

The ExxonMobil logo is displayed in red text in the upper left corner of the image. The background of the entire page is a photograph of a doctor in a white coat and stethoscope examining a woman's arm. A young girl sits next to the woman, looking towards the doctor. The scene is set in a clinical office with a sink and mirror visible in the background.

ExxonMobil

How to enroll – Annual Enrollment

Each year, during the fall, ExxonMobil offers an annual enrollment period. During this time, you can switch from your current option to another available option. This is also the time to make changes to coverage by adding or deleting family members. Family members may be added or removed for any reason but they must be removed as soon as they are no longer eligible. Changes elected during Annual Enrollment take effect the first of the following year.

This tutorial is for instructional purposes only. Some of the information and rates contained in this document should serve as examples only. The actual information and rates are set forth in the Plans' governing documents and annual enrollment materials.

How to enroll?

1. Access the ExxonMobil Benefits Portal. You can do it through your ExxonMobil computer by typing goto/benefitsportal or from your personal device at www.exxonmobil.com/benefits. Please refer to the "How to Log On" tutorial for guidance on how to register into the portal.
2. Click on **Go** if you want to review your current elections.
3. Click on **Learn More** to check out the Annual Enrollment Guide.
4. Click on **Enroll Now** to make your Annual Enrollment elections. Note: in order to participate in a Flexible Spending Account (FSA) you must make an active election each year, even if you are already participating.

The screenshot displays the ExxonMobil Benefits Portal interface. At the top left is the ExxonMobil logo with a blue circle containing the number '1'. The top right shows 'EMPLOYEE TEST' with user and notification icons. A red navigation bar contains links for Home, Pension Plan(s), Health & Welfare Plan(s), Life Events, Other Benefits, and Library. The main content area features several sections: 'Alerts & Opportunities' with a yellow warning icon; 'Don't Miss' with a clipboard icon and the heading 'Annual Enrollment'; 'Enroll in your Benefits' with instructions to review current year elections and a 'Go' button (labeled '2'); 'Check out the Annual Enrollment Guide for More Information.' with a 'Learn More' button (labeled '3'); 'You have until Nov 04, 2022 at 11:59p ET, to make your elections.' with an 'Enroll Now' button (labeled '4'); 'Health Snapshot' with a camera icon; 'Spending Account Snapshot' with a photo of a woman and a 'Go' button; and 'Pension Snapshot' with a pie chart icon. A 'Go' button is also present under the Pension Snapshot section.

5. To make changes click on **Change**

ExxonMobil EMPLOYEE TEST

Home Pension Plan(s) Health & Welfare Plan(s) Life Events Other Benefits Library

Annual Enrollment Deadline: Nov 04, 2022 at 11:59pm ET

Want to know more about your life events and benefits? [\(tell me more\)](#)

		\$998.19 Monthly Cost <small>(Effective 01/01/2023)</small>	11 of 13 benefits selected	expand all
HEALTH BENEFITS			4 of 5 benefits selected	-
Medical ExxonMobil Medical Plan, Aetna POS II B option	x5 You, Dependent One, Dependent Two, Dependent Three, Dependent Four	\$601.00	✓ 5	Change
Dental ExxonMobil Dental Plan	x5 You, Dependent One, Dependent Two, Dependent Three, Dependent Four	\$83.00	✓	Change
Premium Payment Plan Pre-Tax		\$0.00	✓	Change
Vision ExxonMobil Vision Plan	x5 You, Dependent One, Dependent Two, Dependent Three, Dependent Four	\$31.05	✓	Change
Culture of Health Incentive Waive Coverage		\$0.00		
FLEXIBLE SPENDING ACCOUNTS			1 of 2 benefits selected	+
LIFE INSURANCE			2 of 2 benefits selected	+

6. **Check** the box in front of each eligible family member you wish to cover.
7. **Click** the selected plan option. If you want to cancel coverage, click Waive Coverage.

We invite you to compare plans and rates using the "Compare plans/Calculate Costs" tool, which can assist you in making an educated election for you/your family. You will find more information about "Useful tools" at the end of this tutorial and in the Index section.

8. Click **Continue**.

Medical



Find a Doctor/Hospital



Compare Plans/Calculate Costs

 **Who would you like to cover?** Your cost shown below is based on who you cover.
(don't see someone you were expecting?)

You

6 Dependent One view

Dependent Two view

Dependent Three view

Dependent Four view

[+ Add Family Member](#)

 **Which medical plan would you like?**

	Monthly Cost view by coverage tier	Benefits Mentor <small>Estimate your total annual cost 🔗</small>
<input type="radio"/> Waive Coverage	\$0.00	
<input type="radio"/> ExxonMobil Medical Plan, Aetna POS II A option	\$385.00	
7 <input checked="" type="radio"/> ExxonMobil Medical Plan, Aetna POS II B option	\$601.00	
<input type="radio"/> ExxonMobil Medical Plan, Aetna Select option	\$636.00	
<input type="radio"/> ExxonMobil Medical Plan, Cigna QAPIN option	\$636.00	

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Cancel
Continue >

9. After making all the desired changes, click **Submit**.

HEALTH BENEFITS		4 of 5 benefits selected		-
Medical Aetna Select	x5 You, Dependent One, Dependent Two, Dependent Three, Dependent Four	\$636.00	✓	Change
Dental ExxonMobil Dental Plan	x5 You, Dependent One, Dependent Two, Dependent Three, Dependent Four	\$83.00	✓	Change
Premium Payment Plan Pre-Tax		\$0.00	✓	Change
Vision ExxonMobil Vision Plan	x5 You, Dependent One, Dependent Two, Dependent Three, Dependent Four	\$31.05	✓	Change
Culture of Health Incentive Waive Coverage		\$0.00		
FLEXIBLE SPENDING ACCOUNTS		1 of 2 benefits selected		+
LIFE INSURANCE		2 of 2 benefits selected		+
ACCIDENTAL DEATH & DISMEMBERMENT BENEFITS		2 of 2 benefits selected		+
ADDITIONAL BENEFITS		2 of 2 benefits selected		+

Total Cost	
Total	\$1,033.19
Pre-Tax	\$750.05
After-Tax	\$283.14

Note – after you save your elections (by clicking **Submit**), you'll still be able to make changes to your benefits until Nov 04, 2022 at 11:59pm ET.

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[Cancel](#) [Submit](#)

10. **Download / Print** your Confirmation Statement and verify your changes.
In case you need to make any corrections, click on **Make Changes**.

ExxonMobil EMPLOYEE TEST   

Home Pension Plan(s) Health & Welfare Plan(s) Life Events Other Benefits Library

Annual Enrollment Deadline: Nov 04, 2022 at 11:59pm ET

Enrollment Completed **10** [Download/Print](#)

Confirmation Number 22249154819

Submitted Sep 13, 2022 at 08:17am ET

Monthly Cost \$998.19

You can make changes to this event until Nov 04, 2022 at 11:59pm ET.

[← Make Changes](#) [Hide Elections](#)

Useful tools

- **Health Provider Finder** is a fast, easy-to-use tool that improves member experience when you are looking for in-network health care providers.

You can use different filters to find a health provider: your current medical plan, type of provider (hospital, doctor, dental, vision), the professional's name and/or a specialist or condition (allergist, preventive medicine). In addition, you can limit the distance of the health provider from your Zip Code on records.

Health Provider Finder

The screenshot shows the Health Provider Finder interface. It includes several filter sections: 'Plans' with a dropdown menu labeled 'Select at least one plan'; 'Type of Provider' with a dropdown menu set to 'All'; 'Name' with a search input field labeled 'Name or partial name' and a magnifying glass icon; 'Specialists or Conditions' with a dropdown menu labeled 'Make a selection'; and 'Location' with a 'Zip Code' field set to '1180C' and a 'Search Distance (mi): 10' slider. At the bottom, there are 'Reset' and 'Start' buttons.

- **Compare Plans / Calculate Costs - Benefits Mentor** is a tool to help you understand your healthcare services use and costs, to reflect on future needs, and to estimate possible out-of-pocket costs by comparing various health plan options and financial savings opportunities.

You can also choose to **Chat with Watson**. This virtual assistant may help you find the medical plan option that better fits your needs. Or, you can click **Go to Website** and follow the instructions.

(find additional instructions in the Index below)

Let's find the right health insurance together!

Let IBM's Watson guide you in finding a great health plan.



CHAT WITH WATSON

OR

Roll up your sleeves and research your health plan choices.



GO TO WEBSITE

- **Zip Code Search Tool** will show you a listing of available plans for the 2023 plan year based on the zip code of your residence. Plans Summaries and rates information are also available for your review.

[Goto/zipcode](#)

ExxonMobil Medical Plan

This search provides information for the 2022 Plan Year. Please use the navigation at the top of the page to see previous years.

Enter your zip code here...

Check for available plans

Results

If you live in ZIP Code area 77331 you are eligible to participate in the following ExxonMobil Medical Plan(s):

POS II Options (A & B): ExxonMobil Medical Plan POS II Network - In-Network Area

- Option A - Plan Code: 1021 - [Plan Summary](#)
- Option B - Plan Code: 1022 - [Plan Summary](#)
- Group Number: 721000
- Plan Phone Number: 1-800-255-2386

Network Only Option: Cigna OAPIN

- Plan Code: 1162 - [Plan Summary](#)
- Group Number: 3207052
- Plan Phone Number: 800-818-9440

Network Only Option: Aetna Select

- Plan Code: 1119 - [Plan Summary](#)
- Group Number: 721000
- Plan Phone Number: 800-255-2386

ExxonMobil Dental Plan

- Plan Code 20BA - [Plan Summary](#)

ExxonMobil Vision Plan

- Plan Code 8011 - [Plan Summary](#)

Questions or Issues

If you have questions or need assistance unlocking your account, contact us.

- Phone: ExxonMobil Benefit Service Center at (800) 682.2847
Hours: 8 a.m. to 6 p.m. ET, Monday through Friday, except certain holidays.
- Web: ExxonMobil Benefits Center at www.exxonmobil.com/benefits

Important Note

To obtain any personal assistance or to authorize transactions on your account with an ExxonMobil Benefits Service Center representative, you will still be required to provide and enter your SSN and PIN to the Interactive Voice Recognition System (IVR). If you do not have a PIN number please hold on the line and a representative will assist you.

Index

Compare Plans / Calculate Costs - Benefits Mentor

Instructions

1. Read the welcome notice and review the material in the enrollment website for the benefit information that applies to you. Then click **LET'S BEGIN**.

The screenshot shows the 'Welcome' page of the IBM Benefits Mentor. At the top, there is a navigation bar with 'Welcome 1', 'Choose a Medical Plan 2', and 'Review & Enroll 3'. A 'Print' icon is in the top right. The main heading is 'Welcome, EMPLOYEE.' Below it, a paragraph explains the purpose of the tool. A 'Please note' section contains three bullet points: 1) The tool uses anticipated data for modeling costs. 2) It is for modeling purposes only. 3) It includes references to FSA and HSA options. A note states that HSA recommendations assume eligibility. A 'NOTE' at the bottom states that information is not stored. A red circle with the number '1' is next to the 'LET'S BEGIN >' button.

2. Confirm who will be covered (dependents and yourself).
Note: if you need to add any other eligible dependent click in "Add a New Member"
3. Then click **Next**.

The screenshot shows the 'Who do you plan to cover with your medical plan?' page. The navigation bar is the same as the previous page, but 'Choose a Medical Plan 2' is highlighted. The heading is 'Who do you plan to cover with your medical plan?'. A paragraph explains the need to list dependents. Below, the question 'Who will be covered?' is followed by five entries: 'YOU Age: 54', 'DEPENDENT ONE Age: 53', 'DEPENDENT TWO Age: 20', 'DEPENDENT THREE Age: 17', and 'DEPENDENT FOUR Age: 11'. Each entry has a person icon and an 'x' to remove it. A red circle with the number '2' is next to the 'Who will be covered?' text. At the bottom, there is an 'Add a new member' link and a red circle with the number '3' next to the 'NEXT >' button.

- You will find helpful information about the coverage level you will need in connection to your health care needs.

IBM Benefits Mentor EMPLOYEE [dropdown]

Welcome 1 Choose a Medical Plan 2 Review & Enroll 3 Print

How much medical coverage will you need next year...

Healthcare needs can change over time. Some years, you might go to your doctor more than other years. For example, you might need to plan for a surgery or some other sort of major medical event that is likely to occur in the coming year. Understanding your healthcare needs will help us make sure we don't recommend too much or too little insurance for you. Coverage levels range from Preventive care, when you need the least amount of coverage, up to Additional care, when you need the most coverage. Review the definitions in the chart and select your coverage level below.

Preventive care	Basic care	Additional care	Undecided
Preventive care focuses on routine care and early detection of disease. Examples of Preventive care include: • Immunizations • Screenings • Prescriptions when you are sick • Annual exams	Basic care promotes general good health with steps that prevent illness and disease. Examples of Basic care include: • Preventive care, plus • Regular healthcare visits, such as blood pressure testing • A few ongoing prescriptions to maintain your health	Additional care involves more-specialized treatment. Examples of Additional care include: • Preventive care and Basic care, plus • Eight (8) or more healthcare visits, including specialists • Management of multiple conditions, such as diabetes and heart disease • Several ongoing prescriptions to maintain your health	? It can be difficult to determine your upcoming utilization and healthcare needs. That's ok, this video may help you to select the level of care that is best suited for you. How Much Care Will You Need? 0:00 / 2:34

- You may **select** the coverage level for each participant (i.e. Preventive, Basic or Additional Care)
- You may **add** the conditions or services for each participant. This step is optional.
- Click **Next** to view the results

Tell us about your anticipated healthcare needs.

Select the anticipated level of care that best describes the expected needs for each family member and then we'll continue.

YOU	DEPENDENT ONE	DEPENDENT TWO	DEPENDENT THREE
COVERAGE LEVEL Use diagram above to select coverage level Preventive care 5	COVERAGE LEVEL Use diagram above to select coverage level Basic care	COVERAGE LEVEL Use diagram above to select coverage level Additional care	COVERAGE LEVEL Use diagram above to select coverage level Preventive care
CONDITIONS No new chronic conditions.	CONDITIONS No new chronic conditions.	CONDITIONS No new chronic conditions.	CONDITIONS No new chronic conditions.
SERVICES No planned one-time services.	SERVICES No planned one-time services.	SERVICES No planned one-time services.	SERVICES No planned one-time services.
Conditions or Services 6	Conditions or Services	Conditions or Services	Conditions or Services

DEPENDENT FOUR

COVERAGE LEVEL
Use diagram above to select coverage level
Preventive care

CONDITIONS
No new chronic conditions.

SERVICES
No planned one-time services.

Conditions or Services

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8. The following screen will show the medical plan options. You may select your personal priorities when choosing a medical plan (Low overall cost at the end of the year, Low cost at the doctor and pharmacy, or Low paycheck deductions).
9. **Select** the plan of your choice
10. Click **NEXT**.

What is most important to you when selecting a medical plan? COMPARE PLANS IN MORE DETAIL

Low overall cost at the end of the year 8

★ Best Match Lowest estimated cost at the end of the year: **\$5,624**

Aetna POS II A
Aetna

Cost breakdown for this plan

Your Estimated Premium \$4,440
[View details](#)

Your Estimated Out-of-Pocket Costs + \$1,184
[View details](#)

Your Estimated Total Cost \$5,624

More ways to save

You can also contribute pre-tax dollars to the following accounts which will save you money and help you save for your healthcare costs.

Contributor	FSA
You (Recommended)	\$1,184
Your Employer	\$0
Total	\$1,184

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[View plan details](#) Select this plan

Estimated cost at the end of the year: **\$7,686**

Cigna OAPIN
Cigna

Cost breakdown for this plan

Your Estimated Premium \$7,344
[View details](#)

Your Estimated Out-of-Pocket Costs + \$342
[View details](#)

Your Estimated Total Cost \$7,686

More ways to save

You can also contribute pre-tax dollars to the following accounts which will save you money and help you save for your healthcare costs.

Contributor	FSA
You (Recommended)	\$342
Your Employer	\$0
Total	\$342

[View plan details](#) Select this plan

Estimated cost at the end of the year: **\$7,871**

Aetna Select
Aetna

Cost breakdown for this plan

Your Estimated Premium \$7,344
[View details](#)

Your Estimated Out-of-Pocket Costs + \$527
[View details](#)

Your Estimated Total Cost \$7,871

More ways to save

You can also contribute pre-tax dollars to the following accounts which will save you money and help you save for your healthcare costs.

Contributor	FSA
You (Recommended)	\$527
Your Employer	\$0
Total	\$527

[View plan details](#) Select this plan

Estimated cost at the end of the year: **\$7,928**

Aetna POS II B
Aetna

Cost breakdown for this plan

Your Estimated Premium \$7,008
[View details](#)

Your Estimated Out-of-Pocket Costs + \$920
[View details](#)

Your Estimated Total Cost \$7,928

More ways to save

You can also contribute pre-tax dollars to the following accounts which will save you money and help you save for your healthcare costs.

Contributor	FSA
You (Recommended)	\$920
Your Employer	\$0
Total	\$920

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[View plan details](#) Select this plan

← PREVIOUS NEXT >

11. Review the results provided by the tool. If you've decided on what plan will be best for you, please be sure to finish your enrollment in the Benefits Portal.

The screenshot shows the IBM Benefits Mentor interface. At the top, it says 'IBM Benefits Mentor' and 'EMPLOYEE'. Below that, a progress bar shows three steps: 'Welcome', 'Choose a Medical Plan', and 'Review & Enroll' (which is the active step). A 'Print' button is visible in the top right.

So you've decided on a medical plan... what's next?

Now that you've selected a medical plan, let's go to next steps.

A few reminders and next steps:

1. This is for modeling purposes only
2. This tool does NOT add or remove dependents.
3. This tool does NOT enroll you or your family members in your benefits.

Any changes you wish to make regarding your benefits (including medical plan and/or dependents) must be completed within your benefits portal to take effect.

Cigna OAPIN

Cigna

Cost breakdown for this plan

Your Estimated Premium	\$7,632
> View details	
Your Estimated Out-of-Pocket Costs	+ \$342
> View details	
Your Estimated Total Cost	\$7,974

More ways to save

You can also contribute pre-tax dollars to the following accounts which will save you money and help you save for your healthcare costs.

Contributor	FSA
You (Recommended)	\$342
Your Employer	\$0
Total	\$342

[VIEW PLAN DETAILS >](#)

Note: This tool is a simulator, the plan you select in the Benefits Mentor is only for informational purposes. If you would like to make health plan changes based on the results, please proceed with the enrollment changes for 2023 in the Benefits Portal.