



TOTAL REWARDS

2019 BENEFITS
**ANNUAL
ENROLLMENT**



ENROLL: Oct. 26 – Nov. 16

hr.phillips66.com

For COBRA Participants

ANNUAL ENROLLMENT — IT'S EASY TO ENROLL

From Oct. 26 – Nov. 16, you can enroll online or over the phone — quickly and easily.

Review the information in this guide to learn more about your 2019 benefits and to help determine which benefits are best for you and your family. Within this guide, you will learn about:

- Annual Enrollment Requirements
- 2019 Annual Enrollment Choices

Once you have reviewed this guide, you are ready to enroll in your 2019 benefits.



ONLINE AT UPOINT:

- From your computer or mobile device, go to <http://digital.alight.com/phillips66> and enter your UPoint (formerly YBR) 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.

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 your password.

ENROLL EARLY! You can change your enrollment elections as often as you want during the Annual Enrollment period. Annual Enrollment ends online at midnight Central time (or at 6 p.m. Central time if by phone) on Nov. 16.

Your elections in the system at that time will be your final elections for Jan. 1, 2019.

Phillips 66 Benefit Provider Contact Information



DOCTOR MATCH 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

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/mybenefits

VISION

VSP: 800-877-7195
vsp.com

SAVINGS PLAN

Vanguard: 800-523-1188
vanguard.com

ADDITIONAL RESOURCES

Benefits Center: 800-965-4421
Phillips 66: hr.phillips66.com

Effective Jan. 2019

ANNUAL ENROLLMENT REQUIREMENTS

Review this guide to determine which benefits are best for you and your family in 2019. If you wish to enroll or make coverage changes for 2019, you must take action online by midnight Central time or by phone before 6 p.m. Central time on Nov. 16, 2018.

Below is an overview of what you need to do and why 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 2018 elections will carry to 2019.

LEARN MORE ABOUT YOUR BENEFITS

- Visit hr.phillips66.com or the Annual Enrollment web page hr.phillips66.com/Annual-Enrollment/2019-Annual-Enrollment.aspx.
- 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, 2018.

REMINDER:

Eligible retirees can use credits in their Retiree Medical Account (RMA) to offset or reimburse the premiums for Phillips 66 Medical COBRA coverage, Phillips 66 retiree medical coverage or coverage purchased on the [health care exchange](#). RMA credits can be used for eligible retirees and their eligible dependents.

To learn more about the RMA, visit hr.phillips66.com. To determine your remaining RMA credits, visit UPoint (formerly YBR) or contact the Benefits Center.

YOUR 2019 ENROLLMENT CHOICES

Annual Enrollment is your opportunity to make changes to your health and welfare coverage for 2019. Please review this guide carefully to ensure you make the best enrollment decisions for you and your family.

COVERAGE OPTIONS

New for 2019: Medical, Dental and Vision premiums will transition to a 4-tier coverage basis.

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 your home ZIP code.

New for 2019: Infertility benefits will increase to a \$20,000 lifetime maximum.

PRESCRIPTION DRUG BENEFITS

The Phillips 66 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 for 2019:

- Prescription drugs for infertility benefits will be covered up to a lifetime maximum of \$10,000.
- After 2 retail fills of a non-specialty maintenance prescription and after 1 retail fill of a specialty prescription, mail order will be required. Alternatively, you can get a 90-day supply at a CVS Pharmacy through their Maintenance Choice program.
- PPO option co-insurance has been reduced.

HEALTH ADVOCACY

New for 2019: Those enrolled in the HDHP or PPO option will be able to navigate healthcare in a simplified way with a Health Advocate through either Aetna or BCBS.



CONSIDER: Use tools available to estimate your premium and out-of-pocket costs. The option you select will impact your total cost for medical and prescription drug coverage.

If you are enrolled in the Phillips 66 HDHP or PPO option, you will receive a new medical ID card prior to Jan. 1, 2019.

	HDHP Option		PPO Option	
	Network	Non-network	Network	Non-network
Annual deductible	You only: \$1,400 You + Dependents: \$2,800 <i>(Includes prescription drug costs)</i>		You only: \$600 You + Dependents: \$1,200 <i>(Excludes medical copays and prescription drug costs)</i>	You only: \$1,200 You + Dependents: \$2,400
Annual out-of-pocket maximum	Individual: \$4,500* Family: \$9,000	Individual: \$13,500* Family: \$27,000	Individual: \$4,500* Family: \$9,000	Individual: \$13,500* Family: \$27,000
	<i>(Includes deductible and eligible expenses covered by the plan)</i>			
	<i>* Once the individual out-of-pocket maximum has been met, covered services for that individual will be paid at 100%.</i>			
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 & Minute 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): <ul style="list-style-type: none"> • Generic: \$10 copay • Preferred brand: You pay 20% (\$150 max.) • Non-preferred brand: You pay 35% Mail (after deductible): <ul style="list-style-type: none"> • Generic: \$25 copay • Preferred brand: You pay 20% (\$300 max.) • Non-preferred brand: You pay 35% You pay 100% of the discounted cost until you reach your annual deductible.		Retail: <ul style="list-style-type: none"> • Generic: \$10 copay • Preferred brand: You pay 35% (\$150 max.) • Non-preferred brand: You pay 50% (\$300 max.) Mail: <ul style="list-style-type: none"> • Generic: \$25 copay • Preferred brand: You pay 35% (\$300 max.) • Non-preferred brand: You pay 50% (\$600 max.) 	
Monthly premium	You Only: \$443.65 You + Spouse/Domestic Partner: \$962.73 You + Child(ren): \$962.73 You + Family: \$1,330.96		You Only: \$738.87 You + Spouse/Domestic Partner: \$1,603.35 You + Child(ren): \$1,603.35 You + Family: \$2,216.62	

KAISER HMO

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

New for 2019:

- **Kaiser HMO** — now available to those in Washington.

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: \$683.16 You + Spouse/Domestic Partner: \$1,441.45 You + Child(ren): \$1,441.45 You + Family: \$1,994.81
Monthly premium (WA only)	You Only: \$707.29 You + Spouse/Domestic Partner: \$1,492.38 You + Child(ren): \$1,492.38 You + Family: \$2,065.29

GRAND ROUNDS

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

- 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.
- Discuss your treatment options or provide guidance on next steps directly from a staff physician via telephone or video chat.

To learn more about what Grand Rounds has to offer, or to activate your Grand Rounds account, go to grandrounds.com/phillips66, download the Grand Rounds mobile app or call 844-339-6732.



DENTAL

The dental options provide coverage for regular checkups, as well as basic, restorative, and major services and orthodontia. When dental coverage is elected, your home ZIP code is used to determine your eligible dental option.

Your 2018 dental election will carry to 2019 if you don't take action.

	Dental Option		Out-of-area* Dental Option
	Network	Non-network	
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 at 50% up to \$2,000 lifetime maximum per person		
Monthly premium	You Only: \$37.54 You + Spouse/Domestic Partner: \$75.07 You + Child(ren): \$82.58 You + Family: \$120.11		

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

To find a network dental provider, visit metlife.com/mybenefits. Enter "Phillips 66 Company" in the box for company, and fill in your ZIP code.



VISION

Phillips 66 has two vision options administered by VSP. The Basic option provides you and your family 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 2018 vision election will carry forward to 2019 if you don't take action.

	Basic Option	Comprehensive Option
Exam	Covered at 100%	Covered at 100%
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: \$10.05 You + Spouse/Domestic Partner: \$18.26 You + Child(ren): \$18.19 You + Family: \$29.07

* 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.

To learn more or to find a network vision provider, visit vsp.com. Enter your ZIP code to find a doctor.



RESOURCES

This Annual Enrollment Guide highlights what you need to know to enroll in your 2019 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/2019-Annual-Enrollment.aspx.
- Summary Plan Descriptions (SPDs) at hr.phillips66.com.
- Coverage through the 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 hr.phillips66.com/Annual-Enrollment/2019-Annual-Enrollment.aspx. The SBC is a standardized document that highlights key provisions, limitations and exceptions.



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 information 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. 16, 2018.**

**Make sure you understand all your options
before enrolling in your 2019 benefits.**