

# 2018 chevron benefit changes

**This section includes information about changes to your Chevron benefits that take effect on January 1, 2018.**

**Certain sections of this newsletter (Page 8-33) serve as an official summary of material modification (SMM) to the summary plan description (SPD) book(s) for the plans referenced herein.** Please keep this information with your other plan documents for future reference. This SMM provides only certain information about changes of benefit provisions. It is not intended to be a complete explanation. If there are any discrepancies between this SMM 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.

## **Women's health and cancer rights notice**

To comply with the Women's Health and Cancer Rights Act of 1998, Chevron reminds you that all medical plans the company offers cover medically necessary mastectomy and related breast reconstructive surgery, including reconstruction of the breast on which the mastectomy is performed; surgery and reconstruction of the other breast to produce a symmetrical appearance; prostheses; and treatment remedies for physical complications during all stages of the mastectomy, including lymphedema.

# dental PPO plan

The **Chevron Dental PPO Plan** is a preferred provider organization (PPO) dental plan. Delta Dental of California (Delta Dental) is the claims administrator. The Dental PPO Plan changes described below will take effect January 1, 2018.

## monthly premium

Chevron will currently continue to share the monthly cost of coverage — the premium — with eligible employees.



Employee monthly premium*	
\$27.40	You only
\$54.80	You + One adult
\$46.70	You + Child(ren)
\$74.10	You + Family

There's still time to avoid the dental surcharge in 2018.  
The deadline to get your cleaning is December 31, 2017.  
See Page 28

\*The monthly premiums listed above assume that you received your preventive dental cleaning in 2017. As a reminder, if you are currently enrolled in the Chevron Dental PPO or Dental HMO Plan, you're encouraged to take steps to protect your health and receive at least one preventive dental cleaning between January 1 and December 31, 2017. If you do not participate in this preventive care measure by December 31, 2017, you will pay \$120 more for your annual dental plan premium next year. Learn more on Page 28.

## annual deductibles, coinsurance, copayments and out-of-pocket maximums

There are no changes to the deductible, coinsurance, copayment and annual out-of-pocket maximums for the Dental PPO Plan in 2018. You can view a summary of this information online at [hr2.chevron.com/OpenEnrollment](http://hr2.chevron.com/OpenEnrollment).

### dental PPO plan changes

The following x-ray limitations have been changed to align with FDA and ADA guidelines on radiation exposure:

- **Bitewing x-rays**

- To age 18, **two** per calendar year.
- Over age 18, **one** in a calendar year.

- **Full mouth x-rays**

- **One** in 60 months, combine with panoramic x-rays.

- **Panoramic x-rays**

- One in 60 months, combine with full mouth x-rays.

Other plan changes include:

- **Debridement**, *one* per lifetime.
- **Root canal re-treatment**, *one* in 24 months.
- **Pulpal therapy**, covered on primary teeth, with no age limitations. Pulpal therapy is not covered on permanent teeth.
- The previous **coverage exclusion for dental implants** that replace natural teeth lost while *not covered* under the Chevron Dental PPO Plan has been *removed*.
- **Oral pathology laboratory (labs and tests)**, covered as a diagnostic service.

## how to save with network providers

Delta Dental has two different types of networks. Both options are currently considered **network** providers, so they cover the same services, have the same annual maximums, the same coinsurance or copayment levels, and covered services from these providers aren't subject to the deductible. You also don't have to worry about balance billing when you see a provider from either network option. The difference between the two comes down to the reduced fees the dentists have agreed to provide Chevron Dental PPO plan participants.

### **Delta Dental PPO<sup>SM</sup> network**

You'll want to find a dentist in the Delta Dental PPO<sup>SM</sup> network to get the most savings on covered dental services. That's because these dentists have agreed to the most reduced fees. Why does this matter? Simple math; your coinsurance will apply to a smaller fee, so you pay less.

### **Delta Dental Premier<sup>®</sup> network**

If you can't find a Delta Dental PPO<sup>SM</sup> network dentist, a Delta Dental Premier<sup>®</sup> dentist offers the next best opportunity to save. Like the Delta Dental PPO<sup>SM</sup> network dentists, Delta Dental Premier<sup>®</sup> dentists also have agreed to reduced fees, but the savings on these fees aren't as much as with the Delta Dental PPO<sup>SM</sup> network dentists. So, your coinsurance amount will be applied to a higher fee, but you're still saving more money than if you visited an out-of-network provider.

## out-of-network reminders

With the Chevron Dental PPO Plan, you can still see any dentist you choose, but using a network provider saves you money. When you use an out-of-network dentist, services will be subject to an annual deductible and your coinsurance amounts will be higher, so your out-of-pocket costs will be higher. In addition, out-of-network dentists may balance bill you for the difference between the plan allowance and their usual fee for services.



### **more plan information online**

For additional information about this plan or to find a provider in the Delta Dental PPO<sup>SM</sup> or the Delta Dental Premier<sup>®</sup> networks, go to [hr2.chevron.com/OpenEnrollment](https://hr2.chevron.com/OpenEnrollment).