

NXP Benefit Plans Legally Required Notices

NXP is required by the Employee Retirement Income Security Act of 1974 (ERISA) and the federal Patient Protection and Affordable Care Act (ACA) to provide you with certain information and notices regarding your benefit plans. The documents described below provide you with the required information and notices, these documents are posted at www.nxp.com/benefits for your convenience.

- The **NXP Benefits Summary Plan Description (SPD)** provides a summary of the NXP benefit plans, including who is eligible, how they operate, how to file a claim and other details. The 2025 Benefits Summary Plan Document will be available in early 2025.
- The **Summary Annual Reports (SARs)** offer basic information about the Plans' financial statements, including the total expenses and benefits paid to Plan participants.
- The Health Plan Notice of Privacy Practices (HIPAA) describes legal duties and privacy practices related to how medical information about you may be used and disclosed and how you can get access to this information
- The **Children's Health Insurance Program Reauthorization Act (CHIPRA)** Notice provides insurance coverage in states that administer it to uninsured children up to ag 19 in families with incomes too high to qualify them for Medicaid.
- The NXP's Employee Wellness Program Notice describes regulations under the Americans with Disabilities Act (ADA) informing you what information will be collected as part of NXP's voluntary wellness program, how it will be used, who will receive it, and what will be done to keep it confidential.
- The Summary of Benefits and Coverage (SBC) is a uniform glossary of health insurance and medical terms that group health plans and insurers must issue to participants and beneficiaries. There is an SBC for each of NXP's medical plan options.
 - Medical Plan 1 SBC
 - Medical Plan 2 SBC
 - Medical Plan 3 SBC
 - Out of Area Plan SBC
 - Kaiser HMO SBC (SCAL)
 - Kaiser HMO SBC (NCAL)
- Under the Affordable Care Act (ACA), health insurance coverage is offered to each individual through a Health Insurance Marketplace. The exchange is an option for someone who does not have employer provided health. For more information on marketplace coverage options visit www.healthcare.gov or contact the Help Center at (800) 318-2596. TTY users should call (855) 889-4325.
- The 2025 Benefit Guide summary describes the changes that will take effect January 1, 2025.

You may request a printed version of the documents listed above at no cost by requesting via email at usbenefits.office@nxp.com.