



Retiree Annual Enrollment Guide

At ExxonMobil, we value the contributions you made throughout your career and are committed to supporting you in retirement. We believe in providing resources and benefits that help support you through every stage of life. That's why we offer comprehensive benefits designed to help you protect what matters most.

What's New for 2027

The "What's New" section describes updates to ExxonMobil retiree health benefits and relevant information for the 2027 plan year. It is a supplement to the Summary Plan Descriptions (SPDs) for the ExxonMobil Retiree Medical Plan (EMRMP) and Dental and Vision Programs of the ExxonMobil Health and Welfare Plan (EMHWP), available on exxonmobilfamily.com. This is a summary of all benefit changes that are effective January 1, 2027 and should be retained with your SPDs.*

Important: Annual Enrollment (AE) will take place from October 14 to October 30, 2026.

- Make your AE elections on the Your Total Rewards portal (digital.alight.com/exxonmobil).
- Ensure your contact information (home address, email, and mobile phone number) is current. Having a mobile number on file allows benefits representatives to assist you more quickly if you need to unlock your account or reset your password.
- If you need help navigating the Your Total Rewards portal, refer to the user guide at exxonmobilfamily.com/en/resources/exxonmobil-retirees.
- If you have questions, contact a benefits representative at **1-833-776-9966**, Monday to Friday, 8 am to 4 pm CT.

The following updates to your benefits will be effective January 1, 2027:

- **ExxonMobil Retiree Medical Plan**
 - **Pre-65 Retirees:** Participant contributions will moderately increase. The Exclusive Provider Organization (EPO) option will be available to pre-65 retirees in all U.S. locations. Members will have access to one annual preventive skin exam at no cost, and the EPO option out-of-pocket maximums will be updated.
 - **Post-65 Retirees:** Participant contributions will remain unchanged for 2027. Annual prescription drug out-of-pocket maximum will increase.
- **ExxonMobil Health and Welfare Plan—Dental and Vision Programs**
 - Dental and vision coverage and participant contributions will remain unchanged for 2027.

* You may request a hard copy of the SPD by contacting a benefits representative.

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ExxonMobil Retiree Medical Plan: Pre-65 Options

Updates effective January 1, 2027

- **Participant contributions:** Your monthly contributions will increase moderately in 2027.
- **Expanded EPO access:** The Exclusive Provider Organization (EPO) option will be available to pre-65 retirees in all U.S. locations.
- **Preventive skin exam:** One annual preventive dermatology visit will be covered at 100% to support early detection and prevention of skin cancer.
- **Updated EPO out-of-pocket maximums:** The EPO option will have separate out-of-pocket maximum limits for medical and prescription drug expenses.

Compare coverage for services under the three medical options available.

	PPO A		PPO B		EPO
	In-network you pay	Non-network you pay	In-network you pay	Non-network you pay	Network only, you pay
Annual deductible					
▪ Individual	\$600	\$800	\$400	\$700	\$0
▪ Family	\$1,200	\$1,600	\$800	\$1,400	\$0
Preventive care	\$0	\$0	\$0	\$0	\$0
Office visit					
▪ PCP	\$40 copay	45% after deductible	\$25 copay	40% after deductible	\$25 copay
▪ Specialist	\$60 copay	45% after deductible	\$45 copay	40% after deductible	\$45 copay
Telemedicine	\$40 copay	Not applicable	\$25 copay	Not applicable	\$25 copay
Urgent care	\$60 copay	45% after deductible	\$45 copay	40% after deductible	\$60 copay
ER	\$200 copay + 25% after deductible	\$200 copay + 25% after deductible	\$200 copay + 20% after deductible	200 copay + 20% after deductible	\$200 copay + 10%
Ambulance	25% after deductible	25% after deductible	20% after deductible	20% after deductible	10%
Inpatient care	\$300 copay + 25% after deductible	\$600 copay + 45% after deductible	\$200 copay + 20% after deductible	\$400 copay + 40% after deductible	10%
Outpatient care	25% after deductible	45% after deductible	20% after deductible	40% after deductible	10%
Annual medical out-of-pocket maximum					
▪ Individual	\$4,500	\$18,000	\$3,000	\$15,000	\$2,000
▪ Family	\$9,000	\$36,000	\$6,000	\$30,000	\$4,000

Note: If you live in a rural area with limited in-network access, you may contact BCBSTX to validate that your preferred providers are in the network. If you are not able to find an in-network provider within 30 miles of your home zip code, BCBSTX may authorize care with a non-network provider at the in-network cost share.

For More Information

Call **BCBSTX** at **1-877-278-5214**. They are available Monday to Friday, 7 am to 6 pm CT, except for certain holidays. You can also visit the BCBSTX website at [bcbstx.com/exxonmobil](https://www.bcbstx.com/exxonmobil).

ExxonMobil Retiree Medical Plan: Pre-65 Options (Cont'd)

Prescription drug coverage

	PPO A		PPO B		EPO	
Non-Specialty Drugs*	Up to 34-day fills	90-day fills	Up to 34-day fills	90-day fills	Up to 34-day fills	90-day fills
Generic	30% \$75 max	25% \$150 max	30% \$75 max	25% \$150 max	\$15 copay	\$30 copay
Preferred brand	30% \$150 max	25% \$300 max	30% \$150 max	25% \$300 max	30% \$150 max	25% \$300 max
Non-preferred brand	50% \$225 max	50% \$450 max	50% \$225 max	50% \$450 max	50% \$225 max	50% \$450 max
Specialty Drugs**	Up to 34-day fills	90-day fills	Up to 34-day fills	90-day fills	Up to 34-day fills	90-day fills
Generic	30% \$150 max	25% \$300 max	30% \$150 max	25% \$300 max	30% \$150 max	25% \$300 max
Preferred brand	30% \$300 max	25% \$600 max	30% \$300 max	25% \$600 max	30% \$300 max	25% \$600 max
Non-preferred brand	50% \$450 max	50% \$900 max	50% \$450 max	50% \$900 max	50% \$450 max	50% \$900 max
Annual prescription drug out-of-pocket maximum						
Individual	\$2,500		\$2,500		\$1,000	
Family	\$5,000		\$5,000		\$2,000	

*Non-specialty drugs: up to 34-day fills are available from participating retail pharmacies; 90-day fills are available from participating retail pharmacies and mail order.

**Specialty drugs are available through the specialty pharmacy.

Questions?

Call **Express Scripts** at **1-800-695-4116**. They are available 24 hours a day, 7 days a week, except for certain holidays.

ExxonMobil Retiree Medical Plan: Post-65 Retirees Medicare Primary Option (MPO)

Updates effective January 1, 2027

- **Participant contributions:** Your monthly contributions will remain unchanged for 2027.
- **Prescription Drug** annual out-of-pocket maximum will increase to \$2,400.

As a reminder, to enroll in the MPO, you must:

- Be an eligible retiree or eligible family member (as defined in the Plan);
- Be enrolled in Medicare Parts A and B, and continue to pay any required premiums;
- Provide the Medicare Beneficiary Identifier (MBI) located on your Medicare card to a benefits representative at **1-833-776-9966** by the end of the third month following either the month you turn age 65 or the month you retire;
- Have a permanent residential address in the U.S. on file with CMS;
- Not be enrolled in another group or individual Medicare Advantage plan (Part C); and
- Not be enrolled in an individual Medicare Part D prescription drug plan in the open market (Part D).

For More Information

For medical-related questions, call **Aetna** at **1-833-595-1012** (TTY: 711) from Monday to Friday, 7 am to 8 pm CT.

For questions regarding prescription drugs, call **Express Scripts** at **1-866-557-8211**, 24 hours a day, 7 days a week.

Other Employer-Sponsored Coverage—Waiving Coverage

You can waive coverage under the EMRMP if you have access to other employer-sponsored coverage through either your own active employment or as a dependent of your spouse's active employment. If you cancel EMRMP coverage, you and your eligible dependents will not have an opportunity to re-enroll at a later time. Refer to the SPD for more details.

Note: Post-65 retirees with a permanent residential address outside the U.S. are not eligible to participate in ExxonMobil-sponsored health benefits, including medical, dental, and vision coverage.

Dedicated Phone Line Through MD Anderson

Retirees and eligible family members enrolled in the ExxonMobil Retiree Medical Plan have access to an exclusive concierge phone line for scheduling certain cancer-related services at MD Anderson Cancer Center. This service is designed to provide personalized support and faster access to cancer care.

How to Get Support: Call **1-713-563-7998** or email patientaffairs@mdanderson.org from Monday to Friday, 8 am to 5 pm CT.

ExxonMobil Health and Welfare Plan: Dental Program

Dental Contributions

Your coverage and monthly contributions will remain unchanged for 2027.

Questions?

Call **Delta Dental** at **1-833-459-1169** from Monday to Friday, 7 am to 7 pm CT. You can also visit their website at www1.deltadentalins.com/group-sites/exxonmobil.html.

ExxonMobil Health and Welfare Plan: Vision Program

Vision Premiums

Your coverage and monthly contributions will remain unchanged for 2027.

Questions?

Call **MetLife** at **1-833-EYE-LIFE (393-5433)** from Monday to Friday, 7 am to 7 pm CT. You can also visit their website at metlife.com/info/exxonmobil.

Pro Tip > How to Enroll in your Benefits During AE

Step 1 | Access the Your Total Rewards portal

- Access the Your Total Rewards portal directly at digital.alight.com/exxonmobil or through exxonmobilfamily.com, in the “ExxonMobil Retirees” section. Click on the Your Total Rewards portal link from any device (computer, tablet, or mobile phone).
- If you have created a user ID and password, you will need this information to access your account at digital.alight.com/exxonmobil.
- You can also access the Your Total Rewards portal on the go using the Alight Mobile app, and manage your benefits from anywhere at any time. Download the Alight Mobile app from the **App Store** or **Google Play**.
- If you have not created a user ID and password, follow the registration instructions posted on EM Family.



Step 2 | How to Enroll

- Once you're on the home page, click the **Make Your Retiree Benefit Choices** tile in the “Recommended” section. — OR —
- Click the **Make Your Annual Enrollment Choices** tile in the “To Dos” section to begin the enrollment process. This must be completed between October 14, 2026 and no later than October 30, 2026 at 11:59 pm CT.

For further information, please access the Your Total Rewards Enrollment Instructions at www.exxonmobilfamily.com/en/resources/exxonmobil-retirees.

2027 Retiree Health Rates

ExxonMobil Retiree Medical Plan Monthly Pre-65 Retiree Contributions				
	Participant Only	Participant + Spouse	Participant + Child(ren)	Family
PPO A	\$249	\$535	\$524	\$785
PPO B	\$341	\$730	\$716	\$1,073
EPO	\$358	\$767	\$752	\$1,127

ExxonMobil Retiree Medical Plan Monthly Post-65 Retiree Contributions*		
	Participant Only	Participant + Spouse
Medicare Primary Option	\$74	\$148

* Each participant (retiree and spouse, if applicable) needs to be enrolled individually in the MPO. The monthly rate of \$74 is for participant only.

ExxonMobil Health and Welfare Plan – Dental Program Monthly Retiree Contributions				
	Participant Only	Participant + Spouse	Participant + Child(ren)	Family
Retiree Contribution	\$43	\$86	\$86	\$129

ExxonMobil Health and Welfare Plan – Vision Program Monthly Retiree Premiums				
	Participant Only	Participant + Spouse	Participant + Child(ren)	Family
Retiree Premium	\$8.64	\$17.42	\$15.81	\$26.86



Submit Your Beneficiary Designations Online Through the Your Total Rewards Portal

To make changes to your beneficiary designations for pension, life insurance, and accidental death and dismemberment insurance, click the icon on the top right side of the Your Total Rewards portal home page, and select **Beneficiaries**.

If you have questions, contact a benefits representative at **1-833-776-9966** from Monday to Friday, 8 am to 4 pm CT.

Note: You can update and review your Savings Plan beneficiary with Voya Financial at **1-877-XOM-401K (966-4015)**.

Contacts

Benefits Administrator		
ExxonMobil Benefits Service Center	Benefits administrator Your Total Rewards portal	1-833-776-9966 digital.alight.com/exxonmobil
ExxonMobil Retiree Medical Plan: Pre-65 Retirees		
Blue Cross and Blue Shield of Texas (BCBSTX)	▪ Medical and behavioral health benefits ▪ Health Advocates ▪ 24-hour Nurse Line ▪ Chronic condition and cancer care support	1-877-278-5214 bcbstx.com/exxonmobil
Express Scripts	Prescription drug benefits	1-800-695-4116 express-scripts.com/exxonmobil
OneImaging	Access to affordable, high-quality imaging centers nationwide, with personalized concierge scheduling assistance	1-833-619-0837 oneimaging.com/exxonmobil
MDLIVE	24/7 access to board-certified doctors via video chat or phone (urgent care, behavioral health therapy, and psychiatry visits)	1-888-680-8646 bcbstx.com
My Medical Ally	Second opinion services to help you understand your diagnosis and treatment options, find the right doctor or hospital, and get an expert second opinion	1-888-361-3944 MyMedicalAlly.alight.com
Omada	Weight management, diabetes and hypertension support, online tools and education	1-888-987-8337 omadahealth.com/exxonmobil
Hinge Health	Digital physical therapy, online tools and education for musculoskeletal issues	1-855-902-2777 hingehealth.com/for/exxonmobil
ExxonMobil Retiree Medical Plan: Post-65 Retirees		
Aetna Medicare	Medical and behavioral health benefits Medicare Advantage PPO with Extended Service Area	1-833-595-1012 aetnamedicare.com/exxonmobil
Express Scripts Medicare	Prescription drug benefits Medicare Part D Prescription Drug Plan	1-866-557-8211 express-scripts.com
ExxonMobil Health and Welfare Plan: Dental Program		
Delta Dental	Dental benefits administered by Delta Dental Insurance Company, including Delta Dental PPO and Delta Dental Premier networks	1-833-459-1169 www1.deltadentalins.com/group-sites/exxonmobil.html
ExxonMobil Health and Welfare Plan: Vision Program		
MetLife	Vision benefits with the Superior Vision network, administered by MetLife	1-833-EYE-LIFE (393-5433) metlife.com/info/exxonmobil

Important Notices

Summary of Material Modifications (SMM)

The “What’s New” section of this document describes ExxonMobil retiree health plan changes for the following year. It is a supplement to the Summary Plan Descriptions for the ExxonMobil Retiree Medical Plan, ExxonMobil Dental Program, and ExxonMobil Vision Program of the ExxonMobil Health and Welfare Plan available on [exxonmobilfamily.com](https://www.exxonmobilfamily.com). This is a summary of all material modifications and should be retained with your Summary Plan Descriptions.

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. ExxonMobil Corporation reserves the right to amend, suspend, or terminate any or all of its benefit plans and programs at any time.

Affordable Care Act

Please review your/your covered dependents’ personal information on the Your Total Rewards portal and notify ExxonMobil Benefits Service Center if any corrections are needed. The Affordable Care Act requires insurers and employers to report to the IRS the Social Security Number (SSN) and legal name of all employees and dependents with minimum essential coverage. The IRS compares this information against what is on file with the Social Security Administration to ensure the data provided matches.

A Note Regarding the ExxonMobil Retiree Medical Plan

The ExxonMobil Retiree Medical Plan (EMRMP) is a retiree-only plan. As a retiree-only health plan, the EMRMP is exempt from HIPAA portability and Patient Protection and Affordable Care Act (PPACA) insurance mandates, including consumer protections available under other health plans.

Important Notice About Becoming Medicare-Eligible

Retirees or covered family members of a retiree who become Medicare-eligible, either due to age or Social Security disability status, are no longer eligible to participate in the ExxonMobil Retiree Medical Plan PPO options, EPO option, or Cigna Global options. Medicare-eligible participants must change their Company-provided coverage to the ExxonMobil Medicare Primary Option (MPO), enroll in Medicare Part A and Part B, have a permanent U.S. residential address, and provide their MBI (Medicare Beneficiary Identifier)

to the ExxonMobil Benefits Service Center (EMBSC) by the end of the third month following either the month they turn age 65 or the month they retire. In order to be enrolled in the MPO, Medicare-eligible participants cannot enroll in an individual Medicare Part D plan or in another Medicare Part C plan. Medicare-eligible participants may only be enrolled in a group Medicare Part D plan, also referred to as an Employer Group Waiver Plan (EGWP) Part D plan, if a former employer enrolls them.

Medicare Part D Creditable Coverage Notice

For plan participants who are Medicare-eligible, the prescription drug coverage offered under the plan is considered to be “creditable” or “as good as” Medicare Part D coverage. For more information, please refer to the attached Creditable Coverage Notice or the notice located on [exxonmobilfamily.com](https://www.exxonmobilfamily.com).

Medicaid and the Children’s Health Insurance Program (CHIP)

If you are eligible for health coverage and cannot afford the monthly premiums, you may qualify for a premium assistance program offered through state Medicaid or CHIP programs. For more information, please refer to the attached Medicaid and the Children’s Health Insurance Program (CHIP) notice or the notice located on [exxonmobilfamily.com](https://www.exxonmobilfamily.com).

Notice of HIPAA Privacy Practices

The plan is committed to the privacy and security of your protected health information. For information about the permissible uses and disclosures of your protected health information and your individual rights, you can access the plan’s HIPAA Privacy notice on [exxonmobilfamily.com](https://www.exxonmobilfamily.com).

Nondiscrimination Notice

The ExxonMobil Retiree Medical Plan and ExxonMobil Health and Welfare Plan and their 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).

Women’s Health and Cancer Rights Act Notice (WHCRA)

The plan provides benefits for mastectomy-related services including reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy (including lymphedema). If you are enrolled in the PPO A, PPO B, or EPO option, call BCBSTX Member Services at **1-877-278-5214** for more information; for the Medicare Primary Option, call **1-833-595-1012**, Option 1 (TTY: 711).