

A graphic with a red background and a white grid pattern, with a red arrow pointing to the right.

2014 ANNUAL BENEFITS ENROLLMENT



YOUR 2014 COBRA BENEFITS

This year's Annual Benefits Enrollment begins Nov. 1 and ends at midnight Central Time on Nov. 22, 2013. As a COBRA participant:

- You can make changes to your coverage during this time, **OR**
- Your 2013 benefits elections will remain in effect from Jan. 1 through Dec. 31, 2014, or until your COBRA eligibility expires.

WHAT'S NEW FOR 2014

- Understand the new medical option, the **High Deductible Health Plan Base (HDHP Base)**.
- Health Savings Account (HSA) contribution limits are going up—to \$3,300 for You Only, \$6,550 for Other coverage levels.

MEDICAL PLAN OPTIONS

You have three medical options for 2014. Two are High Deductible Health Plan (HDHP) options, and one is a Preferred Provider Organization (PPO) option. **New for 2014:** the HDHP Base, a highly affordable option.

CHANGES FOR 2014 SHOWN IN BOLD.

Network Features	HDHP Base	HDHP	PPO		
Annual Deductible	\$2,000 You Only \$4,000 Other coverage levels	\$1,400 You Only \$2,800 Other coverage levels	\$700 You Only \$1,400 Other coverage levels		
HSA Eligible	Yes	Yes	No		
Preventive Medical Care	Covered at 100%	Covered at 100%	Covered at 100%		
Physician Visits	20% coinsurance after deductible	20% coinsurance after deductible	\$25 PCP/\$50 Specialist		
Other Services	20% coinsurance after deductible	20% coinsurance after deductible	20% coinsurance after deductible		
Annual Out-of-Pocket Maximum	\$4,000 You Only \$8,000 Other coverage levels	\$4,000 You Only \$8,000 Other coverage levels	\$4,000 You Only \$8,000 Other coverage levels		
	100% coverage thereafter (includes medical and prescription)	100% coverage thereafter (includes medical and prescription)	100% coverage thereafter (includes medical deductible and copays, excludes prescriptions)		
Prescription Drugs	You pay the full discounted amount until you reach the deductible. After the deductible is reached, you pay 20% coinsurance until you meet your annual out-of-pocket maximum (medical and prescription drug expenses combined).	You pay the full discounted amount until you reach the deductible. After the deductible is reached, you pay 20% coinsurance until you meet your annual out-of-pocket maximum (medical and prescription drug expenses combined).	Drug Category	Your cost for a 30-day retail supply	Your cost for a 90-day mail order supply
			Generic	\$10 copay	\$20 copay
			Preferred Brand	40% coinsurance \$25 min/\$150 max	40% coinsurance \$60 min/\$375 max
			Non-Preferred Brand	50% coinsurance \$50 min/\$300 max	50% coinsurance \$125 min/\$750 max

2014 MONTHLY EMPLOYEE COST

		You Only	You +1	You +2 or More
MEDICAL	HDHP Base	\$404.97	\$874.25	\$1,208.84
	HDHP	\$473.64	\$998.06	\$1,356.85
	PPO	\$668.03	\$1,489.95	\$2,026.19
DENTAL	Preventive	\$14.28	\$28.56	\$51.00
	CP Dental	\$37.74	\$76.50	\$133.62



DENTAL PLAN

You have two dental plan options. The first offers preventive dental services; the second provides both preventive dental services and comprehensive care for major dental and orthodontic procedures.

CHOOSE AN OPTION TO SUIT YOUR NEEDS:

	Preventive Dental	CP Dental
Annual deductible	No	\$50 individual; \$150 family maximum
Annual maximum benefit	\$2,000 per person	\$2,000 per person
Deductible for diagnostic and preventive service	No	No
Coverage for basic services like fillings and extractions	No	Yes, 20% after deductible
Major services like crowns, implants or root surgery	No	Yes, 50% after deductible
Orthodontia services	No	Yes, 50% up to \$2,000 per person
Great if you:	Seek mostly routine dental care	Need more comprehensive dental care

EMPLOYEE ASSISTANCE PLAN (EAP)

As a COBRA participant, you can continue coverage in the EAP which provides short-term counseling, referral services and educational materials to help you, your spouse and your children with work and home challenges.

HEALTH SAVINGS ACCOUNT (HSA)

If you participate in an HDHP Medical option, you can contribute to an HSA by making a direct contribution. If you're age 55 or older, you can contribute more:

2014 Contribution Limits	You Only Coverage	Other Coverage Levels
Total allowable, under age 55	\$3,300	\$6,550
Total allowable, over age 55	\$4,300	\$7,550

AN HSA HELPS YOU SAVE ON YOUR TAXES IN THREE DIFFERENT WAYS:

- Contributions to your HSA are deductible on your federal income tax return.
- The interest it earns is tax-free.
- The money isn't taxed when you use it to pay for qualified medical, prescription, dental or vision expenses.

Plus, your balance carries over from year to year—no "use it or lose it". Even if you stop participating in the HDHP Medical option, you can continue to use whatever money remains in your account to pay for qualified medical expenses.

ARE YOUR BENEFITS WORKING FOR YOU?

ACTION CHECKLIST

- Make sure your personal contact information and beneficiaries are up-to-date.
- Complete your benefits enrollment between **Nov. 1 and midnight Central Time on Nov. 22, 2013** using one of the two easy ways below.

TWO WAYS TO ENROLL

Online: Go to Your Benefits Resources (YBR) at <http://resources.hewitt.com/conocophillips> and enter your previously established user ID and password.

By Phone: Call a Benefits Center representative at 800-622-5501 or 718-354-1344, from 8 a.m. to 6 p.m. Central Time, Monday through Friday. Make sure to have your password available when you call.

If you take no action, your current benefit elections will carry forward into 2014.

This 2014 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. 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. Each health and welfare benefits plan has specific eligibility and participation requirements. This Guide is intended for COBRA participants. It is not intended for employees covered by collective bargaining agreements, unless those agreements specify participation. Nothing in this document creates an employment contract between ConocoPhillips Company or its subsidiaries and affiliates and any COBRA participant. 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.