



Your 2015 Annual Enrollment Guide

Annual Enrollment is
Oct. 27 to Nov. 14, 2014



Intel goes green for Annual Enrollment



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For All Employees Excluding Oregon and New Mexico

Annual Enrollment is Oct. 27 to Nov. 14

Annual Enrollment begins on Monday, October 27, and stays open through Friday, November 14, 2014 at 10 p.m. (Pacific). Benefit elections you make during this period will take effect on January 1, 2015.

Decision-support tools and other resources will be available to you and your spouse starting on October 20, 2014. Take advantage of these online resources and in-person events, including the *My Health Benefits* website, on-site and Virtual Benefits Road Shows, and Benefits Advisors, to help you prepare for this important once-a-year event.

An Introduction to Annual Enrollment



Annual Enrollment 2015

It is now time for you and your family to review your healthcare plan choices and make your Annual Enrollment decisions for 2015, and there's good news we want to share with you. First, there are no significant changes to the plan design or choices available to you and your family. Second, the cost increase for this year is 2%, which includes costs associated with the Affordable Care Act (ACA). We are also announcing our commitment to limit the increase for 2016 to 2%. This means 2015 and 2016 will see cost increases of only 2% per year.

Innovation: At Intel and in Healthcare

At Intel, you are part of a company creating and delivering innovative products that are changing the world. As leaders in the healthcare industry, we strive to deliver innovative health and wellness programs to you and your family, including high-quality care, comprehensive coverage, and easy access to doctors and care facilities of your choice.

The Results

The early adoption of consumer driven health plans, vendor management, Wellness Check program participation, and a focus on cost containment, have enabled us to keep cost increases below the national average. These positive results mean we share positive outcomes. What this means to you is that we will keep all medical plan cost increases flat at 2% per year in 2015 and 2016. This compares favorably to increases of 6-10% over the past four years.

Two years ago, we implemented the Connected Care model in New Mexico. Connected Care delivers a better approach to

healthcare and creates a closer relationship with your doctor. Based on our success and positive employee feedback, we are bringing Connected Care to employees in Oregon in 2015, with plans for future implementation across the U.S. Our innovation represents Intel as a leader in technology and the same holds true for how we care for you, through the delivery of high-quality and innovative health and wellness programs.

We all have the opportunity to manage and improve our health and healthcare costs. As we learn to be better stewards of our health, everybody wins through better health and lower costs.

Your Health and Wellbeing

We make it easy for you to be healthy so you can be your best at home and at work. Good health and wellness is an essential part of our lives. The healthier we are in mind, body, and spirit, the greater our presence at home and at work. You and your family have access to a variety of Health for Life programs. These high-quality programs are flexible and convenient, and they work together to support the personal needs of you and your family, so you can live a vibrant life. You can start or continue your health journey by taking advantage of our programs and selecting a primary care provider who can help you coordinate your healthcare needs. Don't forget—your in-network preventive care is 100% covered no matter which plan you choose. It's never too late to start your journey to be a healthier you.

Because we take pride in offering you a health benefits package that is one of the best in the industry, your healthcare choices for 2015 continue to provide you high value and comprehensive coverage.

What's Changing in 2015

As you prepare to make your decisions, take a look at the summary of the changes for 2015.

High Deductible Health Plans

Paycheck contributions will remain at zero; annual deductibles and out-of-pocket maximums will increase 2%.

Other Health Plans

The Cigna Primary Care Plus Plan, all HMO's, and the Aetna International Health Plan paycheck deductions will increase 2%. See the rates on page 8 to see your specific cost increase.

Vision

Members enrolled in the VSP Vision Plus Plan will see a premium reduction in 2015. Depending on your coverage, you will see a reduction from \$1 to \$2 per month. If you choose to enroll in the VSP Vision Plus Plan, you will have an enhanced vision plan offering lower copayments, more frequent services, and higher allowances compared to the VSP Basic Vision Plan.

Short-Term Disability

Intel's Short-Term Disability (STD) contribution amounts are changing in 2015 for non-California employees. The STD paycheck deduction rates for the non-California plan will remain at 0.8%, however the annual maximum contribution will increase from \$600 to \$700. The impact of this change depends on your gross salary. For more information go to page 9.

New in 2015:

Express Scripts 90-Day Prescriptions

Express Scripts members (available to those enrolled in a Cigna or Anthem Health Plan) may now purchase a 90-day supply of maintenance medication at Walgreens and Costco without penalty. If you don't want to use one of these preferred pharmacies, you may continue to conveniently purchase your maintenance medications through Express Scripts mail order without penalty. More information can be found on page 10.

Limited Use Health Flexible Spending Account

If you are enrolled in a High Deductible Health Plan (HDHP), you might be interested in using a Limited Use Health Flexible Spending Account for reimbursement for your dental and vision expenses. You can elect up to \$2,500 per year through pretax payroll deductions to pay for eligible non-reimbursed dental and vision expenses. More information can be found on page 11.

Home Birth Coverage

We know for some parents giving birth to your child in the privacy of your home is important. All of our healthcare plans now cover professional services associated with home birth if provided by a licensed nurse mid-wife or doctor. For more information about home birth services and costs, contact your health plan administrator.

Hyatt Legal Plan Enrollment Available through the My Health Benefits Website

You will now be able to complete your Hyatt Legal elections on the *My Health Benefits* website. To enroll in other voluntary benefits, you can continue to make your election through MetLife. More information can be found on page 5.

Everybody wins through better health and lower costs

We are pleased to announce our commitment to hold all medical plan cost increases at 2% per year in 2015 and 2016.



Your Decisions for 2015

Annual Enrollment is your opportunity to learn about the benefits Intel is offering for the coming year and choose the best plans for you. It is also your opportunity to add or drop dependents from your coverage and make changes to your health, dental, and vision plans; life insurance, short-term disability, and voluntary benefits.

This is also the time to set aside pretax money for your eligible expenses. Be sure to choose your contribution amounts for one or more of the following: Health Savings Account, Health Flexible Spending Account, Limited Use Health Flexible Spending Account, Dependent Care Assistance Program, and Commuter Benefit.

You can also take this time to validate and or update important information such as: your covered dependents information including social security numbers and beneficiaries on your life insurance plans.

If You Do Not Make Any Changes During Annual Enrollment

While it is important for you to review the plan information and make your decisions for 2015, if you don't make any changes during the annual enrollment period, the following will occur:

- The health, dental, and vision plan you and your dependents are currently enrolled in will remain the same for 2015.
- Your life insurance, voluntary benefits, and short-term disability coverage will remain the same for 2015.
- Your HSA, Health FSA, and DCAP contributions will stop at the end of 2014.

Enroll in Voluntary and Commuter Benefits

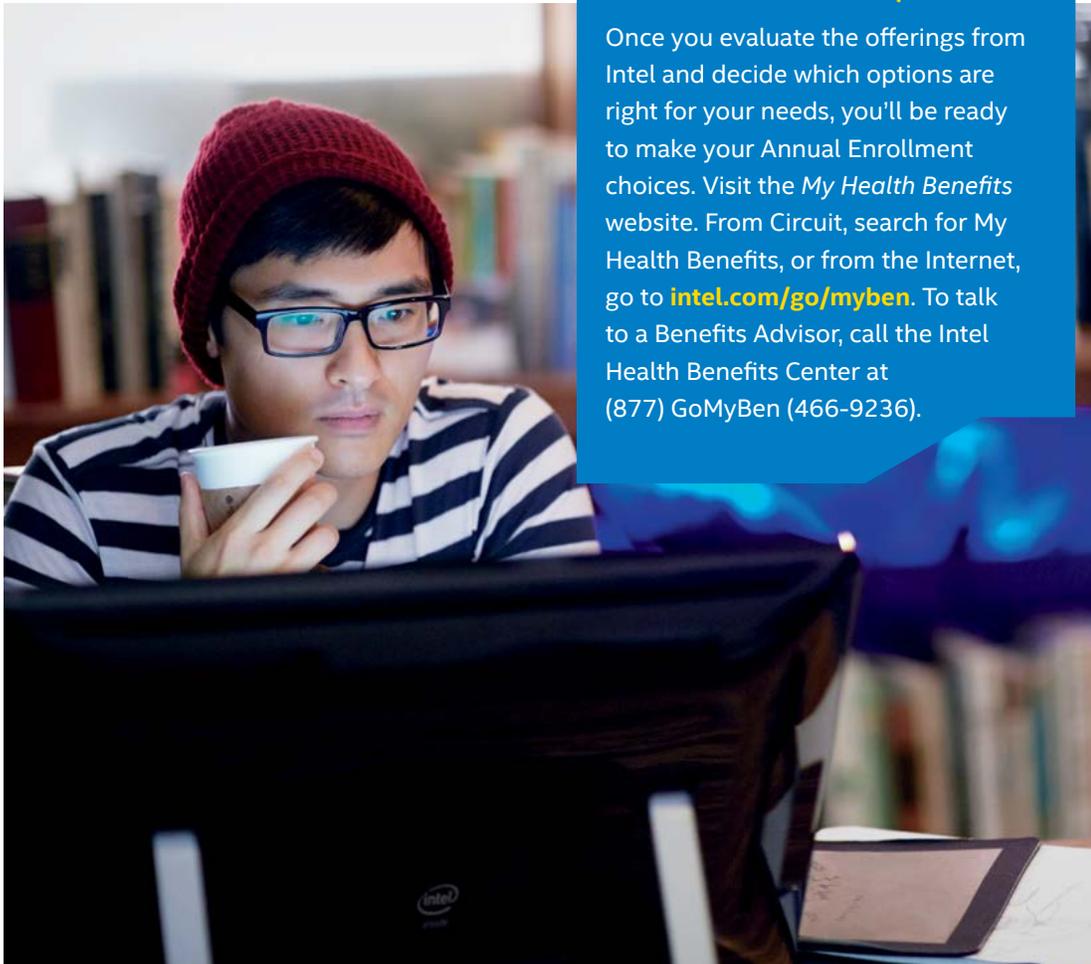
To learn more or enroll in any of **MetLife's voluntary benefits**, visit www.metlife.com/mybenefits, or contact a MetLife representative at (877) 770-4638. MetLife's voluntary benefits include: critical illness insurance, supplemental long-term disability insurance, auto and homeowners insurance, and estate planning for special needs kids.

To learn more or enroll in the **Hyatt Legal plan**, the **Commuter Benefit**, or **Short-Term Disability**, visit the *My Health Benefits* website. From Circuit, search for My Health Benefits, or from the Internet go to intel.com/go/myben.

To talk to a Benefits Advisor, call the Intel Health Benefits Center at (877) GoMyBen (466-9236).

Make Your Elections: Oct. 27 to Nov. 14, 2014

Once you evaluate the offerings from Intel and decide which options are right for your needs, you'll be ready to make your Annual Enrollment choices. Visit the *My Health Benefits* website. From Circuit, search for My Health Benefits, or from the Internet, go to intel.com/go/myben. To talk to a Benefits Advisor, call the Intel Health Benefits Center at (877) GoMyBen (466-9236).



Details and Resources



Health Plan Details

Choose the Plan that Best Fits Your Needs

Each health plan option offers a comparable range of coverage and quality services. The key differences in the plans are when and how you pay. Take some time to understand how they work, and you may find a plan more convenient for your personal money management and or preference.

Understanding Your Costs

Choosing the best plan for you and your family is important. This includes determining when and how you prefer to pay for your coverage and services. Your paycheck deduction is a fixed amount—no matter how much or how little healthcare you use. In addition, there is the amount you pay when you access care. These two costs together determine your total cost for the year. With every plan, depending on the amount of care you need, there is a range of cost you might incur, from the least to the most. The reality is you will likely fall somewhere in between.

Take a Closer Look at the High Deductible Health Plan (HDHP)

When you compare the least or most you'd pay for in-network coverage, you may find that an HDHP plan is the best choice for you. Even if you need a lot of healthcare during the year, the most you'll pay (your paycheck deduction plus the out-of-pocket maximum for the plan) in most cases is lower with an HDHP. On the other hand, if you and your family are healthy, you won't pay anything for in-network preventive care, and there's no paycheck deduction. The table below provides a few cost scenarios you can use to help you evaluate your decision.

Model Your Own Cost Scenario

Go to the *My Health Benefits* website and see for yourself which plan is the most cost effective. Enter your anticipated usage in the Medical Expense Estimator tool and see your total out-of-pocket costs across the different plans.

Plans	You Only		You & One Child		You & Your Spouse		You, Spouse, & Three or More Children	
	The Least You'll Pay	The Most You'll Pay	The Least You'll Pay	The Most You'll Pay	The Least You'll Pay	The Most You'll Pay	The Least You'll Pay	The Most You'll Pay
Anthem Blue Cross HDHP	\$0	\$2,140	\$0	\$4,285	\$0	\$5,100	\$0	\$5,100
Cigna HDHP	\$0	\$2,140	\$0	\$4,285	\$0	\$5,100	\$0	\$5,100
Cigna Primary Care Plus	\$1,308	\$2,808	\$2,496	\$5,496	\$5,004	\$8,004	\$8,532	\$11,532

Note: The least you'll pay is your annual paycheck deduction. The most you'll pay is your annual paycheck deduction plus your out-of-pocket maximum amount. These amounts do not reflect the \$250 Health for Life Wellness discount, and assumes in-network healthcare coverage. See page 7 for your out-of-pocket maximum and page 8 for your paycheck deduction.



Health Plan Comparisons

Intel offers three types of health plans, all of which provide a broad range of quality services to meet your needs. Within the options in each of these categories, there are different providers, provider networks, coverage levels, and cost considerations. The table below summarizes the categories and plans, including the main features of each and the amount you would pay for these services.

	High Deductible Health Plan (HDHP)	Primary Care Plus	Health Maintenance Organization
<p>Provider Choice: Receive the highest level of coverage when using providers who are part of your plan's network</p>	<ul style="list-style-type: none"> • Anthem Blue Cross National Network • Cigna Open Access Plus (OAP) National Network 	<ul style="list-style-type: none"> • Cigna Open Access Plus (OAP) National Network 	<ul style="list-style-type: none"> • AZ: Aetna U.S. Healthcare* • CA: Kaiser Permanente* • MA: Fallon Community* • WA: Group Health Cooperative *Self-Funded HMO
<p>What do I pay when I access care? For each plan, you will be responsible for a deductible, coinsurance and/or copayment.</p> <p>In-network preventive care is covered at 100% under all plans.</p>	<p>First you pay your annual deductible:</p> <ul style="list-style-type: none"> • Employee only: \$1,375 • Employee + child(ren): \$2,755 • Employee + spouse: \$3,445 • Employee + spouse and child(ren): \$3,445 <p>Once you have met your deductible, you pay a coinsurance:</p> <ul style="list-style-type: none"> • In-network: 10% coinsurance • Out-of-network: 30% coinsurance; reimbursement limits apply 	<p>For in-network Primary Care Provider visits and Prescriptions, you pay a copayment when you use these services:</p> <ul style="list-style-type: none"> • \$15 copayment per primary provider visit • Copayment for prescription drugs: \$10 generic, \$20 formulary, or \$35 non-formulary <p>For all other care, (including lab work), you are required to pay an annual deductible:</p> <ul style="list-style-type: none"> • Employee only: \$500 • Family: \$1,000 <p>Once you have met your deductible, you pay a coinsurance for services:</p> <ul style="list-style-type: none"> • In-network: 10% coinsurance • Out-of-network: 30% coinsurance 	<p>For in-network care, you pay a copayment when you access care.</p> <p>In-network:</p> <ul style="list-style-type: none"> • \$15 copayment per primary provider visit • \$35 copayment per specialist visit • \$100 copayment per emergency room visit • \$250 copayment per hospital stay <p>Out-of-network:</p> <ul style="list-style-type: none"> • Not covered except emergencies
<p>You're protected by the out-of-pocket maximum. This is the maximum annual amount you would pay out-of-pocket for in-network care (not including any paycheck deductions)</p>	<ul style="list-style-type: none"> • Employee only: \$2,140 • Employee + child(ren): \$4,285 • Employee + spouse: \$5,100 • Employee + spouse and child(ren): \$5,100 <p>The plan pays 100% for all remaining in-network costs you incur.</p>	<ul style="list-style-type: none"> • Employee only: \$1,500 • Family: \$3,000 <p>The plan pays 100% for all remaining in-network costs you incur.</p>	<ul style="list-style-type: none"> • Employee only: \$1,500 • Family: \$3,000 <p>The plan pays 100% for all remaining in-network costs you incur.</p>
<p>Health accounts you can enroll in to help you pay for your out-of-pocket healthcare expenses with pretax dollars (such as deductibles, coinsurance, and copayments)</p>	<p>Health Savings Account (HSA): Use funds to pay for your eligible out-of-pocket medical, dental, and vision expenses. Unused dollars go with you when you change plans, leave the company, or retire.</p> <p>Annual contribution limits are:</p> <ul style="list-style-type: none"> • Employee only: \$3,350* • Family: \$6,650* • Age 55+ can contribute an additional \$1,000 <p><i>*HSA contributions reflect 2015 IRS limits.</i></p> <p>Limited Use Health FSA: Use funds to pay for your eligible out-of-pocket dental and vision expenses only. Up to \$500 will carry over for use in the following year. Any unused amounts over \$500 will be forfeited.</p> <p>Annual contribution limit is: \$2,500</p>	<p>Health FSA: Use funds to pay for your eligible out-of-pocket medical, dental, or vision expenses. Up to \$500 will carry over for use in the following year. Any unused amounts over \$500 will be forfeited.</p> <p>Annual contribution limit is: \$2,500</p>	<p>Health FSA: Use funds to pay for your eligible out-of-pocket medical, dental, or vision expenses. Up to \$500 will carry over for use in the following year. Any unused amounts over \$500 will be forfeited.</p> <p>Annual contribution limit is: \$2,500</p>



Health Plan Annual Paycheck Deductions

The following table shows how much will be deducted from your paycheck for 2015, depending on the plan and the eligible dependents you cover. These costs represent your annual cost. See below to determine your cost per paycheck.***

Plan	Year	You Only	You & 1 Child	You & 2 Children	You & 3 or More Children	You & Spouse	You, Spouse, & 1 Child	You, Spouse, & 2 Children	You, Spouse, & 3 or More Children
National Plans									
Anthem Blue Cross HDHP with HSA	2015	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	2015 HFL	You will receive a \$250 deposit into your Health Savings Account.**							
	2014	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Cigna HDHP with HSA	2015	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	2015 HFL	You will receive a \$250 deposit into your Health Savings Account.**							
	2014	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Cigna Primary Care Plus	2015	\$1,308	\$2,496	\$3,816	\$4,740	\$5,004	\$6,312	\$7,608	\$8,532
	2015 HFL*	\$1,058	\$2,246	\$3,566	\$4,490	\$4,754	\$6,062	\$7,358	\$8,282
	2014	\$1,284	\$2,448	\$3,744	\$4,644	\$4,908	\$6,192	\$7,464	\$8,364
Regional Plans (HMOs)									
Aetna U.S. Healthcare* (AZ)	2015	\$636	\$1,848	\$2,232	\$2,508	\$3,492	\$4,596	\$4,788	\$4,980
	2015 HFL*	\$386	\$1,598	\$1,982	\$2,258	\$3,242	\$4,346	\$4,538	\$4,730
	2014	\$624	\$1,812	\$2,184	\$2,460	\$3,420	\$4,500	\$4,692	\$4,884
Fallon* (MA)	2015	\$456	\$1,200	\$1,956	\$2,388	\$3,264	\$3,492	\$4,332	\$5,496
	2015 HFL*	\$206	\$950	\$1,706	\$2,138	\$3,014	\$3,242	\$4,082	\$5,246
	2014	\$444	\$1,176	\$1,920	\$2,340	\$3,204	\$3,420	\$4,248	\$5,388
Group Health Cooperative (WA)	2015	\$684	\$1,572	\$2,388	\$3,108	\$3,144	\$3,936	\$4,740	\$5,712
	2015 HFL*	\$434	\$1,322	\$2,138	\$2,858	\$2,894	\$3,686	\$4,490	\$5,462
	2014	\$672	\$1,536	\$2,340	\$3,048	\$3,084	\$3,864	\$4,644	\$5,604
Kaiser* (CA)	2015	\$660	\$2,112	\$2,460	\$3,252	\$3,156	\$3,960	\$4,788	\$5,832
	2015 HFL*	\$410	\$1,862	\$2,210	\$3,002	\$2,906	\$3,710	\$4,538	\$5,582
	2014	\$648	\$2,076	\$2,412	\$3,192	\$3,096	\$3,888	\$4,692	\$5,712
Global Plan (available only to employees on expatriate assignment)									
Aetna International (AI)	2015	\$372	\$1,080	\$1,428	\$1,776	\$1,764	\$2,388	\$2,688	\$2,952
	2015 HFL*	\$122	\$830	\$1,178	\$1,526	\$1,514	\$2,138	\$2,438	\$2,702
	2014	\$360	\$1,056	\$1,404	\$1,740	\$1,728	\$2,340	\$2,640	\$2,892

* 2015 annual paycheck deductions with Health for Life discount.

** If you are enrolled in the High Deductible Health Plan for 2015 and successfully completed all of the requirements of the Health for Life 3-Step Wellness Check during 2014, Intel will deposit \$250 into your Health Savings Account. You must be eligible for a Health Savings Account, and have an open, active account on February 28, 2015 with the Health Savings Plan administrator associated with your health plan (BNY Mellon BenefitWallet for Anthem Blue Cross and JPMorgan Chase for Cigna). The \$250 deposit will be made on or before March 31, 2015.

*** The paycheck deductions shown in the table are for the whole year, but here's how to determine your amount per paycheck: If you are an exempt employee, take the annual rate and divide by 24. If you are a nonexempt employee, take the annual rate and divide by 26.

+ Self-Funded HMO.



Short-Term Disability

Intel's Short-Term Disability (STD) plan is an important part of being prepared for the unpredictable events in life. If the state in which you work mandates participation in a STD plan, you'll want to be sure you carefully weigh your options. STD provides you with a partial wage replacement if you are unable to work due to pregnancy or a non-work related illness or injury. STD payments provide you up to 70% of your eligible earnings (tax-free) for the first 13 weeks. For weeks 14-52 the disability pay provides you payments up to 65% of eligible earnings (tax-free) to a maximum of \$3,000 per week.

Current claim volume in Intel's STD plan is exceeding the expected funding, resulting in the need to increase the annual maximum contribution for 2015. The paycheck deductions

will remain the same at 0.8%, but the annual maximum paycheck deduction will increase up to \$100 depending on your annual salary.

Rates for state-mandated* disability plans along with Intel's California Voluntary Short-Term Disability plan rates, are generally announced in the November or December timeframe and plan participants will be advised of the changes. To view the rate change and paycheck deduction information, see the chart below.

If you are currently enrolled in the Intel STD plan, your enrollment will continue unless you opt out during Annual Enrollment. **If you are not enrolled, Annual Enrollment is your only time to enroll in the plan.**

** Employees who work in CA, HI, NJ, NY, or RI are mandatorily enrolled in Short-Term Disability insurance and cannot opt out of their state plan. Except for employees in CA, if you are enrolled in the Intel STD plan, it is a supplement to your state plan and the maximum benefit amount you will be eligible for will be the higher of the state plan or the Intel STD plan benefits. If you work in CA, you have the option to enroll in the California state plan or the Intel CA-Voluntary Short-term Disability Plan (Intel CA-VSTD). The Intel CA-VSTD Plan offers a more generous benefit than the California state plan.*

Intel STD Plan Rates and Paycheck Deductions

Rate	0.8% to \$600		0.8% to \$700		Cost Per Paycheck*		Increase Per Paycheck*
	2014	2015	2014	2015	2014	2015	
Salary							
\$35,000	\$280	\$280	\$11.67	\$11.67	\$0.00		
\$50,000	\$400	\$400	\$16.67	\$16.67	\$0.00		
\$60,000	\$480	\$480	\$20.00	\$20.00	\$0.00		
Greater than \$87,500	\$600	\$700	\$25.00	\$29.17	\$4.17		

* Cost Per Paycheck is approximate due to variables such as bonuses, overtime, and shift differentials.



Express Scripts 90-Day Prescriptions

In addition to using the Express Scripts home delivery pharmacy, you and your covered dependents can order up to a 90-day supply at Walgreens or Costco without penalty. This new feature makes it easy for you to fill prescriptions for your maintenance medications (drugs you take regularly for ongoing conditions like high blood pressure or high cholesterol).

Note: Express Scripts is only available to those enrolled in a Cigna or Anthem health plan.

Two Ways to Receive Your Maintenance Prescriptions

1: For the best in convenience, take advantage of home delivery from the Express Scripts Pharmacy

Get 90-day supplies of your medications delivered direct to you, safely and securely, with free standard shipping. And, if you ever have questions about your medications or your prescription orders, you'll have 24x7 access to Express Scripts pharmacists and benefit professionals. Visit Express-Scripts.com or call the telephone number on your Express Scripts member ID card to learn how to get started with home delivery. Express Scripts can contact your doctor to have a new 90-day prescription sent right to you.

2: If you prefer, purchase your maintenance prescriptions at a Walgreens or Costco pharmacy

One of their pharmacists can contact your doctor to get a new 90-day prescription, or if you have remaining refills at Express Scripts home delivery, you can call Express Scripts and ask to transfer your maintenance prescriptions from Express Scripts home delivery where allowed by state and federal law. Your copayment for your 90-day supply will be the same whether you fill your prescriptions through Express Scripts home delivery, Walgreens, or Costco.

Frequently Asked Questions

What if I don't have a Costco membership?

You may use the Costco pharmacy to fill your medications, regardless of membership status.

Can I fill my maintenance prescriptions at a pharmacy outside of the maintenance drug program network?

You may only order a 90-day supply of your prescription medication through the Express Scripts Pharmacy, Walgreens, or Costco. If you fill maintenance prescriptions at another retail pharmacy, you will have to pay a higher copayment for each prescription after two refills.

Do I have to fill all of my prescriptions at a Costco or Walgreens pharmacy?

No. This program only affects ongoing prescriptions for maintenance medications. If you require other medications, such as antibiotics, you may fill those prescriptions at any participating retail pharmacy under our prescription plan. That retail pharmacy does not have to be in the maintenance drug program network.

I currently use home delivery to get my maintenance medications and want to continue. Do I need to change anything?

No. If you're already using Express Scripts home delivery pharmacy services to fill your ongoing prescriptions, you don't need to do anything.



Get the Most Through Savings and Spending Accounts

Intel offers a number of ways in which you can use pretax dollars to help you pay for eligible out-of-pocket expenses. Depending on the health plan you are enrolled in, you have the option to choose from a Health Savings Account, a Limited Use Health Flexible Spending Account, or a Health Flexible Spending Account. And, no matter which plan you are on, you can enroll in the Dependent Care Assistance Program to pay for eligible dependent care. You also have the option to enroll in the Commuter Benefit to pay for your eligible commuting expenses. Below is a brief description of each type of account. Health plan related contribution limits can be found on page 7.

Health Savings Account

The Health Savings Account (HSA) is available if you're enrolled in a HDHP.* It's a great way to save for your eligible expenses with pretax money—both for the short term and the long term.

** You cannot have any other medical coverage (including Medicare or Tricare) that is not a High Deductible Health Plan, and you cannot be claimed as a dependent on another person's taxes.*

Note: The HSA is not an Intel-sponsored benefit and is not an ERISA welfare benefit plan.

Limited Use Health Flexible Spending Account

The Limited Use Health Flexible Spending Account (Limited Use Health FSA) is available to those enrolled in a HDHP, and allows you to use pretax payroll dollars to pay for eligible out-of-pocket dental and vision expenses.

Extra Bucks

If you are enrolled in a HDHP, and have an Extra Bucks account, funds may be used to pay for, or get reimbursed for eligible unreimbursed medical expenses incurred by you or your IRS-qualified dependents that are enrolled in your HDHP. Extra Bucks can be used for unreimbursed eligible vision and dental out-of-pocket expenses before your deductible has been met. Alternatively, Extra Bucks can be used to pay for out-of-pocket or unreimbursed eligible vision, dental, and medical expenses after your deductible has been met. If you do not re-enroll in a HDHP, your Extra Bucks balance will be forfeited.

Note: In the event that you have an Extra Bucks Account **and** a Limited Use Health Flexible Spending Account (FSA) for dental or vision expenses only, you may seek reimbursement from the Extra Bucks Account only after there are no remaining amounts available in your Limited Use Health FSA.

Health Flexible Spending Account

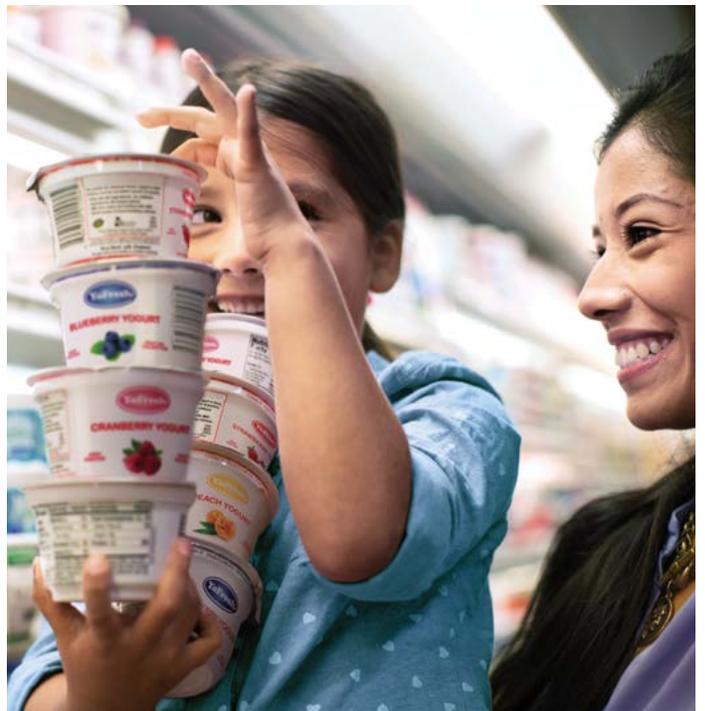
The Health Flexible Spending Account (Health FSA) is available if you are enrolled in an HMO or the Primary Care Plus Plan. A Health FSA can provide you the opportunity to pay for eligible out-of-pocket medical, dental, and vision expenses with pretax dollars.

Dependent Care Assistance Program

The Dependent Care Assistance Program (DCAP) is available to you regardless of enrollment in a health plan. DCAP allows you to elect an annual amount up to \$5,000 per family per year through pretax payroll deductions to pay for eligible dependent care expenses (like day-care) that enable you and your spouse to work, look for work, or attend school full time.

Commuter Benefit

The Commuter Benefit allows you to pay for your eligible commuting expenses using pretax dollars, which you can set aside through paycheck deductions. You can withhold up to \$130 per month for mass transit and vanpools, and up to \$250 per month for parking. This is a month-to-month benefit; you can enroll or change your monthly contribution by the tenth day of each month. For more information, from Circuit, search for Commuter Benefit.



Dental Coverage and Paycheck Deductions

The table below shows your annual paycheck deduction for 2015. Your 2015 dental paycheck deduction will be the same as 2014. The coverage levels also remain unchanged from 2014. See below to determine your cost per paycheck.*

Plan	You Only	You & 1 Child	You & 2 Children	You & 3 or More Children	You & Spouse	You, Spouse, & 1 Child	You, Spouse, & 2 Children	You, Spouse, & 3 or More Children
Delta Dental (Intel Dental Plan)	\$0	\$120	\$216	\$336	\$240	\$336	\$444	\$588
Assurant (AZ)	\$0	\$48	\$96	\$132	\$72	\$120	\$168	\$204
DeltaCare DHMO (CA)	\$0	\$48	\$108	\$132	\$72	\$132	\$180	\$204

* The paycheck deductions shown in the table are for the whole year, but here's how to determine your amount per paycheck: If you are an exempt employee, take the annual rate and divide by 24. If you are a nonexempt employee, take the annual rate and divide by 26.



Vision Coverage and Paycheck Deductions

Vision coverage, provided by VSP, allows you the choice between the VSP Basic Vision Plan and the VSP Vision Plus Plan.

VSP's Broad Choice Network makes it easier for you to choose a provider and eyewear that's right for you and your budget, and their network of providers includes all types of provider locations including local VSP doctors, and retail affiliate providers such as Costco. You have access to over 21,000

VSP doctors nationally. While the VSP network does not include national optical retail chains such as LensCrafters and Sears, they do work directly with private-practice providers to deliver high-quality care for lower cost. To locate a VSP doctor prior to enrollment go to www.vsp.com and log in to the Intel network portal using your WWID as the member ID to register. A summary of the coverage levels and the rates are on the next page.

Vision Plan Annual Paycheck Deductions

See below to determine your cost per paycheck.*

Plan	You Only	You & 1 Child	You & 2 Children	You & 3 or More Children	You & Spouse	You, Spouse, & 1 Child	You, Spouse, & 2 Children	You, Spouse, & 3 or More Children
VSP Basic Vision	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
VSP Vision Plus	\$84	\$102	\$114	\$138	\$156	\$180	\$192	\$216

* The paycheck deductions shown in the table are for the whole year, but here's how to determine your amount per paycheck: If you are an exempt employee, take the annual rate and divide by 24. If you are a nonexempt employee, take the annual rate and divide by 26.



VSP Basic Vision Plan VSP Provider Network: VSP Choice

Benefit	Description	Copay
Your Coverage with a VSP Provider		
WellVision Exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Every calendar year 	\$0
Retinal Screening	<ul style="list-style-type: none"> Takes a picture of the back of your eyes and helps your VSP doctor find possible signs of eye disease Every calendar year 	\$25
Prescription Glasses		
Frame	<ul style="list-style-type: none"> \$130 allowance for a wide selection of frames \$150 allowance on featured frame brands¹ \$70 allowance at Costco 20% savings on the amount over your allowance Every other calendar year 	\$25
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children Every calendar year 	\$25
Lens Enhancements	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 20% – 25% on other lens enhancements 	\$55 \$95 - \$105 \$150 - \$175
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$130 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year 	Up to \$55
Primary Eye Care	<ul style="list-style-type: none"> Treatment and diagnosis of eye conditions like pink eye, vision loss and monitoring of cataracts, glaucoma, and diabetic retinopathy. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details. As needed 	\$15
Exclusive Member Extras	Glasses and Sunglasses <ul style="list-style-type: none"> Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of your last WellVision Exam. 	
	Laser Vision Correction <ul style="list-style-type: none"> Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities 	

Your Coverage with Out-of-Network Providers

Exam: up to \$40
 Lined Trifocal Lenses: up to \$70
 Frame: up to \$70
 Progressive Lenses: up to \$50

Single Vision Lenses: up to \$30
 Lined Bifocal Lenses: up to \$50
 Contacts: up to \$130

1. Brands/Promotion subject to change.

VSP Vision Plus Plan VSP Provider Network: VSP Choice

Benefit	Description	Copay
Your Coverage with a VSP Provider		
WellVision Exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Every calendar year 	\$0
Retinal Screening	<ul style="list-style-type: none"> Takes a picture of the back of your eyes and helps your VSP doctor find possible signs of eye disease Every calendar year 	\$25
Prescription Glasses		
Frame	<ul style="list-style-type: none"> \$200 allowance for a wide selection of frames \$220 allowance on featured frame brands¹ \$110 allowance at Costco 20% savings on the amount over your allowance Every calendar year 	\$10
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children Every calendar year 	\$10
Lens Enhancements	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 20% – 25% on other lens enhancements 	\$55 \$95 - \$105 \$150 - \$175
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$200 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year 	Up to \$55
Primary Eye Care	<ul style="list-style-type: none"> Treatment and diagnosis of eye conditions like pink eye, vision loss and monitoring of cataracts, glaucoma, and diabetic retinopathy. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details. As needed 	\$15
Exclusive Member Extras	Glasses and Sunglasses <ul style="list-style-type: none"> Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of your last WellVision Exam. 	
	Laser Vision Correction <ul style="list-style-type: none"> Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities 	

Your Coverage with Out-of-Network Providers

Exam: up to \$40
 Lined Trifocal Lenses: up to \$70
 Frame: up to \$110
 Progressive Lenses: up to \$50

Single Vision Lenses: up to \$30
 Lined Bifocal Lenses: up to \$50
 Contacts: up to \$200



Your Path to Wellness

Health for Life Centers

The Health for Life Centers in Arizona,* New Mexico, and Oregon provide you and your family a personalized experience for your healthcare needs.

**The Health for Life Centers in Arizona are only available to employees.*

Your Privacy

Intel understands the importance of your privacy and is committed to making sure your personal information remains private and completely confidential. You will interact with and share personal information directly with Take Care Health Systems representatives. Intel will receive information pertaining to employee health that is aggregated and de-identified for use in the design of health and wellness programs.

Intel will receive your name in order to administer the incentives of the Health for Life Wellness program.

Our goal is to have the healthiest workplace on the planet, which means you being the healthiest version of yourself. We continue looking for ways to make it easier for you to reach your full health potential. Our programs and services are designed to help you get and stay in good health so you can live a vibrant life. Get started on your journey to health and wellness now...it's never too late.

Don't Forget your Health for Life Wellness Check

Be sure to complete your Wellness Check by October 31, 2014. All it takes is three simple steps. If your BMI is 30 or greater, or if you are a tobacco user, you are required to meet one on one with a wellness coach by November 7, 2014 in order to receive your \$250 health plan premium incentive. You will receive the **\$250 Health for Life discount** off your 2015 employee contributions or contribution into your HSA if you meet the 2014 program requirements.

The Health for Life Wellness Check is available to you and your family members, here's how you can get started:

Employees: Schedule your appointment by visiting <http://goto/WellnessCheck> when connected to the Intel network, or search "Wellness Check" on Circuit. Your 15-minute appointment will be scheduled at an onsite Health for Life Center, and you can get your results while you wait.

Family members and remote employees: Schedule your appointment by visiting <https://my.blueprintforwellness.com>. Both employees and family members will need to use the Registration Key: intel. Family members will need to enter a unique ID, which includes the employee's worldwide ID plus the family member's date of birth (a 16-digit number). Once logged in, locate the nearest Quest Diagnostic Lab and schedule an appointment.

The 2015 Health for Life Wellness Check program and related incentives (which will take effect in 2016) are currently under evaluation; any changes will be communicated to employees in 2015.

For questions or more information, send an email to intel.healthcoach@takecarehealth.com.

The graphic features the Intel logo and the text "Health for Life" with a sun icon. Below this, it says "Choose Your Path To Health and Wellness – Mind, Body, and Spirit." The central part is a circular diagram with a green center containing the text "Let's get Started!" and a blue stick figure icon. Surrounding this center are various wellness programs: Stress Management, Health Benefits, Weight Management, Emotional & Mental Health, Healthy Cafe Choices, Free Fruit, Physical Therapy, Fitness Centers, Health Centers, Fitness Challenges, Health Seminars, On-site Mammograms, Wellness Checks, Flu Shots & Immunizations, and Tobacco-free Resources.

Intel is there with you, supporting your journey on the way to good health with a variety of Health for Life programs.
For more information: from Circuit simply type <http://goto/healthforlife>.

Many Ways to Get the Help You Need

Get personalized help with your 2015 decisions. You have access to the information, tools, and resources you need, delivered in the way you want—take advantage of the options available to you.

By Phone

The Intel Health Benefits Center at (877) GoMyBen (466-9236) will be available during Annual Enrollment, Monday through Friday, 6 a.m. to 6 p.m. (Pacific).

Virtual Roadshow

You and your spouse can access the Virtual Roadshow 24x7 at www.intel.com/annualenrollment. Here you will have the opportunity to access resources available for Annual Enrollment. You can view On Demand webinars and videos, learn more about the benefit plans and providers by visiting their booths, and download key information you wish to keep.

In Person Roadshows

You can connect with Human Resource Representatives and benefit plan suppliers to get the information you need. Bring your spouse with you. To view the schedule in your local area, from Circuit, search for Annual Enrollment.

Online

Access the *My Health Benefits* website from Circuit by searching for My Health Benefits; or access it via the Internet at intel.com/go/myben, which will allow you and your family to view your health benefits from the convenience of your home. When accessing the site from the Internet, you will need to log in with your user ID and password. First-time users will need to create a user ID and password to log in. Once you log in you can ask questions via web chat during Intel Health Benefit Center available hours.

Ask Ivy, our Virtual HR Agent is Available 24x7



Ivy provides personalized answers to many common questions related to Annual Enrollment. To Ask Ivy an Annual Enrollment or other HR related question, select Get HR Help from the Circuit homepage.

Benefits Advisors

Benefits Advisors are experts who understand your options and can provide help evaluating your personal needs. To talk to a Benefits Advisor, call the Intel Health Benefits Center at (877) GoMyBen (466-9236). Once you reach a representative, ask to speak with an advisor. Advisors will be available by phone, Oct. 27 to Nov. 14 2014, Monday through Friday, 7 a.m. to 4 p.m. (Pacific).

Important note: When calling the Health Benefits Center, you will be prompted to enter your password. This is the same password you use to access the My Health Benefits website from the Internet. If you have forgotten your password or haven't created one yet, just say "representative," and your call will be routed to a representative who will help you.

Model Your Decisions

You can model your own cost scenarios to help you make the best decision for you and your family. Simply go to the *My Health Benefits* website and see for yourself which plan is the most cost effective. Enter your anticipated usage in the Medical Expense Estimator tool and see your out-of-pocket costs across the different plans.

Shop for Healthcare Costs:

If you are enrolled in a HDHP, you can estimate your costs before you receive care.

Plan ahead: compare the cost of services and procedures provided at different facilities and you might be able to save a significant amount of money.

To go shopping, look for the pricing transparency tools available via your health plan administrator's (Anthem and Cigna) website.

Affordable Care Act Update

The healthcare reform requires employers to report to the IRS certain health insurance coverage information beginning in 2015. The information required by the IRS includes the tax identification number (TIN), such as a social security number. Please take a moment to update your TIN information for you and your covered dependents via the *My Health Benefits* website at intel.com/go/myben or by calling the Intel Health Benefit Center at (877) GoMyBen (466-9236).

This 2015 Annual Enrollment Guide is intended to be a Summary of Material Modifications to your benefit plans. The information provided here is a summary of your benefits and is not intended to take the place of or change official plan documents in any way. In the event of any discrepancy between the information in this guide and the 2015 Pay, Stock and Benefits Handbook, the 2015 Pay, Stock and Benefits Handbook will prevail. For a copy of the most recent Pay, Stock and Benefits Handbook, from Circuit search Pay, Stock and Benefits Handbook. Pay, Stock and Benefits Handbook will be available with 2015 updates in January, 2015. Intel reserves the right to modify, change, or discontinue any benefit provided under Pay, Stock and Benefits Handbook, at its sole discretion.

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