

october 2022 thinking ahead to 2023



chevron open enrollment for 2023 health benefits is october 17 through october 28, 2022

do i need to do anything?

Open enrollment is your annual opportunity to review your benefit options for next year. During open enrollment, you can decide to keep the coverage you currently have or make changes. **Any changes you make to your benefits coverage during open enrollment, October 17 through October 28, 2022, become effective January 1, 2023.** If you miss the open enrollment deadline, you must wait until the next open enrollment period in the fall of 2023 for 2024 benefits to make changes. The only other opportunity to change your benefits mid-year is within 31 days of certain qualifying life events, such as a marriage or birth.

i'm satisfied with my current coverage

If you're satisfied with your current 2022 coverage and your plans continue to be available, you aren't required to make open enrollment elections. Your coverage automatically continues at the 2023 premium rates. (Flexible spending accounts have different rules, see below.)





start, stop or change coverage

Open enrollment is your annual opportunity to start, stop or change your medical, dental, vision, Group Critical Illness Insurance, Group Hospital Indemnity Insurance or Voluntary Group Accident Insurance coverage.



participate in a flexible spending account in 2023

If you're currently enrolled in one of Chevron's flexible spending account plans – the Health Care Spending Account (HCSA) or the Dependent Day Care Spending Account (DCSA) – your coverage will *not* automatically continue in 2023. **You must re-enroll in these plans during open enrollment if you want to participate in 2023**.



update dependent coverage

If you need to add or drop a dependent from medical, dental or other health coverage for 2023, you *must* make an election during open enrollment. If you're adding a new dependent to your coverage, be sure to complete the dependent verification process within your 60-day deadline.



try the fast lane

While not a requirement, we strongly recommend you always take a few minutes to review your coverage annually, even if you think you don't need to make changes. **The Fast Lane shopping option on BenefitConnect makes this verification of coverage easy**.

how to enroll

online or by phone october 17 through october 28, 2022



hr2.chevron.com/OpenEnrollment benefitconnect website

The **BenefitConnect website** will be available for you to make open enrollment elections until midnight Pacific time on **October 28, 2022**. This website is available even if you don't have access to a Chevron computer. You can log in to the BenefitConnect enrollment site from any computer or mobile device with an Internet connection.



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 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.

earn 1,000 points toward reduced 2023 medical premiums complete qualifying activities by october 28, 2022

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If you qualify for the Wellness Credit by the October 28, 2022, deadline, you can enjoy the reduced medical premiums shown on page 6 in 2023. Don't forget to log your completed activities on the WebMD Healthy You website by the deadline. Go to **hr2.chevron.com/OpenEnrollment** to get started or to learn more.

dependent verification process

You are required to verify the eligibility of *new* dependents you enroll in Chevron health plans for 2023. You have up to 60 days to obtain and submit requested documentation that verifies your dependent(s) are eligible to participate in Chevron's health benefits. If you don't provide acceptable documentation by the deadline, your dependent(s) will be disenrolled from coverage. More information and instructions online at **hr2.chevron.com/OpenEnrollment**.

tools and information on hr2.chevron.com/OpenEnrollment



Benefit summaries, 2023 plan changes and more.



Find a network provider.

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Decision resources like the Express Scripts price a prescription tool.

what's new at a glance

hr2.chevron.com/openenrollment for the details

Changes are effective January 1, 2023 unless otherwise indicated. This list provides the highlights of benefits changes for your awareness, but it does not provide complete details. Be sure to review the summary of material modification (SMM) for the details, where applicable. The SMM is available online at **hr2.chevron.com/OpenEnrollment** and will be mailed to your home or sent by email, according to your elected communication preference on the BenefitConnect website.

increase to monthly premium costs

Medical PPO and High Deductible Health Plan (HDHP)

The monthly cost of coverage for the Medical PPO and HDHP will increase in 2023; you can preview your new cost for coverage on page 6. Our premium cost is determined, in part, by health claim expenses incurred by the plans in the previous year. Over the last four years, these plans maintained consistent employee rates, with periodically reduced rates, including a premium holiday. However, health claims increased last year largely due to participants receiving care that was deferred during the pandemic, but also as a result of overall rising national health care costs and general inflation. The Medical PPO and HDHP must increase monthly premiums in 2023 to help absorb some of this increase to overall costs.

Medical HMO Plans

The monthly premium cost for most Medical HMO Plans will also change in 2023. You can preview the premium cost for your plan on **hr2.chevron.com/OpenEnrollment**.

Long-Term and Dependent Life Insurance

The monthly premium cost for **Optional Long-Term Disability** coverage and the **Dependent Life Insurance Plan** will increase slightly in 2023. You can view your personalized cost for coverage on the BenefitConnect website during the upcoming open enrollment period.



Effective January 1, 2023, **Sutter Health** facilities and providers in the northern California region will be considered network providers with Anthem. Anthem's provider search tool will reflect the network change for searches conducted on or after January 1.

expansion of family planning support with WIN fertility service

Medical PPO, HDHP and HDHP Basic participants will have access to a new, free family building support program with **WIN Fertility (WIN)**. WIN's nurse case managers provide personalized guidance and support through every step of the family planning and fertility process, including education and guidance about your plan's treatment and medication coverage, fertility preservation (egg/sperm freezing), adoption and surrogacy. **You are strongly encouraged to contact WIN as the first step on your fertility journey; WIN will help you better understand your options so you can maximize your benefit and choose the best course of action.** In addition to the introduction of the WIN service, the Family Planning and Infertility Services coverage rules have been updated as follows:

- Coverage added for storage costs for sperm and/or egg preservation and cryopreservation of fertilized embryos in connection with covered fertility treatment under the medical plan. Preservation storage costs are covered for up to 12 consecutive months measured from the first date of storage, subject to the plans' lifetime maximum.
- Clarifications added to more clearly reflect how existing coverage is administered.

Your medical plans provide coverage for medically necessary fertility treatment. For elective, non-medically necessary fertility preservation egg and/or sperm freezing, plan participants will also have new access to a feature under the **Surrogacy and Elective Fertility Preservation Reimbursement Program**. More information about this change will be available in the updated program policy document, posted on **hr2.chevron.com/OpenEnrollment** by October 15.



new deductibles and contribution limits

- In response to IRS requirements, the annual combined deductible for the HDHP will increase slightly in 2023 to:
 - Network: \$3,000 for You Only and \$6,000 for all other family coverage levels.
 - **Out-of-Network:** \$6,000 for You Only and \$12,000 for all other family coverage levels.
- The annual combined deductible for the **Mental Health and Substance Use Disorder Plan for HDHP participants** will increase slightly in 2023 to:
 - Network and Out-of-Network: \$3,000 for You Only and \$6,000 for all other family coverage levels.
- The annual deductible for the **Dental PPO Plan** for out-of-network covered services has been streamlined to \$100 for You Only coverage and \$200 for all other family coverage levels.
- The maximum contribution limit to the **Chevron Health Care Spending Account (HCSA)** will be **\$2,850** for the 2023 plan year.
- Under IRS rules, the maximum contribution limit to a **health savings account (HSA)** for 2023 is **\$3,850** for individuals and **\$7,750** for families, with an extra \$1,000 in catch-up contributions allowing starting in the calendar year you turn age 55.

dependent life insurance plan update

Effective **January 1, 2023**, you may be required to pay income taxes on the value of your dependent life insurance for spouse or domestic partner coverage. The value is determined by a schedule established by the Internal Revenue Service (IRS). This tax liability is called imputed income. After-tax payments are deducted from the imputed income amount. If after-tax payments equal or exceed the amount calculated for imputed income, no imputed income will be reported. If after-tax payments are less than the amount calculated for imputed income, imputed income will be added to your gross wages and is included on your Form W-2 at the end of the calendar year.



The **Chevron Diabetes Prevention Program** will end on November 30, 2022. This is because this service with Omada will now be offered to enrolled participants in the Chevron Prescription Drug Program. Current participants in the Chevron Diabetes Prevention Program will receive more information about the transition in November.



As a reminder, the money in your **2022 Chevron Health Care Spending Account (HCSA) and/or Dependent Day Care Spending Account (DCSA)** can be used for eligible expenses incurred no later December 31, 2022. This December 31 deadline also applies to any 2021 special one-time carryover amounts into your 2022 account. There is no carryover of 2022 HCSA and/or DCSA amounts into 2023.

chevron prescription drug plan with express scripts

Be sure to visit hr2.chevron.com/openenrollment to read the full details about how these changes might affect you.

- In partnership with Hinge Health, eligible participants will have access to a free, enhanced **Musculoskeletal (MSK) care program** that is personalized to best fit your MSK needs.
- Effective December 1, 2022, Express Scripts, in partnership with **Omada**, will offer access to a program to help participants at risk for type 2 diabetes.
- The plan will change how **manufacturer coupons** used for certain specialty medications dispensed by Accredo will apply to your deductible and out-of-pocket maximum.
- **Medical PPO** participants who are prescribed certain specialty pharmacy drugs will be identified to participate in **SaveOnSP**. This program leverages available manufacturer pharmacy copay assistance and changes how costs will be applied to your deductible and out-of-pocket maximum.

more medical PPO, HDHP and HDHP basic updates

- The current Anthem Engage app will be replaced by the expanded and enhanced Anthem Sydney [™] Health mobile app.
- An additional option to access online (or virtual) health visits will be available through the expanded and enhanced **Anthem Sydney** [™] **Health mobile app**.
- Current **Gender Identity Disorder** coverage will be expanded to include coverage for certain medically necessary and clinically appropriate gender affirming treatments such as surgical facial hair removal, certain facial plastic reconstruction, and voice modification.

more highlights online...

Go to **hr2.chevron.com/openenrollment** for additional change highlights not covered here, including a medical plan coordination of benefit rule update, coverage restrictions under the Chevron Long Term Care Insurance Plan, and new enrollment procedures for the Group Critical Illness and Group Hospital Indemnity Insurance plans.



did you know?

Chevron health plans include coverage for certain preventive care services, as specified by the Affordable Care Act. Chevron health plans generally follow the U.S. Preventive Services Task Force (USPSTF) recommendations and other similar guidelines to determine the evidence-based screenings and frequency that are covered under health plans. The USPSTF updated its recommendations to include a **follow-up colonoscopy** after a positive non-invasive stool-based screening test or direct visualization test as a service that must be added as covered preventive care under health plans. Contact your health plan directly for detailed coverage rules, including effective date and age and frequency requirements.

employee medical plan comparison

effective January 1 through December 31, 2023

	medical PPO plan Applies to Medical PPO, HDHP, HDHP Basic: • Medical – Anthem • Prescription drug – Express Scripts • Basic vision – VSP		high deductible health plan (HDHP)• These are preferred provider organization (PPO) plans. Choose network or out-of- network providers for care.• Preventive care provisions included.		 high deductible health plan basic (HDHP basic) Second opinion requirement applies for knee, hip, back, spine surgery. Access to virtual visits, WIN Fertility service and Omada diabetes prevention service. 		
the basics							 Medical, prescr Health mainten Must use netwo Preventive care
behavioral health services	Automatically enrolled in Chevron Mental Health and Substance Use Disorder Plan (MHSUD)						
employee monthly premium	no wellness credit	wellness credit	no wellness credit	wellness credit	no wellness credit	wellness credit	
you only you + one adult you + child(ren) you + family	\$146 (\$84 \$230 \$186 \$332	\$30 (\$0 \$0 \$0 \$16	\$10 \$21 \$17 \$28	\$0 \$0 \$0 \$0	Available through (MHSUD), but not through MHSUD o
deductible**	separate deductibles for		medical, prescription drugs, MHSUD, combined*		medical, prescription drugs, MHSUD, combined*		
you only you + one adult you + child(ren) you + family	covered med Network \$1,000 \$2,000 \$2,000 \$3,000	lical services* Out-of-network \$2,000 \$4,000 \$4,000 \$6,000	Network \$3,000 (\$200) \$6,000 (\$400) \$6,000 (\$400) \$6,000 (\$400)	Out-of-network \$6,000 (↓\$400) \$12,000 (↓\$800) \$12,000 (↓\$800) \$12,000 (↓\$800)	Network \$5,000 \$10,000 \$10,000 \$10,000	Out-of-network \$10,000 \$20,000 \$20,000 \$20,000	Your cost varies b monthly rates (wi The average annu
you only you + family	covered prescription drugs \$150 \$300 One deductible for network, out-of-network. Mail-order prescriptions are not subject to the annual deductible. covered behavioral health services No deductible under the MHSUD		Mail-order prescriptions are subject to the combined annual deductible. Certain preventive medications covered at 100%, 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.		Mail-order prescriptions are subject to the combined annual deductible. Certain preventive medications covered at 100%, 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.		Some Medical HM have no deductib the Mental Health of Benefits and Co HMO directly to so
							Out-of-pocket ma review the 2023 S
out-of-pocket maximum**	separate out-of-poo	ket maximums for	medical, prescription drugs, MHSUD, combined*		medical, prescription drugs, MHSUD, combined*		
you only you + one adult you + child(ren) you + family	medical and MH Network \$5,000 \$10,000 \$10,000 \$10,000	SUD, combined* Out-of-network \$10,000 \$20,000 \$20,000 \$20,000	Network \$5,000 \$10,000 \$10,000 \$10,000	Out-of-network \$10,000 \$20,000 \$20,000 \$20,000	Network \$6,550 \$13,100 \$13,100 \$13,100	Out-of-network \$13,100 \$26,200 \$26,200 \$26,200	Health
you only you + family	covered press \$1,8 \$3,6 One maximum for net	300					
save for health care?	Flexible spending account Health Care Spending Account (HCSA). Chevron does not contribute.		BenefitWallet Health Savings Account (HSA) with payroll deductions. Chevron also contributes if you meet eligibility requirements.				*Amounts paid for covere Amounts paid for covere **For family coverage lev family member can contr this works, see an exampl



medical HMO plan

- scription drug, basic vision coverage provided by HMO
- enance organization (HMO) plans
- work provider
- are provisions included
- vary by zip code

behavioral health services

gh HMO *or* the Chevron Mental Health and Substance Use Disorder Plan not both for same service. Out-of-network provider not covered whether D or HMO Plan.

employee monthly premium

s by plan. Go to **hr2.chevron.com/openenrollment** to review the 2023 with and without the Wellness Credit).

deductible

nual deductible for most Medical HMO Plans in 2023 will remain \$300. HMO Plans may have a different deductible, and a few will continue to tible at all. There is no deductible when you use covered services under Ith and Substance Use Disorder (MHSA) Plan. Review the 2023 Summary Coverage (SBC) on hr2.chevron.com/openenrollment or contact the see the deductible amount for any Medical HMO Plans available to you.

out-of-pocket maximum

maximum varies by plan. Go to **hr2.chevron.com/openenrollment** to 3 Summary of Benefits and Coverage (SBC) for each plan.

save for health care?

Flexible spending account

h Care Spending Account (HCSA). Chevron does not contribute.

ered services provided by a network provider also count toward the out-of-network annual limit. ered services provided by an out-of-network provider also count toward the network annual limit. levels, each covered person has a maximum limit equal to the You Only network amount. No one ntribute more than the You Only amount toward the full family amount. To learn more about how mple on *hr2.chevron.com/openenrollment*.

reminders for 2023

hr2.chevron.com/OpenEnrollment for the details



lower your medical premiums in 2023

Would you like to pay less for your Chevron medical plan premium in 2023? If you qualify for the Wellness Credit by the October 28, 2022, deadline, you can save up to \$750 annually on your Chevron medical coverage premium from January 1, 2023, through December 31, 2023, as long as you're an active, eligible employee.

chevron contributes to your HSA in 2023



Chevron will once again contribute either **\$500**, **\$750** or **\$1,000** to the BenefitWallet Health Savings Account (HSA) in 2023. The actual 2023 company contribution to your account is based on the medical coverage level you choose during open enrollment. If you're already participating, you don't need to do anything to get the company contribution again in 2023. If you aren't participating and want to start in 2023, you must make elections during open enrollment. You must meet the eligibility requirements, including being an active employee, on January 1, 2023, to receive the company contribution.

supplement your coverage with voluntary benefits

Chevron offers access to voluntary benefits you can use to supplement the coverage offered by your core health and protection benefits.



- **Group Critical Illness** and **Group Hospital Indemnity** coverage can provide a cash benefit to help you pay for expenses such as medical out-of-pocket costs in the event of a covered illness or hospital stay.
- The Vision Plus Program offers additional coverage for prescription eyewear.
- Long-Term Care Insurance can help you pay for services received at home or in a nursing facility in the event you or a family member can no longer perform everyday activities.
- With **Group Auto and Home** insurance you can access group rates and discounts to round out your personal protection coverage.

\$120

get a preventive dental cleaning and save

Receive at least one preventive dental cleaning* between **January 1** and **December 31, 2023**, to avoid a dental surcharge in **2024**. This cleaning requirement applies to you if you're enrolled in the Chevron Dental PPO or Dental HMO Plan in 2023.

Starting in 2023, D4341 and D4342, procedure codes for deep cleaning will satisfy the 2023 cleaning requirement to avoid the dental surcharge in 2024.

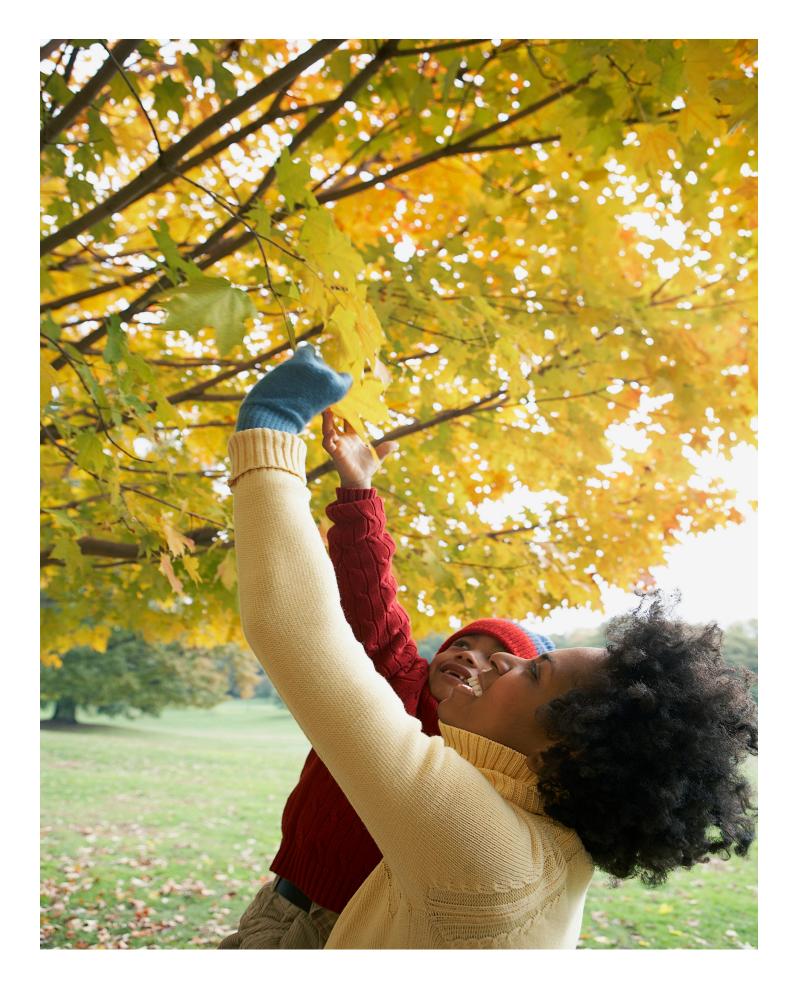
\$400

get a second opinion and save

Chevron continues to offer access to the Health Decision Support Program for a second medical opinion on any diagnosis you might be facing. However, if you'll receive any of these four medical procedures on a non-emergency basis – **knee surgery**, **hip surgery, back surgery, spine surgery** – you're required to use this second opinion service prior to the procedure.** If you do not request a second opinion, you'll be responsible for an additional **\$400** added to your total claim cost for the procedure, whether or not you've met the deductible.

*For participants with dentures, receive at least one oral exam in lieu of a cleaning.

^{**} Currently only applies to employees enrolled in the Medical PPO, HDHP and HDHP Basic plans with Anthem.



Chevron Human Resources Service Center PO Box 981901 El Paso, TX 79998

chevron open enrollment is october 17 through october 28, 2022 important benefit information enclosed



The information in this newsletter applies to active 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. 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.

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