

# medical

## your chevron choices

If you're eligible for health benefits, you must enroll **December 12** through **December 30, 2022**, if you want Chevron health 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)**
- **Medical HMO Plan** options (if any) vary based on your zip code.
  - Chevron Medical HMO - HMO Blue Texas
  - Chevron Medical HMO - Kaiser Northwest
  - Chevron Medical HMO - Kaiser WA

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. As with your current REG Express Scripts prescription drug coverage, 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/REG](https://hr2.chevron.com/REG) 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 15 for additional information about your vision coverage.



### plan for continuation of care, if you know you'll need it

**Continuation of care** allows you to continue to receive health care for certain conditions from providers who *do not* participate in your new plan's network. You might need continuation of care if you are already in active treatment for certain ongoing conditions on **January 1, 2023**. Continuation of care may be available for specific situations: if you're in an active course of treatment for an acute medical condition, you have a serious chronic condition, you're pregnant, you have a terminal illness, you have an imminent surgery or other procedure. Get instructions on [hr2.chevron.com/REG](https://hr2.chevron.com/REG).

# 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. In addition, dependent verification is required when you enroll a dependent in your medical coverage. (See page 8 for more.)
- 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 costs out-of-pocket 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 27 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 22 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, just like your REG coverage, 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 page 19 for a closer look at how Chevron's medical choices compare, including monthly premium, deductibles, and other key plan features.



## benefit summaries, tipsheets, phone numbers, and more

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

## **REG** what happens to your REG coverage

- If enrolled, your REG medical, which includes prescription drug and mental health and substance abuse coverage, automatically ends on **December 31, 2022**.
- Final payroll contributions, as applicable, will be taken from your REG paycheck on **December 16, 2022**. Premiums for your Chevron coverage will begin on subsequent Chevron paychecks after you enroll.
- If you enroll, your Chevron medical plan's deductible and out-of-pocket maximums will apply effective January 1, 2023. While the Chevron and REG PPO and high deductible health plan deductible structures have *many* similarities, there are some differences, including the amounts. See the comparison on page 19 for more Chevron medical deductible information.



### medical coverage transition checklist

- If you want to participate in Chevron coverage effective January 1, 2023, you *must* enroll December 12 through **December 30, 2022**. *Coverage is not automatic*. Enroll by **December 20** to guarantee that the plans you choose will have your coverage activated on January 1, 2023, and that your ID cards will arrive timely.
- If you enroll dependent(s) in Chevron health coverage, you will be required to complete the **dependent verification process** within **60 days** of enrolling. Gather your verification documents in advance to prepare. See page 8 for more.
- Outstanding claims for reimbursement of eligible services that occurred on or before **December 31, 2022**, should be filed directly with Wellmark Blue Cross and Blue Shield according to your REG plan's established procedures and deadlines. **You're encouraged to file all outstanding claims as soon as possible**.
- You may need to act in advance to research and transfer your **prescriptions**, depending on several factors. If you use mail order, you'll also need to take action. Access the tipsheet for instructions from [hr2.chevron.com/REG](https://hr2.chevron.com/REG).
- Continuation of care** allows you to continue to receive medical care for certain conditions – such as pregnancy, surgery or a course of treatment for an acute, serious chronic, or terminal condition – from providers who *do not* participate in your new plan's network. If you need to arrange for continuation of care, you'll need to apply for it starting **January 1, 2023**. Please note that continuation of care is *not* available if you enroll in a Chevron Medical HMO Plan. Access the tipsheet for instructions from [hr2.chevron.com/REG](https://hr2.chevron.com/REG).
- If you have access to and choose to enroll in a **Chevron Medical HMO**, you'll have a new claims administrator for your medical, prescription drug and vision coverage so you should be sure to research the provider network in advance. If you choose to enroll in the **Chevron Medical PPO, HDHP or HDHP Basic**, you'll continue coverage with the Express Scripts and VSP networks. In addition, the Anthem and Wellmark networks are similar. You should still take the time to research the provider network under Chevron's plans to ensure your provider is in the network. **Go to [hr2.chevron.com/REG](https://hr2.chevron.com/REG) for web links, phone numbers and instructions to search the networks.**
- Your current REG medical plan includes coverage for **behavioral health** – which includes mental health and substance use disorder coverage. Behavioral health coverage is provided in a different way at Chevron. See page 17 to learn more.

# snapshot: medical plan comparison

The information in this snapshot comparison on the next pages provides you with a basic comparison of the key similarities and differences to help you get to know Chevron's medical plans. This guide doesn't cover detailed plan rules, requirements, and eligibility. Go to [hr2.chevron.com/REG](https://hr2.chevron.com/REG) to access additional information, documents, and plan contact information to ask the plans questions directly.



# how the chevron medical plans compare

## effective January 1 through December 31, 2023

	medical PPO plan		high deductible health plan (HDHP)		high deductible health plan basic (HDHP basic)	
<b>the basics</b>	<b>Applies to Medical PPO, HDHP, HDHP Basic:</b>		<ul style="list-style-type: none"> <li>These are preferred provider organization (PPO) plans. Choose network or out-of-network providers for care.</li> <li>Preventive care provisions included.</li> </ul>		<ul style="list-style-type: none"> <li>Second opinion requirement applies for knee, hip, back, spine surgery.</li> <li>Access to virtual visits, WIN Fertility service and Omada diabetes prevention service.</li> </ul>	
<b>behavioral health services</b>	Automatically enrolled in Chevron Mental Health and Substance Use Disorder Plan (MHSUD)					
<b>employee monthly premium</b>	<b>no wellness credit</b>	<b>wellness credit</b>	<b>no wellness credit</b>	<b>wellness credit</b>	<b>no wellness credit</b>	<b>wellness credit</b>
you only	\$146	Earn points in 2023 for 2024 premium reduction.	\$30	Earn points in 2023 for 2024 premium reduction.	\$10	Earn points in 2023 for 2024 premium reduction.
you + one adult	\$292		\$59		\$21	
you + child(ren)	\$248		\$49		\$17	
you + family	\$394		\$78		\$28	
<b>deductible**</b>	<b>separate deductibles for ...</b>		<b>medical, prescription drugs, MHSUD, combined*</b>		<b>medical, prescription drugs, MHSUD, combined*</b>	
	<b>covered medical services*</b>					
	<b>Network</b>	<b>Out-of-network</b>	<b>Network</b>	<b>Out-of-network</b>	<b>Network</b>	<b>Out-of-network</b>
you only	\$1,000	\$2,000	\$3,000	\$6,000	\$5,000	\$10,000
you + one adult	\$2,000	\$4,000	\$6,000	\$12,000	\$10,000	\$20,000
you + child(ren)	\$2,000	\$4,000	\$6,000	\$12,000	\$10,000	\$20,000
you + family	\$3,000	\$6,000	\$6,000	\$12,000	\$10,000	\$20,000
	<b>covered prescription drugs</b>		Mail-order prescriptions are subject to the combined annual deductible.		Mail-order prescriptions are subject to the combined annual deductible.	
you only	\$150		Certain preventive medications covered at 100 percent, even if you haven't yet satisfied your combined annual deductible. Applies to covered prescriptions filled at a pharmacy or through the mail-order service.		Certain preventive medications covered at 100 percent, even if you haven't yet satisfied your combined annual deductible. Applies to covered prescriptions filled at a pharmacy or through the mail-order service.	
you + family	\$300					
	<b>covered behavioral health services</b>					
	No deductible under the MHSUD					
<b>out-of-pocket maximum**</b>	<b>separate out-of-pocket maximums for ...</b>		<b>medical, prescription drugs, MHSUD, combined*</b>		<b>medical, prescription drugs, MHSUD, combined*</b>	
	<b>medical and MHSUD, combined*</b>					
	<b>Network</b>	<b>Out-of-network</b>	<b>Network</b>	<b>Out-of-network</b>	<b>Network</b>	<b>Out-of-network</b>
you only	\$5,000	\$10,000	\$5,000	\$10,000	\$6,550	\$13,100
you + one adult	\$10,000	\$20,000	\$10,000	\$20,000	\$13,100	\$26,200
you + child(ren)	\$10,000	\$20,000	\$10,000	\$20,000	\$13,100	\$26,200
you + family	\$10,000	\$20,000	\$10,000	\$20,000	\$13,100	\$26,200
	<b>covered prescription drugs</b>					
you only	\$1,800		One maximum for network, out-of-network.			
you + family	\$3,600					
<b>save for health care?</b>	<b>Flexible spending account</b> Health Care Spending Account (HCSA) Chevron does not contribute		<b>BenefitWallet Health Savings Account (HSA)</b> with payroll deductions. Chevron also contributes if you meet eligibility requirements.			

Legacy REG U.S.-payroll employees

medical HMO plan
<ul style="list-style-type: none"> <li>Medical, prescription drug, basic vision coverage provided by HMO</li> <li>Health maintenance organization (HMO) plans</li> <li>Must use network provider</li> <li>Preventive care provisions included</li> <li>Plan choices vary by zip code</li> </ul>
<b>behavioral health services</b>
Available through HMO or the Chevron Mental Health and Substance Use Disorder Plan (MHSUD), but not both for same service. Out-of-network provider not covered whether through MHSUD or HMO Plan.
<b>employee monthly premium</b>
Your cost varies by plan choice. Go to <a href="https://hr2.chevron.com/REG">hr2.chevron.com/REG</a> to review the 2023 monthly rates (without Wellness Credit).
<b>deductible</b>
The average annual deductible for most Medical HMO Plans in 2023 will remain \$300. Some Medical HMO Plans may have a different deductible, and a few will continue to have no deductible at all. There is no deductible when you use covered services under the Mental Health and Substance Use Disorder (MHSUD) Plan. Review the 2023 Summary of Benefits and Coverage (SBC) on <a href="https://hr2.chevron.com/REG">hr2.chevron.com/REG</a> to see the deductible amount for any Medical HMO Plans available to you.
<b>out-of-pocket maximum</b>
Out-of-pocket maximum varies by plan choice. Go to <a href="https://hr2.chevron.com/REG">hr2.chevron.com/REG</a> to review the 2023 Summary of Benefits and Coverage (SBC) for each plan.
<b>save for health care?</b>
<b>Flexible spending account</b> Health Care Spending Account (HCSA). Chevron does not contribute.

\*Amounts paid for covered services provided by a network provider also count toward the out-of-network annual limit. Amounts paid for covered services provided by an out-of-network provider also count toward the network annual limit.  
 \*\*For family coverage levels, each covered person has a maximum limit equal to the You Only network amount. No one family member can contribute more than the You Only amount toward the full family amount. To learn more about how this works, see an example on [hr2.chevron.com/REG](https://hr2.chevron.com/REG).

Chevron Health, Protection, Work and Life Benefit Guide

# how the transition works

If you're a legacy REG U.S.-payroll employee eligible to participate in health and protection benefits, you'll have the opportunity to enroll in Chevron U.S.-payroll benefits starting **December 12, 2022**. Here's an overview of how this transition works. Additional enrollment instructions and reminders will also be sent via email, mailings to your home and online at [hr2.chevron.com/REG](https://hr2.chevron.com/REG) as the enrollment period approaches.

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## use resources to research your coverage choices and prepare for the move to chevron benefits

We're providing information about your Chevron health benefits in advance, so you have the opportunity to research network providers, transfer prescriptions (if necessary), gather documents for the required dependent verification process, and have a general understanding of Chevron's health and protection benefit program in advance of making enrollment decisions. **This guide**, the **Key Resources** section on page 5 and [hr2.chevron.com/REG](https://hr2.chevron.com/REG) are good starting points.

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## enroll for 2023 chevron benefits december 12 through december 30, 2022.

If you want to participate in Chevron health benefits starting **January 1, 2023**, you *must* enroll **December 12** through **December 30, 2022**. If you enroll, your coverage is effective January 1, 2023. **Coverage is not automatic; your action is required to enroll. If you miss this enrollment deadline, you will not have REG or Chevron health benefits as of January 1, 2023.** We strongly advise that you don't wait until the deadline and enroll as soon as possible. Enrollment instructions will be posted on [hr2.chevron.com/REG](https://hr2.chevron.com/REG) and sent via mail and email leading up to the enrollment period.

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## enroll by december 20, 2022 to ensure your coverage is ready to serve you on january 1.

While you have until December 30 to make your enrollment elections, we strongly encourage you to make your elections by **December 20, 2022**. When you enroll, it takes additional time for your new benefit plans, like Anthem medical or Delta Dental, to receive your enrollment data from the HR Service Center and to activate your coverage in their systems. If you submit your elections by this date, your new plans will have time to activate your coverage by January 1, 2023, and you're likely to receive any applicable ID cards timely. If you have known or planned care during that first week of January, enrolling quickly can help make your transition easier.

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## complete post enrollment activities and requirements

There may be additional action required of you to complete your dependent verification, apply for continuation of care, transfer your prescriptions, manage your new HSA account, designate beneficiaries, and more. You'll also receive ID cards and welcome information from your new plans. Watch for additional instructions and reminders between now and early January.

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The information in this newsletter applies to legacy REG U.S.-payroll 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 and, therefore, may not apply to union-represented employees.