

2018 Retiree Preferred Provider Organization (PPO)

Note: Changes for 2018 are shown in bold.

	Network	Non-Network
Cost Sharing		
Annual deductible	\$1,000 You Only \$2,000 Other coverage levels	\$2,000 You Only \$4,000 Other coverage levels
Annual out-of-pocket maximum (medical and Rx combined, includes deductible and copays; 100% coverage thereafter)	\$6,000 You Only \$12,000 Other coverage levels;	\$12,000 You Only \$24,000 Other coverage levels;
Lifetime coverage limit	No limit	No limit
Medical Services		
Preventive Care	100% covered	Covered at 100% up to \$1,000; 60% thereafter*
Office visits	\$35 PCP/ \$60 Specialist	40% coinsurance after deductible*
Inpatient and Outpatient Services	20% coinsurance after deductible	40% coinsurance after deductible*
Emergency room	20% coinsurance after deductible; 50% after deductible for non-emergency use	20% coinsurance after deductible*; 50% after deductible for non-emergency use
Mental Health and Substance Abuse Disorder Services	20% coinsurance after deductible; managed by Beacon Health Options	40% coinsurance after deductible*; managed by Beacon Health Options
Chiropractic	\$35 PCP/ \$60 Specialist; limited to 20 visits per year	40% coinsurance after deductible*; limited to 20 visits per year

*Non-network benefits are subject to a maximum benefit of **150%** of the prevailing Medicare rate.

Prescription Drugs		
Drug Category	30-day Supply Prescription Drugs	90-day Supply Prescription Drugs
Generic	\$10 copay	\$20 copay
Preferred Brand	40% coinsurance or \$25 min	40% coinsurance or \$60 min
Non-Preferred Brand	50% coinsurance or \$50 min	50% coinsurance or \$125 min

Pricing Factor	Option Description	Monthly Retiree Cost				
		You Only or Spouse Only	You + Spouse	You, Spouse & Child(ren)	You + Child(ren) or Spouse + Child(ren)	Child(ren)
90	hC Retirees only (Full Max Heritage Subsidy)	\$565.00	\$1,130.00	\$1,302.00	\$737.00	\$172.00
85	85 to 89 Points (100% Subsidy)	\$654.00	\$1,308.00	\$1,508.00	\$854.00	\$200.00
80	80 to 84 Points (90% Subsidy)	\$719.00	\$1,438.00	\$1,659.00	\$940.00	\$221.00
75	75 to 79 Points (80% Subsidy)	\$785.00	\$1,570.00	\$1,810.00	\$1,025.00	\$240.00
70	70 to 74 Points (70% Subsidy)	\$851.00	\$1,702.00	\$1,961.00	\$1,110.00	\$259.00
65	65 to 69 Points (60% Subsidy)	\$917.00	\$1,834.00	\$2,112.00	\$1,195.00	\$278.00

These comparisons provide an overview of certain terms and conditions of the health and welfare benefits and are for information purposes only. Benefits and eligibility for coverage are determined under the specific provisions of the official plan documents and any underlying insurance contracts. If there is any discrepancy or conflict between these highlights and the terms of the official plan documents and any underlying insurance contracts, as applicable, the official plan documents and insurance contracts, as applicable, will control. ConocoPhillips reserves the right to amend, change or terminate the health and welfare benefit plans, any underlying insurance contracts or any other programs, at any time and without notice, at its sole discretion, according to the terms of the applicable plans, programs or any underlying insurance contracts.