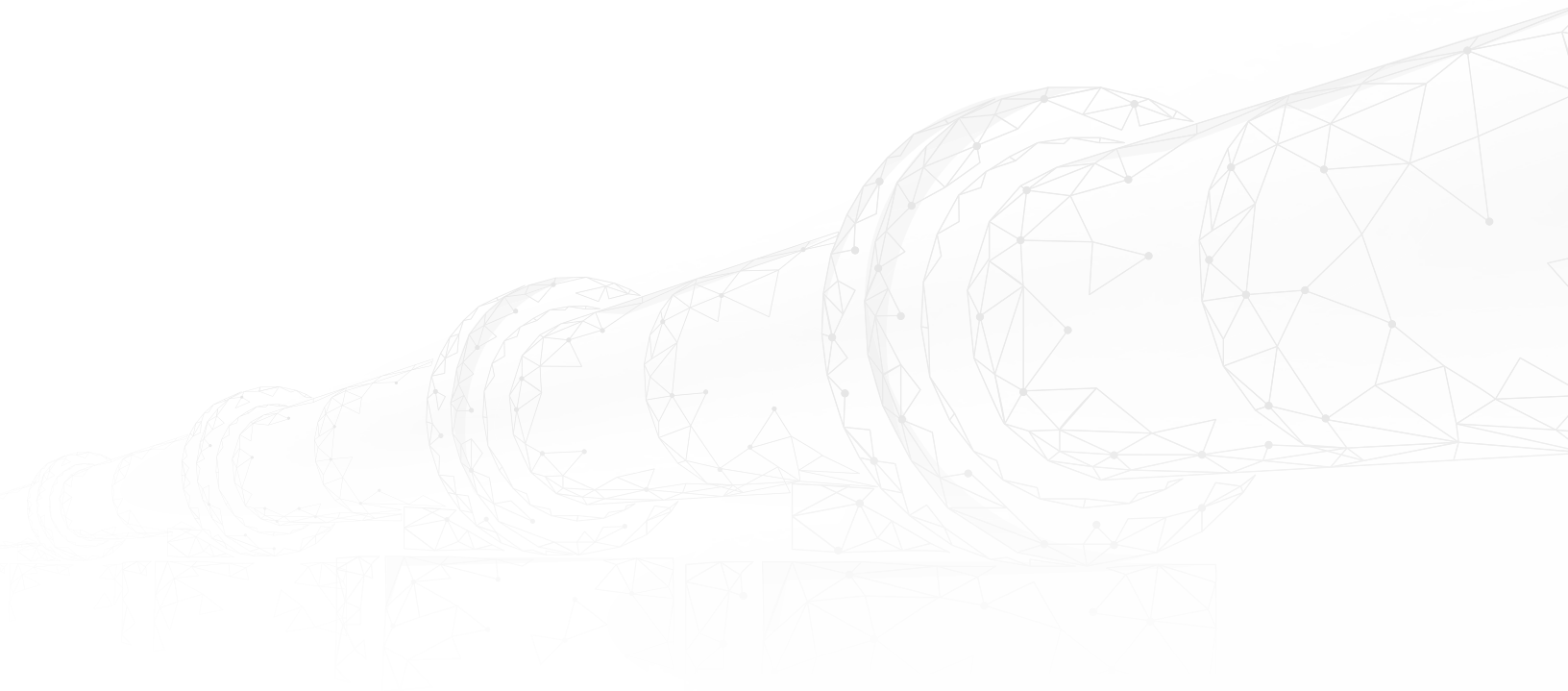


**EMPLOYEE BENEFITS**  
**NEW HIRE GUIDE 2021**

ENROLL ONLINE  
[KINDERMORGAN.HRINTOUCH.COM](http://KINDERMORGAN.HRINTOUCH.COM)



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**This guide provides you with important information to help you better understand the benefit plans, policies, and options available to you.** This is only a summary of benefits and may not reflect the benefit plans in effect for all employees in all circumstances, nor cover all applicable limitations and/or restrictions. We have done our best to accurately explain the benefits in effect under the plans; however, the plans and payment of benefits are governed by the official Plan documents. The Plan documents, insurance contracts or state or federal regulations, will govern in case of conflict.

This guide is intended to be read in conjunction with the applicable Summary Plan Description (SPD) and Summary of Material Modification (SMM). Find the SPDs on: [KOnline > Benefits Online > Plan Resources](#). You should also read the Important Notices provided.

Kinder Morgan is the Plan sponsor and reserves the right to terminate or amend the Plan provisions described at any time.

**Important Note:** If you are a member of a collective bargaining unit, the terms of your benefits are governed by your collective bargaining agreement and may differ from the benefits described in this guide. Contact your Human Resources representative for more information.

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# Benefits Summary

Review the summary below carefully to learn more about the benefits offered to you and the default coverage if you do not enroll within 30 days. You should read this guide in its entirety and refer to the applicable Summary Plan Description (SPD) for more Plan details. If you have any questions, please contact the Benefits Department at [benefits@kindermorgan.com](mailto:benefits@kindermorgan.com) or leave a message at (866) 775-5790 option 3.

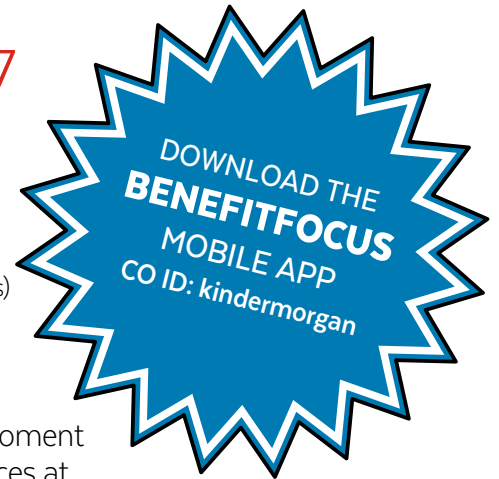
COVERAGE	IMPORTANT NOTES
Medical & Prescription Drug (Rx)	We offer several medical coverage options; prescription drug coverage is bundled with medical. <b>Default: Employee Only in the HDHP Base</b>
Dental and Vision	We offer one dental plan and one vision plan. <b>Default: No Coverage</b>
Basic Life and Basic Accidental Death & Dismemberment (AD&D)	<b>Default: 2x annual base pay Basic Life and AD&amp;D coverage (each).</b>
Optional Employee Life	New hires can elect 3x annual base pay not to exceed \$500,000 without Evidence of Insurability (EOI). <b>Default: No Coverage</b>
Optional Spouse Life	New hires can elect Optional Spouse Life up to \$50,000 without EOI. <b>Default: No Coverage</b>
Optional Child Life	You can elect Optional Child Life to cover eligible children for \$10,000 each; EOI is not required. <b>Default: No Coverage</b>
Voluntary AD&D	Maximum election is 5x annual base pay for employee or family coverage. <b>Default: No Coverage</b>
Spending Accounts Pre-Tax Contributions	You can elect to make Health Savings Account or Flexible Spending Account pre-tax contributions for eligible expenses based on Plan and IRS regulations and limitations. <b>Default: No Coverage</b>
Voluntary Benefits	We offer Voluntary Benefits that may fit your needs and budget. <b>Default: No Coverage</b>
Disability Benefits	<b>We provide Short-Term Disability and Long-Term Disability benefits</b> should you be unable to work for an extended period of time.
Savings Plan - 401(k)	<b>We contribute 5% of your eligible pay to your Savings Plan.</b> You will be automatically enrolled at a contribution rate of 6% of your eligible pay with 1% automatic annual increases (up to 12%). You can change your contribution rate at any time.
Retirement Plan - Pension	<b>Based on age and years of service, we contribute 4% or 5% of your eligible pay.</b> No employee contributions are allowed or required.

# You Must Enroll Online Within 30 Days

## Enroll from work or home anytime 24/7

Kinder Morgan's web-based Benefits Online Portal powered by Benefitfocus® makes enrolling online simple and fast. You must enroll online within 30 days of your date of hire.

- 1 From KMONline click on Benefits Online (under Common Resources) to access the portal or connect 24/7 via the internet at [kindermorgan.hrintouch.com](http://kindermorgan.hrintouch.com) from any device.
- 2 Welcome to the benefits online portal landing page! Take a moment to explore and navigate the website. Lots of important resources at your fingertips. Next, click the orange **Enroll Now** button to direct you to the portal's ENROLLMENT system.
- 3 Follow the prompts to enroll. Make sure you go through all of your benefits options, and complete and save your elections. Double-check your coverage and covered dependents.



### ENROLLMENT CHECKLIST:



Click your **Profile** (enrollment menu) to make sure the information on the **About you** and **Communication preferences** sections are updated and accurate.



**Adding Dependents?** You'll need to provide and upload proof of eligibility (i.e. birth certificates, SSN etc) if you are adding dependents.



Print your **Employee Summary Report** after you complete your enrollment. **CHECK THE REPORT CAREFULLY.** Make sure all your benefits elections are accurate and your dependents are covered.

# Medical & Rx Options

## Medical & Prescription Drug (Rx) Coverage

You have a choice of medical plan options administered by Blue Cross Blue Shield of Texas (BCBSTX). The High Deductible Health Plans (HDHP) are available to all employees. The other options offered to you depend on your home zip code. Review the Medical Benefits chart on pages 6 and 7 for coverage details.

If you enroll in any Kinder Morgan medical plan option, prescription drug coverage that provides retail and mail services is automatically included. Our prescription drug program is administered by CVS Caremark. More information about the Rx program can be found in the Medical SPD.

If you live in California and enroll in the Kaiser medical plan option, you will also be automatically enrolled in the Kaiser prescription drug plan.

## 2021 Medical Plan Options

The 2021 Medical Plan options are listed below. **If you do not actively enroll, you will default to Employee Only Coverage in the High Deductible Health Plan (HDHP) Base Medical option. Employee Only Coverage is offered at no cost to the employee.**

**HDHP BASE**

**HDHP BUY-UP**

**PPO** Preferred Provider Organization

**EPO** Exclusive Provider Organization

**OOA** Out-of-Area

**KAISER** California Only

Both the HDHP Base and HDHP Buy-up have the same coverage provisions, but with different deductibles, out-of-pocket amounts and premiums.

If you enroll in the HDHP Buy-up, the Company will make an annual HSA contribution ("seed" dollars) to your HSA. New hires will receive a prorated HSA Company contribution based on the month of hire and timely identity verification by our administrator. If your verification is delayed, the HSA contribution may be reduced further. You must be actively employed to receive the contribution.

To be eligible for an HSA you must meet certain IRS requirements. For example, you must be covered under a qualifying HDHP and not be enrolled in Medicare. Read IRS Publication 969, or talk to your tax advisor regarding participation in a tax advantaged plan.



**Compare features & costs** before you choose your medical plan. Use the estimator tools to compare costs and provisions, and find the plan that fits you and your family. All 2021 benefits costs can be found on page 15 of this guide.

## CVS Caremark Drug Program

You must fill your prescriptions at a Caremark Advanced Choice Network pharmacy (like CVS or Walmart), or there will be NO COVERAGE. Go to [www.caremark.com](http://www.caremark.com), and click on “Order Prescriptions” to access the Pharmacy Locator tool or call the number on your prescription ID card.

We subscribe to mandatory Maintenance Choice (MC) for maintenance prescriptions. This means that your maintenance prescriptions will NOT be covered unless they are filled by the CVS Caremark mail order service or a CVS retail pharmacy. You are also required to convert from a 30-day maintenance script to a 90-day script effective with the third fill of a maintenance drug, or there will be NO COVERAGE.

## Medical & Prescription ID Cards

Medical and prescription ID cards will be mailed to your home address. Both the BCBSTX and the CVS Caremark ID card will display your name only, though your dependents will be covered.

## Access your healthcare information

You can have your healthcare information at your fingertips. Register and use the wellness tools and resources available on the BCBSTX website at [myhealth.myeveive.com](http://myhealth.myeveive.com).

## Employee Assistance Program (EAP)

Kinder Morgan’s company EAP is administered by Magellan Healthcare, and is available 24/7 by calling (800) 424-6207. Call our EAP to get support for any of life’s worries or challenges. Magellan’s counseling services are entirely confidential and provided at no cost to employees and household members. Six free sessions are available per issue.

You can also log on anytime to the Magellan website at [magellanascend.com](http://magellanascend.com) to take advantage of the many resources and online programs available.

# Medical & Rx Benefits

## BLUE CROSS BLUE SHIELD OF TEXAS (BCBSTX) - HDHPs

	HDHP BASE <sup>1</sup>		HDHP BUY-UP <sup>1</sup>	
	In-Network	Out-of-Network <sup>2</sup>	In-Network	Out-of-Network <sup>2</sup>
<b>Annual Deductible</b>				
Individual <sup>3</sup>	\$3,250	\$6,500	\$1,850	\$3,700
Family	\$6,500	\$13,000	\$3,700	\$7,400
<b>Annual Out-Of-Pocket (OOP)</b>				
Individual <sup>3</sup>	\$7,000	\$14,000	\$4,800	\$9,600
Family	\$14,000 <sup>5</sup>	\$28,000 <sup>5</sup>	\$7,500	\$15,000
<b>HDHP HSA Annual Company "Seed"</b>	N/A		\$500 Individual (EE Only) \$1,000 (Family)	
<b>Doctor Visits</b>				
Primary Care	20%*	40%*	20%*	40%*
Specialist	20%*	40%*	20%*	40%*
Virtual Visit (through MDLIVE)	\$44 visit/20%*	N/A	\$44 visit/20%*	N/A
<b>Well-Child/Adult Visits</b>	\$0/visit	40%	\$0/visit	40%
<b>Hospital Surgery</b>				
Outpatient	20%*	40%*	20%*	40%*
Inpatient	20%*	40%*	20%*	40%*
<b>Ambulance (Emergency only)</b>	20%*	20%*	20%*	20%*
<b>Emergency Room Care</b>	20%*	20%*	20%*	20%*
<b>Mental Health &amp; Substance Abuse</b>				
Outpatient	20%*	40%*	20%*	40%*
Inpatient	20%*	40%*	20%*	40%*

**This is not a complete list of covered services. For more information review the Medical SPD found on the Benefits Portal (Plan Resources), or contact a BCBSTX Health Advocate at (855) 676-4476.**

<sup>1</sup> Annual deductible must be met before HDHP benefits are paid (includes medical/Rx)

<sup>2</sup> Subject to the Maximum Non-network Reimbursement Program method (MNRP 110%) when you use a non-network provider.

<sup>3</sup> For HDHP Employee Only enrollees, the Individual Deductible and Individual Out-of-Pocket (OOP) Maximum amounts apply.

<sup>4</sup> Under the PPO/EPO/OOA the family deductible and family OOP can be met by a combination of two or more family members.

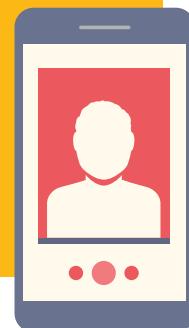
<sup>5</sup> When one member of the family satisfies the Individual OOP, the Plan will pay 100% for that individual; a minimum of two family members is required to meet the family OOP.

\*After the deductible is met you pay this amount.

### Call BCBS!

Prior Authorization (PA) is required for hospital admissions, surgical procedures, and other services, or benefits will not be payable.

**Call a Health Advocate at (855) 676-4476 if you have questions regarding PA or any other health matter.**





## BCBSTX - PPO/EPO/OOA

In-Network	PPO <sup>4</sup> Out-of-Network <sup>2</sup>	EPO <sup>4</sup> In-Network Only	OOA <sup>4</sup> Out-of-Area
\$500 \$1,000	\$1,000 \$2,000	\$250 \$500	\$500 \$1,000
\$3,500 \$7,000	\$7,000 \$14,000	\$7,150 \$14,300	\$3,500 \$7,000
N/A		N/A	N/A
\$20/visit \$40/visit \$20/visit	40%* 40%* N/A	\$30/visit \$50/visit \$20/visit	20%* 20%* \$20/visit
\$0/visit	40%	\$0/visit	\$0/visit
20%* 20%*	40%* 40%*	\$300/visit* \$750/admission*	20%* 20%*
\$0 20%*	\$0 20%*	\$0* \$300/visit	20%* 20%*
\$20/visit 20%*	40%* 40%*	\$30/visit \$750/admit	20%* 20%*



### Medical and Prescription ID Cards

Employees enrolled in a BCBSTX medical plan will receive ID card(s) from BCBSTX, plus separate ID card(s) from CVS Caremark. **Note:** Only the employee name will appear on the cards even if you choose to cover dependents.

## PRESCRIPTION DRUGS (Caremark Advanced Choice Network)

### Generic, Brand & Non-Brand

#### Generic

Retail 30-Day Supply/\$10 copay  
Mail Order 90-Day Supply/\$20 copay  
Specialty Rx/\$75 copay<sup>2</sup>

#### Brand Formulary<sup>1</sup>

Retail 30-Day Supply  
25% Coinsurance (\$40 minimum)  
Mail Order 90-Day Supply  
25% Coinsurance (\$80 minimum)  
Specialty Rx/\$150 copay<sup>2</sup>

#### Brand Non-Formulary<sup>1</sup>

Retail 30-Day Supply  
25% Coinsurance (\$60 minimum)  
Mail Order 90-Day Supply  
25% Coinsurance (\$120 minimum)  
Specialty Rx/\$225 copay<sup>2</sup>

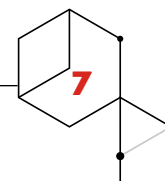
<sup>1</sup>Your cost will be higher if you receive a name brand drug when a generic is available.

<sup>2</sup>Limited to 30-day supply.

**Maintenance Drugs** taken on a regular long-term basis (30 days or more) must be filled with a 90-day prescription through the CVS Caremark mail order service or a local CVS pharmacy. If this is not done, there will be **NO COVERAGE** effective with the third fill.

**Note:** If you are enrolled in a HDHP, you generally pay the full cost for health services, including prescription expenses, until your annual deductible is met.

**Medical Plan Options available to you are based on your home zip code.** California residents also have the Kaiser Permanente (KP) medical plan option, with automatic enrollment in the KP prescription drug plan. Find Kaiser information on the portal > Plan Resources.



# Dental & Vision Benefits

## Dental Benefits

Kinder Morgan's dental benefits are administered by Cigna Dental. If you newly enroll for dental coverage, you will receive a Cigna Dental ID card in the mail. The card will only have your name even if you are covering additional dependents. Search for a network dentist by going to [www.mycigna.com](http://www.mycigna.com), and be sure to download the myCigna mobile app to access your dental health information anytime. Read the Dental SPD for more details.

### CIGNA DENTAL HIGHLIGHTS (in-network)

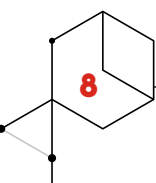
<b>Annual Deductible</b> \$50 Individual \$150 Family	<b>Preventive and Diagnostic</b> (examples: oral exam, bitewing x-rays)	Plan pays 100%
	<b>Basic Restorative</b> (examples: fillings, routine extractions)	Plan pays 80% after deductible
<b>Annual Maximum Benefit</b> \$2,000 per person	<b>Major Restorative</b> (examples: bridges, crowns, dentures)	Plan pays 50% after deductible
	<b>Orthodontia</b> (for dependent child under 19 years of age)	Plan pays 50%
<b>Lifetime Maximum Orthodontia</b> \$1,500 per child	<b>Implants</b>	Plan pays 50% after deductible

## Vision Benefits

Kinder Morgan's vision program is administered by VSP. Go to the VSP website at [www.vsp.com](http://www.vsp.com), or download the VSP mobile app to find network doctors and to manage your eye care needs. You will not receive a vision ID card, but coverage can be verified by VSP with your Social Security Number and group number 12055862. Read the Vision SPD for more information.

### VSP HIGHLIGHTS (in-network)

SERVICE	COPAY	COVERAGE	FREQUENCY
<b>Well Vision Exam</b>	\$5 copay	VSP exam focuses on your eye and overall wellness	Every calendar year
<b>Prescription Glasses</b>	\$15 copay	See Frames and Lenses	
Frames	--	\$190 allowance for wide selection of frames	Every other calendar year
Lenses	--	Single vision, lined bifocal, lined trifocal lenses	Every calendar year
<b>Contact Lens</b>	\$0 copay	\$170 allowance for contact lens exam and contacts	Every calendar year



# Life and AD&D Benefits

## Life and AD&D Insurance

Kinder Morgan provides Company-paid Basic Life and AD&D coverage equal to 2x annual base pay (maximum \$1,200,000 each) payable to your beneficiaries in the event of your death.

For additional protection you can purchase Optional Life or Voluntary AD&D coverage for you and your family. You pay the full cost of this coverage (see page 15). Your premiums may go up in the future due to your age and/or your spouse's age since rates are age-based.

As a new hire, if you enroll during the first 30 days, you can elect the following coverage without EOI: Optional Employee Life of 3x annual base pay not to exceed \$500,000; and/or Optional Spouse Life up to \$50,000. Amounts higher than the above are subject to the EOI coverage limits as shown below.

### OPTIONAL LIFE HIGHLIGHTS

Employee Life	1x to 5x annual base pay	Elections must be in multiples of annual base pay. Coverage in excess of 3x annual base (not to exceed \$500,000) is subject to Evidence of Insurability (EOI). Maximum: lesser of 5x annual base pay or \$2 million
Spouse Life	Flat Amounts	Elections must be in flat amounts of: \$25,000, \$50,000, \$100,000, \$150,000 or \$250,000. Coverage in excess of \$50,000 is subject to EOI Maximum: \$250,000
Child Life	\$10,000 life insurance	Eligible children from live birth up to age 26 are covered for \$10,000 (each) for one flat premium. EOI is not required.

**Optional Life Calculation:** For purposes of determining Optional Employee life insurance benefits and premiums for 2021, your base salary will be used. The rate used to calculate your premiums will be based on your age as of December 31, 2020. Any pay increases in 2021 will not affect the cost of coverage, but will be reflected in any benefits paid. Optional Spouse life premiums will also be based on your spouse's age as of December 31, 2020.

**Voluntary AD&D Insurance:** AD&D insurance may pay benefits if the cause of death or dismemberment is the direct result of an accident. You may elect AD&D coverage for you, or for you and your family. You can elect up to 5x annual base pay. Maximum coverage is the lesser of 5x annual base pay or \$2 million.

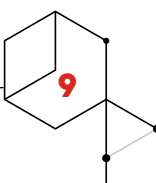
### Evidence of Insurability (EOI)

If you enroll for Optional Employee Life or Optional Spouse Life coverage that is greater than the approved amount for a new hire, the additional amount you elect will be subject to proof of good health, or EOI. You will be directed to complete the online EOI form after you enroll in your New Hire benefits. Securian will approve or deny your application. You will only pay premiums for the approved amount of insurance pending approval for the additional coverage.

### Beneficiary Designation

Protect your loved ones by reviewing and updating your beneficiary designations online for Life and AD&D insurance, and your Retirement and Savings Plan. To learn more, go to the Benefits Online Portal > Enrollment for instructions.

Refer to the SPD and/or insurance certificate for Life and AD&D Plan terms and conditions.



# Benefits News & Highlights

## Voluntary Benefits

Kinder Morgan offers several voluntary benefits that might be right for you. You pay the full cost of these additional benefits through after-tax payroll deductions. For more information, click on the Voluntary Benefits link under the Health & Welfare tab on the Benefits Online Portal home page.

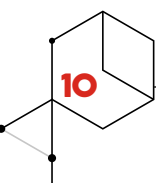


<b>Critical Illness</b>	Provides a lump sum payment due to sickness. Employees can elect coverage of \$15,000 or \$30,000, and includes spouse and child coverage.
<b>Accident Insurance</b> (non-occupational)	Provides a lump sum payment for any covered accident. Employees can elect a High or Low Plan, and includes spouse and child coverage.
<b>Hospital Indemnity</b>	Provides a lump sum and daily payments if hospitalized due to sickness or accident. Employees can elect a High or Low Plan and includes spouse and child coverage.
<b>Pre-paid Legal*</b>	LegalEASE provides legal assistance to employees to help deal with family and financial matters, estate planning, wills and more.
<b>Identity Protection*</b>	Allstate provides credit, financial and identity monitoring services. They offer a full-managed identity theft restorations process and unlimited access to Transunion credit reports/scores and more.
<b>Pet Insurance*</b>	Pet insurance, provided by Nationwide, covers all pets with no age limit; but pre-existing limitations may apply. The plan includes your choice of reimbursement levels, an annual deductible and annual maximum.
<b>Total Pet Program*</b>	Pet Benefit Solutions offers a Total Pet Program which provides discounts on pet food, toys, prescriptions and flea & tick preventatives. Shipping is free for all online orders, and same day pick up for most prescriptions is available at participating pharmacies, such as CVS. The program also offers a veterinary discount plan, a 24/7 pet helpline and a lost pet recovery service.

## Note:

Voluntary benefit elections roll over from year to year unless you cancel coverage. You can enroll for the above voluntary benefits as a new hire or during open enrollment. You can also enroll or cancel coverage anytime for Identity Protection, Pet Insurance and the Total Pet Program.

*\* These voluntary benefits are not offered to employees covered under a collective bargaining agreement.*



## Other Benefits

Kinder Morgan offers resources on our intranet site to help manage your work and home life. Explore KMonline to learn company news and also find links to the Benefits Online Portal, New Hire Site, HR/Employee Self-Service (ESS) system, and more.

### Qualified Life Event

Think carefully about your benefit choices. You can change your elections during the year only if you experience a qualified life event such as marriage, birth or adoption of a child, divorce or legal separation, etc. You must report your life change and submit relevant documentation within 30 days after the life event occurs. Go to the Benefits Online Portal to report the life event by clicking on the blue action button.

### Employee Stock Purchase Plan (ESPP)

The plan allows employees to purchase KMI stock on the open market through after-tax payroll deductions without paying brokerage commissions. Computershare provides services and administers our ESPP at [www-us.computershare.com/employee](http://www-us.computershare.com/employee) (use code: KMT or Kinder Morgan).

### Business Travel Accident Plan (BTA)

Business Travel Accident Insurance may pay benefits for loss of life, limb(s), paralysis, sight, speech and hearing, if sustained in an accident while on a business trip for Kinder Morgan. The Business Travel Accident Insurance is issued by Securian, and the insurance company investigates and determines payment of benefits. BTA benefits are equal to three times annual base pay up to a maximum of \$1.2 million.

#### 2021 Holiday Schedule

DATES OBSERVED	HOLIDAY
Friday, January 1	New Year's Day
Monday, January 18	MLK Day
Friday, April 2	Good Friday
Monday, May 31	Memorial Day
Monday, July 5	Independence Day
Monday, September 6	Labor Day
Thursday, November 25	Thanksgiving Day
Friday, November 26	KM designated holiday
Thursday, December 23	KM designated holiday
Friday, December 24	KM designated holiday

#### Paid Time Off Schedule

YEARS OF CREDITED SERVICE	ANNUAL PTO HOURS
0 - 4 years	120
5 - 9 years	160
10 - 19 years	200
20+ years	240

**Note:** New hires will receive prorated PTO based on hire date for the first year.

# Spending Accounts

## Pre-Tax Contributions

You can voluntarily elect to make pre-tax contributions to a Health Savings Account (HSA) or Flexible Spending Account (FSA) to help pay for your eligible health care or dependent care expenses. You must actively enroll and elect your annual pre-tax contributions for 2021. Your contributions will normally be deducted pre-tax from your paychecks throughout 2021. Learn more about HSAs and FSAs by reading and reviewing the SPDs.

HSA & FSA CONTRIBUTIONS	HSA <sup>1</sup>	Health Care FSA	Limited Purpose FSA (LFSA) <sup>2</sup>	Dependent Care FSA*
<b>Annual Contribution Limits</b> (EO/Family)	\$3,600/\$7,200	\$2,750	\$2,750	\$5,000
<b>Eligible Expenses</b> (per IRS) <sup>3</sup>	Health Care	Health Care	Dental & Vision	Dependent Care
<b>Plan Year End Date</b> (to incur expenses)	N/A	03/15/2022		12/31/21
<b>Claim Filing Deadline</b>	N/A	03/31/2022		
<b>Annual HSA Company Contribution</b> (EO/Family)	\$500/\$1,000	N/A	N/A	N/A

The Annual HSA Company Contribution may be prorated for new hires and applies only if you are enrolled in the HDHP Buy-up. Both employee and employer contributions should be considered toward the IRS maximum limit.

<sup>1</sup> An employee age 55 or older can make an additional \$1,000 in “catch-up” contributions to an HSA. EO = Employee Only Coverage. <sup>2</sup> The LFSA is generally used for dental and vision expenses; eligible medical/Rx expenses can be submitted after the annual medical deductible is met (proof required) <sup>3</sup> Eligible health care expenses can include qualifying medical, dental, or vision expenses. Dependent Care qualified expenses can include daycare for children by qualified caregivers, summer day camps, and after school care.

Both the HSA and FSA contributions lower your taxable income. However, according to IRS rules, HSA dollars are not forfeited if you don’t use them during the plan year — they continue to rollover from year to year. FSA dollars operate under the “use it or lose it” policy. If all of the money deposited into an FSA is not used for qualified expenses by the plan year end date, those dollars are forfeited. Plan carefully, and remember to save receipts in case of an IRS audit.

**NOTE:** Kinder Morgan will open your account with HealthEquity. Your pre-tax dollars will be deposited once your account is established. Be on the lookout to receive a HealthEquity VISA card at your home address. You can access and manage your HSA via the Benefits Online Portal > Manage/View Your Benefits > HSA/FSA Claims and Balances or go to the website [myhealthequity.com](https://myhealthequity.com).

## Health Savings Account (HSA)

If you are enrolled in a High Deductible Health Plan (HDHP), you can elect to make HSA pre-tax contributions to pay for qualified healthcare expenses for you, your spouse, and eligible dependents. An HSA is a savings plan for your health. Contributions to an HSA are tax-deductible up to the annual limit, and money you take out of your HSA to pay for qualified medical, dental and vision expenses is also tax-free.

## Flexible Spending Accounts (FSAs)

We have three FSAs available: the Health Care FSA, the Limited Purpose Health Care FSA (LPFSA), and the Dependent Care FSA.

### Health Care FSA (if enrolled in the PPO, EPO, OOA, Kaiser; or you decline medical)

You can use your health care FSA dollars to pay for eligible out-of-pocket medical, prescription drug, dental, and vision expenses for you, your spouse, and your tax dependents. Out-of-pocket expenses can include deductibles, coinsurance and co-pays.

### Limited Purpose Health Care FSA (if enrolled in a HDHP medical option)

A Limited Purpose FSA generally pays for eligible dental and vision expenses.



### Dependent Care FSA

A Dependent Care FSA can be used to pay for eligible expenses for a qualifying child under the age of 13, or your spouse or another adult dependent incapable of self-care. Eligible dependent care services can include child or adult daycare, before or after school care programs and day camps. **This account cannot be used for dependent healthcare expenses.**

**NOTE:** IRS rules and regulations governing HSAs and FSAs can impact your participation in a tax advantaged plan. Go to [www.IRS.gov](http://www.IRS.gov) for more information or consult with a tax advisor.

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### Dependent Care FSA Notice\*

Rules set forth by the Internal Revenue Code (IRC) state that the benefits provided under the Dependent Care FSA cannot discriminate in favor of Highly Compensated Employees (HCEs) as defined by the IRC. The Plan reserves the right to prospectively reduce or refund contributions made to the Dependent Care FSA by HCEs if such action is necessary to maintain the tax-qualified status of the Dependent Care FSA. If you are affected by the results of our Non-Discrimination Testing, you will be notified by the Benefits Department prior to the reduction.

# Eligible Dependent Requirements

## Eligible Dependents

Kinder Morgan offers you valuable healthcare benefits that cover eligible dependents. Proof of eligibility for coverage is required for each dependent you add and enroll. If you are adding dependent(s) for coverage, you must scan and upload proof of eligibility for your dependents in the Document Center (Benefits Portal) within 30 days or they WILL NOT be covered.

You will need your dependent's Social Security Number (SSN) and date of birth when adding them for coverage, or you will not be able to proceed with enrollment. A valid SSN is required if you elect health coverage in accordance with the Affordable Care Act (ACA) for the IRS 1095-C reporting.

### DEPENDENT DOCUMENTATION REQUIREMENTS

Spouse	Legally Married	The front page of prior year's tax return showing your married status including both of your names; <b>OR</b>  A Marriage Certificate <b>AND</b> a current household bill or account statement (i.e. loan/bank statement) showing both of your names on the bill/statement (joint ownership).  If married less than 1 year, only a Marriage Certificate is required.
Children	Biological, adopted or foster children, stepchildren, children of a Domestic Partner, children covered by a Qualified Medical Child Support Order, and children whom you have been granted permanent legal guardianship	A Birth Certificate for each child showing parent's names. Legal and other pertinent documentation may also be required.  Qualified children are covered up to age 26.
Domestic Partner	The Affidavit of Domestic Partnership form can be found on Benefits Online > Forms	

INELIGIBLE Dependents include: ex-spouses, grandchildren, siblings, and nieces or nephews

**Medical/Rx, dental, and vision coverage for eligible dependent children can continue up to age 26.** Coverage may be extended if the child is disabled, dependent upon you for care and support, lives in your home, and is currently covered under a KM Medical Plan. Proof of disability and support will be required. You must advise the Benefits Department within 30 days from the date the child turns age 26 for consideration of extended coverage.





# Benefits Costs

## 2021 PREMIUMS

MEDICAL BENEFITS (Bi-Weekly Cost)	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	EMPLOYEE + CHILDREN	EMPLOYEE + FAMILY
BCBSTX HDHP Base	\$0.00	\$35.81	\$20.10	\$ 46.20
BCBSTX HDHP Buy-up	\$24.04	\$80.39	\$45.70	\$102.03
BCBSTX PPO	\$74.26	\$216.52	\$147.22	\$283.36
BCBSTX EPO	\$98.71	\$257.10	\$199.99	\$345.94
BCBSTX Out-Of-Area (OOA)	\$74.26	\$216.52	\$147.22	\$283.36
KAISER (California)	\$90.08	\$231.22	\$162.15	\$297.28

## DENTAL BENEFITS (Bi-Weekly Cost)

Cigna	\$7.87	\$16.29	\$17.31	\$24.71
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## VISION BENEFITS (Bi-Weekly Cost)

VSP	\$3.86	\$5.50	\$6.44	\$10.30
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## VOLUNTARY AD&D INSURANCE BENEFITS (Monthly Cost; after-tax)

COVERAGE	EMPLOYEE	SPOUSE	CHILDREN	RATE/\$1,000
Employee	100%	N/A	N/A	\$0.015
Employee & Spouse	100%	50%	N/A	\$0.030
Employee, Spouse & Children	100%	40%	10%	\$0.030
Employee & Children	100%	N/A	10%	\$0.030

## OPTIONAL EMPLOYEE & SPOUSE LIFE INSURANCE (Monthly Cost; after-tax)

AGE	RATE/\$1,000	AGE	RATE/\$1,000	AGE	RATE/\$1,000	AGE	RATE/\$1,000
Under 30	\$0.048	40 - 44	\$0.084	55 - 59	\$0.360	70 - 74	\$1.648
30 - 34	\$0.064	45 - 49	\$0.128	60 - 64	\$0.552	75 +	\$2.060
35 - 39	\$0.076	50 - 54	\$0.192	65 - 69	\$1.032		

## Optional Child Life Insurance - \$0.92 (Bi-Weekly Cost; after-tax)

**NOTE:** To calculate your Optional Employee/Spouse Life Insurance and Voluntary AD&D, take the coverage amount and ÷ \$1,000 x monthly rate above x 12 months = annual amount. Divide annual amount by 26 pay periods = bi-weekly amount.

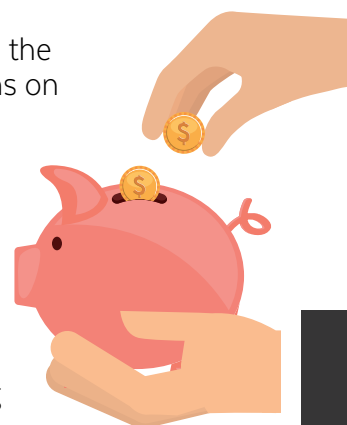
# Savings & Retirement Programs

Saving for retirement is important. The Company helps you prepare for retirement with the Kinder Morgan Savings and Retirement Plans. Kinder Morgan contributes to these Plans on your behalf, and you can also make personal contributions to your Savings Plan.

## Savings Plan - 401(k)

Empower Retirement is our 401(k) administrator. We are proud that more than 90% of employees realize the power of saving and contribute to the Savings Plan. The average employee contribution percentage is 8%.

Register on the Empower Retirement portal to choose your investment options, increase or change your contributions, and access educational and interactive planning tools. Register at [www.empowermyretirement.com](http://www.empowermyretirement.com).



## Company Contributions - Qualified Non-Elective Contribution (QNEC)

The company contributes 5% of your eligible compensation (subject to certain IRS limitations) each pay period regardless of your contribution. It is invested per your elections or into the appropriate target date fund. **You are vested in the QNEC contributions after two years of eligible service.**

Eligible compensation used to determine the QNEC includes base, holiday and paid time off pay, scheduled overtime and shift differential.

## Your Contributions

You can contribute from 1% to 50% percent of your eligible compensation, per pay period on a Pre-tax or Roth After-tax basis, subject to certain IRS limitations. Your contributions are invested per your elections or into the appropriate target date fund. You are 100% vested in your own contributions immediately. Go to [www.empowermyretirement.com](http://www.empowermyretirement.com) or call (844) 465-4455 to make a contribution election.

Eligible compensation used to determine your contributions includes base, holiday and paid time off pay, all overtime and shift differential.

## Automatic Enrollment for New Hires

As a new hire, you will be automatically enrolled in the Savings Plan at a pre-tax contribution rate of 6% of eligible compensation 30 days after you become a participant if you do not actively make a contribution election. In addition, you will also be enrolled in the automatic increase program, which means that your pre-tax contributions will increase by 1% each year until you reach a 12% contribution level, or you elect another contribution percentage rate (from 0% to 50%).

**Note:** If you do not want to be automatically enrolled in the Savings Plan and/or be enrolled in the automatic increase program, you must contact Empower to modify your contribution rate or opt out.

## Retirement Plans – Pension

Kinder Morgan also provides pension benefits in the form of a Personal Retirement Account or PRA (commonly known as a cash balance plan). The company pays the total cost of this benefit; no employee contributions are allowed, and no enrollment is necessary. Read the Retirement Plan SPDs for more information.

Your PRA grows with Kinder Morgan contribution credits and interest credits. If you are vested when you terminate, your pension benefit is based on your PRA balance, and several annuity payment options and a lump sum option may be available to you. **You are vested in your PRA after three years of eligible service.**

### KM Retirement Plans (A & B)

KM has two Retirement Plans. The Plan you participate in (Plan A or Plan B) is dependent on your hire date and any previous KM service. **Pension benefits are calculated the same under both Plans.**

## Company Contribution and Interest Credits

The amount the Company contributes to your PRA on a bi-weekly basis, is a variable percentage of eligible compensation (subject to certain IRS limitations) based on your age and years of service as of 12/31 of the prior year. See the table below. The annual interest credit rate is updated each January and is credited bi-weekly.

### CONTRIBUTION CREDITS

Age + Service as of 12/31 of the prior year	Less than 50 = 4%	50 and above = 5%
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Eligible compensation used to determine PRA contributions includes base, holiday and paid time off pay, scheduled overtime and shift differential.

## Check Your Personal Retirement Account Balance

The Kinder Morgan Benefits Service Center is the administrator of the Retirement Plan; register at [www.myplansconnect.com/kindermorgan](http://www.myplansconnect.com/kindermorgan). Just follow the New User instructions and you will be able to see your balance, run estimates, and access helpful financial tools and resources. You can also call the Kinder Morgan Benefits Service Center if you have questions about your PRA benefits at (866) 301-2359.

Helpful information regarding Kinder Morgan's Retirement and Savings Plans can be found by going to Benefits Online > Retirement/Savings.

DESIGNATE YOUR BENEFICIARIES. It's important to name beneficiaries for your Kinder Morgan benefits. You can find a link to the Beneficiary Designation instructions on the Retirement/Savings page as well as under Life/AD&D on the Benefits Online Portal.

# Contact List



PROVIDER	TELEPHONE	SERVICE/GROUP ID	WEBSITE
KM Benefits Department	(866) 775-5790 Select option 3	Benefits	KMONLINE > Benefits Online
Benefits Online Portal kindermorgan.hrntouch.com	Review your profile and benefits, find benefits plan information and resources, enroll online, report a Qualified Life Event, upload documentation, and more.		
Ask Bolty! Questions? On KMOnline click the Chat box on the right side or bottom of the page to get answers from Bolty!			
Blue Cross Blue Shield of Texas	(855) 676-4476	Medical (TX041826)	myhealth.myevive.com
CVS Caremark	(800) 840-0357	Prescription (5101)	caremark.com
Magellan EAP	(800) 424-6207	Employee Assistance Program	magellanascent.com
Kaiser (California HMO)	(800) 464-4000	Medical - CA Only	kaiserpermanente.org
Cigna	(800) 244-6224	Dental (3339023)	mycigna.com
Vision Service Plan	(800) 877-7195	Vision (12055862)	vsp.com
HealthEquity	(866) 346-5800	HSA & FSA Accounts	myhealthequity.com
Securian	(844) 301-0133	Life & AD&D (70318) Travel Assistance Legacy Planning	lifebenefits.com lifebenefits.com/travel securian.com/legacy
Benefit Service Center	(866) 301-2359	Retirement Plan (Pension)	myplansconnect.com/kindermorgan
Empower Retirement	(844) 465-4455	401(k) Savings Plan	empowermyretirement.com
Computershare	(800) 633-9394	Employee Stock Purchase Plan (ESPP)	www-us.computershare.com/employee

**VOLUNTARY BENEFITS :** For more information, go to the Benefits Online Portal > Health & Welfare > Voluntary Benefits

<b>Securian</b> -- Claims Filing	(888) 254-1308 (800) 328-9442	Critical Illness, Accident and Hospital Indemnity Insurance	lifebenefits.com/km securian.com/benefits
<b>LegalEASE</b>	(888) 416-4313	Legal Services/Assistance	legaleaseplan.com/kindermorgan
<b>Allstate</b>	(800) 789-2720	Identity Protection	myaip.com
<b>Nationwide</b>	(844) 208-1108	Pet Insurance	
<b>Pet Benefit Solutions</b>	(800) 891-2565	Total Pet Program (including Rx)	petbenefits.com

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