

HIGHLIGHTS

Here is a summary of some features of the Dental Plan.

Plan Feature	Summary
Eligibility	You are eligible to participate in the Dental Plan if you are an eligible retiree and you elect coverage under The Avaya Inc. Retiree Medical Expense Plan for Salaried Employees (Medical Plan). You may also enroll your eligible dependents .
Enrollment	<p>When you retire, enrollment materials and information about your coverage options will be sent to you at your home address.</p> <p>You must enroll by the date specified in your enrollment package. If you do not enroll by the specified enrollment deadline, you will be defaulted to deferred coverage. You may enroll for coverage at a later date, but you will not have coverage retroactively.</p>
Coverage Amounts	<p>The Dental Plan is a Preferred Provider Organization (PPO), which offers dental services through a network of participating dentists and specialists. Dental PPO providers charge negotiated fees for services that will generally be less than those charged by non-participating providers.</p> <p>If you use a PPO dentist, the provider's charge is guaranteed to be within the reasonable and customary charges, so you are protected from paying charges above the allowable amount.</p>
Information About the Dental Plan	Use this document as a reference and call the Claims Administrator (see "Important Contacts") for specific benefit coverage information. For questions about eligibility, your benefit options or to enroll, call the Avaya Health and Benefits Decision Center (see "Important Contacts").
Cost	The cost of coverage varies by your medical option, level of coverage, years of service at retirement, age at retirement, hire date and retirement date.