



Your Guide to 2021 Health Benefits

[Why Annual Enrollment Matters to You](#)

[How to Enroll](#)

[Learn What's New](#)

[Compare Your Plan Options](#)

**Annual Enrollment
October 19–November 6, 2020**





Annual Enrollment October 19–November 6

2020 has been challenging in so many ways.

Through it all, your health benefits from ExxonMobil have been there for you and your family.

Whatever medical plan option you are enrolled in, ExxonMobil health benefits have provided you access to affordable primary care, a vast network of specialists when you have a problem and prescriptions that can be delivered right to your door. We have expanded options to get care virtually through telemedicine services and with your own provider, and we have enhanced our Employee Health Advisory Program (EHAP) to help you take care of yourself and those who depend on you.

We encourage you to take the time now to review your benefits, learn about the changes for next year and take an active role in your health care decisions.

Tools and Tips to Learn More

- Understand the changes for 2021 and how they might impact you on [pages 4–5](#).
- Get the facts you need to choose a medical plan option and understand how to use your medical plan benefits on [pages 8–11](#).
- Find and compare health care costs anytime, anywhere, at [goto/Cigna](#) or [cigna.com](#) or [goto/Aetna](#) or [aetna.com](#).
- Know the steps to enroll and the deadline on [page 3](#).

Remember: Annual Enrollment is the only time you can enroll in or make changes to your health care benefits for the 2021 plan year, unless you experience a change in status during the year.

There's an Online Option, Too

Check out your online Annual Enrollment Guide at [annualenrollmentonline.com](#).

You'll find additional details and a quick video about your options. It's also mobile friendly, so you can learn about your options while you're on the go.



This enrollment guide is a supplement to the Summary Plan Descriptions (SPDs) for the ExxonMobil Medical Plan, ExxonMobil Dental Plan, ExxonMobil Vision Plan, and the ExxonMobil Pre-Tax Spending Plan. It is a summary of all material modifications that are effective January 1, 2021, and should be retained with your SPDs.



Get Ready for 2021

4 Steps to Enroll

- 1 Learn more by reading this guide and visiting annualenrollmentonline.com.
- 2 Enroll through the Employee Direct Access (EDA) system between October 19 and November 6, 2020.
- 3 Click on the Employee Self Service tab at the top of the EDA home page and follow the on-screen instructions. Save your elections throughout the process and submit them when you are finished.
- 4 Print the confirmation for your records.

You must enroll by 6 p.m. CT on November 6 to make changes for your 2021 coverage.

Can I Enroll by Phone?

You cannot enroll by phone for medical, dental or vision coverage or Health Care or Dependent Care Flexible Spending Accounts (FSA). If you don't have access to EDA, you can obtain enrollment forms by calling **800-262-2363, option 0**. Enrollment forms must be received by Benefits Administration no later than November 6, 2020.

For More Information

If you have questions about your benefits, call Benefits Administration at **800-262-2363, option 0**.

Important

If you do not want to make any changes, you don't have to enroll to continue with your current plan selections. But it's still a good idea to review your options. As your life changes, your coverage needs might change, too.

If you participate in a Flexible Spending Account (FSA), you must enroll every year. FSA enrollment does not automatically carry over from year to year.

What's New for 2021

The following changes will be effective January 1, 2021, for those enrolled in the ExxonMobil Medical Plan.

Aetna POS II A&B Members

Non-Network Claims

Using medical providers who are not in the Aetna network is expensive for you and for the Plan. Starting in 2021, you will be responsible for more of the cost if you choose to get care from a non-network provider.

Deductible and Out-of-Pocket Maximum

The annual non-network deductible and out-of-pocket (OOP) maximum amounts are not changing. However, you will need to meet the non-network deductible and OOP maximum separately from the network deductible and OOP maximum. Non-network services will only count toward the non-network deductible and OOP maximum, and network services will only count toward the network deductible and OOP maximum.

For example:

	Network OOP	Non-network OOP
Network specialist visit	\$40	\$0
Non-network MRI facility	\$0	\$400*

* This is only an example. Imaging facilities charge varying amounts. We assumed a \$1,000 total bill, which would leave you with 40% coinsurance if you are enrolled in POS II B.

Allowable Amount

When you use a non-network provider, the Plan will only pay up to a maximum amount for each service. The maximum or allowable amount for most services will be based on a percentage of what Medicare would pay for the same service. **That means you may incur charges the Plan will not share with you, and you will be responsible for paying any outstanding balance billed by the provider.**

This is already how the Plan works for non-network facility charges. You may want to consider using a network provider as a lower-cost alternative.

Preventive Care

You will have access to more preventive services at no cost to you, including certain prescription medications like contraceptives and statins. Preventive care includes periodic wellness visits, routine immunizations and screenings provided when you have no symptoms or have not been diagnosed with a disease.

For a complete list of preventive services, visit [healthcare.gov/coverage/preventive-care-benefits](https://www.healthcare.gov/coverage/preventive-care-benefits).

Medical Coverage Appeals

The Office of the Administrator-Benefits will no longer handle voluntary medical claims appeals. Aetna, Magellan and Express Scripts will handle all claims appeals, including third-party reviews in some cases.

Medical/Dental Coordination

Your medical and dental coverage will no longer coordinate payment to cover procedures by a dentist or oral surgeon under both plans.

Procedures by a dentist or oral surgeon that are medical in nature based on Aetna guidelines will be covered under the medical plan. Procedures that are dental in nature will be covered under the dental plan.

Aetna Select Members

Vision Coverage

If you would like coverage for routine vision care, you will want to enroll in the ExxonMobil Vision Plan. Routine vision care will no longer be covered through your Aetna medical plan option.

We encourage you to examine your option for 2021. If you enroll, you will receive:

- Up to two comprehensive eye exams per year at no cost (provided you stay in network)
- One pair of lenses and frames or contacts per year

Tip: Learn more on [page 13](#).



Cigna Members

Prescription Drugs

More pharmacy programs and services will be available through Express Scripts, a Cigna company. Here are some important items to know:

- You will receive a new Cigna ID card to use at retail pharmacies.
- Home delivery will be through the Express Scripts pharmacy. If you have automatic refills today with Cigna, you will be mailed instructions to sign up for automatic refills with Express Scripts.
- You still have access to the same Cigna network of retail pharmacies, including 90-day refills. Your current prescriptions do not need to be updated. You will be notified if your next refill date changes.
- You can continue to manage your prescriptions at [myCigna.com](https://mycigna.com) or now on express-scripts.com/exxonmobil.

For Those on Diabetes Medications

Fill 30-day insulin prescriptions for \$25 and 90-day insulin prescriptions for \$75 at participating pharmacies (e.g., CVS, Walmart, Target and Express Scripts home delivery).

For Those on Certain High-Cost Specialty Medications

Pay \$0 in copays to fill certain specialty prescriptions. If the specialty medication you are taking qualifies for this benefit, you will be contacted by Accredo, our specialty pharmacy, to complete the paperwork to enroll in the program.

Vision Coverage

If you would like coverage for routine vision care, you will want to enroll in the ExxonMobil Vision Plan. Routine vision care will no longer be covered through your Cigna medical plan option.

We encourage you to examine your option for 2021. If you enroll, you will receive:

- Up to two comprehensive eye exams per year at no cost (provided you stay in network)
- One pair of lenses and frames or contacts per year

Tip: Learn more on [page 13](#).

Changes in Contributions

Because the cost of health care in the U.S. increases every year, your monthly medical plan contributions will increase by \$2 to \$18. The amount of the increase depends on which plan option you enroll in and who you cover. You can see rates for 2021 on [page 11](#).

Good news! There are **no increases** to the monthly contributions for dental and vision coverage.

Did You Know?

ExxonMobil provides health care benefits for more than 47,000 Medicare-eligible retirees and dependents across the U.S. This year, we are switching to a Medicare Advantage plan. Why? Retirees receive a better benefit and the company saves money through Aetna's 4.5-star National PPO Plan.





Who's Eligible for Coverage

If you are enrolled in health care coverage, you may also enroll your eligible family members in medical, dental and vision coverage for 2021, provided they are:

- Your legal spouse;
- Your natural child, stepchild or adopted child until he or she reaches age 26;
- A child over age 26 who is disabled or incapable of self-sustaining employment;
- An eligible family member over whom you have court-appointed legal guardianship or conservatorship;
- An eligible family member recognized under a qualified medical child support order

You may be asked to confirm your family member's eligibility status on a periodic basis.

Important Reminders

Refer to your Annual Compensation and Benefits Statement information and ensure your enrolled family members are still eligible. If your family member is no longer eligible for coverage, you must notify Benefits Administration.

- Failure to notify Benefits Administration about a family member who is no longer eligible, for example a former spouse, can result in your loss of eligibility for the health care plans, and you will be required to reimburse the Plans for any claims paid after the loss of eligibility for any ineligible person(s).
- If you are changing medical options, check the box in front of each family member you wish to cover.
- If this is the first time you are adding a family member, be sure to provide his/her Social Security number.
- If you experience a change in status, such as a marriage or the birth of a child during the year, you may be eligible to make changes to your benefit elections. You will have 60 days from the date of the event to make your change.

To add a family member to your record, contact Benefits Administration at **800-262-2363 , option 0**, or by email at hr.health.welfare@exxonmobil.com.

Covering a Disabled Adult Child

You may continue covering an eligible dependent child after age 26 if he/she:

- Is totally and continuously disabled and incapable of self-sustaining employment by reason of mental or physical disability; and
- Meets the definition of a dependent by the Internal Revenue Service; and
- Was covered as an eligible family member under this plan immediately prior to his/her 26th birthday; and
- Received that determination prior to his/her 26th birthday and continues to meet the clinical definition through subsequent periodic reassessments.

Health Resources for You & Your Family

For help with life issues and challenges

All ExxonMobil employees and families

We all sometimes struggle with how to balance our work and personal lives. This year, dealing with anxiety, stress, financial issues and relationships has been especially challenging.

The Employee Health Advisory Program (EHAP) can help.

- Family or relationship problems
- Challenges or conflicts at work
- Feeling depressed or anxious
- Quitting tobacco, alcohol or drug use
- Caring for children or aging parents
- Changes in your financial situation

You can receive eight in-person sessions at no cost to you, or you can connect to an EHAP counselor by phone or video or use BetterHelp to text or chat. To register online, go to [BetterHelp.com/Magellan](https://www.betterhelp.com/magellan) and choose "Get Started." Enter your first name, last name, email address and ExxonMobil, then complete the registration and questionnaire.

Phone: 800-442-4123 (available 24/7)

Web: [magellanascent.com](https://www.magellanascent.com) (select "Find My Company" and search "Exxon")

For telemedicine (virtual doctor visits)

Aetna and Cigna members



Whether you have trouble booking a timely appointment, are out of town or simply concerned about being around other people, you can talk to a physician by phone or video 24/7.

Teladoc (Aetna)

Phone: 855-835-2362

Web: [Teladoc.com/Aetna](https://www.teladoc.com/aetna)

MDLIVE (Cigna)

Phone: 888-726-3171

Web: [MDLIVEforCigna.com](https://www.mdliveforcigna.com)

For chronic illnesses (e.g., cancer, heart disease or musculoskeletal issues)

Aetna and Cigna members



Dealing with a chronic illness can be exhausting and confusing at times.

You can get help navigating the treatment process, understanding treatment and getting valuable guidance from a licensed, registered nurse through Optum health management.

Phone: 800-557-5519

For diabetes management

Aetna members only



Livongo can help you manage diabetes. Your participation is at no cost to you.

Register for the Livongo program and receive your welcome kit, real-time tips, health care equipment and support from coaches.

Phone: 800-945-4355

Web: [start.livongo.com/EXXON](https://www.start.livongo.com/EXXON) (Registration code: **EXXON**)

For diabetes prevention/weight loss

Cigna members only



If you're at risk for diabetes or heart disease or if you are currently living with type 2 diabetes, Omada Health can help you lose weight and improve your health.

Web: [Omadahealth.com/exxonmobil](https://www.omadahealth.com/exxonmobil)

? Are you comfortable getting all of your care from network providers?

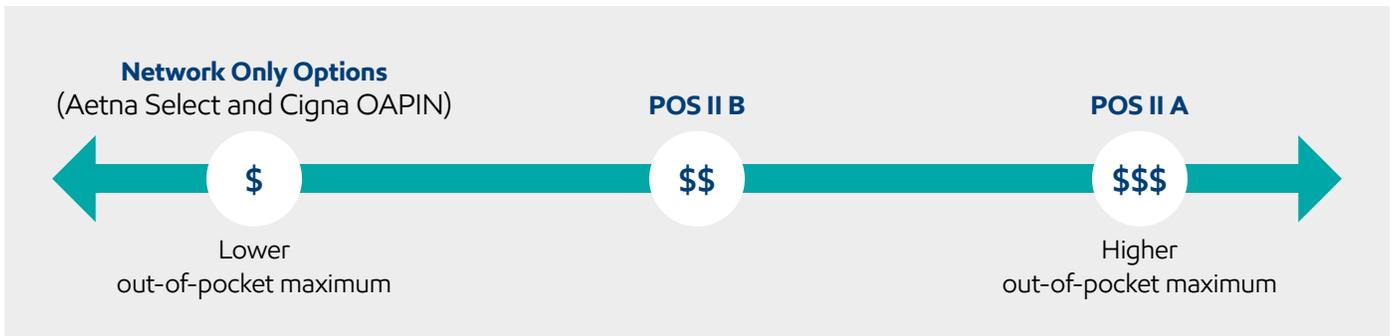
Two plan options — Aetna Select and Cigna OAPIN — require you to use *only* network providers for care. Both options have extensive networks of providers and facilities, so if you see a non-network doctor or use a non-network facility, you will pay 100% of the cost. We strongly recommend you work with a primary care physician to coordinate your care. If you choose the Aetna Select option, your primary care physician must provide a referral before you can see a specialist.

Network Only Options (Aetna Select and Cigna OAPIN)	POS II B	POS II A
Network only	Network or non-network	Network or non-network

? Have you reached your annual out-of-pocket maximum during the last two years?

The annual out-of-pocket is an important consideration if you've had extensive health care claims the last two years or expect high claims in the future. The ExxonMobil Medical Plan pays for 100% of eligible health care expenses after you reach the out-of-pocket maximum in a plan year.

The Network Only options have lower out-of-pocket maximums than the POS II options.



Did You Know?

If you have a medical emergency or schedule a procedure in a network facility, you may receive care from a non-network provider without your knowledge or ability to choose a network provider. For example, your anesthesiologist or radiologist may not be a network provider, and you may receive a surprise bill for their services. If this happens, call Aetna or Cigna. Some or all of the bill may be covered as an eligible expense.



ExxonMobil Medical Plan

Compare coverage for services under the four medical plan options available.

	POS II A		POS II B		Aetna Select	Cigna OAPIN
	In network you pay	Non-network you pay	In network you pay	Non-network you pay	Network only	Network only
Annual deductible						
▪ Individual	\$500	\$700	\$300	\$400	\$0	\$0
▪ Family	\$1,000	\$1,400	\$600	\$800		
Preventive care	\$0	\$0	\$0	\$0	\$0	\$0
Office visit						
▪ PCP	\$40 copay	45%	\$25 copay	40%	\$25 copay	\$25 copay
▪ Specialist	\$60 copay	45%	\$40 copay	40%	\$40 copay	\$40 copay
Telemedicine	\$40 copay	—	\$25 copay	—	\$25 copay	\$25 copay
Urgent care	\$60 copay	45%	\$40 copay	40%	\$60 copay	\$60 copay
Emergency care	\$100 copay + 25%	\$100 copay + 25%	\$100 copay + 20%	\$100 copay + 20%	\$150 copay	\$150 copay
Inpatient care	\$300 deductible + 25%	\$600 deductible + 45%	\$200 deductible + 20%	\$400 deductible + 40%	10%	10%
Outpatient care	25% after deductible	45% after deductible	20% after deductible	40% after deductible	10%	10%
Annual medical out-of-pocket maximum					(includes Rx)	(includes Rx)
▪ Individual	\$4,500	\$18,000	\$3,000	\$15,000	\$3,000	\$3,000
▪ Family	\$9,000	\$36,000	\$6,000	\$30,000	\$6,000	\$6,000

Network or Non-Network: What's the Difference?

Aetna and Cigna both negotiate with doctors, hospitals and other providers to charge less for their networks. When you choose a provider who is "in network," it means you will pay less out of pocket.

POS II A & B: If you see a non-network provider, you will pay a higher coinsurance percentage and will have a higher out-of-pocket maximum. The Plan will only pay up to a maximum amount for each service, and you will be responsible for any outstanding balance billed by your provider.

Aetna Select and Cigna OAPIN: You will pay the full cost for non-network services.



Prescription Drug Coverage

	POS II A	POS II B	Aetna Select	Cigna OAPIN
Up to 34-day fills (from participating retail locations)				
▪ Generic	30% (\$60 max)	30% (\$50 max)	\$15 copay	20% (\$105 max)
▪ Formulary brand	30% (\$130 max)	30% (\$125 max)	30% (\$145 max)	30% (\$125 max)
▪ Non-formulary brand	50% (\$200 max)	50% (\$200 max)	45% (\$165 max)	45% (\$135 max)
90-day fills (mail order or participating retail locations)				
▪ Generic	25% (\$120 max)	25% (\$100 max)	\$30 copay	20% (\$155 max)
▪ Formulary brand	25% (\$260 max)	25% (\$250 max)	30% (\$145 max)	30% (\$175 max)
▪ Non-formulary brand	45% (\$400 max)	45% (\$400 max)	45% (\$165 max)	45% (\$200 max)
Annual prescription drug out-of-pocket maximum				
▪ Individual	\$2,500	\$2,500	Included in medical out-of-pocket maximum	
▪ Family	\$5,000	\$5,000		

For more detailed plan information, refer to the Summary Plan Descriptions at exxonmobilfamily.com.

2021 Medical Plan Contributions

Class of coverage	POS II A	POS II B	Aetna Select	Cigna OAPIN
	Monthly contribution	Monthly contribution	Monthly contribution	Monthly contribution
Participant only	\$100	\$159	\$165	\$165
Participant + spouse or Participant + child(ren)	\$236	\$350	\$363	\$363
Family	\$360	\$572	\$594	\$594

Note: The contributions shown do not reflect the Culture of Health (CoH) rate. See below for CoH savings you can achieve.

Did You Know?

If you are enrolled in the POS II or Aetna Select options, you have access to **StepIn**, a digital weight management and healthy living program offered through Livongo, at no cost to you.

To learn more and see if you are eligible, call **800-945-4355**. The registration code is **STEPIN**.

Important Savings Reminder

If you earn the Culture of Health rate by fulfilling the requirements every year, you can reduce your medical plan option contributions for the next calendar year by:

- \$30/month for participant only coverage
- \$60/month for participant + spouse or children coverage
- \$90/month for family coverage





ExxonMobil Dental Plan

With the ExxonMobil Dental Plan, you get comprehensive coverage, plus the plan covers preventive care at no cost to you. You can visit any dentist for your care, but choosing a dentist in the Aetna Dental PPO network will save you a lot of money.

To find a provider near you, visit [goto/Aetna](https://goto.aetna.com) or aetna.com.

Summary of Coverage

Aetna network	Dental PPO/PDN with PPO II Network
Annual dental maximum*	\$2,000 per covered person
Annual deductible*	\$50 individual/\$150 family

* Applies to general and major services only

Covered services	You pay
Preventive services** Diagnostic exams and cleanings, diagnostic X-rays, fluoride treatment and sealants	\$0
General services Tooth extractions, root canals and fillings	20%
Major services Dentures, fixed bridges or implants, and permanent crowns	50%
Orthodontic services Orthodontia lifetime maximum benefit is \$2,000 per covered person	50%

** Limits on the number of services covered per year apply

For more detailed plan information, please refer to the Dental Plan Summary Plan Description at exxonmobilfamily.com.

2021 Dental Plan Contributions

Class of coverage	Monthly contributions
Participant only	\$27
Participant + 1	\$54
Participant + 2 or more	\$81



For More Information

Download the Aetna mobile app to find a doctor, dentist or the nearest network facility. You can also visit [goto/Aetna](https://goto.aetna.com) or call **800-255-2386**.





ExxonMobil Vision Plan

The ExxonMobil Vision Plan covers up to two comprehensive eye exams as well as one pair of lenses and frames or contact lenses each calendar year. The plan also provides discounts on additional glasses or contact lenses, prescription sunglasses, and laser eye surgery.

You can visit any provider, but choosing a provider from the Spectera network will save you money. Visit exxonmobilvision.com to learn more.

Summary of Coverage

Covered services	In network you pay	Non-network you pay	Limitations and exceptions
Comprehensive exam	\$0	Anything over \$40	Twice/calendar year
Retinal screening photography	\$0	100%	Once/calendar year
Materials	\$25 copay		Once/calendar year
Frames (private practice provider or retail chain provider)	Anything over \$150	Anything over \$45	Once/calendar year
Eyeglass lenses <ul style="list-style-type: none"> ▪ Single Vision ▪ Bifocals ▪ Trifocals ▪ Lenticular 	\$0	Anything over: \$40 \$60 \$80 \$80	Once/calendar year
Lens options <ul style="list-style-type: none"> ▪ Standard scratch resistant coating ▪ Premium progressive ▪ Polycarbonate lenses ▪ Premium anti-reflective coating 	\$0	100%	
Contact lenses (in lieu of eyeglasses) <ul style="list-style-type: none"> ▪ Covered-in-full elective contact lenses ▪ Necessary contact lenses ▪ All other elective contact lenses 	\$0 \$0 Anything over \$200	100% Anything over \$210 Anything over \$200	Once/calendar year

For more detailed plan information, please refer to the Vision Plan Summary Plan Description at exxonmobilfamily.com.

2021 Premiums

Class of coverage	Monthly premiums
Participant only	\$8.75
Participant + spouse or Participant + child(ren)	\$16.99
Family	\$26.77





ExxonMobil Pre-Tax Spending Plan

Flexible Spending Accounts (FSAs) let you pay for eligible out-of-pocket health care and/or dependent care expenses with pre-tax dollars.

How It Works

1 To participate in an FSA, you must elect an annual amount to contribute to your FSA each year.

- The annual maximum is \$2,700 for a Health Care FSA, and the annual maximum for the Dependent Care FSA is \$5,000. (If you are married and file separate tax returns, the maximum for the Dependent Care FSA is \$2,500.)

2 Your annual contribution amount is divided into the number of paychecks you'll receive.

- Each pay period, your FSA contributions will be taken out of your paycheck on a pre-tax basis and deposited into your account(s).

3 You can then use the funds to pay for eligible expenses in 2021.

- Eligible health care expenses include your medical plan deductible, copays and coinsurance, prescription drugs, dental care and more. (Over-the-counter medications and supplies do not qualify for reimbursement under our Health Care FSA.)
- Eligible dependent care expenses include child care for dependents under age 13 or care for adults who are physically or mentally disabled and live with you.

FSA Tips

- With the Health Care FSA, you can carry over up to \$500 of your unused funds to the next plan year. Anything over this amount must be forfeited, so it's important to choose your annual contribution for 2021 carefully.
- With the Dependent Care FSA, you can only be reimbursed up to the amount in your account at the time a dependent care claim is filed.

How Much Should You Contribute?

The Payflex interactive adviser can help you determine how to estimate your expenses and tax savings. Go to payflex.com/en/individuals.html to access the tool. (Scroll down to "Plan to Save.") **Note:** Since Payflex is not exclusive to ExxonMobil, refer to the ExxonMobil Pre-Tax Spending Plan Summary Plan Description for a list of covered expenses under the Health Care and Dependent Care FSA.



Questions?

- Visit [goto/HealthPlans](https://goto.com/HealthPlans) under Pre-Tax Spending Plan and Flexible Spending Accounts.
- To access Flexible Spending Account forms, visit exxonmobilfamily.com and look under "Forms."
- Visit [goto/Aetna](https://goto.com/Aetna) or aetna.com and click "Access Your Account," then "Contact Us," or call **800-255-2386**, Monday–Friday, 8 a.m.– 6 p.m. CT (except certain holidays).

Health Plan Contacts

Vendor	Description	Contact
Medical Plan		
Aetna	POS II and Aetna Select, including: <ul style="list-style-type: none"> ▪ Health Advocate Program ▪ 24-Hour Nurse Line ▪ Behavioral Health (Magellan) 	800-255-2386 goto/Aetna or aetna.com Aetna mobile app
Cigna	Cigna OAPIN, including: <ul style="list-style-type: none"> ▪ Health Advocate Program ▪ 24-Hour Nurse Line ▪ Behavioral Health 	800-818-9440 goto/Cigna or cigna.com myCigna mobile app
Express Scripts (ESI)	Prescription drug benefits information	800-695-4116 express-scripts.com/exxonmobil
Telemedicine		
Teladoc® (Aetna)	24/7 access to board-certified doctors via video chat or phone	855-835-2362 Teladoc.com/Aetna
MDLIVE (Cigna)	24/7 access to board-certified doctors via video chat or phone	888-726-3171 MDLIVEforCigna.com
Dental Plan		
Aetna		800-255-2386 goto/Aetna or aetna.com
Vision Plan		
Spectera		877-303-2415 exxonmobilvision.com
Pre-Tax Spending Plan		
Aetna		800-255-2386 goto/Aetna or aetna.com
Programs		
Magellan	<ul style="list-style-type: none"> ▪ Employee Health Advisory Program ▪ Behavioral Health (Aetna members) ▪ Life Assistance Resources 	800-442-4123 magellanascend.com
2nd MD (Aetna)	Second Opinion Services	866-410-8649 2nd.md/Aetna
Cleveland Clinic MyConsult (Cigna)	Second Opinion Services	800-223-2273, ext. 43223 216-444-3223 goto/Cigna (click on the MyConsult link)
Livongo (Aetna)	Diabetes Management	800-945-4355 start.livongo.com/EXXON Registration Code: EXXON
Omada (Cigna)	Lifestyle Change Program for diabetes prevention	Omadahealth.com/exxonmobil
Optum (Aetna & Cigna)	<ul style="list-style-type: none"> ▪ Health Management Program (for chronic illnesses if you meet eligibility criteria) ▪ Cancer Management Program information 	800-557-5519
Progyny (Aetna & Cigna)	<ul style="list-style-type: none"> ▪ Fertility services ▪ 1:1 support ▪ Patient advocacy 	833-851-2229 progyny.com

Important Notices

The notices and Summaries of Benefits and Coverage (SBCs) that ExxonMobil is required to provide on an annual basis are part of your Annual Enrollment materials. A copy of these notices and SBCs can be found at [exxonmobilfamily.com](https://www.exxonmobilfamily.com).

Plan Documents

The benefits described herein are governed under law by formal Plan documents. If there is any discrepancy between the information provided in this guide and the formal Plan documents, the Plan documents control. Exxon Mobil Corporation reserves the right to amend, suspend or terminate any or all of its benefit plans and programs at any time.

Required Notice of Grandfathered Plan Intent

Effective January 1, 2021, the POS II A and B are no longer grandfathered options under the ExxonMobil Medical Plan (EMMP). The Aetna Select and Cigna OAPIN options under the EMMP were no longer grandfathered as of January 1, 2019.

All options under the EMMP meet the requirements of the Patient Protection and Affordable Care Act (PPACA).

PPACA Highlights

ExxonMobil is continuing to monitor the changes associated with PPACA to assess how it affects the Company and our employees. Keep in mind, you can choose how you obtain your health coverage. You can get it through the ExxonMobil Medical Plan, a family member's employer or through the health insurance marketplace available in your state.

Notice of HIPAA Privacy Practices

The ExxonMobil Medical Plan and the ExxonMobil Dental Plan are required to give you a link to the HIPAA Privacy Notice. Access the HIPAA Privacy notice on ExxonMobil Family at [exxonmobilfamily.com](https://www.exxonmobilfamily.com).

Nondiscrimination Notice

The ExxonMobil Medical Plan and its administrators comply with applicable Federal civil rights laws and do not discriminate on the basis of race, national origin, age, disability or sex.

To see the full notice of nondiscrimination, visit [exxonmobilfamily.com](https://www.exxonmobilfamily.com).