

# 2023

## Annual Benefits Enrollment Guide

Annual benefits enrollment begins Oct. 21  
and ends at 8 p.m. Central time Nov. 11, 2022.

[hr.conocophillips.com](https://hr.conocophillips.com)



You can learn more about annual benefits enrollment, find online resources and access *My Benefits* to enroll at [hr.conocophillips.com](https://hr.conocophillips.com).



## Medical Options

**You have two High Deductible Health Plan (HDHP) options with Blue Cross Blue Shield of Texas (BCBSTX) and prescription coverage with CVS/Caremark.**

Prescription costs have significantly increased in recent years, especially for brand name prescription drugs. ConocoPhillips is investing in an automatic rebate program through CVS/Caremark, which will result in an average 40 percent decrease in the cost of frequently used, brand name prescription drugs when filled at a retail pharmacy and/or by mail order.

You continue to have access to valuable medical and mental health benefits, such as MDLIVE, 2nd.MD and BCBSTX mental health and substance use coverage.

As a reminder, your BCBSTX health advocate continues to be a valuable resource to help you navigate these new benefits.

Network Features	HDHP Base	HDHP
Annual deductible	\$3,000 You Only coverage \$6,000 Other coverage levels	\$1,500 You Only coverage \$3,000 Other coverage levels
Annual out-of-pocket maximum	\$6,000 You Only coverage \$12,000 <sup>1</sup> Other coverage levels	\$4,000 You Only coverage \$8,000 Other coverage levels
	Medical and Rx combine to meet out-of-pocket max; includes deductible (100% coverage thereafter).	
Health Savings Account (HSA)		
Total annual contribution	\$3,850 You Only coverage \$7,750 Other coverage levels  Note: If you are age 55 or older, you can make an additional contribution of \$1,000.	
Medical Services		
Preventive care	100% covered	100% covered
Medical services	20% coinsurance after deductible	20% coinsurance after deductible
Prescription Drugs		
Generic preventive prescription drugs	20% coinsurance after deductible	100% covered
Non-preventive prescription drugs	20% coinsurance after deductible	20% coinsurance after deductible

Changes for 2023 are shown in **bold**.

<sup>1</sup> No more than **\$9,100** for any one person.



## 2023 COBRA Monthly Costs

	You Only	You + Child	You + Spouse	You + Children	You + Family
Onsite Clinic					
The Well (Midland, TX and Artesia, NM)	\$73.18	\$73.18	\$73.18	\$73.18	\$73.18
Medical					
HDHP Base	\$537.54	\$786.42	\$1,222.98	\$1,133.22	\$1,797.24
HDHP	\$593.64	\$890.46	\$1,386.18	\$1,284.18	\$2,035.92
Dental					
CP Dental	\$39.58	\$79.15	\$79.15	\$139.64	\$139.64
Vision					
Vision Base	\$7.81	\$14.20	\$14.20	\$21.72	\$21.72
Vision Plus	\$17.02	\$31.03	\$31.03	\$47.52	\$47.52
EAP					
EAP	\$2.49	\$2.49	\$2.49	\$2.49	\$2.49





### Select a network dentist to save money.

Visit [MetLife](#) to see if your dentist is in-network. If you do not see your dentist listed, utilize MetLife's Recommend a Dentist form to refer your dentist for network consideration.

	Network	Non-Network	Out-of-Area Dental Benefits <sup>1</sup>
<b>Annual Deductible</b>	\$50 individual, \$150 family	\$100 individual, \$300 family	\$50 individual, \$150 family
<b>Diagnostic and preventive services</b>	100% covered	100% covered <sup>2</sup>	100% covered
<b>Basic services</b>	20% coinsurance after deductible	40% coinsurance after deductible	20% coinsurance after deductible
<b>Major services</b>	50% coinsurance after deductible	50% coinsurance after deductible	50% coinsurance after deductible
<b>Annual maximum benefit</b>	\$2,000 per person (network and non-network combined)		\$2,000 per person
<b>Orthodontia</b>	50% coinsurance; \$2,000 per person lifetime maximum (network and non-network combined)		50% coinsurance; \$2,000 per person lifetime maximum

MetLife and other dental carriers offer individual dental benefits, which may be an affordable alternative for you. Additional information is available at [hr.conocophillips.com](https://hr.conocophillips.com). You can also find out more about MetLife's TakeAlong Dental options at [metlifetakealongdental.com](https://metlifetakealongdental.com) or contact MetLife at 1-844-263-8336.<sup>3</sup>

<sup>1</sup> The out-of-area dental benefit is available only to those **without** access to at least two network dentists within 10 miles of their home zip code.

<sup>2</sup> Non-network charges are reimbursed similar to network charges in the geographic area. Your dentist may bill you for the difference between the approved charge and the billed amount.

<sup>3</sup> The TakeAlong Dental program is not supported by ConocoPhillips. Any questions should be directed to MetLife at 1-844-263-8336.



Network Features	Vision Base	Vision Plus
<b>Well vision exam</b>	100% covered; One per calendar year	100% covered; One per calendar year
<b>Eyeglass Lenses or Contact Lenses</b>		
<b>Single, bifocal, trifocal lenses</b>	100% covered	\$20 copay <sup>1</sup>
<b>Photochromic lenses</b>	30% average savings	\$30 copay
<b>Anti-reflective coating and progressive lenses</b>	30% average savings	\$40 copay
<b>Impact-resistant lenses for children</b>	100% covered	100% covered
<b>Impact-resistant lenses for adults</b>	30% average savings	30% average savings
<b>Contact lenses</b>	\$130 allowance <sup>2</sup> for contacts/contact lens exam (fitting and evaluation), 15% off exam thereafter.	\$200 allowance <sup>2</sup> for contacts/contact lens exam (fitting and evaluation), 15% off exam thereafter.
<b>Frames</b>		
<b>Frames for children and adults</b>	\$130 allowance <sup>2</sup> 20% discount thereafter. Adults every other calendar year; children every calendar year.	\$20 copay, \$200 allowance <sup>2</sup> , 20% discount thereafter. Adults and children every calendar year.

<sup>1</sup>One copay required when purchasing either frames or lenses or both.

<sup>2</sup>Allowance for frames or contacts but not both.

Note: Your well vision exam is covered under the vision plan. If you want vision benefits, you must enroll in a vision option.



# Employee Assistance Plan (EAP)

You can elect EAP coverage, administered through Concern, which provides professional assessments, short-term counseling, referral services and educational materials to help you, your spouse and your children with work and home challenges.

## Annual Benefits Enrollment Closes Nov. 11 at 8 p.m. Central time

You can log on and enroll via [mybenefits.conocophillips.com](https://mybenefits.conocophillips.com). If you do not have an account, you will be prompted to create a new username and password using the company key: **conocophillips**. If you need enrollment assistance, contact a Benefits Center representative at 800-622-5501, Monday through Friday, from 7 a.m. to 8 p.m. Central time.



Learn more about annual benefits enrollment and find online resources at [hr.conocophillips.com](https://hr.conocophillips.com).

## We're going paperless on your Annual Enrollment worksheets.

To review your current (2022) benefits summary, you can login to My Benefits. Your elections do carry over each year. If you do not wish to make changes to these elections, no further action is needed. If you do wish to make changes, you can do so online or by calling the Benefits Center. More information listed below.

## Two Ways to Enroll



Go to *My Benefits* at [mybenefits.conocophillips.com](https://mybenefits.conocophillips.com). The company key to use is **conocophillips**.



Call **800-622-5501** and select the "Annual Enrollment" option to speak with a Benefits Center representative from 7 a.m. to 8 p.m. Central time, Monday through Friday.



Note: This 2023 Annual Benefits Enrollment Guide (Guide) highlights ConocoPhillips Company's health and welfare benefits for COBRA participants. The Guide is an overview of certain terms and conditions of the health and welfare benefits and is for informational purposes only. Each health and welfare benefit plan has specific eligibility and participation requirements. If there is any discrepancy or conflict between this Guide (or any other enrollment materials) 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. This Guide is intended for U.S. COBRA participants. ConocoPhillips Company reserves the right to amend, change or terminate the plans or any underlying insurance contract at any time and without notice, at its sole discretion, according to the terms of the applicable plan or insurance contract.