

ADMINISTRATIVE INFORMATION

Plan Names	The official Plan Names of the Reimbursement Accounts are: <ul style="list-style-type: none"> • The Avaya Inc. Health Care Reimbursement Account Plan • The Avaya Inc. Child/Elder Care Reimbursement Account Plan which are part of The Avaya Inc. Health & Welfare Benefits Plan for Salaried Employees.
Plan Sponsor	The Plan Sponsor is Avaya Inc.
Plan Administrator	The Plan Administrator is: Avaya Inc. Reimbursement Account Plans Administrator 211 Mount Airy Road Basking Ridge, NJ 07920 E-mail: hwplanadmin@avaya.com
Type of Administration	The Plan is administered on behalf of Avaya Inc. by SHPS.
Claims Administrator	Claims under the Reimbursement Account Plans are administered on behalf of Avaya Inc. by the Claims Administrator: Avaya Health and Benefits Decision Center P.O. Box 34740 Louisville, KY 40232 <i>Telephone Number:</i> 1-800-526-8056 (on business days from 8:00 a.m. to 8:00 p.m. Eastern time); TDD: 1-800-952-0450.
Agent for Service of Legal Process	Legal actions regarding a claim for benefits should be sent to the Claims Administrator. All other legal actions should be sent to the Plan Administrator.
Plan Records and Plan Year	The Plans and all their records are maintained on a calendar year basis, beginning on January 1st and ending on December 31st of each year.
Type of Plans	<ul style="list-style-type: none"> • The HCRA is considered a “health & welfare” plan under the Employee Retirement Income Security Act of 1974, as amended (ERISA). • The CECRA is <i>not</i> a “health & welfare” plan under ERISA.
Plan Number	The Plan Number is 550.
Employer Identification Number	The Employer Identification Number is 22-3713430.