 24 hours a day, seven days a week or go online to myaip.com/ericssonenterprisewireless.

Legal Plan

When you enroll in the MetLife legal plan, you have access to attorneys who can provide assistance and advice on a variety of legal issues. Your plan covers you, your spouse or domestic partner, and your dependents.

The legal plan gives you access to:

- Free 30-minute consultation
- Discounted attorney fees
- Online access to lawyers
- Assistance with document creation
- Legal document review
- Online tools to create customized wills, living wills, and powers of attorney

Find more information by calling **1-800-821-6400**, Monday through Friday, 8 a.m. to 8 p.m. ET or by visiting metlife.com/info/EricssonBenefits.

Auto & Home Insurance

It's more important than ever for Enterprise Wireless Solutions employees to protect their most important assets with the right types of products. MetLife auto and home provides convenient access to a comprehensive range of protection that goes beyond traditional offerings.

Services include:

- | | |
|------------------------------|-----------------------------|
| ■ Auto | ■ Home |
| ■ Boat | ■ Condo |
| ■ Recreational vehicle | ■ Mobile/motor home |
| ■ Landlord's rental dwelling | ■ Personal excess liability |
| ■ Renters | ■ Flood |

Pet Insurance

Your pets can now receive coverage to stay healthy, too. Voluntary pet insurance helps you be financially prepared, as veterinary bills can add up quickly. With pet insurance from MetLife, you can save on unexpected veterinary expenses plus optional coverage to help pay for routine veterinary care, such as vaccines, wellness exams, and teeth cleaning.

DISCOUNT PROGRAM

To enroll in these benefits (Allstate identity protection and Metlife home, auto, and pet insurance), visit our **Benefit Hub** discount mall. You can also use this portal to find exclusive deals at your favorite stores, restaurants, and more! It's your convenient one-stop-shop for everyday savings.



Workplace Wellbeing

Education Assistance Program

As an Enterprise Wireless Solutions employee, you are eligible to receive up to \$8,000 per calendar year for tuition reimbursement. Refer to the [Benefits Hub](#) for important details regarding this benefit.

Contact your People Business Partner or email our benefits team at bews.total.rewards@ericsson.com for more information.

Career Growth Opportunities

Build your career with Enterprise Wireless Solutions through our Degreed learning platform, Job & Skills model, and Career Hub.

- **Degreed** is our one-stop-shop for learning resources to help you grow your professional skills.
- Our **Job & Skills** model defines the work and skills we need to deliver for our customers.
- **Career Hub** is a powerful tool that helps you to design your future, expand your skillset, identify career and development opportunities within Ericsson through jobs and projects that align with your experience and career goals.

Through these career growth tools and resources, you can manage career aspirations and easily find and apply for development opportunities at Ericsson. It assists your career path navigation by helping you find jobs and projects that align with your experience and career goals.

Social Wellbeing

At Enterprise Wireless Solutions, we care deeply about you and your family, which is why we offer a generous time off package, including, paid holidays, sick time, and vacation.

Holidays

Enterprise Wireless Solutions offers 11 paid holidays each year. The company designates seven holidays, giving you four days to use as floating holidays. You can schedule these holidays at your discretion, with manager approval.

Paid Time Off (PTO)

PTO is available based on the following guidelines:

- **Use It or Lose It:** Vacation must be used by December 31 or it will be lost, unless where state law requires otherwise.
- **Accrual:** Vacation is accrued daily and based on your start date and years of service, as shown in the table below.
- **Part-Time Employees:** Those working 30-39 hours per week earn vacation proportionally.
- **Vacation Usage:** You can use vacation up to your annual limit, but it's accrued daily. If you use more than you've earned by your termination date, you'll need to repay the difference.
- **Vacation Buy Back:** You can sell up to 40 hours (five days) of your available vacation balance each year for taxable cash, based on your base pay rate at the time of sale.

Annual Vacation Allowance*	
Years of Service	Vacation Allowance
0-6	15 days (120 hours)
7-18	20 days (160 hours)
19+	25 days (200 hours)

*Enterprise Wireless Solutions may recognize your service date with a prior company if you are part of an acquisition group.



Additional Perks Wellness Initiatives

Guaranteed to help you rest and recharge, these initiatives include Wellness Days and a monthly No Internal Meetings Friday.

Diversity and Inclusion (D&I)

Our Diversity & Inclusion (D&I) mission is to create an inclusive work environment where all employees' unique perspectives are celebrated, their contributions are valued, and everyone feels safe to bring their authentic selves to work. Consider getting involved by joining one of our Employee Resource Groups (ERGs)—groups of employees who support efforts to advance the careers and sense of belonging for their members. Each ERG is made up of members from under-represented groups and their allies, who work collectively to advance our D&I mission. Visit our [Diversity & Inclusion site](#) (internal access only).



Sick Time

You receive up to 80 hours of sick time, effective immediately upon your employment with Enterprise Wireless Solutions, with annual grants made on the first working day of the calendar year thereafter.

You may use up to 80 hours of your available paid sick time to care for a family member who is ill or injured. To see who qualifies as a family member and other uses of sick time, see the Sick Time Instruction on ericssonenterprise wirelessbenefits.com. Employees working between 30 and 39 hours per week will receive sick time proportional to the percentage of working hours to a 40-hour work week.

Unused sick time does not carry over to the following year, unless required by state law.

Other Time Off

- **Court Duty:** You are immediately eligible for paid time off for jury duty or court appearances.
- **Bereavement Pay:** You receive bereavement pay for up to five days for a death in your immediate family.
- **Parental Leave:**
 - **Maternity:** You may be eligible for up to a maximum of 10 weeks disability benefits paid at 100%, no service requirement.
 - **Paternity:** You may be eligible for up to a maximum of six weeks paid at 100%, no service requirement.
 - **Adoption:** You may be eligible for up to a maximum of six weeks paid at 100%, no service requirement.

For more details, access the Paid Parental Leave Instruction at ericssonenterprise wirelessbenefits.com.

Your Benefit Contacts

Coverage	Contact/Policy Number	Phone	Website/Email
Questions on Benefits	Benefits Administration	N/A	bews.total.rewards@ericsson.com
Employee Assistance Program (EAP)	Workplace Options	1-888-851-7032	global.helpwhereyouare.com (company code: Ericsson Enterprise)
Telemedicine	Aetna CVS Virtual Care	-	cvs.com/virtual-care
	Kaiser (So. CA) Kaiser (No. CA)	1-833-574-2273 1-866-454-8855	kp.org/getcare
Medical & Prescription	Aetna – Policy #803929 Enterprise Wireless Health Concierge	1-833-915-3870	aetna.com
	Kaiser California So. CA – Policy #235484 No. CA – Policy #607150	1-800-464-4000	kp.org
Health Savings Account (HSA)	HealthEquity	1-866-346-5800	healthequity.com or download the HealthEquity app
Dental	Aetna Dental – Policy # 803929	1-877-238-6200	aetna.com
Vision	VSP – Policy #30030176	1-800-877-7195	vsp.com
Flexible Spending Account (FSA)	HealthEquity	1-877-924-3967	healthequity.com or download the HealthEquity app
Life and AD&D	MetLife	1-800-438-6388	online.metlife.com
Short-Term Disability (STD)	Sedgwick	1-844-236-0425	absenceone.com/ericsson
Long-Term Disability (LTD)	Prudential	1-800-778-4357	www.prudential.com
401(k)	T. Rowe Price	1-800 922-9945	rps.troweprice.com
Accident, Critical Illness & Hospital Indemnity	MetLife	1-800-438-6388	metlife.com/info/EricssonBenefits
Identity Protection	Allstate Identity Protection	1-800-789-2720	myaip.com/ericssonenterprisesolutions
Legal	MetLife Legal	1-800-821-6400 M-F, 8am-8pm ET	metlife.com/info/EricssonBenefits
Auto & Home	MetLife Farmers Auto & Home	1-855-567-6605	metlife.com/info/EricssonBenefits
Pet	MetLife Pet	1-800-438-6388	metlife.com/info/EricssonBenefits
Benefit Questions	Employee Benefits Center	1-877-849-4605	Employee Benefits Center

This communication highlights some of your Enterprise Wireless Solutions benefit plans. Your actual rights and benefits are governed by the official plan documents. If any discrepancy exists between this communication and the official plan documents, the plan documents will prevail. Enterprise Wireless Solutions reserves the right to change any benefit plan without notice. Benefits are not a guarantee of employment.



FIND OUT MORE!

Reading this guide is just the start. Scan the QR code or go to ericssonenterprisewirelessbenefits.com to access more information about your benefits, including plan documents, time off policies, holiday schedules, legal notices, and more.