



2021 Benefits Annual Enrollment

For COBRA Participants

ENROLL: OCT. 30 - NOV. 20 hr.phillips66.com

ANNUAL ENROLLMENT —

ENROLLMENT IS EASY

From Oct. 30 - Nov. 20, you can enroll online or over the phone - quickly and easily.

Before enrolling, review the information in this guide to learn more about your 2021 benefits and to help determine which benefits are best for you and your family. Within this guide, you will learn about:

- Annual enrollment requirements
- Annual enrollment choices



ONLINE AT UPOINT:

- From your computer or mobile device, go to <u>http://digital.alight.com/phillips66</u> and enter your UPoint user ID and password.
- You may be prompted to update your password.



BY TELEPHONE:

Call the Benefits Center at 800-965-4421,
 8 a.m. to 6 p.m. Central time, Monday through Friday.

ENROLL EARLY!

You can change your enrollment elections as often as you want during the annual enrollment period. The annual enrollment period ends online at midnight Central time (or at 6 p.m. Central time if by phone) on Nov. 20. Your elections in the system at that time will be final for Jan. 1, 2021.

Forgot your password?

If you can't remember your

UPoint user ID or password,
click "Forgot User ID or

Password" at the UPoint login.
Or, you can call the Benefits

Center and say "I don't know"
when prompted to enter

2021 BENEFITS ANNUAL ENROLLMENT

Oct. 30 - Nov. 20, 2020

VISIT <u>hr.phillips66.com</u> to learn more about your Phillips 66 Total Rewards.

ANNUAL ENROLLMENT REQUIREMENTS

Review this guide to determine which benefits are best for you and your family. If you wish to enroll or make coverage changes for 2021, you must take action online by midnight Central time or by phone before 6 p.m. Central time on Nov. 20, 2020.

Below is an overview of what you need to do and why you need to take action during annual enrollment.

Benefit	What do you need to do?	Why take action?
Medical, Dental, Vision and Resources for Living	Review this guide	Review to ensure you have the right coverage for you and your family. If you don't make changes, your 2020 elections will carry to 2021.

LEARN MORE ABOUT YOUR BENEFITS

- Visit <u>hr.phillips66.com</u> or the annual enrollment web page <u>hr.phillips66.com/Annual-</u> <u>Enrollment/2021-Annual-Enrollment.aspx</u>.
- Contact the Benefits Center at 800-965-4421, M-F, 8 a.m. to 6 p.m. Central time.

COVERAGE THROUGH THE EXCHANGE

In addition to the options described in this guide you may be able to purchase coverage through the health care exchange. The options available on the exchange will vary based on where you live. You can access resources to help identify options available to you by contacting Health Coverage Resources at healthcoverageresources.com/Phillips66/home.

Exchange enrollment: Nov. 1 - Dec. 15, 2020.



Retirees eligible for the Phillips 66 Retiree Medical Account (RMA) may use their credits to purchase medical, dental, and vision coverage through the following options:

- Phillips 66 Retiree Medical Plan
- Continuous COBRA coverage
- Medicare premiums (Part B and D)
- The Exchange
- Coverage obtained outside the plan

You have the option to pay only a portion of your RMA eligible premiums using credits from your RMA. You can choose from 25%, 50%, 75% or 100% reimbursement for your coverage. Your RMA premium payment election will be applied to all RMA-eligible benefits in which you are enrolled.

YOUR 2021

ENROLLMENT CHOICES

Annual enrollment is your opportunity to make changes to your health and welfare coverage for 2021. Please review this guide carefully to ensure you make the best enrollment decisions for you and your family.

MEDICAL

Phillips 66 offers comprehensive medical benefit options providing coverage for preventive care, regular checkups and office visits, prescription drugs, and more. The HDHP and PPO options are offered through either Aetna or BCBS, based on the participant's home ZIP code.

For 2021, your annual deductible and out-of-pocket maximum will remain unchanged from 2020.

Your 2020
medical election
will carry to 2021 if
you don't take
action.

New: Oklahoma residents will change to the BCBS Blue Preferred network and receive new ID cards. To find out if your doctor is in the new network, contact BCBS or search providers on www.bcbstx.com. Prior to Jan. 1, follow these instructions: Click Find a Doctor or Hospital, Search as Guest, and Search In-Network Providers. Answer the drop-down questions choosing Blue Preferred as your network. After Jan. 1, search providers while logged into Blue Access for Members (BAM).

TELEMEDICINE

Telemedicine gives you 24/7 access to a national network of U.S. board-certified doctors at a low cost. Contact your insurance carrier to utilize telemedicine services.

GRAND ROUNDS

Whether you or a covered dependent needs help finding care, Grand Rounds can:

- Discuss your treatment options or provide guidance on next steps directly from a staff physician via telephone or video chat.
- Help you find a top-tier doctor through the Doctor Match feature.
- Connect you to a world-class physician for an expert opinion on a diagnosis or condition.

To learn more about Grand Rounds and activate your account, go to My HR Tools and click on the Grand Rounds tile, *grandrounds*. *com/phillips66*, use the Grand Rounds mobile app or call 844-339-6732.

PRESCRIPTION DRUG BENEFITS

The HDHP and PPO options include prescription drug benefits administered by CVS Caremark. You are generally required to get your 90-day supply of a maintenance medication through mail order. Alternatively, you can get a 90-day supply at a CVS Pharmacy through their Maintenance Choice program.

New: Starting January 2021, Phillips 66 is offering two new programs to participants who meet the criteria.

- Hello Heart: Hypertension awareness and management program. Participants will receive a wireless blood pressure monitor and real-time personalized digital coaching.
- Next Generation Transform Diabetes Care:
 Members who were participating in the Livongo
 program in 2020 and other eligible individuals
 will be able to engage in a more comprehensive
 and personalized clinical approach to diabetes
 management.

	HDHP Option		PPO Option		
	Network	Non-network	Network	Non-network	
Annual deductible	Employee only: \$1,600 Employee + Dependents: \$3,200	Employee only: \$2,400 Employee + Dependents: \$4,800	Employee only: \$800 Employee + Dependents: \$1,600	Employee only: \$1,600 Employee + Dependents: \$3,200	
	(Includes prescription drug costs)		(Excludes medical copays and prescription drug costs)		
Annual out-of- pocket maximum	Individual: \$5,000* Family: \$10,000	Individual: \$15,000* Family: \$30,000	Individual: \$5,000* Family: \$10,000	Individual: \$15,000* Family: \$30,000	
	(Inclu	des deductible and eligible	e expenses covered by the	e plan)	
	* Once the individual out-of-pocket maximum has been met, cover be paid at 100%.				
Preventive medical care (deductible waived)	Covered at 100%	\$1,500 covered at 100%; you pay 50% thereafter	Covered at 100%	\$1,000 covered at 100%; you pay 50% thereafter	
Doctor visits	You pay 20%, after deductible	You pay 50%, after deductible	Primary care: \$30 copay Specialist: \$60 copay	You pay 50%, after deductible	
Telemedicine & Retail Clinic	\$10 copay, after deductible		\$15 copay		
Urgent care	\$50 copay, after deductible	You pay 50%, after deductible	\$60 copay	You pay 50%, after deductible	
Most other services	You pay 20%, after deductible	You pay 50%, after deductible	You pay 20%, after deductible	You pay 50%, after deductible	
Centers of excellence	You pay 10% for certain procedures, after deductible	NA	You pay 10% for certain procedures, after deductible	NA	
Preventive prescription drugs	Generic preventive drugs and insulin: Covered at 100%; no deductible Brand preventive drugs: You pay 20% (Retail: \$150 max.; Mail: \$300 max.); no deductible		No special provision for preventive prescription drugs		
Other network prescription drugs	Retail (after deductible): • Generic: \$10 copay • Preferred brand: You pay 20% (\$150 max.) • Non-preferred brand: You pay 35% (\$300 max.) Mail (after deductible): • Generic: \$25 copay • Preferred brand: You pay 20% (\$300 max.) • Non-preferred brand: You pay 35% (\$600 max.) You pay 100% of the discounted cost until you reach your annual deductible.		Retail: • Generic: \$10 copay • Preferred brand: You pay 35% (\$150 max.) • Non-preferred brand: You pay 50% (\$300 max.) Mail: • Generic: \$25 copay • Preferred brand: You pay 35% (\$300 max.) • Non-preferred brand: You pay 50% (\$600 max.)		
Monthly premium	You Only: \$461.98 You + Spouse/Domestic Partner: \$1,003.20 You + Child(ren): \$1,003.20 You + Family: \$1,386.17		You Only: \$751.56 You + Spouse/Domestic Partner: \$1,632.46 You + Child(ren): \$1,632.46 You + Family: \$2,255.65		

KAISER HMO

Kaiser provides medical and prescription drug coverage from doctors and facilities participating in the Kaiser network.

If you live within a Kaiser service area in California or Washington, you can choose to enroll in the Kaiser HMO option. For coverage details, contact Kaiser.

Kaiser			
Website	kp.org		
Phone number	Kaiser CA: 800-464-4000 Kaiser WA: 888-901-4636		
Monthly premium (CA only)	You Only: \$703.99 You + Spouse/Domestic Partner: \$1,485.43 You + Child(ren): \$1,485.43 You + Family: \$2,055.65		
Monthly premium (WA only)	You Only: \$720.56 You + Spouse/Domestic Partner: \$1,520.37 You + Child(ren): \$1,520.37 You + Family: \$2,104.03		



DENTAL

Dental options are provided through the MetLife PDP Plus network. Coverage includes regular checkups, as well as basic, restorative, major and orthodontia services.

Your 2020 dental election will carry to 2021 if you don't take action.

	Der	Dental Option			
	Network	Non-network	Dental Option		
Annual deductible	\$50 individual \$100 family	\$150 individual \$300 family	\$50 individual \$100 family		
Annual maximum		\$2,000 per person			
Preventive	Covered at 100%	Covered at 80%	Covered at 100% up to plan limits		
Basic services	You pay 20%, after deductible	You pay 50%, after deductible	You pay 20%, after deductible up to plan limits		
Major services	You pay 50%, after deductible	You pay 50%, after deductible	You pay 50%, after deductible up to plan limits		
Orthodontia	Covered a	Covered at 50% up to \$2,000 lifetime maximum per person			
Monthly premium	You Only: \$39.10 You + Spouse/Domestic Pa You + Child(ren): \$86.02 You + Family: \$125.12	You + Spouse/Domestic Partner: \$78.20 You + Child(ren): \$86.02			

To review the MetLife PDP Plus

* Available to those without access to at least 2 dentists within 10 miles of their home ZIP code.

metlife.com, click on "Find a dentist," select PDP Plus, then

network dental providers, visit

add your ZIP code.

VISION

Phillips 66 has two vision options administered by VSP. The basic option provides you and your family with routine eye exams at no cost and you may receive discounts on other services from VSP providers. The comprehensive option provides a higher level of coverage including the services provided in the basic option.

Your 2020 vision election will carry forward to 2021 if you don't take action

	Basic Option	Comprehensive Option	
Exam	Covered at 100%	Covered at 100% (under the company-provided basic option)	
Frames	Discounts available	\$200 annual allowance*	
Contact lenses	Not covered \$180 annual allowance*		
Contact lens fitting	Discounts available	Covered at 100%	
Lenses — Single vision, bifocal, trifocal, lenticular, polycarbonate (under age 19)**	Discounts available	Covered at 100% one-time annually	
Lens options — Progressive, anti-reflective	Discounts available	Member pays VSP Preferred Pricing	
Monthly premium	You Only: \$0.82 You + Spouse/Domestic Partner: \$1.47 You + Child(ren): \$1.46 You + Family: \$2.33	You Only: \$10.55 You + Spouse/Domestic Partner: \$19.18 You + Child(ren): \$19.09 You + Family: \$30.53	

^{*} The annual allowance is for either frames or contact lenses in the calendar year, but not both.

^{**} Polycarbonate lenses are covered at 100% for participants under the age of 19. For participants over the age of 19 they are covered at a discounted rate.



RESOURCES

This annual enrollment guide highlights what you need to know to enroll in your 2021 benefits. If you want more information on a specific plan — eligibility, coverage details, how it works — you have several resources:

- Annual enrollment website: hr.phillips66.com/Annual-Enrollment/2021-Annual-Enrollment.aspx.
- Summary plan descriptions (SPDs) at hr.phillips66.com.
- Coverage through the Health Care Exchange at *healthcoverageresources.com/Phillips66/home*.
- Benefits Center at 800-965-4421, Monday Friday, 8 a.m. 6 p.m., Central time.
- Health care reform requires Phillips 66 to provide you with a summary of benefits and coverage
 (SBC), available at <u>hr.phillips66.com/Annual-Enrollment/2021-Annual-Enrollment.aspx</u>. The SBC is
 a standardized document that highlights key provisions, limitations and exceptions.

PHILLIPS 66 BENEFIT PROVIDER CONTACT INFORMATION

FIND A DOCTOR AND EXPERT OPINION

Grand Rounds: 844-339-6732 *grandrounds.com/phillips66*

TELEMEDICINE 24/7

For Aetna: 855-835-2362 teladoc.com/aetna For BCBS: 888-680-8646 MDLIVE.com/bcbstx

RESOURCES FOR LIVING (EXTERNAL EAP)

844-766-7351

resourcesforliving.com

MEDICAL

Aetna: 855-267-4184

aetna.com

BlueCross BlueShield: 855-594-4233

bcbstx.com/phillips66 Kaiser CA: 800-464-4000 Kaiser WA: 888-901-4636

kp.org

PRESCRIPTION DRUGS

CVS Caremark: 888-208-9634

caremark.com

DENTAL

MetLife: 855-837-6381 metlife.com

VISION

VSP: 800-877-7195 *www.vsp.com*

SAVINGS PLAN

Vanguard: 800-523-1188

vanguard.com

ADDITIONAL RESOURCES

Benefits Center: 800-965-4421 Phillips 66: *hr.phillips*66.com

Effective Jan. 2021

NOTES			



This communication may contain information regarding certain Phillips 66 compensation and benefits. The summary plan descriptions for the various benefit plans and other relevant terms and conditions provide more detailed information. Receipt of this communication does not guarantee eligibility for benefits or any other form of compensation. Phillips 66 reserves the right to correct any errors. If the information provided by this communication conflicts with the plan documents, the plan documents will prevail. Phillips 66 also reserves the right to amend, change or terminate its plans, any underlying contract or any other policy or program, at any time without notice, at its sole discretion. This communication applies only to non-represented employees, as well as represented employees where provided for under the terms of an applicable collective bargaining agreement.

Enroll online before midnight, Central time (or by phone before 6 p.m., Central time) on Nov. 20, 2020.

Make sure you understand all your options before enrolling in your 2021 benefits.

