



october 2024

get ready for open enrollment

chevron open enrollment for 2025 pre-65 retiree health benefits
is october 14 through october 25, 2024



make your pre-65 health coverage changes

Open enrollment is the time you can make changes to health coverage for 2025, if desired. The enrollment instructions and benefit updates discussed in this newsletter apply to **pre-65 retiree group health plan** participants only. (Watch for notices from your insurance carrier about changes to **post-65 health benefits**; it's your responsibility to speak directly to your post-65 health plan for changes to your coverage.) Coverage for pre-65 eligible participants will automatically continue in 2025 as long as your plan is still available and the participant continues to meet eligibility requirements. **However, if any of the situations below apply to you, you need to take action between October 14 and October 25, 2024.**

- You read about a change to pre-65 health plans and decide you want to change your coverage.
- If you, the retiree, are pre-65, you can add a pre-65 eligible dependent to medical and/or dental coverage. You have 60-days to complete the dependent verification process.
- You want to add pre-65 medical or pre-65 dental coverage (if available).

pre-65 chevron open enrollment october 14 through october 25, 2024

This newsletter provides important information about 2025 pre-65 Chevron health benefits. In addition, you should also receive a separate pre-65 open enrollment worksheet from the HR Service Center that includes personalized information about the pre-65 group health choices available and your cost for coverage in 2025.

post-65 via benefits open enrollment october 15 through december 7, 2024

If you're happy with your post-65 plans, no action is needed; plans renew automatically. If you want to make changes to your post-65 individual medical, prescription drug, dental, or vision coverage for 2025, contact **Via Benefits** at **1-844-266-1392** or access the website to **Shop & Compare** plans. **Do not contact your medical plan carrier directly to enroll or make changes.** If you enroll in a Medicare health plan directly with your medical plan carrier, your Chevron Corporation Post-65 Retiree Health Reimbursement Arrangement Plan (Retiree HRA Plan) will be canceled. If your Retiree HRA Plan is canceled, you must generally wait until the next available retiree enrollment milestone, if any, to re-enroll.

turning 65 soon?



Remember, turning age 65 is an important retiree health benefit enrollment milestone because Chevron retiree health benefits will change. Medicare Part A and Part B are required to enroll in post-65 health coverage through Via Benefits and to activate the Retiree HRA Plan; start the process to enroll for Medicare at least **four months** in advance of turning 65. Read more about this enrollment milestone online at hr2.chevron.com/retiree or call the HR Service Center. Via Benefits and the HR Service Center will also mail information and materials in advance of turning 65.

how to enroll

pre-65 health coverage
online or by phone
october 14 through october 25, 2024



[hr2.chevron.com/OpenEnrollment benefitconnect website](https://hr2.chevron.com/OpenEnrollmentbenefitconnect)

After you log in to **BenefitConnect**, click the open enrollment box on the home page. The website will be available for Chevron open enrollment elections until 11:59 p.m. Pacific time on **October 25, 2024**. *Note: Most retirees can make elections online, but in certain limited situations it's possible you may only be permitted to make elections by calling the HR Service Center.*



1-888-825-5247 1-832-854-5800 (outside the U.S.) call the HR service center

Service hours for elections by phone

Monday through Friday
6 a.m. to 5 p.m., Pacific time
8 a.m. to 7 p.m., Central time

Customer Service Representatives can take your open enrollment elections by phone until 5 p.m., Pacific time (7 p.m., Central time) on **October 25, 2024**.

For quicker service, avoid peak call hours. Peak hours are all day Monday and 9 a.m. to 10 a.m., Pacific time (11 a.m. to noon, Central time) on other weekdays.

tools and information on hr2.chevron.com/OpenEnrollment



Benefit summaries,
deductibles and more



Find a network provider



Review the health benefit
retiree enrollment milestones

what's new at a glance

hr2.chevron.com/openenrollment for the details

Changes are effective **January 1, 2025** unless otherwise indicated. This list provides benefit change highlights for your awareness. It is not comprehensive, nor does it provide complete details. Be sure to review the summary of material modification (SMM) for the details, where applicable. Go to hr2.chevron.com/openenrollment for additional changes not covered here and to review the SMMs. SMMs will be mailed to your home or sent by email, according to your elected communication preference on the BenefitConnect website.

new deductibles

- To align with Centers for Medicare and Medicaid Services (CMS) changes, the **Medical PPO prescription drug** annual deductible will increase to **\$590** (You Only) and **\$1,180** for all other family coverage levels.
- In response to IRS requirements, the **annual combined deductible** for the **HDHP** will increase to:
 - **Network:** \$3,300 (You Only) and \$6,600 for all other family coverage levels.
 - **Out-of-Network:** \$6,600 (You Only) and \$13,200 for all other family coverage levels.
- The **annual combined deductible** under the Mental Health and Substance Use Disorder Plan for HDHP participants will increase to \$3,300 (You Only) and \$6,600 for all other family coverage levels, network or out-of-network.

chevron prescription drug program with express scripts

The Chevron Prescription Drug Program already provides coverage for **GLP-1 medications**, used for both **diabetes** and **weight loss**. Effective January 1, 2025, these medications will be subject to *new* coverage requirements. To read the full details, visit hr2.chevron.com/openenrollment.

- **For diabetes purposes:** Your prescribing physician may be required to provide new information and proof of clinical diabetes during both initial prior authorization and ongoing prescription renewals, including: either an A1C lab value, a blood glucose test result or medical diagnosis code. *No action is required of you;* this change will be implemented automatically with your prescribing physician.
- **For weight loss purposes:** You must meet new BMI or other clinical requirements, enroll and engage in the Omada virtual health program, and your doctor must provide documentation during the prior authorization process. *Your action will be required.* All participants currently taking a GLP-1 medication for weight loss will be contacted by Express Scripts in November 2024 to restart the initial prior authorization process and begin participation in the Omada program.

monthly pre-65 premium costs



Monthly medical premium costs for the **Medical PPO**, **HDHP** and most **Medical HMO Plans** will increase due to general inflation in the healthcare industry and claims costs in the plan last year. The company contribution to **Dental PPO** coverage is increasing, so your premium will be slightly reduced. 2025 premiums for all pre-65 health plans will be available on the BenefitConnect website during open enrollment and also included on the enrollment worksheet mailed to you in late September.



Be sure to consult the retiree health enrollment milestones posted online at hr2.chevron.com/OpenEnrollment for additional enrollment rules that may apply to you and your eligible dependents.



omada virtual program

Available at no cost to eligible participants as part of the **Diabetes Care Value Program** under your **Chevron Prescription Drug Program** coverage, Express Scripts, in partnership with **Omada Health (Omada)**, offers access to a diabetes prevention program to help participants at risk for type 2 diabetes. This program is an online behavioral modification and digital care program designed to help you make gradual changes to the way you eat, move, sleep and manage stress. Included is a ready-to-use wireless scale, mobile app, support from a professional health coach, a small peer group for realtime support, weekly online lessons and interactive activities. If you meet program eligibility requirements, Omada will reach out to you directly with an invitation to participate.



suffer from muscle or joint pain?

Hinge Health is a free, enhanced musculoskeletal (MSK) care program included with the **Chevron Prescription Drug Program** in partnership with Express Scripts. Hinge Health's programs for muscle and joint pain are tailored to your needs and might include any of the following: personalized exercise therapy, wearable sensors for live feedback in the mobile app, unlimited 1-on-1 health coaching, personal physical therapist with video visits. To learn more or get started, visit hinge.health/chevron.

**chevron pre-65 open enrollment is October 14 through October 25, 2024
important benefit information enclosed**



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. 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. Unless required by applicable law, there are no vested rights with respect to any Chevron health and welfare plan benefit or to any company contributions towards the cost of such health and welfare plan benefits. Some benefit plans and policies described in this document may be subject to collective bargaining and, therefore, may not apply to union-represented employees.

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