2022 Retirement Benefits Guide









We appreciate you choosing a career with Marathon Petroleum and thank you for your contribution over the years. Your hard work, talent and commitment have made a difference, and we thank you for being part of our great Company.

As you begin to think about retirement, we want to make sure you have the information you need to transition successfully to the next stage of your life. In this guide we will review important benefit information, to help you make decisions, prior to leaving Marathon Petroleum.



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PRINTED SUMMARY PLAN DESCRIPTIONS AND SUMMARIES OF BENEFITS AND COVERAGE AVAILABLE

The Summary Plan Descriptions (SPD) and Summaries of Benefits and Coverage (SBC) are available at <u>www.myMPCbenefits.com</u>. We have posted the SPDs and SBCs online to help ensure you have easy access to your benefits information. If you prefer to receive a printed copy of the SPDs or SBCs, we will provide one to you at no charge. Contact the MPC Benefits Service Center at 1-888-421-2199, (option 1, then 3), or <u>benefits@</u> <u>marathonpetroleum.com</u> to request a printed copy.

The Company's policies, plans, practices and procedures may be amended, terminated or changed at any time at the sole discretion of the Company. If that should occur, the material in this document will be superseded and the provisions of the actual official plan documents will control. If there are discrepancies between this document and the official plan documents, the actual plan documents will always govern.

Who to Call

Need help? No problem. We understand the numerous benefit options available to you can be confusing. If you need assistance, here's who you can call:

- MPC Retirement Plan, Andeavor Pension Benefit and MPC Thrift Plan: Contact the Fidelity Benefits Center by logging in to <u>www.netbenefits.com/</u> <u>marathonpetroleum</u> or calling 1-866-602-0595.
- Health, Dental, Vision and Life Insurance Plans: Contact the MPC Benefits Service Center, an internal team of benefit experts who are ready to help you navigate all the benefit options available to you and your family. Simply call 1-888-421-2199, (option 1, then 3), Monday through Friday, 8 a.m. to 5 p.m., ET, or send an email to <u>benefits@marathonpetroleum.com</u>. After-hours callers can leave a message along with their phone number and, in most cases, can expect to receive a response within one business day.

A more detailed contact list of the MPC benefit plan vendors is provided on pages 22-23 of this guide.

NOTE: If you are a union employee or if you have prior service with a subsidiary or affiliate of Marathon Petroleum Company LP, your benefits may be different from those reviewed in this brochure. Please contact a representative at Fidelity to verify your retirement benefit and the MPC Benefits Service Center regarding your Health, Dental, Vision and Life Insurance coverage.



Getting Ready for Retirement

In general, Marathon Petroleum's benefits in retirement are available provided you are at least age 50, have 10 years of actual service under the terms of the Employee Service Plan, and are vested in benefits under the terms of the retirement plan(s). (The eligibility age for the Retiree Health Plan can differ for employees based on hire date and if hired with Marathon Petroleum through an acquisition. See page 7 for more information regarding eligibility.)

The value of these benefits can vary based on your employment history including, but not limited to, your age at your date of hire, your employment status during your service, and your age and service when you leave the Company.

Prior to making your retirement decisions, you should review the benefits information at <u>www.myMPCbenefits.com</u> and pay particular attention to the eligibility criteria and to the factors that are used to determine each available benefit in retirement. You are encouraged to consult with a tax advisor or financial planner to make the appropriate retirement decisions for yourself and your family.

THE BENEFITS OF WORKING ANOTHER YEAR ... OR MORE

Depending on your personal situation, it might "pay to delay" your retirement from one to several years, based on the following considerations:

- Lower Retiree Health Plan Premiums, (if eligible): You receive 4% of the Company subsidy toward your Retiree Health Plan premium for every year of service after your 30th birthday. If you have not yet earned 100% of the Company subsidy, retiring now could potentially cost you a significant amount in Retiree Health Plan premiums over time.
- Accrued earnings from salary growth in your Thrift Plan.
- Projected benefits from the Retirement Plan and Thrift Plan.
- Continued compensation treatment.

While retirement is a life decision that involves many important considerations, Marathon Petroleum wants to ensure you're getting the most value from our benefit plans when you leave the Company.

Retirement Plan

Your Retirement Plan benefit is one of the key components of your overall retirement income, so you'll want to have a clear understanding of how the Plan pays benefits and the options available to you. If you are a legacy Andeavor employee, your retirement plan benefit is comprised of two components, the MPC benefit and the Andeavor benefit.

Andeavor Benefit

For questions, contact Fidelity Investments, 1-866-602-0595 or <u>www.netbenefits.com/</u> <u>marathonpetroleum</u>

• Legacy Andeavor employees earned a pension benefit for their service through December 31, 2018 under the Andeavor benefit. You are vested in your benefit after 3 years of service. Your continued service with Marathon Petroleum is recognized for this purpose.

CHECK OUT YOUR RETIREMENT BENEFITS CHECKLIST

There is a lot to consider when preparing for retirement. For your convenience, we've included a "Retirement Benefits Checklist" on page 20. This planning tool summarizes important decisions regarding your Marathon Petroleum retirement benefits, as well as action items for accessing retirement resources outside the Company.



How Can You Get an Estimate of Your Retirement Plan Benefits?

Once you have a retirement date in mind, you can use Fidelity NetBenefits, <u>www.netbenefits.</u> <u>com/marathonpetroleum</u>, a web-based benefits information tool, to estimate your Retirement Plan benefit. If you do not have online access, you can call Fidelity at 1-866-602-0595 to request an estimate.

Depending on your employment history with Marathon Petroleum, your Retirement Plan benefit may include a portion from the "Final Average Pay" (FAP)-based formula (your "legacy benefit") and a portion from the Cash Balance account-based benefit.

What Payment Options Do You Have?

When deciding on a payment option, it's important to look at your overall financial situation. As part of this process, you may want to consult with your spouse, if applicable (in fact, some payment options may require your spouse's consent), as well as with a financial planner/tax advisor.

The Retirement Plan, including the Andeavor benefit, offers several payment options. These benefit options are described in detail in the Retirement Plan documents available on <u>www.</u> <u>myMPCbenefits.com</u>.

How Do You Apply for Your Retirement Benefit?

To begin the retirement process and apply for your retirement benefit:

- Contact the Fidelity Benefits Center at 1-866-602-0595, at least 45, but no more than 180 days, prior to your desired "benefit commencement date," which is generally the first of the month following your retirement date.
 Note: The benefit commencement date does not refer to the actual disbursement date of retirement monies. See "When Do Benefit Payments Commence?" on the next page.
- When contacting Fidelity, you will need to provide date information, including last day worked and benefit commencement date.
 For example: If you are planning to retire January 6 and want to receive your benefit

as soon as possible, your last day worked will be January 5 and your benefit commencement date will be February 1.

- For legacy Andeavor employees, you will need to request two sets of election paperwork: one for the Andeavor benefit (service prior to 2019) and one for the Marathon Petroleum benefit (service starting in 2019).
- When contacting Fidelity, you should ask to be assigned to a Retirement Benefits Coordinator (RBC). The Fidelity RBC will serve as a single point of contact throughout the retirement process, from answering initial questions and starting the process through the actual payment of benefits.
- Fidelity's RBC will guide you through the benefit election process over the phone. If you are not ready to make your benefit elections at that time, the Fidelity RBC will initiate a benefit modeling statement (which will be mailed to you) to assist you in the benefit election process.
- Once your benefit elections have been communicated (via telephone) to Fidelity, you will receive a Pension Benefit Election Authorization statement to sign outlining your benefit elections. Note: This mailing may include additional forms to complete depending on your form of benefit election (e.g., a spousal consent form).
- Fidelity must receive your signed Pension Benefit Election Authorization statement (along with any other forms, e.g., spousal consent) in good order prior to your benefit commencement date. To ensure there is no delay in processing your request, return your completed forms promptly in order to allow Fidelity adequate time for review and processing.



When Do Benefit Payments Commence?

Retirement benefit payments will commence approximately five weeks after your benefit commencement date. This timing ensures that all of your pay can be appropriately included in the calculation of your final benefit.

Are There Tax Consequences to Receiving Your Retirement Benefit?

Yes. There may be tax consequences to receiving your Retirement Plan benefit. To help you make an informed decision, please review the information regarding payment options and tax rules in the Retirement Plan Summary Plan Description (SPD) and Andeavor Pension Plan SPD. You can also consult a financial planner/ tax advisor and reference the Fidelity election paperwork and the Fidelity Special Tax Notice.

If you take a lump sum benefit, you can elect a direct rollover to another qualified plan, such as the Thrift Plan or an Individual Retirement Account (IRA). You can also elect to have the lump sum payment paid directly to you, with possible tax consequences. If you decide to make a rollover to an IRA, the account would need to be set up in advance with your financial planner/tax advisor.

AVAILABILITY OF SUMMARY PLAN DESCRIPTION (SPD)

The Retirement Plan Summary Plan Description (SPD) and Andeavor Pension Plan SPD on <u>www.myMPCbenefits.com</u> provide you with a general description of all forms of benefits available through the Retirement Plan, as well as important tax information you will need before deciding how to receive your Plan benefits. If you do not have access to the Internet, please call the MPC Benefits Service Center at 1-888-421-2199 (option 1, then 3) for a printed copy.

What Happens to Your Retirement Benefit If You Die Before You Retire?

If you are a vested member of the Retirement Plan and you die before you retire, the Plan will provide a lump sum benefit.

If you are married, your eligible surviving spouse can elect the lump sum benefit or a monthly annuity as described in the Retirement Plan SPD and the Andeavor Pension Plan SPD. If you are single, your named beneficiary or estate will receive the lump sum benefit — there is no monthly annuity option in this case. **Note:** Under the Andeavor Pension Plan, you can name a beneficiary other than your spouse, with their consent.

Keep Leadership and Human Resources Informed

Since the Company considers retirement discussions confidential, Marathon Petroleum is not notified of your intention to retire until your signed forms are received by Fidelity. Since this event may occur after your date of retirement, you need to contact your leadership and your local HR Business Partner prior to your last day of work.

Thrift Plan

What Options Do You Have Regarding Your Thrift Plan Account?

As a retiree, you will no longer be able to make payroll contributions to your Thrift Plan account. However, with the money existing in the account, you have several options. You can:

- Leave your money in the Thrift Plan (if the amount is greater than \$5,000).
- Roll it over to an IRA or another qualified plan.
- Take a lump sum distribution.
- Roll it over into a new employer's qualified plan (if you decide to find employment in retirement and the new plan accepts rollovers).

If you leave your money in the Thrift Plan, you can manage your account in much the same way you did as an active employee. You can:

- Change your beneficiary designation (with spousal consent).
- Make transfers among investment options.
- Continue existing loans that are re-amortized to a monthly payment schedule.
- Take up to four retired member withdrawals each year.
- Rollover into the Thrift Plan a lump sum benefit from the Retirement Plan(s).
- Rollover into the Thrift Plan from an IRA (excluding Roth) or other qualified plans.

And as a retired member, you can also elect:

• Annual, semi-annual or monthly installment payments.

What If You Have an Existing Loan?

Your existing loan(s) can be continued; there is no mandatory payoff simply because you retire. You should contact Fidelity to find out how to make monthly payments after you retire.

Can You Initiate Loans and Withdrawals After Retirement?

You can initiate withdrawals online or by contacting Fidelity. You can take a partial distribution, known as a retired member withdrawal, or a total distribution from your Thrift Plan account. Retirees are not able to initiate new loans.

Are There Tax Consequences to Taking a Withdrawal?

Withdrawals do have potential tax consequences. On all monies distributed to you, 20% federal taxes will be withheld from the taxable portion unless you elect a direct rollover. If you are not at least age 55 in the year you retire, or have not yet attained age 59½ at the time of the withdrawal, your tax liability (at the time you file that year's tax return) may include a 10% early distribution penalty, in addition to your ordinary income taxes.

Can I Continue to Receive Updates From Fidelity Via Email Regarding My Thrift Account After Retirement?

Yes. Log in to <u>www.netbenefits.com/</u> <u>marathonpetroleum</u>, select "Your Profile" then select "Email Address." You can then add or update your home email address.

What Are Installments and How Do They Work?

As a retiree, you are eligible for another type of transaction not available to active employees. This transaction is called an "installment." Installments, also known as Systematic Withdrawal Payments (SWPs), are a type of automatic scheduled withdrawal.

Installments can be designed to avoid certain tax consequences, or simply for the convenience of having regularly scheduled payments.

You can elect installments as an annual payment, semi-annual payments or monthly payments. These payments can be electronically transferred to your bank account.

Are There Tax Consequences to Receiving Installments?

If you retire prior to the year in which you attain age 55, you could be subject to an early distribution tax penalty equal to 10% of the taxable portion of each withdrawal.

To avoid this tax penalty, substantially level payment amounts can be projected by the Fidelity RBC. These payments are usually determined by amortizing your total account balance over the number of years equal to your life expectancy at an approved interest rate.

Once installments commence, if you modify the payment amount prior to the later of age 59½ or five years from your first payment or take additional withdrawals, all payments could be subject to the 10% tax plus interest. (After the later of age 59½ or five years, you may change or discontinue your installments without incurring the 10% penalty.)

If you retire in the year in which you will be

at least age 55, you can establish a payment amount that fits your budget. You would also have four retired member withdrawals available to you in addition to your automatic payment schedule. Your installments and retired member withdrawals from your Thrift Plan would not be subject to the 10% early distribution penalty.

Call the Fidelity RBC if you have any questions about or would like to set up installment payments. Additional information about tax rules can be found in the Thrift Plan section on www.myMPCbenefits.com.

What Happens to Your Thrift Plan Account If You Die?

- If your named beneficiary is your spouse: Your spouse is permitted to remain in the Plan for life and can take installments and/or up to four partial withdrawals a year. However, if the balance of your account is \$5,000 or less, your spouse must commence final settlement no later than 60 days after the close of the Plan year during which you died.
- If your named beneficiary is not your spouse: He/she may maintain an open account for up to five years from the date of your death and is allowed to take up to four partial withdrawals a year. If your account balance is \$5,000 or less, your beneficiary must request final settlement no later than 60 days after the close of the Plan year in which you die.

CONSULT A TAX PROFESSIONAL

Because the tax rules around withdrawals can be very complex, Marathon Petroleum strongly encourages you to consult with a tax advisor before taking a withdrawal from your Thrift Plan account.

PRE-65 Retiree Health Plan*

What Medical Coverage Is Available From Marathon Petroleum When You Retire?

The Marathon Petroleum Retiree Health Plan (Retiree Health Plan) is administered by Anthem BlueCross BlueShield (for medical expenses) and Express Scripts (for prescription drug expenses). The Kaiser CA HMO is available in certain locations. Your eligibility for the Retiree Health Plan is dependent upon your date of hire, your years of accredited service and your age at retirement. Note: Special rules apply if you were hired or rehired on or after January 1, 2008. Also, employees hired with Marathon Petroleum through an acquisition may have different eligibility requirements. Contact the MPC Benefits Service Center at 1-888-421-2199 (option 1, then 3) for your eligibility.

Once your retirement is entered in our HR system, you must complete the Retirement life event in the Benefitsolver system within 31 days of your retirement date to waive or enroll in the Retiree Health Plan. You and your spouse/ domestic partner remain eligible for coverage under the Retiree Health Plan until age 65. Note: New dependent(s) acquired after a retiree member's date of retirement are not eligible for coverage under the Retiree Health Plan.

For information regarding Medicare supplement options when you or your spouse/domestic partner turn age 65, or if you or your spouse/ domestic partner are age 65 or older at the time you retire, see "What Happens to Your Company Medical Coverage When You Become Medicare Eligible (Age 65)?" on page 10.

Employees hired (as well as those who became benefits eligible) on or after January 1, 2019 are not eligible for the Retiree Health Plan. Legacy Andeavor employees hired by Andeavor on or after January 1, 2016 are not eligible for the Retiree Health Plan.

*For questions regarding eligibility for the Retiree Health Plan, contact the MPC Benefits Service Center at 1-888-421-2199 (option 1, then 3).

Will Your Health Plan Contributions Change?

Yes. Although your contributions for Retiree Health Plan premiums will continue to be subsidized by the Company, your premium will be higher. Since Retiree Health Plan usage is higher, retiree premiums are higher than those of active employees.

The method used to determine the Company subsidy toward your Retiree Health Plan premium is the 4% accrual method, under which you receive 4% of the Company subsidy for each year of service after the age of 30.

Call an MPC Benefits Counselor at 1-888-421-2199, (option 1, then 3), to find out what your earned percentage and cost will be when you retire. After you have made your benefit elections and your billing account is created, you will receive a notification from BenefitSolver letting you know your account is open and you have a balance due. After the initial notification, premium and billing notices will generate at the beginning of each month.



2022 Health Plan Monthly	Monthly Contributions		
Retiree Contributions ¹	Classic Option	Saver HSA Option	
Retiree Only	\$189.40	\$103.00	
Retiree + Spouse/Domestic Partner ²	\$378.40	\$201.00	
Retiree + Child(ren)	\$378.40	\$201.00	
Family	\$567.80	\$328.00	

¹ Monthly contribution amounts for the Health Plan's Classic and Saver HSA options shown above are for retirees with 100% of the Company subsidy. A complete list of accrual rates can be found at <u>www.myMPCbenefits.com</u>.

² The IRS considers the Company's contribution for Domestic Partner coverage (if not a tax dependent) to be a taxable benefit, which is included as imputed income for participants if elected.

2022 Kaiser HMO Health Plan	Monthly Contributions		
Retiree Contributions ¹	Northern	Southern	
Retiree Only	\$458.41	\$322.73	
Retiree + Spouse/Domestic Partner ²	\$1,100.82	\$819.92	
Retiree + Child(ren)	\$736.02	\$528.23	
Family	\$1,255.23	\$613.29	

¹ Monthly contribution amounts for the Kaiser Northern California and Kaiser Southern California options shown above are for retirees with 100% of the Company subsidy. A complete list of accrual rates, Summaries of Benefits and Coverage and Evidence of Coverage documents can be found at <u>www.myMPCbenefits.com</u> for Medical and Prescription coverage information for Kaiser Northern and Southern HMO plans.

²The IRS considers the Company's contribution for Domestic Partner coverage (if not a tax dependent) to be a taxable benefit, which is included as imputed income for participants if elected.

2022 Health Plan Options Comparison (includes Medical,Surgical, Mental Health and Substance Abuse)	Classic Option In-network benefits	Saver HSA Option In-network benefits	
Deductible	\$600 Individual	\$1,400 Retiree Only	
Deductible	\$1,200 Retiree + Dependent(s) ²	\$2,800 Retiree + Dependent(s) ²	
Out-of-Pocket (OOP) Maximum ¹	\$3,500 Individual	\$5,000 Individual	
Out-oi-Focket (OOF) Maximum	\$7,000 Retiree + Dependent(s) ²	\$10,000 Retiree + Dependent(s) ²	
Coinsurance	You pay 20% after deductible	You pay 20% after deductible	
Office Visit	\$20 for primary care; \$50 for specialist and urgent care	You pay 20% after deductible	
Preventive Services	Plan covers at 100% (no deductible)	Plan covers at 100% (no deductible)	
ER Charge	\$200 charge, then deductible plus 20% coinsurance	Deductible, then \$200 charge, then 20% coinsurance	

¹ Medical and prescription drug expenses will apply toward meeting the out-of-pocket maximum.

² Retiree + Dependent(s) covers Retiree + Spouse/Domestic Partner, Retiree + Child(ren) and Retiree + Family.

	Classic Option Out-of-network benefits	Saver HSA Option Out-of-network benefits
Deductible	\$1,200 Individual	\$2,800 Retiree Only
Deductible	\$2,400 Retiree + Dependent(s)	\$5,600 Retiree + Dependent(s) ²
Out-of-pocket (OOP)	\$7,000 Individual	\$10,000 Individual
Maximum ¹	\$14,000 Retiree + Dependent(s)	\$20,000 Retiree + Dependent(s)
Coinsurance	You pay 40% after deductible	You pay 40% after deductible
Office Visit	You pay 40% after deductible	You pay 40% after deductible
Preventive Services	You pay 40% after deductible	You pay 40% after deductible
ER Charge	\$200 charge, then deductible plus 20% coinsurance	Deductible, then \$200 charge, then 20% coinsurance

¹ Medical and prescription drug expenses will apply toward meeting the out-of-pocket maximum.

² Retiree + Dependent(s) covers Retiree + Spouse, Retiree + Child(ren) and Retiree + Family.

Prescription Drugs (Rx)

Prescription drug coverage for the Classic and Saver HSA Retiree Health Plan options is administered by **Express Scripts**. You will automatically receive prescription drug coverage if you enroll in either option. Your prescription drug costs will depend on the option you elect, whether you purchase at a retail pharmacy or through mail order and the type of prescription drugs you buy (i.e., generic or brand name).

All prescription and specialty drugs **MUST** be purchased through Express Scripts mail order or at a participating network pharmacy, or there will be no coverage from the Plan.

Members may receive a 90-day supply through a Walgreens pharmacy or the Express Scripts mail order pharmacy.

	Classic Option	Saver HSA Option	
Out-of-Pocket Maximum	Combined	with medical	
Prescription Annual Deductible	Retail and Mail Order Combined – \$100 Individual; \$200 Family	Combined with medical	
Retail (30-day supply) ² :			
 Generic Drugs* 	\$10 after deductible	You pay 20% after deductible ¹	
 Preferred Brand Drugs 	\$30 after deductible		
 Non-Preferred Brand Drugs 	\$60 after deductible		
Mail Order (90-day supply)2:			
 Generic Drugs* 	\$25		
 Preferred Brand Drugs 	\$75	You pay 20% after deductible ¹	
(includes Specialty Drugs)	\$150		
 Non-Preferred Brand Drugs 			

¹ Certain generic preventive drugs under the Saver HSA option are covered at 100%. A list of these drugs can be found at <u>www.myMPCbenefits.com</u>.

² To encourage the use of Mail Order or Smart90-Walgreens, there will be no coverage for the third and subsequent fills of a "maintenance drug" purchased at other participating retail pharmacies. You will pay 100% of the cost of the medication.

Will You Be Eligible for Routine Physical Exams and Preventive Care?

Yes. As long as you are enrolled in the Retiree Health Plan, you and your covered dependent(s) are eligible for routine physical exams and preventive services. Preventive services information can be found at www.myMPCbenefits.com.

Can You Waive Retiree Health Plan Coverage at Retirement, But Later Re-enroll?

Eligible retirees with a retirement date on or after January 1, 2021 have the option to waive coverage in the Retiree Health Plan at retirement and be allowed a one-time opportunity to enroll during a future Annual Enrollment period or due to a qualifying event, with proof of continuous creditable coverage during the waived period.



What Happens to Your Company Medical Coverage When You Become Medicare Eligible (Age 65)?

Once you become eligible for Medicare at age 65, your Retiree Health Plan coverage ends, or if you are over age 65 when you retire, your active employee Health Plan coverage ends. However, you'll have the opportunity to supplement or replace your Federal Medicare coverage with an individual plan through a private insurance company. These supplemental or replacement plans are available to anyone who is Medicare eligible due to reaching age 65, regardless of income level. **Please note: You and your spouse must each make a separate election.**

A few months prior to your 65th birthday (or when you retire if you or your spouse are age 65 or older at the time of your retirement), you will receive an informational packet from Via Benefits detailing your options. Benefit advisors from Via Benefits will be available to help you pick the plan that works best for you based on your current doctors, prescriptions and budget, and will guide you through the enrollment process, answering any questions you may have.



Medicare Supplemental Plans

Via Benefits offers three different types of supplemental plans to those who are Medicareeligible at age 65. These plans provide coverage beyond what traditional Medicare (Parts A and B) offers:

- Medicare Advantage (Part C): These plans — MAPD (with prescription drug coverage) and MA (no prescription drug coverage) — provide all the Medicare Parts A and B coverage, plus additional benefits. There are also three provider networks: HMO, PPO and Private Fee-for-Service.
- **Medigap:** Supplemental coverage that fills the "gaps" in Medicare coverage.
- **Part D:** Optional prescription drug coverage.

If you are a legacy Marathon Petroleum employee and were last hired or re-hired as a regular full-time or regular part-time employee prior to January 1, 2008, and are Medicare eligible due to reaching age 65, Marathon Petroleum will provide a subsidy toward the cost of medical coverage for you and your Medicare-eligible spouse. The subsidy is in the form of a contribution to a tax-free Health Reimbursement Account (HRA) administered by Via Benefits. You can use HRA funds to pay for eligible health care expenses such as monthly premiums, deductibles and copayments, as well as vision and dental expenses. The amount of the subsidy is based on the final accrual percent you earned upon retirement.

Health Care Flexible Spending Account (FSA) and Limited Purpose Health Care Flexible Spending Account (LPFSA)

Your deduction will stop with your last paycheck. You can continue to submit claims with a date of service prior to your employment termination date. All claims incurred must be filed by May 31, 2023. If you participate in the Health Care FSA or LPFSA and you have not used all of your account balance by your retirement date, you may be eligible to extend your access to the account by electing COBRA. You will receive notice about this option from **BenefitSolver** in your COBRA election package.

Health Savings Account (HSA)

Marathon Petroleum's Health Savings Account (HSA), administered by **Fidelity**, is a triple-taxadvantaged account you can use to pay for qualified health-related expenses, including copays, coinsurance and deductibles for medical, prescription drug, dental and vision expenses. You are eligible to open an HSA only if you enroll in the **Saver HSA option** of the <u>Health Plan</u>.

You manage this account. You can choose to save and invest the money with tax-free earnings or use it to pay eligible expenses during the year, up to your current balance.

You can make contributions to your HSA, up to the IRS limits. For 2022, the IRS limits are:

- \$3,650 for Retiree Only coverage.
- \$7,300 for Retiree + Dependent(s) coverage.
- Plus an additional \$1,000 in catch-up contributions if you're over age 55.

At any time, you may make an after-tax contribution to your Fidelity HSA, by transferring money online into your HSA from another Fidelity account or from an outside bank using electronic funds transfer (EFT), or by check. You may also call a Fidelity Representative to transfer money. You then report all contributions to your HSA on Form 8889 and file it with your Form 1040 or Form 1040NR.

HSA funds roll over from year to year and belong to you, so you will always have access to these funds. You do not need to submit receipts for reimbursement. However, it's recommended you save receipts and records in case the IRS requests proof that these funds were used for qualified health care expenses.

The HSA account is used to reimburse eligible health care expenses. To view a list of eligible HSA expenses for this account, refer to IRS Publication 502, which you can obtain through your local IRS office or from the IRS website at <u>www.irs.gov</u>. Please be aware that the rules governing IRS-qualified health care expenses are subject to change from year to year.

HSA Eligibility Rules

- You must be enrolled in a high-deductible health plan.
- You cannot be claimed as a dependent on someone else's tax return.
- If you or your dependent(s) are 65 and/or Medicare eligible, special rules apply.
- Please consult a tax professional.
- You cannot have any other medical coverage (such as through your spouse's/domestic partner's employer), unless it is also an HSA-qualified, high deductible health plan under IRS rules.
- If you are eligible for Veterans Benefits or TRICARE, special rules apply. Please consult a tax advisor.
- You cannot use HSA dollars for domestic partners unless they are a qualified tax dependent.

IMPORTANT!

It is the responsibility of each HSA owner to ensure he or she satisfies applicable HSA eligibility rules and complies with applicable contribution limitations. Contributions made by ineligible owners and contributions in excess of IRS prescribed limits are taxable to the owner and subject to an excise tax imposed on the HSA owner, unless distributed to the HSA owner within IRS-prescribed time frames. It is the HSA owner's responsibility to request a distribution of excess contributions (including Company contributions) within such time frames in order to avoid the excise tax.

If you or your spouse will be 65 and/or Medicare eligible in the next year, special rules apply for the HSA. Please consult a tax advisor.

Pre-65 Retiree Dental and Vision Plans

Before deciding on whether to elect coverage under the Pre-65 Retiree Dental and/or Vision Plans — especially if you will be turning age 65 any time soon — take time to review the following information regarding eligibility, enrollment in and termination of coverage from the Plans:

Eligibility

You're eligible to enroll in the Pre-65 Retiree Dental and Vision Plans if you:

- Are a retired employee under age 65.
- Are eligible for Retiree Health Plan coverage when you retire from the Company under the terms of the Marathon Petroleum Retirement Plan.

If you, as the retiree, meet eligibility requirements, you can also enroll your spouse/domestic partner and eligible child(ren) up to age 26 for coverage in the Pre-65 Retiree Dental or Vision Plans.

Enrollment

- You must enroll in or waive coverage within 31 days of retirement or within 31 days of the date COBRA coverage ends (see the COBRA section on page 17 for further information).
- Eligible retirees with a retirement date on or after January 1, 2021 have the option to waive dental plan and/or vision plan coverage at retirement and be allowed a one-time opportunity to enroll during a future Annual Enrollment period or due to a qualified event, with proof of continuous creditable coverage during the waived period.
- Once enrolled, you cannot drop coverage mid-year.
- Once you've dropped coverage in the Plans, you cannot re-enroll for coverage at any time.
- Employees hired (as well as those who became benefits eligible) on or after January 1, 2019 are not eligible for the Pre-65 Retiree Dental or Vision Plans.

Other Coverage Provisions

The following rules apply to eligibility for and termination of coverage under the Pre-65 Retiree Dental and Vision Plans:

- Coverage under the Pre-65 Retiree Dental and Vision Plans ends for you, your spouse/ domestic partner, and covered dependent(s) on the date you (the retiree), become Medicare eligible due to reaching age 65.
- If your spouse/domestic partner turns age 65 before you (the retiree), they will lose coverage under the Plans on the date they become Medicare eligible. That individual's loss of coverage will not affect your, or your other covered dependent(s)' coverage under the Plans, provided they meet all other Plan requirements.
- If you're a pre-65 retiree who dies while enrolled in the Retiree Dental and/or Vision Plans, your surviving spouse/domestic partner and dependent(s) may continue coverage under the Plans through COBRA (see page 17) for a maximum of 36 months.
- If you're a pre-65 retiree who didn't enroll in the Pre-65 Retiree Dental and/or Vision Plans at retirement and you die, your surviving spouse/domestic partner and dependent(s) won't be eligible to enroll in the Pre-65 Retiree Dental and/or Vision Plans.

Note: Your domestic partner and his/her dependent(s) participating in the Marathon Petroleum Dental and Vision Plans for active employees at the time of your retirement may be enrolled in the Pre-65 Retiree Dental and Vision Plans, provided they meet all other Plan requirements. New dependent(s) acquired after a retiree member's date of retirement are not eligible for coverage under the Retiree Dental and Vision Plans.

Pre-65 Retiree Dental Plan

Marathon Petroleum offers dental coverage through the Pre-65 Retiree Dental Plan administered by **Delta Dental**. With the Pre-65 Retiree Dental Plan, you can receive care from any licensed dentist. However, you can save more when you receive care from a dentist in the Delta Dental PPO and Delta Dental Premier Networks, since these dentists have agreed to give Plan members the largest discounts*. To find a Delta Dental PPO or Premier provider in your area, call Delta Dental at 1-800-524-0149 or go to <u>www.deltadentaloh.com/findadentist</u>.

If there are no participating dentists in your area or if you choose not to use an available network dentist, you can still participate in the Plan. However, out-of-network reimbursement amounts are limited to the amount that the Plan would reimburse for in-network care at a PPO provider. As a result, if you use an out-of-network dentist you will be required to pay the balance of the charges not paid by the Plan. This is known as "balance billing." Coverage levels are not the same as in the active employee Dental Plan. Covered amounts are based on reduced contracted fees, referred to as "maximum allowable charges," and are generally lower than paid under the active employee Dental Plan. A Delta Dental Premier network provider may also balance bill you for charges not paid by the plan.

*A dentist who is in the Delta Dental Premier Network is still in-network with Delta Dental. However, you will receive a greater cost savings if you go to a Delta Dental PPO Network provider.

Pre-65 Retiree Dental Plan Monthly Premiums

	Retiree Only	Retiree + Spouse/ Domestic Partner*	Retiree + Child(ren)	Retiree + Family
Delta Dental	\$26	\$48	\$55	\$78

Pre-65 Retiree Dental Plan Overview

Annual Deductible: \$50 per person

Calendar Year Maximum: \$1,000 per person				
Type of Service	Service Examples	Coverage		
Preventive and Diagnostic	Exams (limited to two per year), x-rays	100% ^{1,3} (no deductible)		
Basic Dental Services	Filling, extractions, root canals	80% ¹ (after deductible)		
Major Dental Services	Inlays, crowns, dentures	50% ¹ (after deductible)		
Orthodontia Services	Not covered	Not covered		

¹ When you receive services from a nonparticipating dentist or a Delta Dental Premier provider, the percentages in this column indicate the portion of Delta Dental's PPO provider fee schedule that will be paid for those services. This amount may be less than what the dentist charges or Delta Dental approves, and you are responsible for that difference.

²The IRS considers the Company's contribution for Domestic Partner coverage as imputed income which becomes a taxable benefit. Contact the MPC Benefits Service Center for more information.

³ \$50 individual deductible does not apply to preventive services.

	Delta Dental PPO
Benefits	 No deductible for preventive and diagnostic services. \$50 deductible per individual on other services.
	• \$1,000 calendar year maximum per individual.
Claims	Dental cards are mailed to you upon completion of your enrollment.

The Dental Plan details and the claim form can be found at www.myMPCbenefits.com/Forms/.

Out-of-network providers may require you to submit your own claims, may charge you the full cost of a procedure and may ask for payment in full up front.

Pre-65 Retiree Vision Plan

With the Pre-65 Retiree Vision Plan, administered by **Anthem Blue View Vision**, you can receive care from any licensed eye care professional. If you see an Anthem network provider, you receive a higher level of benefits and there are no claim forms to file. If you see an out-of-network provider, you receive a lesser discount on services and must file a claim for reimbursement.

Pre-65 Retiree Vision Plan Monthly Premiums

	Retiree Only	Retiree + Spouse/ Domestic Partner ¹	Retiree + Child(ren)	Retiree + Family
Pre-65 Retiree Vision Plan	\$7	\$12	\$13	\$20

¹ The IRS considers the Company's contribution for Domestic Partner coverage as imputed income which becomes a taxable benefit. Contact the MPC Benefits Service Center for more information.

Pre-65 Retiree Vision Plan

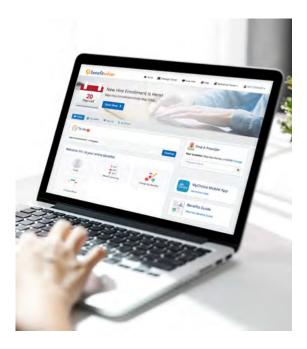
Plan Features	In-Network	Out-of-Network
Frequency of Service Exams Lenses/Contacts 	Once every calendar year Once every calendar year	Once every calendar year Once every calendar year
Frames	Once every other calendar year	Once every other calendar year
Exams	No copay	Up to a maximum allowance of \$35
Frames	No copay (Up to \$130 retail), then	Up to a maximum allowance of \$45
Lenses	20% off any remaining balance	
Single Vision	\$10 copay	Up to a maximum allowance of \$25
• Bifocal	\$10 copay	Up to a maximum allowance of \$40
• Trifocal	\$10 copay	Up to a maximum allowance of \$55
Contact Lenses (in lieu of	Up to a maximum allowance of \$130	Up to a maximum allowance of \$105
prescription eyeglass lenses)	This benefit applies to <u>one</u> order of contact lenses per calendar year	This benefit applies to <u>one</u> order of contact lenses per calendar year

The Pre-65 Retiree Vision Plan details and the out-of-network claim form can be found at <u>www.myMPCbenefits.com</u>.



Instructions for Completing Enrollment

benefitsolver





Follow the instructions below to complete your Retiree Benefits Enrollment. You must complete the Retirement life event in the Benefitsolver system within 31 days of your retirement date.

- Visit BenefitSolver at <u>www.</u> <u>myMPCbenefits.com/myBenefits</u> from any computer or smart device. New users must register. The Marathon Petroleum Company key is **MPC**.
- Once you log in, click Start Here on your homepage and use the Previous and Next buttons at the bottom of the page to move through each plan. Make sure your personal information, elections and dependent information is accurate and Approve your enrollment. To finalize your enrollment, click I Agree.
- **3.** Save or print a copy of your benefit summary after you have completed your enrollment.
- If you need to upload supporting documentation for a dependent (i.e., marriage license or birth certificate) you can upload your documentation on the Action Required page, or under your To Do list on your home page. All required documentation must be uploaded within 31 days of your retirement date.

For questions, technical assistance or to enroll over the phone, please contact BenefitSolver at 1-844-408-2575.

MY CHOICE MOBILE

Enrollment can also be completed by downloading BenefitSolver's app, My Choice Mobile. An access code is required and can be obtained by registering or logging into your account.

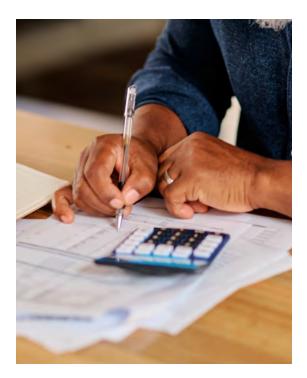
Instructions for Paying Monthly Premiums

BenefitSolver is Marathon Petroleum's third-party benefits administrator that handles the direct billing and premium payment processes. If you have any questions about your billing and payment process, please call BenefitSolver at 1-844-408-2575 for assistance. Below is information to explain the process.

Due Date for Monthly Premiums

Premiums are due the 1st of the month for that month's coverage with a grace period through the end of that month. For example, premiums for the month of March are due March 1st. You have a grace period through March 31st to pay your March premiums. If your payment is not received by March 31st, your account is considered delinquent and your coverage could be subject to termination for nonpayment.

Your coverage will terminate back to the end of the last fully paid period, and you will lose all rights to coverage under the Plan. As a reminder, any medical, prescription, dental and/or vision claims incurred during the time your benefit premiums were not paid will be reprocessed and the health providers will bill you directly for all claims previously paid by the Plan(s).



BenefitSolver Billing Statements

If you have a personal email address on record with BenefitSolver and it is set as your primary email address, you will receive an email from BenefitSolver's Message Center advising that you have an email ready to be read in the system. To read your message, log in to <u>www.myMPCbenefits.com/mybenefits</u> (Company Key = MPC) and click on the Message Center at the top of the page. (See screenshot below)

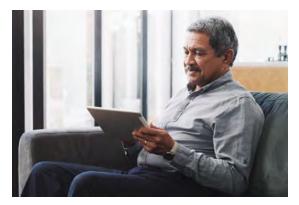


If you do not have an email address on record with BenefitSolver, monthly statements will be mailed to you. To add or update your email address, click on your name and then "Profile" to add/update your email address under the Personal Preferences section. If you do have an email address on record with BenefitSolver, you can change your contact preferences under your Account Profile to "paper mail" so you can receive your BenefitSolver monthly invoices by regular mail.

Contact Preferences		×
low would you prefer to be contacted?		
O Electronic Mail		
Email Address		
Personal Email Address		
	Cancel	Save

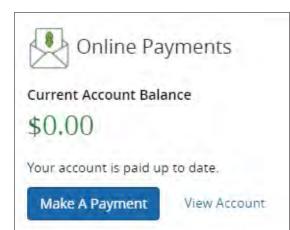
Change of Address After Retirement

If you have a change of address after retirement, email your change request to HR data at hrdatahelp@marathonpetroleum.com or mail it to Marathon Petroleum, Attn: HR Employee Data, 539 South Main Street, Findlay, OH 45840-3295. Be sure to include your Marathon Petroleum employee number with your request so HR data can match it with your employee record. Changes will be provided to the appropriate benefit vendors.



Auto-Pay and Online Payment Options

The auto-pay option lets you set up automatic deductions from your bank account to pay your monthly premiums. The auto-pay process runs around the 5th of each month. You can set up auto-pay by logging in to your BenefitSolver account at <u>www.myMPCbenefits.com/</u><u>mybenefits</u>. After you log in, scroll to the bottom right-hand corner to see the "Online Payments" box as shown below.



Click on "Make A Payment" and then click on the "Add a payment method." Fill in the required fields and select "Yes" for the "Auto-Pay" radio button at the bottom of the screen. Auto-Pay payments will be deducted around the 5th day of the month.

You can also make payments online without having to set up "Auto-Pay." A \$2.00 processing fee is charged to you each time you make an online payment without setting up "Auto-Pay."

Making Payments by Check

Payments should be mailed to:

Marathon Petroleum ATTN: Direct Bill Administration PO Box 850512 Minneapolis, MN 55485-0512

Include your name and account number on your check or money order. Your account number can be found on your BenefitSolver monthly statement.



COBRA

Your coverage under the active employee Health Plan, Dental Plan, Vision Plan, Health Care FSA and Limited Purpose FSA terminates upon retirement. However, you may continue coverage for 18 months at a higher premium under a law known as the Consolidated Omnibus Budget Reconciliation Act of 1985, commonly called COBRA.

COBRA requires the Company to offer temporary extension of Health, Dental, Vision, Health Care FSA and Limited Purpose FSA coverage for members and their covered dependent(s) upon a change in employment status or due to loss of coverage.

You will receive a COBRA packet from BenefitSolver about two weeks after your retirement date.

- You will need to compare the costs and coverage for each of these plans to determine if it makes more sense for you to enroll in the retiree plans or if the COBRA offer is better for you. You can find COBRA rates at www.myMPCbenefits.com.
- Keep in mind that COBRA is offered to you for a maximum of 18 months due to loss of coverage as an employee. If you are under age 65 at retirement, coverage can continue for the lesser of 18 months or when you attain age 65. If you are age 65 or older at retirement, coverage through COBRA can continue for a maximum of 18 months. You will only be offered COBRA for those plans in which you were participating at the time of retirement.
- If COBRA is elected for the active employee Dental and Vision Plans, you may enroll in the respective Pre-65 Retiree Dental and Vision Plans at the end of the COBRA coverage period provided your request is received within 31 days of the date COBRA coverage ends and you are still under 65.
- Coverage in the Pre-65 Retiree Dental Plan is different from the COBRA coverage offered for active employee coverage — the COBRA dental coverage is exactly the same as active employee coverage.
- Do not enroll in the COBRA coverage if you choose to enroll in the respective retiree plan.

EAP (Employee Assistance Program)

Your coverage (and that of anyone living in your household) continues for 36 months from your date of retirement.



Life and Accidental Death and Dismemberment (AD&D) Insurance

What Happens to Your Life and AD&D Coverage When You Retire?

- Basic Accidental Death and
 Dismemberment Coverage:
 Your coverage terminates upon retirement.
- Optional Accidental Death and Dismemberment Coverage: Your coverage terminates upon retirement.
- Basic Life Insurance Coverage: Your coverage terminates upon retirement.
- Optional Life Insurance Coverage: Your coverage terminates upon retirement.
- For the Life and AD&D Insurance Plans, if you die within 31 days of retirement, the coverage in force at retirement will be paid to your beneficiary.

Is There a Way to Continue Life Insurance and AD&D Coverage?

As you begin this transition in your life, you may be eligible to continue the group Life and AD&D insurance you had with Marathon Petroleum through the MetLife Insurance Company ("MetLife") conversion and portability options.

MetLife has arranged for financial professionals at Barnum Financial Group to help explain your options. Once your active coverage has ended, you will receive a packet which includes coverage amounts, eligibility dates and who to contact to get started.

Should you choose one of these options for continuation of your insurance coverage, you will be purchasing your insurance coverage directly from MetLife. **Coverage issued by MetLife for this purpose is not part of any Marathon Petroleum employee benefit plan or employment practice.**

• **Conversion:** The conversion option offers you and your eligible dependent(s) an opportunity to convert your group term life insurance (Basic and Optional) to an individual life insurance policy with MetLife without furnishing medical evidence of insurability by submitting a statement of health.

The maximum amount of coverage you may convert (Employee Life, Spouse Life, and/or Child Life) is the amount you currently have under the group plan, although a lower amount may be converted. *Please note: AD&D Insurance cannot be converted.*

• **Portability:** The portability option enables you and your eligible dependent(s) to continue group term life and AD&D insurance (Basic and Optional) that is similar to your current coverage after your active coverage terminates.

The maximum amount of coverage you can "port" (Employee Life and AD&D, Spouse Life and AD&D, and/or Child Life and AD&D) is the amount you currently have under the group plan, to a maximum of \$2,000,000 for Life Insurance (Basic and Optional combined) and \$2,000,000 for AD&D Insurance (Basic and Optional combined). The minimum amount of coverage that can be ported is \$10,000, \$2,500 for Spouse coverage (\$10,000 when Spouse coverage is ported alone), and \$1,000 for Child coverage.

FOR MORE DETAILS ABOUT METLIFE'S LIFE AND AD&D COVERAGE OPTIONS

MetLife Transition Solutions will send you information about the conversion and portability options within 31 days following your retirement. Once you receive your packet, you can call 1-877-275-6387, Monday through Friday, from 9 a.m. to 6 p.m. ET to start the process.

Metlife Legal Plan

The MetLife Legal Plan provides you with access to experienced attorneys for a variety of legal assistance matters, including phone and office consultations, estate planning, financial consultation, family law assistance, real estate matters, traffic offenses, identity theft matters and more.

When your active MetLife Legal Plan coverage ends, coverage is portable and can be continued for a period of 12 months. If you want to continue your Legal Plan coverage after you retire, you must contact MetLife directly within 30 days following your retirement and arrange for the extension of coverage.

The one-time extension of coverage through portability requires payment of the full annual premium up-front. Call the Client Service Center at 1-800-821-6400 to initiate the process to port your coverage.



Long Term Disability (LTD)

Your coverage terminates on your last day of employment.

If you are receiving LTD payments at the time of retirement, you will continue to receive LTD payments until the exhaustion of those payments, which is normally at age 65 or until you are no longer deemed disabled. If you are currently receiving Social Security Disability payments, you may want to check with the Social Security Administration to see if your retirement would affect your SSDI (Social Security disability insurance) payments.

If you (or your covered dependent) become eligible for Medicare prior to age 65, due to disability, you will want to ensure you enroll in Medicare Parts A&B. As a disabled Retiree Health Plan participant, Medicare will become your primary insurance. While you may elect to remain in Marathon Petroleum's Pre-65 Retiree Health Plan, you also have the option to purchase a Medicare supplement plan through Via Benefits or other insurance broker. For more information on how your Medicare status may impact your Retiree Health coverage and claim reimbursement, please contact the Marathon Petroleum Benefits Service Center.

Vacation

Any unused vacation will be paid in your final paycheck that will be deposited or mailed as usual on your next scheduled payday. Also, please remember, if you don't take your floating holidays before you retire, you will not be paid for them unless required by state law.

Other Important Information

Well ALL Ways Program

At retirement you are no longer eligible for the Well ALL Ways Program that incentivizes activities including the completion of a preventive physical. If you are planning to take advantage of the program, please submit any Preventive Physical forms a minimum of 30 days prior to your retirement date.

For questions about the Wellness Program, please contact Well ALL Ways at wellallways@marathonpetroleum.com.

Annual Cash Bonus (ACB) Plan (Grades 1 – 19)

Eligible employees who voluntarily retire during or after the annual performance period shall be eligible for a bonus payment to be made in the following calendar year. Bonuses paid for retirements that occur during the annual performance period shall be paid at target for that period. Bonuses paid for retirements that occur following the performance period shall be paid at company and individual performance for that period. Bonus payments to eligible retirees will be at the discretion of the organizational vice president.

Success Through People (STP) Plan (Hourly Employees)

Eligible employees who voluntarily retire during or after the annual performance period shall be eligible for a bonus payment to be made in the following calendar year. Bonuses paid for retirements that occur during the annual performance period shall be paid at target for that period. Bonuses paid for retirements that occur following the performance period shall be paid at business unit performance.

Service Award

A brochure will be sent to your home address within four months of your retirement date, along with a certificate of recognition and a commemorative gift.

Some Final Reminders

- **On your last day:** Please keep in mind that on your last day, you will need to return all of your Company property (i.e., ID card, parking pass, cellphone, credit cards, etc.) to your local Human Resources.
- **Information for retirees:** Be sure to let your local Human Resources know if you would like to receive future mailings of your local newsletters. They may also have information about annuitant groups in your area.
- If you have an address or phone number change: Email your change request to HR data at <u>hrdatahelp@</u> <u>marathonpetroleum.com</u> or mail it to Marathon Petroleum, Attn: HR Employee Data, 539 South Main Street, Findlay, OH 45840-3295. Be sure to include your Marathon Petroleum employee number with your request so HR data can match it with your employee record. Changes will be provided to the appropriate benefit vendors.

Retirement Benefits Checklist

Action Items

Here's a benefits checklist to help you prepare for retirement.

Place a \checkmark next to the action item when completed.

Benefits Service Center

___ Contacted the Benefits Service Center.

Retirement Plan

- Contacted Fidelity and requested a Retirement Benefits Coordinator (RBC).
- ____ Reviewed distribution options.

Thrift Plan

- Contacted Fidelity.
- ___ Reviewed options.

Social Security

Contacted Social Security to request a current Social Security estimate of benefits at retirement (call 1-800-772-1213 or go to <u>www.ssa.gov</u>).

Retiree Health Plan

- ____ Reviewed plan information.
- ___ Considered coverage options.
- Determined if I am adding/dropping dependent(s).

Pre-65 Retiree Dental Plan

- ____ Reviewed plan information.
- Determined if I am adding/dropping dependent(s).

Pre-65 Retiree Vision Plan

- ____ Reviewed plan information.
- Determined if I am adding/dropping dependent(s).

Miscellaneous

- Considered usage of floating holidays and vacation days.
- Determined last working day. Your last working day cannot be a Company-designated holiday unless that day is a regularly scheduled workday.

Other Actions

COBRA

- ____ Reviewed plan information.
- ____ Reviewed COBRA election package (received after retirement).
- Considered Health Plan, Dental Plan, Vision Plan, FSA and LPFSA options via COBRA.

Life Insurance

___ Considered portability/conversion options.

AD&D Insurance

___ Considered portability options.

Health Care Flexible Spending Account and Limited Purpose Flexible Spending Account

____ Made sure all charges incurred before retirement were submitted.

Health Savings Account (HSA)

___ Considered additional contribution options.

Limited Purpose Health Reimbursement Account (HRA)

____ Reviewed account balance, if applicable.

Human Resources (HR) and Manager/ Supervisor

 Contacted HR and my manager/supervisor about my retirement.

IF YOU ARE UNDER AGE 65 AT THE TIME OF YOUR RETIREMENT:

- You must enroll in or waive the retiree plans by logging in to BenefitSolver within 31 days of retirement.
 - Choose waive or enroll in the Retiree Health Plan option you desire. Retiree rates for your coverage are displayed during enrollment.
 - Choose waive or enroll in the Pre-65 Retiree Dental or Pre-65 Retiree Vision Plans at retirement. If you choose enroll, also select a coverage level.
- Approximately two weeks after retirement, you will receive a statement with payment instructions from BenefitSolver for the Plan(s) you are enrolled in as a retiree.

IF YOU OR YOUR SPOUSE ARE AGE 65 OR OVER AT THE TIME OF YOUR RETIREMENT:

- You or your spouse will need to enroll in Federal Medicare Parts A and B if either of you is over the age of 65, so it is in effect on the date of your retirement. Medicare can only be effective on the first of the month. You should contact Via Benefits regarding which Medicare supplement plans are available for you.
- If you are over the age of 65, you are not eligible to enroll in the Pre-65 Retiree Dental and Pre-65 Retiree Vision Plans. Therefore, if you were enrolled in the Dental and Vision Plans while employed, you may want to consider electing COBRA coverage for the Dental and Vision Plans for active employees. In addition, Via Benefits offers dental and vision options which you may want to consider.

Contact Information and Resources

Plan or Service	Online	Phone	Mobile App
MPC Benefits Service Center	Email: <u>benefits@</u> <u>marathonpetroleum.com</u>	1-888-421-2199 (option 1, then 3)	
Retiree/Direct Billing for Pre-65 Monthly Benefit Premium(s) Benefitsolver	www.myMPCbenefits.com/ mybenefits	1-844-408-2575	
Marathon Petroleum Plan Descriptions/Forms	www.myMPCbenefits.com		
Pre-65 Health Care			
Classic and Saver HSA Options Anthem BlueCross BlueShield • Find Providers, Claims and ID Cards • Pre-Certification	www.anthem.com Group #: 212077	1-855-698-5676 1-866-776-4793	Sydney Health Access your member ID, estimate costs, find a doctor and check the status of claims.
Kaiser Permanente Health Plan Customer Service	www.kp.org	1-800-278-3296	
Prescription Drug Program Express Scripts	www.express-scripts.com Group #: MARAPET Bin #: 610014	1-877-207-1357	Express Scripts Access your member ID, find in-network pharmacies, refill and renew prescriptions and track the status of home delivery prescriptions.
Pre-65 Retiree Dental Plan Delta Dental	www.deltadentaloh.com	1-800-524-0149	Delta Dental Mobile Access your ID card, find an in-network dentist, estimate costs and check the status of claims.
Pre-65 Retiree Vision Plan Anthem Blue View Vision	www.anthem.com	1-866-723-0515	Sydney Health Access your member ID and view the status of your claims.
COBRA BenefitSolver	www.myMPCbenefits.com/ mybenefits	1-844-408-2575	
Post-65 Health Care			
Post-65 Medicare Supplement Via Benefits	https://my.viabenefits.com/ marathonpetroleum	1-855-535-7152	

Plan or Service	Online	Phone	Mobile App	
Health Savings Account (HSA)				
Fidelity	http://www.netbenefits.com/ marathonpetroleum	1-800-544-3716		
Health Care Flexible Spending Account				
PayFlex	www.payflex.com	1-844-PAYFLEX (1-844-729-3539)		
Other Insurance				
Level Premium Life Insurance Beneficiary Designations MetLife	www.mybenefits.metlife.com	1-866-574-2864		
Life Insurance Beneficiary Changes for Closed Group of Catlettsburg and Canton Retirees MetLife	www.metlife.com/mybenefits	1-800-357-4482		
MetLife Legal Plan	www.legalplans.com (access code 9902519)	1-800-821-6400		
Property & Casualty Insurance Farmer's Group Select	www.metlife.com/mybenefits Company Code = 07L	1-800-438-6381		
Savings and Retirement				
Thrift Plan & Retirement Plan Fidelity (includes Andeavor Pension Benefit)	http://www.netbenefits.com/ marathonpetroleum	1-866-602-0595		



