



preventive care for chronic conditions effective january 1, 2020

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Update to the summary plan descriptions (SPD)

All changes described in this SMM are effective January 1, 2020 unless otherwise indicated.

The enclosed information serves as an official summary of material modification (SMM) for the plans referenced herein. Please keep this information with your other plan documents for future reference. You can access the summary plan descriptions for your benefits at hr2.chevron.com or by calling the HR Service Center at 1-888-825-5247.



medical services

new preventive services for chronic conditions

This change applies to medical services for participants in the High Deductible Health Plan (HDHP) and the High Deductible Health Plan Basic (HDHP Basic)

Effective January 1, 2020 the HDHP and HDHP Basic annual combined deductible *does not* apply to covered charges for certain preventive care and services received from a *network provider* for specified chronic conditions as defined in IRS Notice 2019-45. The following covered preventive care and services will now generally be covered at 100 percent with no deductible and no coinsurance:

| Preventive Care for Specified Conditions ... | For Individuals Diagnosed with ... |
|--|---|
| Anti-resorptive therapy | Osteoporosis and/or osteopenia |
| Blood pressure monitor | Hypertension |
| Peak flow meter | Asthma |
| Glucometer | Diabetes |
| Retinopathy screening | Diabetes |
| Hemoglobin A1c testing | Diabetes |
| International Normalized Ratio (INR) testing | Liver disease and/or bleeding disorders |
| Low-density Lipoprotein (LDL) testing | Heart disease |

- While charges for covered preventive care and services are not subject to the deductible or coinsurance, other applicable **plan rules** will continue to apply.

Starting **October 14, 2019**, you may contact **Anthem (1-844-627-1632)** to discuss your personal situation and if your covered medical services may be subject to this provision in 2020.

Future updates

The Treasury Department and the IRS, in consultation with Health and Human Services, determines the preventive care and service items on this list and will maintain the responsibility to periodically review and update the list. Insurers and sponsoring companies, like Chevron, do not determine the items on this list.

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. There are no vested rights with respect to Chevron health care plans or any company contributions towards the cost of such health care 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.