

# medical

## your chevron choices

If you're eligible for health benefits, you must enroll **October 17** through **October 28, 2022**, if you want Chevron medical coverage. Elections you make during your enrollment period take effect on January 1, 2023. Chevron provides you with up to four medical plan options:

- **Chevron Medical PPO Plan**
- **Chevron High Deductible Health Plan (HDHP)**
- **Chevron High Deductible Health Plan Basic (HDHP Basic)**
- **Chevron Medical HMO - HMO Blue Texas** (May be available, depending on your zip code.)

All plans include access to **medical services**, **prescription drugs**, and **basic vision care**. They also all offer comprehensive coverage for the same **major medical services** you'd expect, including office visits, emergency services, hospital care, lab services, outpatient care, pregnancy and newborn care and rehabilitative services.

## medical services

When you enroll in a **Medical HMO Plan**, coverage for medical services is provided through the plan you choose. When you enroll in the **Medical PPO**, the **HDHP**, or the **HDHP Basic**, coverage for medical services is provided by Anthem Blue Cross (Anthem).

## prescription drugs

When you enroll in a Medical HMO Plan, prescription drug coverage is provided through the plan you choose. When you enroll in the **Medical PPO**, the **HDHP**, or the **HDHP Basic**, you're also automatically enrolled in the **Prescription Drug Program** with **Express Scripts** at no additional monthly cost. The Chevron Prescription Drug Program includes cost management programs and rules to help control pharmacy costs. This includes the use of generic drugs, home delivery pharmacy for maintenance medications, step therapy programs, prior authorization requirements, and a Specialty Pharmacy service for certain specialty drugs. The Prescription Drug Program also features a list of preferred brand-name drugs in a formulary designed to help keep costs down. If you're enrolled in the Prescription Drug Program, Express Scripts will notify you if any of these programs apply to your medications. Starting today you can access [hr2.chevron.com/PRSI](https://hr2.chevron.com/PRSI) for phone numbers and links to the formulary and the Express Scripts online tool to research your current medications under Chevron's Medical PPO, HDHP, and HDHP Basic plans.

## basic vision

When you enroll in a **Medical HMO Plan**, basic vision coverage is provided through the plan you choose. When you enroll in the **Medical PPO**, the **HDHP**, or the **HDHP Basic**, you're also automatically enrolled in the **Chevron Vision Program** with **VSP** at no additional monthly cost. See page 12 for additional information about your vision coverage.

## how all the chevron medical plans are the same

Chevron's medical plan choices all share some basic features:

- **Who is covered and who you can cover** — the eligibility rules — are the same. Dependent verification is required when you enroll a dependent in your medical coverage. (See page 8.)
- Chevron currently **shares the monthly cost of coverage** — the premium — with you.
- All plans include access to 100 percent coverage with no deductible for certain **preventive care services**, as specified by the Affordable Care Act, when you see a **network** provider.
- All Chevron plans are structured into three cost sharing phases: **deductible**, **shared**, and **covered**. At the beginning of the plan year, you are responsible for paying most out-of-pocket costs until you satisfy the **deductible**. In the **shared phase**, you and your Chevron plan share the cost of services you receive through copayments and/or coinsurance (depending on your plan). You enter the **covered phase** when you reach the out-of-pocket-maximum. This means your Chevron medical plan pays 100% of covered services for the remainder of the plan year.
- If you enroll in any of Chevron's medical plans, you and your enrolled dependents will also automatically have access to a **second opinion service** through the Chevron Health Decision Support Program with 2nd.MD. (See page 18 for more.)
- All plans offer access to *one* of two tax-advantaged **health accounts** — either the Health Care Spending Account (HCSA) or a health savings account (HSA) — to help you save and pay for certain out-of-pocket health care costs. (See page 14 for more.)

### network vs. out-of-network

A network is a group of independent health care providers — physicians, hospitals and other facilities — that have agreed with your health plan to charge contracted rates for services provided to plan members. If your plan allows the choice to use a network or an out-of-network provider, try to use the network when possible. Why? Network providers typically save you money by reducing your out-of-pocket costs. **In addition, some of Chevron's medical plans also have a different deductible, coinsurance/copayment, and out-of-pocket maximum amount depending on if you see a network or an out-of-network provider.**



### snapshot comparison of your chevron medical choices

See the **Snapshot: Medical Plan Comparison** for a closer look at how Chevron's medical choices compare, including monthly premium, deductibles, and other key plan features. A copy was provided to you with this guide and it's also posted on [hr2.chevron.com/PRSI](http://hr2.chevron.com/PRSI).



### benefit summaries, tip sheets, phone numbers, and more

Research plan features and coverage, coinsurance and copayment amounts, network providers, get tip sheets for additional instructions on assorted topics, get phone numbers, and more on [hr2.chevron.com/PRSI](http://hr2.chevron.com/PRSI).

The information in this newsletter applies to Pasadena Refinery represented employees who are eligible for Chevron U.S. benefits. This communication provides only certain highlights about changes of benefit provisions. It is not intended to be a complete explanation. If there are any discrepancies between this communication and the legal plan documents, the legal plan documents will prevail to the extent permitted by law. Oral statements about plan benefits are not binding on Chevron or the applicable plan. There are no vested rights with respect to Chevron health and welfare plans or any company contributions toward the cost of such health and welfare plans. Rather, Chevron Corporation reserves all rights, for any reason and at any time, to amend, change or terminate these plans or to change or eliminate the company contribution toward the cost of such plans. Such amendments, changes, terminations or eliminations may be applicable without regard to whether someone previously terminated employment with Chevron or previously was subject to a grandfathering provision. Some benefit plans and policies described in this document may be subject to collective bargaining.