

PHILLIPS 66

ACTIVE EMPLOYEES

FULL-TIME & PART-TIME (20+ Hours per Week)

Monthly Premiums Effective January 1, 2020 to December 31, 2020

Plan Description	Employee Cost				Company Cost				Total Cost			
	Employee Only	Employee + Spouse/ Domestic Partner	Employee + Child(ren)	Employee + Family	Employee Only	Employee + Spouse/ Domestic Partner	Employee + Child(ren)	Employee + Family	Employee Only	Employee + Spouse/ Domestic Partner	Employee + Child(ren)	Employee + Family
Medical Plans (Before Tax)												
SELF - INSURED MEDICAL through BCBS/AETNA, Rx through CVS/caremark												
HDHP with H.S.A.	\$25.00	\$111.00	\$111.00	\$168.00	\$475.00	\$967.00	\$967.00	\$1,290.00	\$500.00	\$1,078.00	\$1,078.00	\$1,458.00
HDHP without H.S.A.	\$25.00	\$111.00	\$111.00	\$168.00	\$433.33	\$883.67	\$883.67	\$1,206.67	\$458.33	\$994.67	\$994.67	\$1,374.67
PPO	\$153.00	\$333.00	\$333.00	\$460.00	\$614.00	\$1,333.00	\$1,333.00	\$1,842.00	\$767.00	\$1,666.00	\$1,666.00	\$2,302.00
HMO MEDICAL PLANS through KAISER - FULLY INSURED												
Kaiser Northern HMO CA	\$137.57	\$291.21	\$291.21	\$403.39	\$554.00	\$1,168.00	\$1,168.00	\$1,616.00	\$691.57	\$1,459.21	\$1,459.21	\$2,019.39
Kaiser Southern HMO CA	\$137.57	\$291.21	\$291.21	\$403.39	\$554.00	\$1,168.00	\$1,168.00	\$1,616.00	\$691.57	\$1,459.21	\$1,459.21	\$2,019.39
Kaiser HMO Washington	\$148.61	\$313.02	\$313.02	\$433.33	\$595.00	\$1,256.00	\$1,256.00	\$1,738.00	\$743.61	\$1,569.02	\$1,569.02	\$2,171.33
DENTAL PLAN through METLIFE (BEFORE TAX)												
Dental Plan	\$7.00	\$15.00	\$16.00	\$24.00	\$31.00	\$61.00	\$68.00	\$98.00	\$38.00	\$76.00	\$84.00	\$122.00
VISION PLANS through VSP (BEFORE TAX)												
Basic Vision	\$0.00	\$0.00	\$0.00	\$0.00	\$0.80	\$1.44	\$1.43	\$2.28	\$0.80	\$1.44	\$1.43	\$2.28
Comprehensive Vision	\$9.85	\$17.90	\$17.83	\$28.50	\$0.00	\$0.00	\$0.00	\$0.00	\$9.85	\$17.90	\$17.83	\$28.50
SUPPLEMENTAL LIFE INSURANCE, DEPENDENT LIFE, AD&D, LTD PLANS (AFTER-TAX, EMPLOYEE PAID)												
SUPPLEMENTAL LIFE INSURANCE through ZURICH - (TOBACCO FREE)												
Age Group -->	Under 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70 & Over		
Per \$1000 of Coverage	\$0.046	\$0.062	\$0.070	\$0.077	\$0.110	\$0.166	\$0.300	\$0.526	\$1.031	\$1.448		
SUPPLEMENTAL LIFE INSURANCE through ZURICH - (TOBACCO USER)												
Age Group -->	Under 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70 & Over		
Per \$1000 of Coverage	\$0.060	\$0.103	\$0.138	\$0.181	\$0.281	\$0.467	\$0.926	\$1.368	\$3.230	\$4.086		
SPOUSE LIFE INSURANCE through ZURICH												
Age Group -->	Under 30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70 & Over		
Per \$1000 of Coverage	\$0.050	\$0.070	\$0.080	\$0.090	\$0.130	\$0.190	\$0.350	\$0.610	\$1.190	\$1.660		
CHILD LIFE through ZURICH												
Rate Based on Option	Low Option - \$15,000		\$0.750		Medium Option - \$20,000		\$1.000		High Option - \$25,000		\$1.250	
LONG TERM DISABILITY through THE HARTFORD												
Per \$100 of Monthly Pay												
	Basic LTD			\$0.000		Enhanced LTD			\$0.341			
ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) through ZURICH												
Employee AD&D - Coverage Option (no Age Limit) Per \$1,000 of Coverage			\$0.017	Spouse AD&D - Coverage Option (Ends at Age 70) Per \$1,000 of Coverage				\$0.017	Child AD&D - Coverage Option (Ends at Age 25) Per \$1,000 of Coverage			\$0.017