



september 2021

welcome to your chevron COBRA benefits

for legacy noble employees eligible for COBRA coverage





Chevron Corporation recently acquired Noble Energy Inc. As part of integration efforts, effective **October 1, 2021**, Noble Energy benefits will transition to Chevron benefits, and the administration of COBRA benefits will transition from Alight to **BenefitConnect | COBRA**.

This is an introduction guide to Chevron's 2021 COBRA health benefits. It also provides you with important information about what happens to your Noble COBRA coverage, how to prepare for your new Chevron COBRA coverage and what will happen during the upcoming transition.

what's inside

- 3** How the transition works
- 4** Key resources
- 5** Tips for a smoother transition
- 6** What's changing
- 7** 2021 Health benefit breakdown



watch for the checklist

Look for this checklist icon throughout this guide for a summary list of the things you may need to do or consider as part of the transition from Noble to Chevron COBRA benefits.

how the transition works

1

use resources to research your coverage choices and prepare for the move to chevron COBRA benefits

We're providing information about your Chevron COBRA health benefits in advance, so you have the opportunity to research network providers, transfer prescriptions (if necessary), and have a general understanding of Chevron's health benefit program in advance of making enrollment decisions. **This guide**, the **Key Resources** section on page 4, materials you'll receive from BenefitConnect | COBRA, and hr2.chevron.com/noble/COBRA are good starting points.

optional

2

watch for communications from benefitconnect | COBRA

During this transition, you will also receive important communications from the new COBRA administrator, **BenefitConnect | COBRA**, including **2021 Benefit Election Information**, which includes your new Chevron coverage choices, enrollment deadlines, how to make COBRA enrollment elections on the new BenefitConnect | COBRA website and how to pay for your coverage. Please review all communications carefully and use the contacts if you have questions.

required

3

enroll for COBRA benefits

Depending on your situation, the enrollment information you receive from Alight and/or BenefitConnect | COBRA provides instructions about what you need to do to enroll in COBRA benefits and the deadlines you need to know. If you want coverage, be sure to take action as soon as possible and prior to your applicable deadlines, if you can. You will also participate in Chevron's open enrollment for 2022 COBRA benefits; watch for open enrollment instructions and deadlines from BenefitConnect | COBRA in the fall.

required

4

complete post enrollment activities and requirements

There may be additional action required of you to set up your new COBRA billing, apply for continuation of care, transfer your prescriptions or find new network providers. You'll also receive ID cards and welcome information from your new plans. Watch for additional instructions this fall from Chevron, your new plans and BenefitConnect | COBRA.

monitor

key resources

prepare now for the move to chevron benefits

We've provided only the highlights about your Chevron health benefits in this introduction guide. There are more resources you should access to get additional details that will help you make decisions.



go to hr2.chevron.com/noble/COBRA

We've created this page for former legacy Noble COBRA participants to help you transition to Chevron COBRA benefits. This page is available from any computer, tablet or smartphone connected to the internet. This page is updated throughout the transition. Here's what you can find on this page:



find a provider

With new claims administrators in 2021 for your medical, dental, vision and prescription drug coverage, we know it's important that you know if your current provider is a part of the network. Access web links, phone numbers and instructions that make it easier to research your provider options.



summary of benefits and coverage

Summary of Benefits and Coverage (SBCs) provide summary information about your medical plans, such as benefits, co-payments, co-insurance, deductibles, and plan contact information. SBCs can help you understand the key differences among the options available to you.



phone numbers

Access phone numbers to talk directly to your new benefit plans like Anthem and Delta Dental if you have questions as you research your choices.



additional plan information and summaries

Research your prescription drugs, get continuation of care forms, see schedule of benefits or benefit summaries, review summary plan descriptions and more.

who to contact

Until September 30, 2021 (6 p.m. Central Time)

Noble Benefit Resource Center

1-844-487-5599

digital.alight.com/NobleEnergy

Contact the Noble Benefit Resource Center for questions, enrollment, changes or billing regarding your January 1 through September 30, 2021 Noble COBRA coverage. If you have questions regarding your Noble coverage after September 30, contact BenefitConnect | COBRA.

This resource is not able to answer Chevron COBRA benefit questions.

See the detailed contact list available on h2.chevron.com/noble/COBRA for help with Chevron plan-specific questions prior to October 1.

On or after October 1, 2021 (8 a.m. Central Time)

BenefitConnect | COBRA Service Center

1-877-292-6272

(1-858-314-5108 outside the U.S.)

Contact BenefitConnect | COBRA for questions, enrollment, changes or billing regarding your 2021 Chevron COBRA coverage, and for any outstanding Noble COBRA needs after September 30, 2021.

See the detailed contact list available on h2.chevron.com/noble/COBRA for help with Chevron plan-specific questions prior to October 1.



looking for chevron benefit information?

As a reminder, if you're looking for additional information about Chevron benefits, please visit h2.chevron.com/noble/COBRA for additional information and a detailed list of contacts to help you research your Chevron benefit choices and decisions.



Act promptly, don't wait to enroll or report a life event

As you know, you have a set amount of time for certain activities, like enrolling in COBRA coverage or reporting a life event that might warrant a change to your benefits. **While these deadlines haven't changed, during the next few months leading up to October 1, we strongly encourage you to make enrollment elections or report life events as soon as possible, well before your established deadline.** Making your enrollment elections and reporting your life events as soon as possible will facilitate a smoother transition to your Chevron COBRA benefits. Use the contacts above if this happens to you.

what's changing

noble energy coverage will end september 30, 2021

chevron coverage begins october 1, 2021

If you are enrolled in any of the Noble plans listed below as of September 30, 2021, your coverage will end, and you and any enrolled, eligible dependents will be automatically moved into the corresponding Chevron plans listed below effective October 1, 2021.

benefit type	noble energy	chevron
Medical	Core Plan	Chevron Medical PPO
Medical	HDHP Gold	Chevron High Deductible Health Plan (HDHP)
Medical	HDHP Silver	Chevron High Deductible Health Plan (HDHP)
Dental	Dental Plan	Chevron Dental PPO
Vision	VSP Vision	Vision Plus Program
Behavioral Health	Included with Medical	Mental Health and Substance Use Disorder Plan (MHSUD)
Health FSA	Health FSA	Not available.

You may also have access to additional medical and/or dental plan choices with Chevron. (See page 7.) For this reason, you'll have the opportunity to change your election(s) among the additional options available to you (if any) during your 2021 initial enrollment election period this fall. The **2012 Benefit Election Information** you will receive from BenefitConnect | COBRA will outline the Chevron plan choices available to you.

Your monthly premium cost will change.

The cost for Chevron COBRA coverage is different than the Noble cost of coverage. (See page 12.) Your new Chevron COBRA coverage cost will begin with the effective date of Chevron coverage. In addition, please note that the cost of behavioral health coverage is included with your Noble medical benefit. At Chevron, there is a separate cost for a separate plan, the Mental Health and Substance Abuse (MHSUD) Plan, for this coverage.

New claims administrators for most of your health coverage.

With the exception of your vision coverage, your Chevron plans are administered by new claims administrators. Be sure to review the Health Benefit Breakdown section of this newsletter for more information. (See page 7.)

Your billing and payment process will change.

Your action is required to ensure your premium payments are paid with the new COBRA administrator, BenefitConnect | COBRA. More information about this change is included with the material you will receive from BenefitConnect | COBRA.



who can I cover?

The eligibility rules for COBRA coverage have not changed. COBRA coverage is only available to eligible dependents enrolled in your active employee coverage at the time of your termination of employment. You may choose to drop dependent coverage, but you can only add dependents that were covered under your Noble benefits at time of termination.

health benefit breakdown

a benefit-by-benefit guide to the transition



in this section we'll introduce you to chevron's 2021 COBRA health benefits, outline key actions you may need to take, provide details about how your noble coverage will transition and what you need to do



these are only the basics; go online for the full story

Get the big picture here, then head to hr2.chevron.com/noble/COBRA to take a closer look at the topics that you want to learn more about.



all the phone numbers are online

Go to hr2.chevron.com/noble/COBRA for a comprehensive list of phone numbers if you have additional questions about some of the benefits discussed here.



information is effective for 2021 plan year

This information, including costs and deductible amounts, are effective for the 2021 plan year only. 2022 information will be provided separately just prior to 2022 open enrollment.

medical

your chevron choices

Chevron COBRA medical coverage begins on October 1, 2021. Chevron provides you with up to four medical plan options:

- **Medical PPO Plan**
- **High Deductible Health Plan (HDHP)**
- **High Deductible Health Plan Basic (HDHP Basic)**
- **Medical HMO Plan** options (if any) vary based on your zip code
 - Medical HMO Plan – HMO Blue Essentials Texas
 - Medical HMO Plan – Kaiser Colorado

All plans include access to **medical services, prescription drugs** and **basic vision care**. They also all offer comprehensive coverage for the same **major medical services** you'd expect, including office visits, emergency services, hospital care, lab services, outpatient care, pregnancy and newborn care, and rehabilitative services.

Prescription Drug Program with Express Scripts

When you enroll in the Medical PPO, the HDHP or the HDHP Basic, you're also automatically enrolled in the **Prescription Drug Program** with **Express Scripts**. As with your current Noble prescription drug coverage, the Chevron Prescription Drug Program includes cost management programs and rules to help control pharmacy costs. This includes the use of generic drugs, home delivery pharmacy for maintenance medications, step therapy programs, prior authorization requirements and a Specialty Pharmacy service for certain specialty drugs. The Prescription Drug Program also features a list of preferred brand-name drugs in their formulary designed to help keep costs down. If you're enrolled in the Prescription Drug Program, Express Scripts will notify you if any of these programs apply to your medications. Starting today you can access hr2.chevron.com/noble/COBRA for phone numbers and links to the formulary and the Express Scripts online tool to research your current medications.



snapshot comparison of your chevron medical choices

See page 11 for a closer look at how Chevron's medical choices compare, including monthly premium, deductibles and other key plan features.



benefit summaries, phone numbers and more

Research plan features, coverage, network providers, phone numbers and more on hr2.chevron.com/noble/COBRA.

what happens to your noble coverage

- Noble COBRA medical and prescription drug coverage automatically ends on **September 30, 2021**.
- The amounts you have paid year-to-date toward your Noble 2021 **deductibles** and **out-of-pocket maximums** will be applied toward your corresponding Chevron 2021 medical plan deductibles and out-of-pocket maximum amounts. If you enroll, your Chevron medical plan's 2021 deductible and out-of-pocket maximums will apply effective October 1. This means that, depending on the Chevron plan you choose, you may have an additional

deductible amount to satisfy even if you've already met your Noble medical deductible or out-of-pocket maximum for 2021. For example, with the Noble Core Plan, your medical and prescription drug deductible is combined; with Chevron's Medical PPO plan, the medical and prescription drug deductibles are separate. See the comparison on page 11 for more information.



medical coverage transition checklist



If you want to participate in COBRA coverage, or if you want to make changes to your 2021 Chevron COBRA coverage elections, you must enroll by the deadline indicated in the **2021 Benefit Election Information** you will receive from BenefitConnect | COBRA.



You may need to take action to transfer your **prescriptions**. See page 10 for more information.



Cigna will follow a process to share your year-to-date 2021 **deductible** and **out-of-pocket maximum** amounts with your Chevron medical coverage after you enroll. The *earliest* your Chevron plan may reflect any transferred amounts is in November, but it could take several months longer depending on the processing status of any outstanding claims you may have.



Go to **hr2.chevron.com/noble/COBRA** to research your current medications and the contact information for your new prescription drug administrator if you have questions about your current medication.



If you need to arrange for **continuation of care**, you'll need to apply for it starting October 1. Please note that continuation of care is *not* available under Chevron Medical HMO Plans. See page 14 for more.



If enrolled in Noble COBRA coverage, outstanding claims for reimbursement of eligible services that occurred on or before **September 30, 2021**, should be filed directly with Cigna according to your Noble plan's established procedures and deadlines. You're encouraged to file all outstanding claims as soon as possible to assist with a timely transition of deductible and out-of-pocket maximum amounts.



With new claims administrators in 2021 for your medical, vision and prescription drug coverage, we know it's important that you know if your current provider is a part of the network. Go to **hr2.chevron.com/noble/COBRA** for web links, phone numbers and instructions that make it easier to verify the status of your current provider and find a new one if necessary.



prescription drug transition checklist

You need to plan ahead to ensure you continue to have timely access to your medication during the transition. Here's what you'll need to do.

your first step is to check the provider network for the chevron medical plan for which you intend to enroll

Go to hr2.chevron.com/noble/COBRA for links and instructions to search the provider network for each plan.

Chevron Medical HMO

Your prescribing physician and/or retail pharmacy *must* be in the HMO plan's network. Additional action is required if your provider(s) are not in your HMO's network.

Medical PPO, HDHP, HDHP Basic

Express Scripts is the administrator for prescription drug coverage. You can use any retail pharmacy you choose, but additional time and attention may be required if your current retail pharmacy is not in Express Scripts' network. See below for more.

next, determine action that may be required

Network retail pharmacy

If your current pharmacy is also part of your new plan's prescription drug network and you have enough refills remaining, you will not need a new prescription prior to October 1, 2021. Be sure to show your new Chevron prescription drug ID card for refills.

Out-of-network retail pharmacy

If your current pharmacy is not part of your new plan's prescription drug network and you have refills remaining, ask your current prescribing physician to provide you with a new prescription or transfer the prescription to a network pharmacy. **We strongly suggest you plan ahead and contact your physician prior to October 1, 2021** – especially if you don't intend to (or cannot) continue with that physician as of October 1, 2021.

Mail order

Your prescription cannot be transferred, regardless of the Chevron plan you choose. **Advanced planning and action is required to prepare for the transition.** First, contact your current physician and request a new prescription just prior to October 1, 2021. You should allow at least two weeks for a new mail order prescription; so, if you need medication immediately, ask your physician for two prescriptions – one for a small supply at a retail pharmacy and one for 90 days by mail order.

Starting **October 1, 2021**, contact your **HMO Plan** or for the Medical PPO, HDHP or HDHP Basic, contact **Express Scripts Member Services** for the steps you need to take to begin mail order.



need a refill around October 1?

If you know you'll need to refill your current prescription(s) on or around October 1, 2021, we strongly suggest you contact your prescribing physician prior to October 1 for a refill – especially if you don't intend to (or cannot) continue with that physician under your new plan.



need to change physicians October 1?

If you need or want to change physicians, be sure to make new appointments as soon as possible in October to ensure your prescriptions are timely refilled or transferred as needed.

snapshot: medical plan comparison



The information in this snapshot provides you with a basic comparison of the key similarities and differences to help you get to know Chevron's medical plans. This guide doesn't cover detailed plan rules, requirements and eligibility. Go to hr2.chevron.com/noble/COBRA to access additional information, documents and plan contact information to ask the plans questions directly.

how all the chevron medical plans are the same

Chevron's medical plan choices all share some basic features:

- **Who is covered and who you can cover** – the eligibility rules – are the same.
- As a COBRA participant, you'll pay the **full premium cost plus a 2 percent administration fee** regardless of the coverage you choose.
- All plans include access to 100 percent coverage with no deductible for certain **preventive care services**, as specified by the Affordable Care Act, when you see a **network** provider.
- All plans include **out-of-pocket maximum protection**, which means there's a defined limit on how much you need to pay for covered services during a plan year. This is an important feature because it protects you in the event of major medical expenses during the year.



network vs. out-of-network

A network is a group of independent health care providers — physicians, hospitals and other facilities — that have agreed with your health plan to charge contracted rates for services provided to plan members. If your plan allows the choice to use a network or an out-of-network provider, try to use the network when possible. Why? Network providers typically save you money by reducing your out-of-pocket costs. **In addition, just like your Noble coverage, some of Chevron's medical plans also have a different deductible, coinsurance/ copayment, and out-of-pocket maximum amount depending on if you see a network or an out-of-network provider.**

COBRA medical plan comparison

effective january 1 through december 31, 2021

	medical PPO plan	high deductible health plan (HDHP)	high deductible health plan basic (HDHP basic)
the basics	Applies to Medical PPO, HDHP, HDHP Basic: <ul style="list-style-type: none">Medical – AnthemPrescription drug – Express Scripts	<ul style="list-style-type: none">Basic vision – VSPThese are preferred provider organization (PPO) plans	<ul style="list-style-type: none">Choose network or out-of-network providers for carePreventive care provisions included
employee monthly premium	full monthly cost (102%)	full monthly cost (102%)	full monthly cost (102%)
you only	\$631.38	\$532.44	\$516.12
you + one adult	\$1,262.76	\$1,065.90	\$1,032.24
you + child(ren)	\$1,074.06	\$904.74	\$877.20
you + family	\$1,705.44	\$1,438.20	\$1,393.32
deductible***	separate deductibles for ...	medical, prescription drugs, MHSUD*, combined**	medical, prescription drugs, MHSUD*, combined**
	covered medical services**		
	NetworkOut-of-network	NetworkOut-of-network	NetworkOut-of-network
you only	\$1,000\$2,000	\$2,800\$5,600	\$5,000\$10,000
you + one adult	\$2,000\$4,000	\$5,600\$11,200	\$10,000\$20,000
you + child(ren)	\$2,000\$4,000	\$5,600\$11,200	\$10,000\$20,000
you + family	\$3,000\$6,000	\$5,600\$11,200	\$10,000\$20,000
	covered prescription drugs		
you only	\$150	Mail-order prescriptions are subject to the combined annual deductible.	Mail-order prescriptions are subject to the combined annual deductible.
you + family	\$300	Certain preventive medications covered at 100 percent, 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.	Certain preventive medications covered at 100 percent, 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.
	covered behavioral health services		
	No deductible if enrolled in MHSUD.*		
out-of-pocket maximum***	separate out-of-pocket maximums for ...	medical, prescription drugs, MHSUD*, combined**	medical, prescription drugs, MHSUD*, combined**
	medical and MHSUD*, combined**		
	NetworkOut-of-network	NetworkOut-of-network	NetworkOut-of-network
you only	\$5,000\$10,000	\$5,000\$10,000	\$6,550\$13,100
you + one adult	\$10,000\$20,000	\$10,000\$20,000	\$13,100\$26,200
you + child(ren)	\$10,000\$20,000	\$10,000\$20,000	\$13,100\$26,200
you + family	\$10,000\$20,000	\$10,000\$20,000	\$13,100\$26,200
	covered prescription drugs		
you only	\$1,800		
you + family	\$3,600		
	One maximum for network, out-of-network.		
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.	

medical HMO plan	
<ul style="list-style-type: none">Medical, prescription drug, basic vision coverage provided by HMOHealth maintenance organization (HMO) plans	<ul style="list-style-type: none">Must use network providerPreventive care provisions includedPlan choices vary by zip code
behavioral health services	
Available through HMO or the Chevron Mental Health and Substance Use Disorder (MHSUD) Plan (if you enroll), but not both for same service. Out-of-network provider not covered whether through MHSUD or HMO Plan.	
HMO blue essentials	kaiser colorado
full monthly cost (102%)	
\$1,243.38 \$2,485.74 \$2,112.42 \$3,355.8	\$671.16 \$1,342.32 \$1,141.38 \$1,812.54
annual deductible	annual deductible
\$0	\$300 individual \$600 family
annual out-of-pocket maximum	annual out-of-pocket maximum
\$2,500 individual \$5,000 family	\$2,500 individual \$5,000 family
save for health care?	
Flexible spending account Health Care Spending Account (HCSA). Chevron does not contribute.	

* If you enroll in the Mental Health and Substance Use Disorder (MHSUD) Plan; coverage is not automatic.

**Amounts paid for covered services provided by a network provider also count toward the out-of-network annual limit. Amounts paid for covered services provided by an out-of-network provider also count toward the network annual limit.

***Each covered individual has a maximum limit equal to the You Only network amount.



medical continuation of care instructions

Continuation of care allows you to continue to receive health care for certain conditions from providers who do not participate in your new plan's network. You might need continuation of care if you are already in active treatment for certain ongoing conditions on **October 1, 2021**.

medical HMO plan

If a Chevron Medical HMO Plan is an available medical plan option in your zip code, you should be aware that continuation of care is not available under these plans. An HMO is a health maintenance organization medical plan option, so you must visit a provider in the HMO's network, otherwise your services aren't covered.

chevron medical PPO, HDHP or HDHP basic

These Chevron medical plans administered by **Anthem** are preferred provider organization plans, so you can continue to use any provider you choose, network or out-of-network. However, the deductible and out-of-pocket amounts are lower when you see a provider that is in Anthem's network. With an approved continuation of care application, you'll have a set amount of time to continue to see your provider and continue to receive the network level of coverage for that condition. After that, you will need to choose a physician from within the Anthem network to receive the network level of coverage. Examples of conditions eligible for continuation of care might include:

- Be in an active course of treatment for an **acute medical condition**
- Be **pregnant**, regardless of trimester
- Have a **terminal illness**
- Have a **surgery or other procedure** that has been authorized by your previous plan scheduled to occur within 90 days of October 1, 2021

To qualify for a continuation of care benefit, you must apply for it. Anthem will send a letter to you outlining the decision or requesting additional information, if needed.* You can also contact Anthem to confirm if your request has been received.



how to apply

You must apply **October 1, 2021**, through **December 1, 2021**. The application is posted on **hr2.chevron.com/noble/COBRA**.

* Continuation of care approval does not guarantee a treatment is medically necessary, and it also doesn't mean you are pre-approved for any medical services. All medical services must be medically necessary. Pre-approval by Anthem may still be required. Talk to Anthem to discuss your personal situation.

dental

your chevron choices

Chevron COBRA dental coverage begins on **October 1, 2021**. Chevron provides you with access to up to two dental plan options:

- **Dental PPO Plan**
- **Dental HMO Plan** (availability varies based on your zip code)

All plans help you pay for diagnostic, preventive, basic restorative and major dental care up to the plan's benefit maximums. Both plans include routine preventive cleanings and x-rays (bitewings) for you and your dependents each year that are 100 percent paid by the plan with no deductible and no co-payment when you visit a network provider.

dental PPO plan with delta dental

You can see any dentist you choose but using at least a **Delta Dental Premier®** network provider saves you money directly by reducing your out-of-pocket costs. Use a **Delta Dental PPOSM** network provider to get the greatest savings on your covered dental services.

Coverage level	Full monthly cost (102%)	Deductible	
		Network	Out-of-network
You only	\$50.77	No deductible	\$100
You + one adult	\$101.43	No deductible	\$200 per person
You + child(ren)	\$86.22	No deductible	\$200 per person
You + family	\$136.88	No deductible	\$300 per person

dental HMO plan with deltacare USA

With an HMO you must visit a provider in the DeltaCare USA network, otherwise your services aren't covered (except for certain emergency situations). In addition, you must visit your selected **DeltaCare USA primary care dentist** to receive benefits under your Dental HMO Plan. Most services not performed by your primary care dentist must be authorized by DeltaCare. Learn more about the primary care dentist on hr2.chevron.com/noble/COBRA.

Coverage level	Full monthly cost (102%)	Deductible
You only	\$20.20	No deductible
You + one adult	\$40.49	
You + child(ren)	\$34.35	
You + family	\$54.65	



features, details, surcharge, phone numbers and more

Research plan features, phone numbers, deductibles, out-of-pocket maximums and more on hr2.chevron.com/noble/COBRA.

what happens to your noble coverage

- Noble COBRA dental coverage automatically ends on **September 30, 2021**.
- Your Noble dental deductible does not transfer to Chevron dental coverage. If you enroll, any applicable **deductible** and **benefit maximums** under your Chevron dental plan will apply for the remainder of 2021.



dental coverage transition checklist

- | | |
|--|--|
| <p><input type="checkbox"/> If you want to participate in COBRA coverage, or if you want to make changes to your 2021 Chevron COBRA coverage elections you must enroll by the deadline indicated in the 2021 Benefit Election Information you will receive from BenefitConnect COBRA.</p> <p><input type="checkbox"/> If enrolled in Noble coverage, outstanding claims for reimbursement of eligible services that occurred on or before September 30, 2021, should be filed directly with Cigna according to your Noble plan's established procedures and deadlines.</p> | <p><input type="checkbox"/> For participants with a qualifying orthodontia treatment in progress you may be able to continue the treatment you started under your Noble dental plan. For all other treatments, there are no treatment in progress provisions. If you need to arrange for treatment in progress, you'll need to apply for it starting October 1. See page 17 for more.</p> <p><input type="checkbox"/> With new claims administrators in 2021 for your dental coverage, we know it's important that you know if your current provider is a part of the network. Go to hr2.chevron.com/noble/COBRA for web links, phone numbers and instructions that make it easier to verify the status of your current provider and find a new one if necessary.</p> |
|--|--|



orthodontia treatment in progress

For participants with a qualifying orthodontia treatment in progress on October 1, 2021, you may be able to continue the treatment you started under your previous dental plan. For all other treatments, there are no treatment in progress provisions.

dental PPO plan

The Dental PPO Plan, administered by **Delta Dental**, is a preferred provider organization plan, so you can continue to use any provider you choose, network or out-of-network. If you began active orthodontic treatment prior to October 1, 2021, ask your orthodontist to submit an orthodontic treatment claim to Delta Dental. **You should have your orthodontist do this whether or not they are a Delta Dental network provider.** Delta Dental will then work with your provider regarding the care. The claim form is available on hr2.chevron.com/noble/COBRA. Any standard dental claim form can also be used. The claim should include:

- All charges and fees (including the down payment or installments paid by your previous dental plan)
- Banding date and length of active treatment
- Brief description of the dentition, appliance (including type) and treatment
- If you are covered by more than one plan, information about the other carrier

dental HMO plan

The Dental HMO Plan, administered by DeltaCare USA, is a health maintenance organization (HMO) dental plan option, so you must visit a provider in the HMO's network, otherwise your services aren't covered. If you or an enrolled dependent has started orthodontic treatment under your previous dental plan, you may be able to continue that coverage if you switch to the Chevron Dental HMO Plan in 2021. Through a provision called orthodontic treatment in progress, your Dental HMO Plan allows you to continue treatment you started under your previous dental plan. You can visit the same orthodontist and have the same coverage and copayments as your previous plan. You pay the same amount that you would have paid under your previous coverage, as long as you remain eligible for coverage under your Chevron Dental HMO Plan. If you began active orthodontic treatment prior to October 1, 2021, under your Noble dental plan and:

- **If banding has taken place**, you are eligible for continuous orthodontic coverage under your Chevron Dental HMO Plan and may continue to visit the same orthodontist.

- **If banding has not occurred**, you are not eligible for continuous orthodontic coverage. In that case, orthodontic treatment must be provided by a DeltaCare network orthodontist in accordance with the copayments, limitations and exclusions defined in your Chevron Dental HMO Plan.
- You must sign up between October 1 and October 31, 2021 to receive this continuous orthodontic coverage. Go to hr2.chevron.com/noble/COBRA to download the **Continuous Orthodontic Coverage Form** and a **claim form**. Please have your treating orthodontist complete and submit both forms by October 30, 2021. DeltaCare will coordinate benefits as necessary with your orthodontist.



vision

basic vision

- If you enroll in the Chevron Medical PPO Plan, the HDHP or the HDHP Basic, you're also automatically enrolled in the **Chevron Vision Program** for **basic vision** coverage with **VSP**.
- If you enroll in a Medical HMO Plan, your coverage also includes **basic vision** coverage through your **HMO Plan**.
- There is no additional cost for this coverage.

vision plus program

- Similar to your Noble VSP Vision Plan, Chevron also offers the **Vision Plus Program** for additional coverage for prescription eyewear that goes beyond your basic vision coverage.
- **VSP** is the insurer for the Chevron Vision Plus Program.



chevron vision plus program with VSP

Coverage level	Full monthly cost (102%)	
	Enrolled in a Chevron medical plan	Waiving Chevron medical plan coverage
You only	\$11.79	\$12.72
You + one adult	\$23.94	\$25.80
You + child(ren)	\$20.06	\$21.63
You + family	\$32.23	\$34.74



features, monthly cost, phone numbers and more

Review more details about basic and voluntary vision coverage, research network providers, access phone numbers to talk directly to VSP and more on hr2.chevron.com/noble/COBRA.

what happens to your noble vision coverage

- Noble Cigna Vision and/or VSP Vision coverage, automatically ends on **September 30, 2021**.



vision coverage transition checklist

- | | |
|--|--|
| <input type="checkbox"/> As a reminder, you're automatically enrolled in basic vision coverage when you enroll in a Chevron medical plan. | <input type="checkbox"/> There are no treatment in progress or continuation of care provisions for vision coverage. |
| <input type="checkbox"/> If you want to participate in COBRA coverage, or if you want to make changes to your 2021 Chevron COBRA coverage elections, you must enroll by the deadline indicated in the 2021 Benefit Election Information you will receive from BenefitConnect COBRA. | <input type="checkbox"/> For Chevron basic vision coverage, go to hr2.chevron.com/noble/COBRA for web links, phone numbers and instructions that make it easier to verify the status of your current provider and find a new one if desired. |
| <input type="checkbox"/> If enrolled in Noble coverage, outstanding claims for reimbursement of eligible services that occurred on or before September 30, 2021 , should be filed directly with Cigna or VSP, as applicable, according to your Noble plan's established procedures and deadlines. You're encouraged to file all outstanding claims as soon as possible. | <input type="checkbox"/> As with your Noble VSP Vision plan, VSP is also the claims administrator for the voluntary Chevron Vision Plus Program. As long as your current provider remains in the VSP network, you don't need to find a new vision provider. |

behavioral health

mental health and substance use disorder coverage

With Noble, your behavioral health coverage was part of your medical plan. At Chevron, there is a separate cost for a separate plan for behavioral health coverage. The Chevron **Mental Health and Substance Use Disorder Plan (MHSUD)** provides confidential support for a wide range of personal issues — from everyday challenges to more serious problems. You and your dependents have access to support services 24 hours a day for a variety of concerns, from family/relationship issues, stress and anxiety, depression to drug and alcohol recovery and more.

MHSUD basics

- **Beacon Health Options** is the claims administrator. This is different from your coverage with Cigna, in which claims are paid by the same administrator.
- As a COBRA participant, you'll pay the **full premium cost plus a 2 percent administrative fee**. The cost of MHSUD coverage is *not* included in Chevron medical coverage.

no deductible if enrolled in ...

- **Medical PPO Plan**
- A **Chevron Medical HMO Plan**

If you choose not to elect Chevron medical coverage, there's no deductible to satisfy.

deductible applies if enrolled in ...

- **High Deductible Health Plan (HDHP)**
- **High Deductible Health Plan Basic (HDHP Basic)**

These plans have *one combined* deductible for medical, prescription drugs, mental health and substance use disorder services. This means you'll have to pay the full cost for covered services and supplies until you reach your combined deductible for the year. See page 12 for deductible information.

do i need to use a network provider?

- You can visit **any qualified provider** you choose (except for Medical HMO Plan, as noted below), but you pay less if you use a provider that is in the Beacon network.
- If you enroll in the MHSUD and a **Chevron Medical HMO Plan**, you have the choice to use the behavioral health benefits provided by your HMO, or use the benefits provided by the MHSUD (but not both for the same service). You must use a network provider to receive benefits, whether through your HMO or the MHSUD. Out-of-network benefits are *not* covered, except for emergency services.



features, requirements, phone numbers and more

For more information about the MHSUD Plan, including what's covered and notification requirements, go to hr2.chevron.com/noble/COBRA.

what happens to your noble coverage

- Noble behavioral health coverage automatically ends on **September 30, 2021**.
- If you were enrolled in Noble medical coverage as of September 30, 2021, you will be automatically enrolled in Chevron MHSUD COBRA coverage. **As a reminder, there is a separate monthly cost for Chevron MHSUD coverage.** If you wish to decline Chevron MHSUD coverage, be sure to make an election to decline during your 2021 COBRA enrollment period.
- The amounts you have paid year-to-date toward your Noble 2021 **deductibles** and **out-of-pocket maximums** will be applied toward your corresponding Chevron 2021 plan deductibles and out-of-pocket maximum amounts. If you enroll, your Chevron plan's 2021 deductible and out-of-pocket maximums will apply effective October 1. This means that, depending on the Chevron plan you choose, you may have an additional deductible amount to satisfy even if you've already met your Noble medical deductible or out-of-pocket maximum for 2021.



behavioral health coverage transition checklist

- ☐ If you were enrolled in Noble medical coverage as of September 30, 2021, you will be automatically enrolled in Chevron MHSUD COBRA coverage. **As a reminder, there is a separate monthly cost for Chevron MHSUD coverage.** If you wish to decline Chevron MHSUD coverage, be sure to make an election to decline during your 2021 COBRA enrollment period.
- ☐ If enrolled in Noble coverage, outstanding claims for reimbursement of eligible services that occurred on or before **September 30, 2021**, should be filed directly with Cigna according to your Noble plan's established procedures and deadlines. You're encouraged to file all outstanding claims as soon as possible to assist with a timely transition of any applicable deductible and out-of-pocket maximum amounts.
- ☐ **If you enroll in MHSUD and the Chevron Medical PPO, HDHP or HDHP Basic:** Cigna will follow a process to share your year-to-date 2021 deductible and out-of-pocket maximum amounts with the Chevron MHSUD and your Chevron medical plan after you enroll. The *earliest* your Chevron plan may reflect any transferred amounts is in November, but it could take several months longer depending on the processing status of any outstanding claims you may have.
- ☐ **If you enroll in the MHSUD and a Chevron Medical HMO:** Cigna will follow a process to share your year-to-date 2021 deductible and out-of-pocket maximum amounts with the Chevron MHSUD, but for privacy reasons, Cigna cannot share this information with your Medical HMO Plan. If you choose to use the behavioral health coverage provided by your Medical HMO Plan, your action is required to transfer any year-to-date deductible and out-of-pocket maximum amounts for behavioral health services to your Medical HMO. Go to hr2.chevron.com/noble/COBRA for further instructions.
- ☐ If you enroll in the MHSUD, there is a separate monthly cost for coverage.
- ☐ If you need to arrange for **transition care**, you'll need to apply for it starting **October 1**. See page 22 for more.

mental health and substance use disorder (MHSUD) plan

Coverage level	Full monthly premium (102%)
You only	\$26.01
You + one adult	\$52.01
You + child(ren)	\$44.21
You + family	\$70.22



behavioral health transition care instructions

Transition care allows you to continue to receive certain behavioral health care from providers who do not participate in Beacon Health Options' network. You might need transition care if you are already in active behavioral health treatment on or before **September 30, 2021**.

Go to hr2.chevron.com/noble/COBRA for instructions to determine if your current provider is also a Beacon Health Options network provider.

- If your current provider is a **Beacon network provider**, simply inform your current provider that effective October 1, 2021, your new claims administrator is Beacon Health Options with Chevron. No additional action is required.
- If your current provider is not a **Beacon network provider**, inform the representative that you are a former Noble employee that needs to register for transition of care.
- You must register for transition of care **October 1, 2021**, through **December 1, 2021**.

If approved for transition of care, you'll be granted a set amount of time to see your current out-of-network provider and continue to receive the network level of coverage for medically necessary services. After that date, typically any one the following may occur:

- Your treatment with the out-of-network provider is complete.
- Your out-of-network provider has successfully applied for and joined the Beacon network.
- You locate and choose a new provider that is part of the Beacon network.
- You have contacted Beacon and requested consideration for a single-case agreement in which the out-of-network status of the provider is waived due to continuity of care.

health flexible spending account (FSA)

If enrolled, your Noble Health FSA closes on **September 30, 2021**. There is no Health FSA option under Chevron COBRA coverage. You have until March 31, 2022, to request reimbursement from Alight Smart-Choice Accounts, the Noble FSA administrator, for eligible health care and/or dependent care expenses incurred through September 30, 2021.



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

**open me for important information about the transition of your
noble COBRA coverage to new chevron COBRA coverage**



The information in this newsletter applies to legacy Noble U.S.-payroll employees who are eligible for COBRA continuation coverage. 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 toward 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.

© 2021 Chevron Corporation. All rights reserved.
Bluehouse 1392640. NOBLE-COBRA September 2021 500

