



Alyeska Pipeline Service Company Retiree Medicare Eligible Reimbursement Health Plan

This guide explains your upcoming Alyeska post age 65 retirement healthcare benefits, and the steps you must take to ensure that you have healthcare coverage in place at the time of your retirement. For eligibility requirements please see the Retiree Medicare Eligible Reimbursement Health Plan (RHP) Summary Plan Description located at www.alyeska-pipe.com/Connect/Benefits/Plans.

Alyeska has selected Willis Towers Watson's Via Benefits as our partner to help you navigate this transition and ensure that you are equipped to make an informed and confident choice regarding your health care benefits. As you approach your retirement date, you will have the opportunity to work with a Via Benefits licensed benefit advisor who will become your advocate—helping you find and enroll in the Medicare supplement plan that best serves your medical needs and fits your budget. Alyeska will continue to provide support for your healthcare by funding a Health Reimbursement Arrangement (HRA). Your HRA funds can be used to reimburse you for qualified health plan premiums. Read through the rest of this guide for further explanation and instructions on your new retiree healthcare program.



<https://my.viabenefits.com/alyeska>

1-855-241-5725



We have selected a solution that provides Alyeska retirees with the ability to choose from a wide selection of Medicare supplement plans, allowing you to personalize your Medicare benefits. Alyeska will provide you with a Health Reimbursement Arrangement (HRA) to offset the monthly premium cost of an individual health plan. An HRAs is a tax-free account established by Alyeska, and is used to reimburse eligible health insurance premiums. **You will now be responsible for choosing and paying for your own health coverage and**

paying your insurance carrier directly.

We understand that you will need to make important choices about your health care coverage. To help you make informed decisions with confidence, we have partnered with Via Benefits. The Via Benefits licensed benefit advisors will be your advocate and will help you choose the Medicare supplement coverage plan(s) that best serves your medical needs and fits your budget. These knowledgeable, objective advisors will be available to support and assist you in making these decisions. They will guide you through the

entire process. The Via Benefits online tools, as well as access to benefit advisors, are services provided at no cost to you and are offered in recognition of your dedication and service to Alyeska. To date, Via Benefits has helped hundreds of thousands of retirees evaluate and enroll in Medicare plans.



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Introducing Via Benefits

Your transition to Alyeska Post Age 65 retiree healthcare benefits

Via Benefits is dedicated to making the transition to your retiree health coverage as easy and as straightforward as possible.

Via Benefits is the leading provider of defined contribution health care solutions. With Via Benefits, retirees gain access to a number of different Medicare supplement plans, including those offered by the leading national and regional insurance companies, including AARP, Aetna, Blue Cross Blue Shield, and United Healthcare.

Via Benefits will give you and your eligible spouse personalized assistance. An experienced Via Benefits benefit advisor will provide:

- Individualized telephone support to help you make an informed and confident enrollment decision. Please follow the instructions provided in the forthcoming *Enrollment Guide* to prepare for your enrollment appointment with a benefit advisor.
- Education about the differences between various plans, and the costs of each of those plans.
- Advice and decision making support, based on your current health status as well as your future needs.
- Assistance with enrolling in medical, prescription drug, dental, and vision plans.

For those interested in more immediate access to information, Via Benefits offers a personalized website for education, evaluation of options, and enrollment information. The web address for this site is <https://my.viabenefits.com/alyeska>.

The information in this guide pertains to retirees, spouses of retirees, and surviving spouses of retirees who are Medicare-eligible due to age.

If your spouse is currently not Medicare-eligible, he or she can remain on Alyeska's Pre-65 Retiree Medical and/or Dental Plan. Information on Medicare enrollment and enrollment with Via Benefits will be sent to your spouse approximately four months before he or she becomes Medicare-eligible due to age.

Steps toward enrollment

A step-by-step guide to enrolling.

Prior to your retirement date, Via Benefits will help you enroll in the individual Medicare plans that best fit your needs. Via Benefits has identified three steps in completing this process: **Prepare, Educate, and Enroll.**

1. Prepare: Enroll in Medicare Parts A & B

If you have not done so already, you must enroll into Medicare Parts A and B prior to your enrollment. You are first eligible for Medicare at your 65th birthday, but may defer Part B enrollment if you are still actively working. If you did not sign up for Part B when you were first eligible, you have a chance to sign up during a Special Enrollment Period, as long as you or a spouse is working, and you're covered by a group plan through the employer (such as Alyeska's group plan). Contact Alyeska's C&B Coordinator (907-787-8110) if any employer statement is needed for your Medicare special enrollment.

It is recommended that you get your Part B in place prior to your retirement date. Doing so will ensure that you don't experience a lapse of coverage between when your Alyeska plan ends and your new Medicare plan begins.

You may sign up for Part A and/or Part B online at www.socialsecurity.gov. You may also visit your local Social Security office, or call Social Security at 1-800-772-1213.

2. Evaluate

Using the Via Benefits online tools you may review the options available to you before speaking with a benefit advisor. Contact Via Benefits to speak with a benefit advisor or to set up an appointment.

During your dedicated call-in time, you will provide medical background and other basic information to a licensed benefit advisor. Your benefit advisor will make recommendations based on this data in order to help you determine which options make sense for you. You'll be able to compare your options and decide what level of coverage you require to best meet your medical needs and budget.

3. Enrollment

Your licensed benefit advisor will expedite the process of enrollment, and help you apply for and enroll in the Medicare plans you choose. During your enrollment appointment, your benefit advisor will ensure that you make informed and confident decisions and that you have expert support throughout the entire process.



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Become familiar with Medicare

How the parts combine to provide you with coverage.

Medicare benefits are broken into several component parts. To decide how to best meet your medical needs and budget, it helps to understand how these parts work together. The simple outline shown here will familiarize you with the parts of Medicare and the decisions you must make.

What you get:

Part A and Part B

Original Medicare consists of Part A and Part B. You automatically receive Part A and become eligible for Part B when you qualify for Medicare either due to age or disability.

Part A

Part A provides you with inpatient care, and covers inpatient hospital stays, home health care, stays in skilled nursing facilities, and hospice care.

Part B

Part B provides you with outpatient care, and covers physician fees, and other medical services not requiring hospitalization. You must choose to enroll in Part B.

What you choose:

Medicare Advantage, Medigap, and Part D

You choose between these three different types of supplemental plans that add coverage where original Medicare may have less than you require.

Medicare Advantage

Medicare Advantage is a plan offered by a private company to provide you with all your Medicare Part A and Part B benefits plus additional benefits. There are two versions of Medicare Advantage plans: MAPD, which includes prescription drug coverage, and MA, which does not. Within these two Medicare Advantage types there are three doctor networks: HMO, PPO, and Private Fee-for-Service Plans (PFFS). Medicare Advantage is also referred to as Part C.

Medigap

Medigap is supplemental insurance sold by private insurance companies to fill “gaps” in original Medicare plan coverage.

Part D

Part D refers to optional prescription drug coverage, which is available to all people who are eligible for Medicare. Plans are offered through private insurance companies.

How to decide:

You may combine the supplemental plans above to get a package of plans that covers all of your needs. Choosing the best combination requires some education and some comparison of plan features and costs.

What is an HRA?

Instead of receiving medical and prescription drug coverage under health care plans through Alyeska, you will now be responsible for choosing and paying for your own health coverage. You can then be reimbursed for the eligible health care premium expense from the Alyeska Health Reimbursement Arrangement (HRA)* to the extent that credits are available in your HRA.

A Health Reimbursement Arrangement (HRA) is an account that is used to reimburse you for eligible health care premium expenses on a tax-free basis. Via Benefits will become the administrator for your HRA. This means you will submit claims to Via Benefits and Via Benefits will reimburse you from your HRA account. You may use your HRA to be reimbursed for any and all eligible health insurance premiums (medical, dental, vision, Medicare, Long-Term care and prescription drug plan).

Prior to your effective date, Via Benefits will mail you an HRA Guide that will help you access and manage your HRA account as well as provide you with claims and processing information. Under existing IRS regulations, HRA reimbursements are NOT taxable.

Establishing direct deposit for your HRA reimbursements

In order to receive your reimbursements as quickly as possible, we encourage you to establish direct deposit.

Information on how to do so will be provided by the Via Benefits *HRA Guide*. Unless you choose to set up direct deposit, all reimbursements will be made by check and mailed to the address on file with Via Benefits.

ALYESKA'S CONTRIBUTION TO YOUR HRA*

Alyeska will contribute to the HRA in the form of benefit dollars deposited into your HRA. Please refer to your welcome letter included with your Enrollment Guide for the amount of your subsidy. This amount will be credited to your HRA account on an annual basis.** Please note that any balance remaining at the end of the year **will not** roll over into the next year.

How Funding and Reimbursement Works

Select your plan(s) and qualify for your funding

Select your plan(s) through the Via Benefits marketplace. Remember, it is not necessary to select a Medicare supplemental plan through Via Benefits to have access to your HRA. Your HRA will be administered by Via Benefits. You must contact Via Benefits for any claim submission questions.

1. Pay for your expenses – make your payments for eligible premium expenses directly to your health care provider.
2. Submit reimbursement requests – submit a reimbursement request for eligible health care expenses to Via Benefits. Ask your benefit advisor how to activate automatic reimbursements for your eligible premiums.
3. Via Benefits will reimburse you from your HRA – Via Benefits will reimburse you for eligible expenses from the available funds. Activate direct deposit to receive your reimbursements quickly. If you chose not to set up direct deposit, your reimbursement check will arrive by mail.



* Retirees hired or rehired after 1/1/2010 please refer to the Summary Plan Description for the Retiree Health Account (RHA).

** This document describes certain processes and provisions of Alyeska Pipeline Service Company. Nothing contained in this communication is a contract for employment or a promise to provide benefits. Alyeska must reserve the right, at Alyeska's discretion, to amend or terminate the retiree health plan at any time and for any reason. In the event of any conflict between the terms of this document and the governing plan document, the governing plan document shall control. Eligibility for benefits is dependent upon your meeting requirements contained in the benefit plan. Please refer to the Summary Plan Description for the Retiree Medicare Eligible Reimbursement Health Plan for plan details.

What happens next?

Enrollment

After you have communicated your retirement date to Human Resources, Via Benefits receives confirmation from Alyeska of the date of your retirement and your eligibility for the HRA. Complete your enrollment in Medicare Parts A&B then call Via Benefits to get the process started or to ask any questions you may have. You may call Via Benefits at 1-855-241-5725, Monday through Friday from 4:00 am until 5:00 pm Alaska time. You may also visit the Alyeska Via Benefits website at <https://my.viabenefits.com/alyeska>. Be advised that Via Benefits may reach out to you directly to offer assistance in preparing for enrollment.



Evaluate and Enroll in plans

Please call Via Benefits to speak to a benefit advisor. Your benefit advisor will answer your questions and help you enroll in the individual Medicare plans that fit you best.

HRA Guide

One or two weeks prior to your effective date, you will receive the Via Benefits HRA guide in the mail. This guide explains how the Health Reimbursement Arrangement system works, and the information needed to make claim on your HRA.



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