2025

Healthy Solutions for a Healthier Future

HSA Primary & HSA Plus Resource Guide

Our Commitment to a Culture of Health

At BAE Systems, lives depend on us — and we depend on you. Helping you be your best — at work and at home — inspires us to deliver comprehensive medical plans and resources that allow you and your family to thrive in all areas of life.

Your physical, emotional, and financial health are all dependent on one another. Whether it's understanding a complicated medical diagnosis or improving your well-being, our medical plans and resources can help.

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This guide includes information about the resources available to you and your family to help you make the most of your BAE Systems medical benefits through Cigna HealthcareSM and pharmacy benefits through CVS Caremark.

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Welcome to Your BAE Systems Medical Plan



BAE Systems offers comprehensive medical plans designed to meet the needs of you and your family. Medical coverage is provided through Cigna Healthcare, and prescription drug coverage is provided through CVS Caremark.

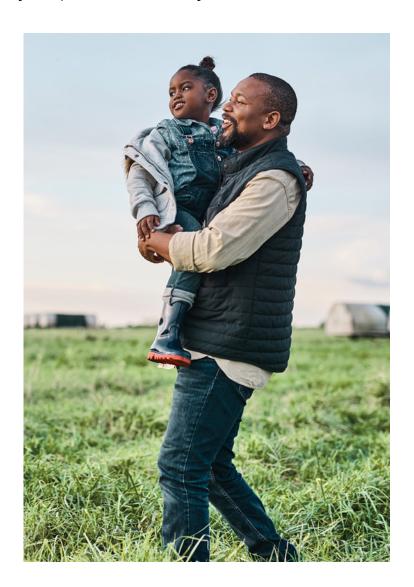
Your medical plan includes valuable benefits such as:

- Access to Cigna Healthcare's nationwide network of providers, with no referrals necessary
- Preventive care covered at 100%*
- Dedicated Cigna Healthcare customer service and claims support
- Health coaching and other programs to help you stay healthy

Preventive care

When you see in-network providers, eligible preventive care is covered at 100% with no coinsurance or deductibles. Preventive care services include annual physical examinations, breast cancer screenings, and colon cancer screenings, as well as routine immunizations such as flu shots. Preventive prescription drugs, including women's contraceptives, are also covered at 100% with no additional cost to you. If services are done to diagnose, monitor, or treat a symptom or health issue at your preventive care visit, there may be a cost to you.

*Not all preventive care services are covered. For example, immunizations for travel are generally not covered. Contact Cigna Healthcare at 800 530 1314 for a complete list of covered preventive care services.



HSA Primary & HSA Plus Plans

The **HSA Primary** and **HSA Plus** medical plans emphasize wellness and prevention – doing things to prevent health problems rather than just treating them when they occur. By becoming an educated health care consumer and taking charge of your health, you can help reduce your costs for medical services and improve your quality of life, now and down the road.

The HSA Primary and HSA Plus plans are qualified high-deductible health plans paired with a health savings account (HSA) that allows you to you save and pay for health care expenses both now and in the future. Your HSA is a tax advantaged plan*, grows over time like a 401(k), and is yours to keep, even if you leave the company or retire.

Although the HSA Primary and HSA Plus plans have larger deductibles that must be met before benefits are paid, their lower plan premium costs help offset the larger deductibles. Employees are encouraged to save the difference in a tax-advantaged HSA that can grow over time like a 401(k) account.* If you enroll in any coverage level other than Employee Only, the family deductible must be met before benefits are paid for any individual family member.

How the HSA Primary and HSA Plus medical plans work

I. Annual deductible

This is the amount of eligible medical **and** prescription drug expenses you must pay each year before the plan begins to pay a percentage of those expenses.

Note: If you enroll your spouse, domestic partner, or children, the family deductible must be met before benefits are paid for any individual family member.

2. Coinsurance

Once your deductible is met, you and the plan share the cost of eligible expenses. The HSA Primary and HSA Plus plans cover 80% of your eligible in-network expenses, and you pay 20%.

3. Out-of-pocket maximum

This is the maximum you will pay during the year, including your deductible and coinsurance. Your eligible in-network medical and prescription drug expenses count toward your out-of-pocket maximum. Once met, the plan pays 100% of eligible medical and prescription drug expenses for the rest of the year.

^{*}HSA contributions and earnings are not subject to federal taxes; however, a few states treat the contributions as taxable income. Those employees residing in California and New Jersey will have applicable state taxes withheld from their contributions each pay period.

HSA Primary & HSA Plus Benefits at a Glance

In-Network Medical Benefits		
	HSA Primary	HSA Plus
Preventive care	You pay nothing; the plan pays 100%	You pay nothing; the plan pays 100%
Deductible	\$3,000 individual/\$6,000 family* (applies to both medical and prescription drugs)	\$2,000 individual/\$4,000 family* (applies to both medical and prescription drugs)
Coinsurance	After meeting your deductible, you pay 20% and the plan pays 80%	After meeting your deductible, you pay 20% and the plan pays 80%
Out-of-pocket maximum	\$6,500 individual/\$13,000 family** (applies to both medical and prescription drugs)	\$4,500 individual/\$9,000 family** (applies to both medical and prescription drugs)
Non-preventive care (doctor's office visits, specialists)	After meeting your deductible, you pay 20% and the plan pays 80%	After meeting your deductible , you pay 20% and the plan pays 80%
Account	HSA funded by you	HSA funded by you
Urgent care	After meeting your deductible, you pay 20% and the plan pays 80%	After meeting your deductible, you pay 20% and the plan pays 80%
Emergency room	After meeting your deductible, you pay 20% and the plan pays 80%	After meeting your deductible, you pay 20% and the plan pays 80%
Inpatient care	After meeting your deductible, you pay 20% and the plan pays 80%	After meeting your deductible, you pay 20% and the plan pays 80%
Outpatient care	After meeting your deductible, you pay 20% and the plan pays 80%	After meeting your deductible, you pay 20% and the plan pays 80%
Customer service	Visit myCigna.com or call 800 530 1314	Visit myCigna.com or call 800 530 1314

^{*}If you enroll other family members, the full family deductible of \$6,000 for HSA Primary or \$4,000 for HSA Plus must be met – not just the individual deductible – before benefits begin for anyone.

^{**}For out-of-pocket maximum, once one family member reaches the individual out-of-pocket maximum, the plan pays for that person for the remainder of the year.

Prescriptions		
Generic	After meeting your deductible , you pay 20% coinsurance, with a max of \$15 for a 30-day supply at a retail pharmacy or \$37.50 for a 90-day supply by mail order	
Preferred brand name	After meeting your deductible , you pay 20% coinsurance, with a max of \$50 for a 30-day supply at a retail pharmacy or \$125 for a 90-day supply by mail order	
Non-preferred brand name	After meeting your deductible , you pay 20% coinsurance, with a max of \$100 for a 30-day supply at a retail pharmacy or \$250 for a 90-day supply by mail order	
Specialty medications: Limited to a 30-day supply	After meeting your deductible , you pay 20% coinsurance, with a max of \$75 for a 30-day supply; drugs must be purchased from CVS Caremark Specialty Pharmacy or a CVS retail pharmacy	
Refill limits on maintenance drugs	After three fills, you must fill maintenance medications by mail or at a CVS Pharmacy; if you fill these prescriptions anywhere else or in 30-day-supply increments, they will no longer be covered and you'll pay 100% of the cost	
Customer service	Visit caremark.com/baesystems or call 866 236 8236	

Health Savings Account		
IRS limit	\$4,300 for employee-only coverage/\$8,550 for family coverage. If you will be age 55 or older during the plan year, you can also make "catch-up" contributions of up to \$1,000	
Customer service	Smart-Choice at 888 900 4223 (part of the BAE Systems Benefit Center)	
Bank	UMB Healthcare Services	

How Your Health Savings Account Works

What is an HSA?

A Health Savings Account (HSA) is a valuable feature of your medical plan. This special tax-advantaged account allows you to set aside pretax dollars in a bank account that you own. You choose the amount you want to save in your HSA. This amount can be changed anytime throughout the plan year.

HSA advantages at a glance

- Your money goes in tax-free. You can save in your HSA on a pretax basis through convenient payroll deductions. Not only do you save money on qualified expenses, including deductibles and other out-of-pocket expenses, but you lower your taxable income for the year.
- Your money grows tax-free. You earn taxfree interest on your money. And that interest generates even more interest!
- Your money comes out tax-free. You don't pay taxes on the money you take out to pay for qualified health care expenses.
- A debit card makes it easy to access your HSA funds. No need to file claims.
- Your balance rolls over from year to year. And there are no "use it or lose it" rules. It is yours to keep even if you change medical plan options, leave the company, or retire. In short, the account is always yours.

HSA contributions

For 2025, you can save up to \$4,300 in your HSA if you're covering only yourself or up to \$7,050 if you're covering yourself and your family. If you'll be age 55 or older during the plan year, you can also make "catch-up" contributions of up to \$1,000.



Check your eligibility

To find out if you're eligible to contribute to an HSA, you must first consider these questions:

- Will you be covered by Medicare or TRICARE?
- Will you be covered by another non-highdeductible plan (that is, a plan with a deductible less than \$1,650 for individuals and less than \$3,300 for families, based on 2025 limits)?
- Will you receive reimbursements for medical expenses from someone else's general purpose flexible spending account (FSA)?
- Will you be claimed as a dependent on someone else's tax return?

If you answered "yes" to any of these questions, you are not eligible to contribute to an HSA through a BAE Systems medical plan.

If you're ineligible to contribute to an HSA, you may choose to enroll in a general purpose Health Care FSA. You can use these FSA funds to help pay for qualified expenses, such as medical, dental, and vision care, including prescriptions.

Limited purpose FSA

If you participate in an HSA, you can also enroll in a limited purpose Health Care Flexible Spending Account (HCFSA). The HCFSA is limited to eligible dental and vision expenses — allowing you to put more of your HSA dollars toward medical and prescription drug expenses.

If you currently have a Smart-Choice debit card for your limited purpose FSA, you will use the same card for both FSA and HSA expenses.

Your Smart-Choice Accounts debit card will use funds in your limited purpose FSA first. If it's a medical expense or you have no funds in your limited purpose FSA, your HSA dollars will be used to cover the expense.



How Your Health Savings Account Works

Setting up your HSA

When you elect a medical plan with an HSA component, you agree to have an account opened on your behalf.

To establish an account with the HSA administrator, Smart-Choice, there is no further action required unless there is a discrepancy. Your information will be securely sent by the BAE Systems Benefit Center to Smart-Choice.

Once your HSA is established, be sure to designate a beneficiary for your account. Designating a beneficiary is important to ensure that the funds in your HSA will easily transfer to your loved ones.

HSA funding

Your account will typically be opened in two to four weeks. In the meantime, be sure to activate your debit card when it arrives by mail. Your HSA funds will become available as soon as they're deducted from your paycheck and deposited into your account — at which time you can use them on eligible expenses. Unlike an FSA, your total annual contribution to an HSA is not deposited at the start of each year.

Growing your HSA

When and how you use your HSA will depend on your health care needs and savings goals. With an HSA, you can spend all the money in your account on current expenses or save it for tomorrow to get a jump start on future health care costs.

Maximize your contributions

Be sure to contribute the maximum to your HSA through Smart-Choice Accounts. If you're age 55 or older (or will turn age 55 during the plan year), you can also make pretax "catch-up" contributions, up to \$1,000. Although most people choose to contribute on a pretax basis, you can also contribute after-tax dollars to your HSA. Your pretax and after-tax contributions apply to the same annual limit. When you make after-tax contributions, you can list the amount contributed as a deduction on your taxes.

Investment earnings

You can invest a portion of your HSA balance once it reaches \$1,000. This is a great way to put your money to work for you and potentially grow your HSA more quickly.

For more information on your investment options, visit the Smart-Choice website and click on the investments section.



Spending your HSA

When you enroll in an HSA, you have access to the Smart-Choice website, via BenefitsNavigator, which lets you manage your HSA online anytime. You can check your balance, submit a claim for reimbursement, check claim reimbursement status, etc.

You will be issued a Smart-Choice debt card that allows you to easily pay for eligible expenses. When it's time to pay for medical care or prescription drugs, there are two ways to pay from your HSA:

- Use your HSA debit card. Simply swipe it to pay
 for qualified health care expenses, and the funds
 will be taken directly from your account. Prior to
 using your HSA card, remember to ensure you
 have sufficient funds to cover your expenses or the
 transaction will be declined.
- Pay out of pocket. If you prefer, you can pay for your qualified expenses up front and pay yourself back later through your HSA. Simply log on to the Smart-Choice Accounts website through BenefitsNavigator or use the mobile app.

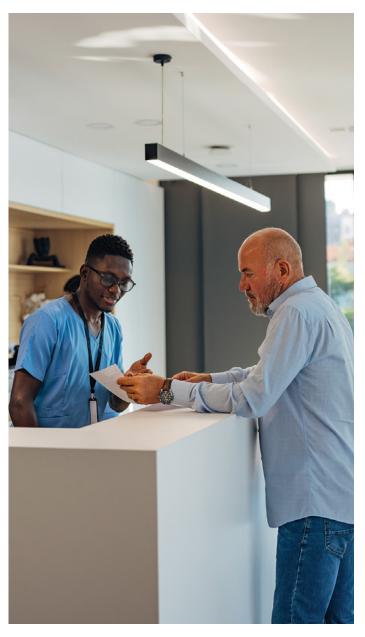
Whether you choose to use your debit card to pay for eligible expenses from your HSA or you choose to pay out of pocket and seek reimbursement, be sure to keep your receipts in case you need to prove to the IRS how you spent your HSA funds. Unlike an FSA, you do not submit receipts to Smart-Choice Accounts to verify your payments.

Qualified expenses

Be sure you only use your HSA to pay qualified expenses, which are listed at www.irs.gov/publications/p502. If you use money from your HSA on nonqualified expenses — such as child care, cosmetic surgery, health club fees, teeth whitening products, or vitamins — you'll pay taxes on that money plus an additional 20% penalty tax if you're under age 65.

Withdrawals after age 65

After you reach age 65 or become entitled to Medicare due to disability, you may withdraw money from your HSA for "nonmedical purposes." These withdrawals will be subject to normal income taxes. You may use your HSA to pay for your covered dependents health care expenses as long as you claim them as dependents on your federal income tax return.



How Your Health Savings Account Works

HSA communications

After you have completed the verification process and your HSA has been established, you'll receive:

- A welcome letter from Smart-Choice Accounts with your account number and contact information
- A Smart-Choice Accounts debit card with frequently asked questions and card usage tips

Once there's activity in your account, you'll receive:

- A quarterly account statement detailing your transactions
- A Form 1099-SA generated at the end of each calendar year — detailing all HSA distributions for tax purposes; the following April, you will receive a Form 5498-SA with your total annual contribution for the prior year

Make it easy with the Smart-Choice Mobile app

When you download the Smart-Choice Mobile app onto your mobile device, you can quickly access, view, and manage your account. Here are just some of the things you can do while on the go:

- Check account balances and activity
- Track and organize expenses
- Use your device's camera to upload receipts/ documentation, if required
- Scan products to verify whether they're IRS-qualified medical expenses

To learn more about the app, visit BenefitsNavigator, select Smart-Choice Accounts, and review the Getting Started Guide.

Note: Sensitive account information is never stored on your mobile device; secure encryption is used to protect all transmissions.

Questions?

In addition to reviewing the information on the Smart-Choice Accounts website through BenefitsNavigator at

benefitsnavigator.baesystems.com, you can call the BAE Systems Benefit Center at 888 900 4223, Monday through Friday, from 8 a.m. to 8 p.m. Eastern time.



Valuable Cigna Healthcare Resources

Cigna One Guide – Ready to answer all your questions. And so much more.

Understanding and using your health plan isn't always easy. But you have Cigna One Guide® on your side.

BAE Systems has partnered with Cigna Healthcare to offer Cigna Healthcare's exclusive One Guide service, Cigna Healthcare's highest level of personal support available. Simply call Cigna Healthcare at 800 530 1314, click-to-chat on myCigna.com*, or use the myCigna* App.* You'll automatically be connected to a One Guide representative who will help guide you where you need to go.



Click, call, or chat.

Your personal guide is ready and waiting to help.

- myCigna App
- myCigna.com
- 800 530 1314

Your Cigna One Guide team can help you: Understand your plan

- Learn how your coverage works
- Get answers to all your health care or plan questions

Get care

- Find an in-network doctor, lab, or urgent care center
- Connect with health coaches
- Schedule your annual check-up and other appointments
- Connect with dedicated, one-on-one support for complex health situations

Save money

Get cost estimates to avoid surprises

*The downloading and use of the myCigna mobile app is subject to the terms and conditions of the App and the online stores from which it is downloaded. Standard mobile carrier and data usage charges apply.

myCigna.com – Your personal health place

myCigna.com is one of the ways you can access your One Guide service. From your personalized home page, you can:

- Manage and track claims and EOB statements
- Compare quality-of-care ratings for doctors and hospitals in your plan's network
- Download a digital Cigna Healthcare ID card
- Take a Health Assessment and get tips on how to stay healthier
- Access a variety of health and wellness tools and resources, including articles, videos, product discounts, and online coaching programs
- Click-to-chat with a One Guide representative

The myCigna App — One Guide and more, on the go

You're busier than ever. Which is why Cigna Healthcare has upgraded the **myCigna App** to include the exclusive Cigna One Guide service, making it easier than ever to take control of your health and health spending.

The app gives you access to the Cigna Healthcare directory of providers, hospitals, labs, and facilities, with maps for instant driving directions. The **myCigna App** with One Guide lets you:

- Build your custom health team, a personal list of the in-network doctors, dentists, and facilities you use so you can keep track of their information all in one place
- Sign up for messages that can guide you to savings, coaching opportunities, and more
- Get tips and reminders to help you stay on track with appointments and preventive care
- Display your ID card right from your phone

Valuable Cigna Healthcare Resources



Free 24-hour Health Information Line

It's 2 a.m. and someone in your house is sick. Instead of rushing to the emergency room for a long wait to see a doctor, you can talk with a nurse to see if the trip is necessary. Nurses are available day or night to provide guidance and direct you to the most appropriate type of care.* You can reach the Health Information Line by calling 800 530 1314, 24 hours a day, seven days a week. In an emergency, dial 911 or visit the nearest hospital.

Health coaching

You have access to personal health coaches to help you and your family maintain or improve your health and address health risks. Your health coach can help you develop an action plan that takes advantage of available health and wellness resources.

Based on your needs, your coach can offer:

- **Help making lifestyle changes.** Examples include smoking cessation, weight management, and stress management.
- Support for managing chronic conditions.
 Your coach can help you get the best care from your doctor and develop a plan to better manage chronic conditions and identified risks.
- Access to an integrated personal health team.
 Based on your needs, your coach can connect you with other professionals who specialize in various areas, such as nutrition, exercise, cardiac care, weight management, stress management, and psychology.

*These health advocates are trained nurses. They have a current nursing license in at least one state. When working as a health advocate, they are not practicing nursing or giving medical advice.

Working with a health coach is not intended as a replacement for medical care from your doctor. Coaching is intended to help you get the most from your appointments with your doctor and to offer additional, ongoing personal support to help you live a healthy life. All interactions with your health coach are confidential.

Cigna Healthcare Virtual Care

With Cigna Healthcare Virtual Care, you can connect with a board-certified doctor when, where, and how it works best for you – via video or phone – without having to leave home or work.* Get the care you need – including most prescriptions (when appropriate) – for a wide range of minor conditions. A virtual care visit often costs less than a primary care doctor visit. To learn more, visit myCigna.com. After you reach your deductible, you pay only the applicable coinsurance on the per-visit charge.

Choose from a large selection of board-certified doctors – all included in your BAE Systems medical plan through Cigna Healthcare.

- Go to myCigna.com or the myCigna App
- Select Talk to a doctor via phone or video

Cigna Healthcare behavioral virtual care services

Dealing with mental health issues can be a challenge. But with Cigna Healthcare's behavioral virtual care services, you don't have to go it alone. And you don't have to go far for the care you need.

You and your dependents can see a licensed provider who participates in the Cigna Healthcare Behavioral Health or Confide/ Employee Assistance Program (EAP) network – when, where, and how it works best for you. Whether you're home or away, behavioral virtual care gives you access to personal and confidential video-based services that are more convenient than visiting an office.

- Online video conferencing using your smartphone, tablet, or computer
- Scheduled appointments based on provider's availability
- Same cost as an in-office visit (and no cost under Confide/EAP benefits)
- Available as part of your Cigna Healthcare health plan for behavioral and/or Confide/EAP benefits

To find out more information and to locate a virtual counselor, visit myCigna.com and select Find a Doctor, Mental Health/Confide/EAP Professional

or Service, then Talk to a doctor via phone or video, and then click Continue under Counseling. You'll then be able to choose from a list of providers affiliated with the Confide/EAP** or medical plan.

Cigna Healthcare Confide Behavioral Health Navigator

For personalized help finding the care you or a family member needs for a mental health issue, you have access to Confide Behavioral Health NavigatorSM. Confide behavioral health advocates will listen to your needs and help connect you with an in-network provider whose expertise aligns with your needs. This service is easy to use, completely confidential, and available at no cost to you. To connect with a Confide behavioral health advocate, log in to myCigna.com > Coverage > EAP and Confide Navigator.

Talkspace

Receive confidential support and counseling for anxiety, depression, and burnout; substance use; or other mental health issues. This confidential online therapy solution lets you work with a licensed therapist from the comfort of home either by phone, private text message, or video. Get started at myCigna.com > Coverage > EAP and Confide Navigator.



*Cigna Healthcare provides access to virtual care through participating innetwork providers. Not all providers have virtual capabilities. Cigna Healthcare also provides access to virtual care through national telehealth providers as part of your plan. This service is separate from your health plan's network and may not be available in all areas or under all plans. Referrals are not required. Video may not be available in all areas or with all providers. All health care providers are solely responsible for the treatment provided to their patients; providers are not agents of Cigna Healthcare. Refer to plan documents for complete description of virtual care services and costs.

**Authorization required if virtual counseling is used under the EAP.

Valuable Cigna Healthcare Resources

Cigna Healthy Pregnancies, Healthy Babies program

Healthy babies start with healthy pregnancies. With the Cigna Healthy Pregnancies, Healthy Babies program, expectant parents receive the support they need to stay healthy during and after pregnancy. To learn more, call 866 344 9991 or download the Cigna Healthy Pregnancy App.

Resources include:

- 24-hour access to expert support
- Library of health information
- Pregnancy newsletter and a parenting magazine
- Information for expectant fathers
- Personalized pregnancy calendar

Breast pumps are available for Cigna Healthcare members at no additional costs once the 28th week of pregnancy is reached. For more information, call Cigna Healthcare at 866 344 9991.

WIN Family-Building*

Employees and spouses enrolled in a BAE Systems Cigna Healthcare medical plan are provided up to \$20,000** toward fertility-related medical treatment.

BAE Systems also provides adoption/surrogacy reimbursement of up to \$30,000** for the associated costs to help build your family. This includes agency fees, legal costs, travel expenses, etc. Some exclusions apply.

To learn more, visit managed.winfertility.com/baesystems/ or download the WINApp using employer code BAE21. WIN Customer Service agents can also be reached at 855 620 0989, Monday–Friday, 9:00 a.m.–7:30 p.m. ET.

Cigna Healthcare Healthy Rewards program***

With the Healthy Rewards® program, you can save on weight management programs, chiropractic services, acupuncture treatments, natural supplements, and more. Using the Healthy Rewards program is easy. No referrals or claim forms are needed. All employees are eligible, and if you're a Cigna Healthcare customer, you're automatically enrolled. For more information, visit myCigna.com and select Wellness.

Your Personal Health Record

Keeping track of your health information can be challenging. Cigna Healthcare makes it easy to keep your medical history at your fingertips. Store all your health information in your **Personal Health Record (PHR)** and access it securely 24 hours a day from myCigna.com.

When you choose to have your Cigna Healthcare lab results and medical claims data automatically stored in your PHR, you can view the details of reported conditions/diagnoses (including the name of the physician who submitted your information). You will be provided with a link to a medical library of related health content and resources for each PHR entry to offer you support and guidance. You can also upload important documents and scanned images and enter additional information, such as allergies and over-the-counter medications. Then, next time you visit your doctor, fax or email a copy of your PHR Summary or print it out and take it with you. Your PHR is provided in agreement with WebMD*, a leader in the health information industry.

^{*}WINFertility is an independent third-party service provider. Cigna Healthcare does not endorse or guarantee the products or services of any third parties and is not liable for any such products or services. WINFertility and its providers are solely responsible for any treatment provided to their patients. Benefits are subject to plan terms and conditions, including exclusions and limitations.

^{**}This benefit amount is a lifetime limit.

^{***}Some Healthy Rewards programs are not available in all states. If your plan includes coverage for any of these services, this program is in addition to, not instead of, your plan benefits. Healthy Rewards programs are separate from your medical benefits. A discount program is NOT insurance, and you must pay the entire discounted charge.

Additional Resources

Free expert second medical opinion from Teladoc Medical Experts

Being diagnosed with a serious medical condition is stressful and often confusing. Teladoc Medical Experts can help. They can offer a second opinion on medical cases covering a range of conditions. With one call, you are connected to a physician case manager who will serve as your personal advocate to talk about your situation, gather your medical records, arrange to have your case reviewed by experts across the country, and answer your questions.

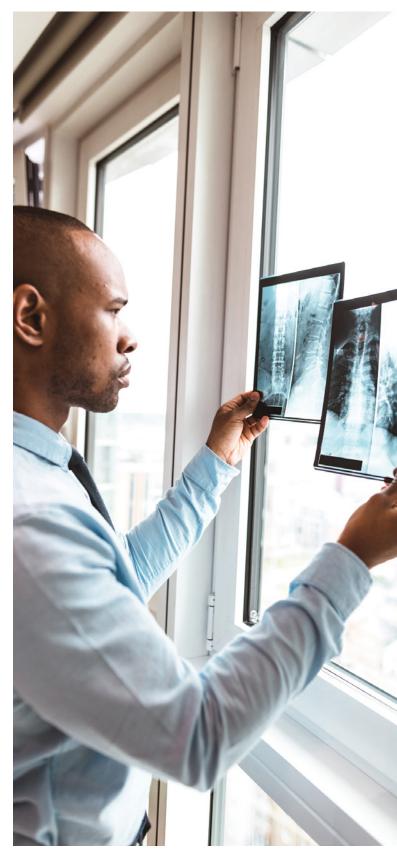
You'll receive a comprehensive report of your case team's recommendations that you can review with your personal doctor. This benefit is completely voluntary and free to employees and their families. To learn more, call **855 380 7828** or visit **teladoc.com/medicalexperts**.

Free support to help you quit smoking from the EX Program

Quitting tobacco for good takes more than willingness and willpower. It takes careful planning, expert advice, and proven tools. When you're ready to quit, the EX Program will give you the support you need to succeed – all at no cost to you.

The EX Program includes tools, tips, one-on-one coaching, and access to an active EX Community of members who've been through it all. Developed in partnership with the Mayo Clinic, this interactive, self-paced, guided quit plan provides specialized support to help you overcome the behavioral, social, and physical aspects of tobacco addiction.

Learn more about the EX Program and how it might help you or a loved one. This free tobacco-cessation program is available to every employee and their spouse/domestic partner. Employees and covered dependents can register today by visiting becomeanex.org.



Additional Resources

Free virtual physical therapy with Hinge Health

Improve your mobility and prevent future injuries with a personalized digital program to help you get moving and stay active. The program provides interactive exercise therapy consisting of gentle stretches and exercises as a therapeutic treatment to manage or prevent joint or muscle pain. Hinge Health uses motion tracking and educational resources to educate you on proper techniques to prevent further injury and promote long-term mobility. Real-time feedback and one-on-one expert guidance are provided by a dedicated physical therapist and health coach.

Hinge Health is available to employees and dependents age 18 and older who are enrolled in a national Cigna Healthcare medical plan. To sign up for the program, visit hingehealth.com/for/baesystems.

Hinge Health's Pelvic Health Program offers support for your unique musculoskeletal needs through virtual physical therapy. The program addresses all stages of life, including pregnancy, postpartum, and menopause. The pelvic health program reduces the risk of chronic pain and improves overall function. This program includes a specialized care team, including a pelvic floor physical therapist, a women's health coach, and, if needed, a urogynecologist, to meet your goals and increase quality of life.



Cigna Healthcare Tools to Help You Take Charge of Your Benefits

Find in-network doctors and facilities

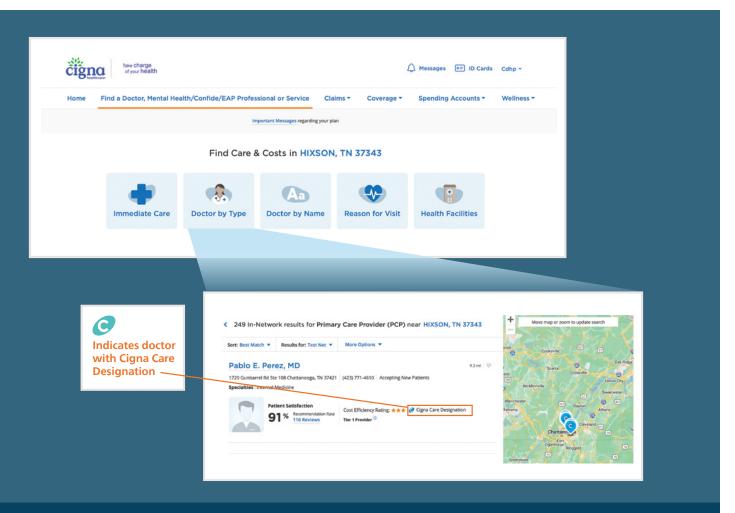
The Find a Doctor, Mental Health/Confide/EAP Professional or Service tool on myCigna.com provides separate search paths for doctors and facilities. It also allows you to search for common procedures and shows cost ranges.

For a complete list of covered services, please refer to your Summary Plan Description, located under **Plan Information** under the **Health & Insurance** tab on BenefitsNavigator.



Choose doctors with the Cigna Care Designation

Every year, Cigna Healthcare evaluates provider performance in 21 primary care and medical specialties. Providers with top results* in delivering quality, cost-effective care become Tier 1 providers and receive the Cigna Care Designation (CCD). When you search for care, your results will first show doctors who have a proven history of achieving good-quality outcomes while also being cost-effective. Doctors with top results are clearly marked Tier 1 and with the CCD symbol.



*Providers identified as having top results, based on Cigna Healthcare's latest "Quality, Cost Efficiency, and Cigna Care Designation Methodology" white paper. Some doctors are included in Tier 1 due to contractual obligations and may not meet Cigna Healthcare quality and/or cost-efficiency measures. Quality designations, cost efficiency, and other ratings reflect a partial assessment of quality and cost efficiency and should not be the sole basis for decision-making. They are not a guarantee of the quality of care that will be provided to individual patients. You are encouraged to consider all relevant factors and consult with your physician when selecting a provider. Providers are independent contractors solely responsible for care delivered. They are not agents of Cigna Healthcare.

Cigna Healthcare Tools to Help You Take Charge of Your Benefits

Locate a quality facility for high-tech imaging

For MRI, CT, or PET scan imaging services, Cigna Healthcare requires providers to precertify coverage with eviCore before benefits are paid. eviCore has access to a national network of approved radiology centers. Be sure to discuss your options with your doctor. You may save money based on where you receive service. For help locating the most appropriate facility to meet your needs, contact Cigna Healthcare at 800 530 1314.

Manage your health care costs

You have significant influence over your medical expenses. Use in-network providers to take advantage of lower costs and higher benefits and make smart choices to save money.

- For treatment of minor illnesses or injuries, you can visit a walk-in clinic, such as a CVS MinuteClinic*, or an urgent care facility instead of an emergency room
- Ask your doctor to prescribe generic drugs whenever possible
- Use the cost and quality tools on myCigna.com to help determine the most cost-effective place to receive treatment
- Request a second medical opinion from Teladoc Medical Experts
- Talk to a Cigna One Guide representative about Centers of Excellence when scheduling surgeries



Cigna Healthcare's health care cost-estimator tool shows what the plan will pay and what you will pay for certain conditions by provider. You can even compare the procedure by the provider based on their facility affiliation, since cost can vary significantly from one location to another.*

To estimate your health care costs, go to:

- Find a Doctor, Mental Health/Confide/EAP Professional or Service at the top of the home page
- Select Reason for Visit and enter the procedure
- Select the type of care you are looking for
- Select provider or facility to see costs
- Click on the Costs tab and enter a procedure name or billing code

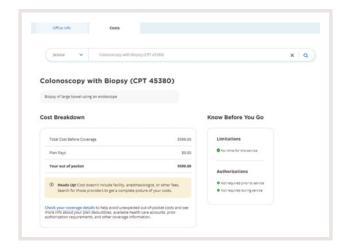


Image used for illustrative purposes only. Actual costs will vary.

*The cost estimates contained in the directory are designed to help you and your family better understand how much you could pay for the various health care services you've searched for. They are not your final cost and should not be relied on to make final decisions about what health care you receive. Cigna Healthcare works hard to help ensure cost information is as up to date and relevant as possible but cannot guarantee or warrant accuracy. The amount you will owe could be different, based on a variety of factors beyond our control (your plan design, your coverage, claims you may have in process, the doctor or other provider, your out-of-pocket costs to date, your plan deductible, money available in your health care accounts [if applicable], where the service is provided, etc.). These are estimates.



Your Prescription Drug Benefits

Administered by **CVS** caremark

To locate a CVS Caremark network retail pharmacy in your area, check prescription costs, or get started with mail order, visit **caremark.com** or call a Customer Care representative toll-free at **866 236 8236**, 24 hours a day, seven days a week.

Save with generic medications

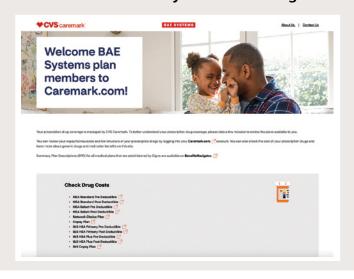
Generic medications can save you money each time you fill your prescription while still safely and effectively treating your condition. In most instances, the pharmacy will automatically dispense a lower-cost generic drug when available.

When a generic is available but the pharmacy dispenses a brand-name medication – or a doctor or prescriber indicates "dispense as written" for a brandname drug – you will pay the difference between the brand-name medication and the generic plus the brand coinsurance.

Fill 90-day prescriptions

For medications that you take on a regular basis, you must ask your doctor to write your prescription for a 90-day supply. You have the choice to fill your 90-day prescription at a CVS Pharmacy or through convenient home delivery.

Here's how to find the Preventive Therapy Drug List on **caremark.com/baesystems**. On the web page shown below, in the **Drug Lists** section, choose the link to the **Generics Only Preventive Drug List**.



Review the Preventive Medication Drug List

The Preventive Medication Therapy List includes medications that help prevent chronic health conditions, such as high blood pressure, when taken regularly. If you take a generic medication that is on the Preventive Medication Therapy List, you will only pay the coinsurance amount, even if you have not yet met your annual deductible.

Transform Diabetes

The CVS Caremark Transform Diabetes Care program is a voluntary program that offers free services, support, and tools to Cigna Healthcare medical plan members and spouses who are currently on medication to manage their diabetes. Through the Transform Diabetes Care program, you can:

- Track your levels, see trends, and share your data with whomever you choose
- Receive personalized tips in real time to help you stay on track and make informed choices

CVS Caremark Transform Diabetes Care benefits also include:

- Two diabetes monitoring visits per year at a MinuteClinic (at no additional cost to you) to help prevent diabetes-related conditions; these visits include A1c testing, foot exams, body mass index (BMI) assessments, diet consultation, and blood pressure and cholesterol checks
- Personalized, one-on-one coaching with pharmacists to help you stay on track

If you or your dependent is eligible, you will receive a welcome kit from the CVS Caremark Transform Diabetes Care team.

Save Time – Manage Prescriptions On the Go

Use Caremark.com and the CVS Caremark App

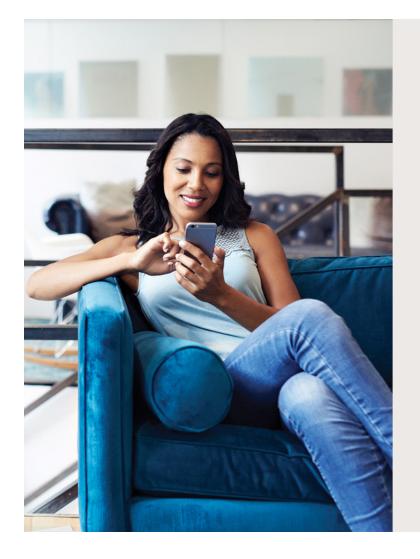
Caremark.com and the CVS Caremark app allow you to:

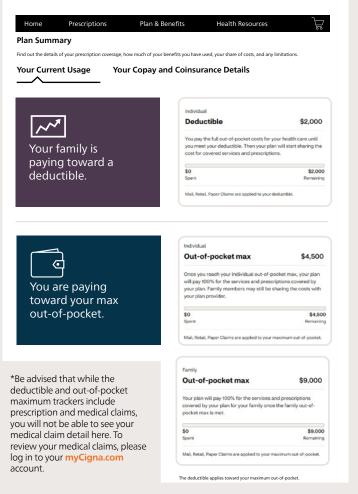
- Refill your existing prescriptions, and check your order status
- Set up your orders for automatic refills
- Get notified when your order is ready
- See which medications are covered and how much they cost
- Learn about any cost-savings opportunities available to you

Track your annual health care costs

To make it easy to understand where you stand with your annual health care costs, navigate to **Plan Benefits** and click **Plan Summary** on the top of your home page.

You will see the total expenses you have incurred toward your deductible and out-of-pocket maximum at any point in the year. This will include both prescriptions and medical claims that have been filed with Cigna Healthcare.*





Other Important Benefits Information

Covering your dependents

If you add a new dependent to your coverage, you will be asked to verify that they are an eligible dependent. You will receive communications from the BAE Systems Benefit Center advising how to complete this. Please remember that eligible dependents are allowed to be covered until age 26. Their coverage will terminate at the end of the month in which they turn age 26.

Disabled dependents that were deemed permanently and totally disabled prior to turning age 26 are eligible for coverage under the plan. For more information, call the Benefits Center at 888 900 4223.

If you cover dependents under your BAE Systems medical plan, you must indicate whether the company-sponsored plan is their only medical plan or if they have other coverage. This is an annual requirement. If Cigna Healthcare receives a dependent claim of more than \$500, it will not pay the claim until it receives coverage verification.

To verify if your dependents have additional medical coverage, call Cigna Healthcare at 800 530 1314 or visit myCigna.com, click Profile at the top, select Other Insurance/Coverage under Manage My Coverage, and update your dependents' insurance information. This process helps ensure that the plan pays only valid claims.

Out-of-network claims

Your medical plan allows you to visit doctors and other providers who do not participate in the Cigna Healthcare network. However, when you receive nonemergency care outside the network, your share of the costs – including deductibles and coinsurance – will be significantly higher than what you would pay for in-network care.

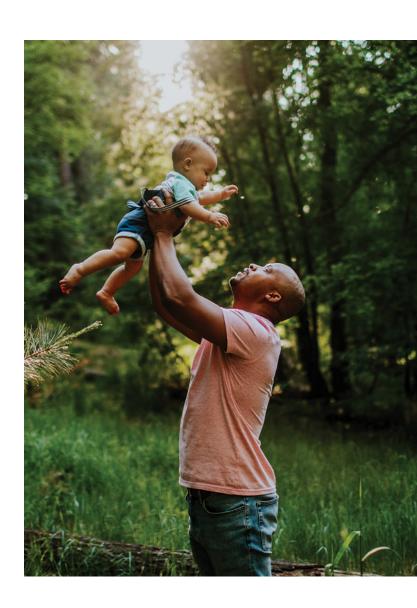
When you receive out-of-network care, you can get reimbursed for some but not all of your expenses. This amount is called the maximum reimbursable

charge. For example, your doctor might charge \$100 for treatment, but the most your plan will pay is \$80.

You are responsible for paying any charges above this amount. These charges do not apply to your deductible or out-of-pocket maximum.

A note about state surcharges

If you receive medical treatment in Massachusetts, Michigan, New York, or Vermont, a state-mandated surcharge will be applied to the total cost of claims for inpatient and outpatient hospital services, diagnostic services, and treatment center care.



Reviewing Your Explanation of Benefits

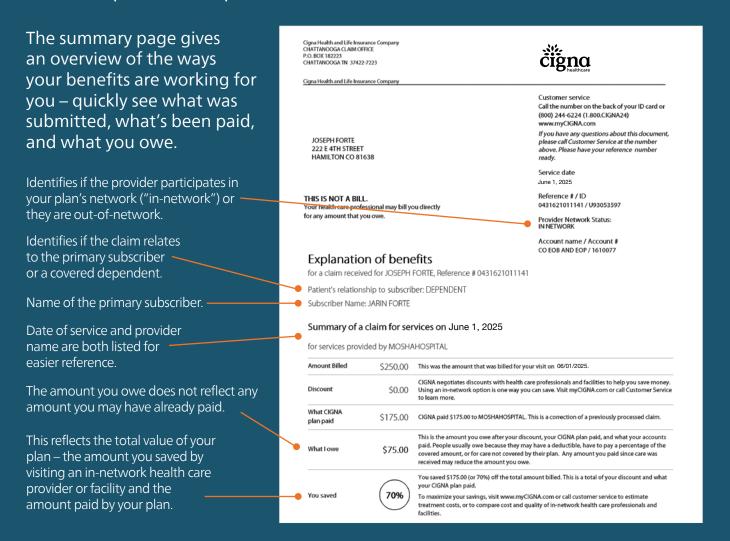
The Cigna Healthcare claims processing system generates an EOB for every medical claim you incur. The EOB includes a breakdown of the costs associated with the care you received. It will show:

- The total amount billed by your provider
- Any discount negotiated by Cigna Healthcare
- What the plan paid for the service
- How much you owe the provider

When you receive a bill from your provider, check that the EOB matches the bill before making a payment.

Your EOBs are available online at myCigna.com, or you can receive paper EOBs by mail.

An example of an Explanation of Benefits



Contact Information and Resources

For additional questions or support, please consult the resources below.

BAE Systems Benefit Center

888 900 4223

8:00 a.m.–8:00 p.m. ET Monday through Friday

benefitsnavigator.baesystems.com

- Log-in access to BenefitsNavigator
- Benefit eligibility questions
- Beneficiary elections
- Flexible Spending Account (FSA) questions
- Health Savings Account (HSA) enrollment and questions
- New hire benefit enrollment
- Summary Plan Description (SPD) or Plan Document questions
- COBRA questions and assistance
- Retiree medical eligibility
- Medicare Enrollment Form completion

BAE Systems Benefits Website

Available at any time

benefits.baesystems.com

- Access information related to your medical plan, prescription plan, well-being programs, and time away from work
- Find out where to go and whom to contact
- Learn the answer to general benefits questions
- Share health and well-being information with your spouse/domestic partner

Cigna Healthcare

- 800 530 1314
- 8:00 a.m.–8:00 p.m. ET Cigna One Guide service Monday through Friday
- Representatives available 24 hours a day, 365 days a year

myCigna.com

- Help with health care or plan questions
- Appointment scheduling
- One-on-one support for complex health situations
- 24/7 Health Information Line for triage and guidance
- 24/7 access to Confide Behavioral Health Navigator/EAP
- Phone-based and video medical consultation through MDLIVE[®]
- Access to care, including help locating doctors, hospitals, and other health care providers
- Help resolving health care billing and claim issues
- Preauthorizations
- Guidance in medical claims appeals process and assistance in filing appeals

Cigna Healthy Pregnancies, Healthy Babies

866 344 9991

Customer service representatives are available 24 hours a day, 365 days a year

- Library of health information
- Pregnancy newsletter and a parenting magazine
- Information for expectant fathers
- Personalized pregnancy calendar

CVS Caremark

866 236 8236

Customer service representatives available 24 hours a day, 365 days a year

caremark.com

- Get answers to general questions about prescriptions and benefits
- Check prescription costs
- Request prior authorization for non-formulary prescriptions
- Learn about switching to a generic or preferred brand prescription
- Locate network pharmacies
- Order 90-day supply of maintenance medication through mail order

Delta Dental of Virginia

800 237 6060

Monday through Thursday, 8:15 a.m.-6:00 p.m.; Friday, 8:15 a.m.-4:45 p.m. ET

DeltaDentalVA.com

- Receive answers to questions on dental benefits
- Locate providers

EX Program

Available at any time becomeanex.org

- Access free video and digital content on preparing to quit tobacco and remaining accountable
- Use interactive tools for setting a guit date, tracking tobacco use, and beating triggers
- Receive four weeks of nicotine patches, gum, or lozenges delivered to your home for free

Hinge Health

To sign up, visit

hingehealth.com/for/baesystems

- Free virtual physical therapy
- Interactive exercise therapy for musculoskeletal needs
- 1:1 expert guidance by a dedicated physical therapist and health coach
- Pelvic Health Program offers virtual physical therapy

MDLIVE

888 726 3171

Customer service representatives available 24 hours a day, 365 days a year

mdliveforCigna.com

- Connect with a board-certified physician
- Receive the care you need when you need it, via phone or video
- Get prescriptions and care for minor ailments

Teladoc Medical Experts

855 380 7828

Customer service representatives available 24 hours a day, 365 days a year

teladoc.com/medicalexperts

• Receive a free second medical opinion on a diagnosis, treatment, or prescription

VSP

800 877 7195

Monday through Friday, 5:00 a.m.-8:00 p.m.; Saturday, 6:00 a.m-5:00 p.m. PT

vsp.com

- Receive answers to questions on vision benefits
- Locate providers

WINFertility

855 620 0989

Monday through Friday, 9:00 a.m.-7:30 p.m. ET managed.winfertility.com/baesystems

- Discuss your family-building benefit options with a WINFertility representative
- Access to a WINFertility Nurse Care Manager 24/7 to get answers to guestions, education, statistics, and help easing the emotional strain of infertility

BAE Systems, Inc. 2941 Fairview Park Drive Falls Church, VA 22042

benefits.baesystems.com

All employees and covered dependents participating in a medical plan through Cigna Healthcare will be eligible for the comprehensive health and wellness benefits described in this brochure, with the exception of WINFertility, which is only offered to employees and spouses/domestic partners.

This is only a brief overview. It is not intended to address all plan features that may apply to you. If there is any conflict between the language in this brochure and the language in the plan legal documents, the language in the plan legal documents will govern. In addition, this overview creates no rights between you and BAE Systems. Any participant rights are solely as described in the plan legal documents.

While BAE Systems expects to continue its benefit plans, these plans are subject to change and may be discontinued at any time at the sole discretion of BAE Systems. Benefit provisions vary among BAE Systems businesses; if you transfer within BAE Systems, your benefits may change.

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