

Chevron Dependent Verification Process Definition of Dependent Eligibility

TYPE OF DEPENDENT	DEFINITION
Eligible Spouse	<ul style="list-style-type: none"> • Legally married under the law of a state or other jurisdiction where the marriage took place.
Eligible Domestic Partner – U.S. Payroll	<p>A domestic partnership is established when you and your partner meet one of the following (U.S.-payroll):</p> <ul style="list-style-type: none"> • You and your partner are all of the following: <ul style="list-style-type: none"> ○ At least age 18 and of legal age. ○ Mentally competent to enter into contracts. ○ Jointly responsible for each other’s welfare and financial obligations and have lived together for at least six months. ○ In an intimate, committed relationship of mutual caring that has existed for at least six months and is expected to continue indefinitely. ○ Not related by blood. ○ Not married to anyone other than each other. • You live in California and meet all of the requirements of the California Family Code section 297 definition of a domestic partner, including the requirement to have registered your domestic partner with the Secretary of State’s office. • You live in another state that recognizes civil unions or state-recognized domestic partnerships and have entered into a civil union or state-recognized domestic partnership and reside in that state. • You and your partner have entered into a civil union in a state that recognizes civil unions, but reside in a state where that civil union is not recognized. • You meet other criteria set forth in the Chevron Affidavit of Domestic Partnership.
Eligible Domestic Partner – Expatriate in the U.S.	<p>Generally, you can enroll your domestic partner in health care coverage while you are on an expatriate assignment in the U.S., but only if your domestic partner is eligible for coverage under the Company sponsored medical plan (or government-sponsored health plan where provided in your home country) in which you would participate if you were working in your home country.</p>
Eligible Child / Domestic Partner Child	<p>You can enroll a dependent child for coverage if he or she is all of the following:</p> <ul style="list-style-type: none"> • You or your spouse’s or domestic partner’s natural child, stepchild, legally adopted child, foster child, or a child who has been placed with you or your spouse/domestic partner for adoption. • Younger than age 26 (age 25 for purposes of the Dependent Life Insurance and the Voluntary Group Accident Insurance plans). <p>You can enroll an “other dependent*” for coverage if he or she is all of the following:</p> <ul style="list-style-type: none"> • Not married. • Younger than age 26 (age 25 for purposes of the Dependent Life Insurance and the Voluntary Group Accident Insurance plans). • Is a member of your household. • Someone for whom you act as a legal guardian. • Dependent on you (or on your spouse/domestic partner) for more than 50 percent of his or her financial support.

TYPE OF DEPENDENT	DEFINITION
	<p data-bbox="386 312 1481 373"><i>* Other dependents are not eligible for Group Critical Illness and/or Group Hospital Indemnity Insurance coverage.</i></p> <p data-bbox="386 405 862 432">Incapacitated Dependent Over Age 26</p> <p data-bbox="386 436 1463 556">Coverage can continue after the child reaches age 26, provided he or she is enrolled in the plan and meets the plan's definition of incapacitated child as outlined in the glossary. When the child reaches age 26 and periodically thereafter, Chevron Corporation will require you to provide documentation stating that the child continues to be incapacitated.</p> <p data-bbox="386 588 1495 768">Incapacitated children over age 26 can be added to coverage only if they were disabled before age 26 and had other health care coverage immediately before being added as a dependent under a Chevron plan. You will be required to provide documentation of both conditions. Please contact the Chevron Human Resources Service Center at <number> if you have questions or have a dependent that you believe meets the requirements of being an incapacitated (or disabled) child.</p>
<p data-bbox="164 827 1494 947">Important reminder for retirees: In addition to meeting the definition of an eligible spouse, domestic partner or child, your dependent's eligibility to participate in Chevron retiree health benefits is also subject to additional rules regarding enrollment timing, your benefit participation status, your age or the age of your dependent. Be sure to review the Enrollment Milestones available online at hr2.chevron.com/retiree for the details.</p>	

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Chevron Dependent Verification Process Proof Documentation Requirements

TYPE OF DEPENDENT	ACCEPTABLE DOCUMENTATION
Spouse	<ul style="list-style-type: none"> ▪ Government-issued Marriage Certificate <li style="text-align: center;">OR ▪ Affidavit / County Declaration
Domestic Partner – U.S.- Payroll	<ul style="list-style-type: none"> ▪ Notarized Chevron Affidavit of Domestic Partnership. If you have enrolled a domestic partner, this form is enclosed. It's also available from your Dependent Verification screen on BenefitConnect. You can also call the HR Service Center to request the form. <li style="text-align: center;">OR ▪ Affidavit / County Declaration
Domestic Partner – Expatriate in the U.S.	<ul style="list-style-type: none"> ▪ Notarized Chevron Affidavit of Domestic Partnership. If you have enrolled a domestic partner, this form is enclosed. It's also available from your Dependent Verification screen on BenefitConnect. You can also call the HR Service Center to request the form. <li style="text-align: center;">OR ▪ Affidavit / County Declaration
Eligible Child / Domestic Partner Child	<p>Natural Child</p> <ul style="list-style-type: none"> ▪ Government Issued Birth Certificate OR Hospital Record <p>Adopted Child</p> <ul style="list-style-type: none"> ▪ Government Issued Birth Certificate (if available) OR Hospital Record <li style="text-align: center;">AND ▪ Court Documents OR Adoption Order approved by the court <p>Stepchild</p> <ul style="list-style-type: none"> ▪ Government Issued Birth Certificate OR Hospital Record <p>Foster Children</p> <ul style="list-style-type: none"> ▪ Government Issued Birth Certificate OR Hospital Record <li style="text-align: center;">AND ▪ Court Documents OR a Decree from an appropriate agency <p>An “Other Dependent”</p> <ul style="list-style-type: none"> ▪ Government Issued Birth Certificate OR Hospital Record <li style="text-align: center;">AND ▪ Court Documents OR a Decree from an appropriate agency <li style="text-align: center;">AND ▪ A completed copy of Worksheet 2 of IRS Publication 501, accessible at www.irs.gov/pub/irs-pdf/p501.pdf <p>Qualified Medical Child Support Order</p> <ul style="list-style-type: none"> ▪ Qualified Medical Child Support Order that is still in effect. Provide the section that includes child name(s), parent names, child date of birth, stating that the health coverage must be provided and the period for which it must be provided <p>Incapacitated Dependent Over Age 26</p> <p>If you are adding a dependent that you believe meets the requirements of being an incapacitated (or disabled) child, please contact the Chevron Human Resources Service Center at for further information and instructions.</p>