



2023 EMPLOYEE BENEFITS GUIDE

Your 2023 Benefits

The work that you do every day has a positive impact in supporting Ensign's culture of achievement to deliver a superior customer experience and trusted, reliable performance. That's why we're proud to offer Ensign employees a comprehensive benefits program that provides flexibility and security to meet the unique needs of you and your family.

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Eligibility and Enrollment

Who Is Eligible?

- ▶ **Employee eligibility:** You are eligible for benefits if you are an employee of Ensign U.S. Drilling Inc., its divisions and any subsidiary, and you are regularly scheduled to work at least 25 hours per week.
- ▶ **New hire effective date:** You are eligible for benefits the first of the month following your date of hire.
- ▶ **Covering dependents:** If you enroll for benefits, you may add eligible dependents to your coverage, including:
 - Your legal spouse defined by state law
 - Domestic partner (if enrolled in the Kaiser medical plan)
 - Your children up to age 26, including biological children, legally adopted children, stepchildren and children deemed eligible under a Qualified Medical Child Support Order (QMCSO), and children with proven legal guardianship as approved by a court
 - A child of any age who depends on you for support because of a mental or physical disability

If found with ineligible dependents, you may be dropped from coverage, held liable for any payments the company made on your behalf, and may face disciplinary action up to and including termination.

Making Changes to Your Benefits

The choices you make during enrollment remain in effect for the entire plan year (January 1 to December 31, 2023). If you have a qualified family status change event during the year, you have 30 days from the date of the event to make the change to your elections. The following are examples of qualified family status change events:

- ▶ Marriage, divorce, or legal separation
- ▶ Death of a dependent child or spouse
- ▶ Change in your or your spouse's employment status that results in loss or gain of coverage
- ▶ Gain or loss of dependent eligibility due to birth, adoption, court order, disability, marriage, or reaching the dependent child age limit
- ▶ A dependent becomes independently eligible for benefits (for example, he or she gets a job that offers benefits)
- ▶ Change in your employment status (for example, if you were an intern or part-time employee and you became a full-time employee)

Any change to your benefit elections must be related to the change event. Your HR department can provide more details about the rules governing these changes.

Rules for Covering Dependents

If you and your spouse or your dependent child is employed by Ensign U.S. Drilling Inc., its divisions or any subsidiary, dependent children may only be covered under one employee (parent), not both. You may not be covered as an employee and as a dependent of an Ensign plan at the same time. More information is available from the Benefits Department.

Ensign reserves the right to conduct an audit of dependent eligibility at any time.

Remember: You have 30 days from the date of the event to make a change to your elections.

You may make the qualified family status change online. If you miss the 30-day window, you must wait until the next annual enrollment period to update your coverage. If you choose to elect or increase life insurance coverage after your initial eligibility (also known as the guaranteed issue period), you are required to submit Evidence of Insurability (EOI) documentation. You can find EOI forms in the Forms tab of the Ceridian Dayforce portal at <https://sso.dayforcehcm.com/ensignenergy>.

US Benefit Hub

The US Benefit Hub is your source for everything benefits. You and your dependents can access US benefit information right at your fingertips; including, required forms, vendor websites and apps, contact information, and much more.

Visit myensignenergybenefits.com or scan:



Ceridian Dayforce (Dayforce) Portal

Dayforce is the place to go to manage your benefits. Through Dayforce, you can:

- Review, enroll in, or make changes to benefits due to a qualifying life event
- Add or update beneficiaries
- Add or update dependents, and upload dependent verification documents
- Review personalized actions that need to be taken
- Access your pay information

To log into Dayforce, click on the Dayforce link located on the US Benefit Hub home page at myensignenergybenefits.com.

Select the **Benefits** button on the Dayforce home page.

Enrolling in Benefits

To enroll for the first time or complete your annual enrollment elections, log into Dayforce via the US Benefits Hub at myensignenergybenefits.com:

1. Click on the **Benefits** button on the Dayforce home page.
2. Click on the **Overview** tab.
3. Follow the prompts to select your benefits. Dayforce can even help you determine the best medical plan for your unique needs and provide a side-by-side comparison of your medical options.
4. Once you have selected your benefits, click **Confirm Elections** at the bottom of the page. Your enrollment cannot be processed until you confirm.

To view your confirmed elections, click on the **Current Elections** tab in Dayforce.

Designating Your Beneficiaries

Designating beneficiaries is an important part of the enrollment process even if you are not electing any optional benefits. To add or update a beneficiary, log into Dayforce via the US Benefits Hub:

1. Click on the **Benefits** button on the Dayforce home page.
2. Click on the **Forms** tab.
3. Select **Current Beneficiaries**.
4. You will be directed to the next page where you will click Add or Update to select the type of beneficiary to be entered or updated.
5. On the **Benefit Designation** screen, you will indicate your primary and contingent beneficiaries and designate a percentage of the benefit in the event of a life insurance or Accidental Death & Dismemberment (AD&D) claim. The percentages must add up to 100%.

Verifying Dependents

To provide dependent verification, log into Dayforce via the US Benefits Hub at myensignenergybenefits.com:

- Click on the **Dependent Verification** button on the Dayforce home page.

Reviewing Your Personal Information

To review your personal information, log into Dayforce via the US Benefits Hub at myensignenergybenefits.com:

- Click on the **Profile** button on the Dayforce home page.

Accessing Your Pay Information

To review earnings, deductions, taxes, and employer contributions, log into Dayforce via the US Benefits Hub at myensignenergybenefits.com:

- Click on the **Earnings** button on the Dayforce home page.

Medical and Prescription Drug Coverage

We offer you a choice of three plans so you can select the best plan for you and your family's needs. Our nationwide plans are administered by Blue Cross Blue Shield of Texas (BCBSTX), and if you live in California, you may also be able to choose similar plans through Kaiser Permanente. All of our medical plans cover preventive care at no cost to you, as long as you use an in-network provider. Prescription drug coverage is included when you enroll in a medical plan.



Find a BCBSTX Blue Choice Provider Near You

BCBSTX makes it easy to find in-network doctors and pharmacies. Log into www.bcbstx.com on your computer or mobile device or call 1-800-311-1593.

National BCBSTX Plans

You may choose between the BCBSTX **High-Deductible Health Plan with a Health Savings Account (HDHP + HSA)**, the **Health Reimbursement Arrangement (HRA) Plan** or the **Hybrid Plan**. The BCBSTX plans offer:

- ▶ An extensive network of providers, facilities and pharmacies
- ▶ Access to specialist care without a referral (some services, such as mental health and substance abuse treatment may require prior approval)
- ▶ The same prescription drug cost structure
- ▶ Prescription drug monitoring for safety and effectiveness
- ▶ MDLIVE for on-demand physician consultations by phone or video chat

BCBSTX HDHP + HSA

- ▶ The HDHP + HSA plan combines a medical plan with an HSA.
- ▶ You pay the full amount of the negotiated BCBSTX discount cost of medical services until you reach your deductible, after which you will pay 20%.
- ▶ You can set aside pretax dollars in your HSA to use for eligible medical expenses or save for the future.
- ▶ Ensign will also make contributions to your account: \$750 if you only cover yourself, or \$1,500 if you cover family members. These amounts are prorated for new hires.
- ▶ If you use out-of-network providers, you will have additional costs after your deductible has been met. Preventive care is only 100% covered if you use in-network providers.

ADVANTAGES

- ◆ The balance in your HSA can earn interest, and it's yours to keep (even if you change jobs).
- ◆ Ensign will fund your HSA with \$750 if you only cover yourself, or \$1,500 if you cover family members.

TRADE-OFFS

- ◆ HSA funds become available as you make contributions each pay period.
- ◆ The IRS limits HSA contributions from all sources: \$3,850 for employee coverage or \$7,750 for family coverage in 2023.

BCBSTX HRA Plan

- ▶ The HRA plan combines a medical plan with an HRA funded by Ensign.
- ▶ Ensign contributes to your account: \$500 if you only cover yourself, or \$1,000 if you cover family members. These amounts are prorated for new hires.
- ▶ These funds are used to pay for your covered medical expenses, including the full cost of your prescription drugs.
- ▶ Once your HRA has been depleted, you are responsible for 100% of any remaining charges until you have met your deductible.
- ▶ After that, the plan will begin paying a portion of your coverage until you meet your out-of-pocket maximum.
- ▶ If you use out-of-network providers, you will have additional costs after your deductible has been met. Preventive care is only 100% covered if you use in-network providers.

ADVANTAGES

- ◆ Ensign will fund your HRA with \$500 if you only cover yourself, or \$1,000 if you cover family members.
- ◆ HRA funds are automatically applied to your medical and prescription claims.

TRADE-OFFS

- ◆ This plan has higher premiums than the HDHP + HSA.
- ◆ You forfeit the HRA if you leave the company.

BCBSTX Hybrid Plan

- ▶ You will generally have lower deductibles and out-of-pocket maximums in exchange for higher premium paycheck deductions (when compared to the HDHP + HSA and HRA plans).
- ▶ You will pay set copays for office visits alongside coinsurance for other services.
- ▶ In-network preventive care is covered at no cost to you.

For New Hires: Prorated Company HRA and HSA Contributions

Depending on when you're hired, the company contribution to your HRA or HSA will be reduced. After you have satisfied the waiting period for eligibility, you will receive your prorated contribution. The company will contribute to your HSA throughout the year, and your full HRA balance is available when you become eligible for benefits.

If you enroll in a BCBSTX plan, you have 24/7 access to U.S. board-certified physicians who can resolve many of your medical issues over the phone or through online video chat. It can be a useful option if you cannot see your regular provider for a non-emergency health concern such as cold or flu, bronchitis, sinus problems, allergies, minor infections and more. MDLIVE physicians can even prescribe medications if needed. Register today for this service so you'll be ready when you need care.

MDLIVE

MDLIVE.com/bcbstx

1-888-680-8646

Text 635-483



Also look for their mobile app for your device.



PLAN FEATURES	HDHP + HSA		HRA PLAN		HYBRID PLAN	
	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK	IN-NETWORK	OUT-OF-NETWORK
Ensign account funding	\$750 employee only \$1,500 family		\$500 employee only \$1,000 family		N/A	
Annual deductible	\$3,000 employee \$6,000 family	\$6,000 employee \$12,000 family	\$1,500 employee \$3,000 family	\$3,000 employee \$6,000 family	\$1,000 employee \$2,000 family	\$2,000 employee \$4,000 family
Out-of-pocket maximum (includes deductible)	\$6,000 employee \$12,000 family	\$10,000 employee \$20,000 family	\$5,000 employee \$10,000 family	\$10,000 employee \$20,000 family	\$5,000 employee \$10,000 family	\$10,000 employee \$20,000 family
Coinsurance	You pay 20%	You pay 50%	You pay 20%	You pay 50%	You pay 20%	You pay 50%
Preventive care	100% covered (no deductible)	50% after deductible	100% covered (no deductible)	50% after deductible	100% covered (no deductible)	50% after deductible
Office visit - PCP/specialist	20% after deductible	50% after deductible	20% after deductible	50% after deductible	\$30 copay	50% after deductible
					20% after deductible	
Telehealth - MDLIVE virtual visit	20% after deductible	In-network coverage only	\$10 copay	In-network coverage only	\$10 copay	In-network coverage only
Urgent care	20% after deductible	50% after deductible	20% after deductible	50% after deductible	20% after deductible	50% after deductible
Emergency room	20% after deductible		20% after deductible		20% after deductible	
Hospital services (semi-private room and board) or outpatient facility	20% after deductible	50% after deductible	20% after deductible	50% after deductible	20% after deductible	50% after deductible
Mental health services - office visit, inpatient or outpatient	20% after deductible	50% after deductible	20% after deductible	50% after deductible	20% after deductible	50% after deductible

Prescription Drug Coverage (Same for both plans)	Other Participating Retail Pharmacy (30-Day Supply)	Mail Order Pharmacy (90-Day Supply)
Generic ¹	\$10 copay	\$20 copay
Preferred brand name	20% after deductible	20% after deductible
Non-preferred brand name	20% after deductible	20% after deductible

¹ HDHP + HSA generic drugs are subject to deductible. Copay is applicable after deductible has been met.

Don't Skip Preventive Care

Regular preventive care can make a difference in living a long, healthy life. Experts agree that people who receive preventive care have better health and lower medical costs overall.

Although not smoking, eating right and exercising are all important for your overall health, preventive medical care can help you stay ahead of potentially serious conditions. Generally, you have a greater chance for a full recovery the earlier you begin treatment.

Sometimes early treatment can mean something as minor as changing your diet or taking medication.

Our BCBSTX and Kaiser plans cover in-network preventive medical care like physicals, screenings, well visits and immunizations at no cost to you. The Affordable Care Act requires that preventive care services be covered with no patient cost-sharing (deductible, coinsurance or copay). Visit www.bcbstx.com or kp.org to learn more about the services that your plan covers at 100%.

Kaiser Permanente Plans – California Employees Only

- For California employees, the Kaiser HDHP + HSA and HRA plans have features that are similar to the BCBSTX nationwide plans, but **they do not offer out-of-network coverage** except in case of an emergency.
- If enrolled in the HDHP + HSA or HRA plan, Kaiser requires you to designate a primary care physician (PCP) to coordinate your care and provide referrals to specialists when needed.
- Both plans offer personalized plan information through the Kaiser website, kp.org.
- The plans have different cost structures for prescription drug coverage.

PLAN FEATURES	HDHP + HSA		HRA PLAN	
	IN-NETWORK ONLY		IN-NETWORK ONLY	
Ensign account funding	\$500 employee \$1,000 family		\$500 employee \$1,000 family	
Annual deductible	\$3,000 employee \$6,000 family		\$1,500 employee \$3,000 family	
Out-of-pocket maximum (includes deductible)	\$6,000 employee \$12,000 family		\$3,000 employee \$6,000 family	
Coinsurance	You pay 20%		You pay 20%	
Preventive care	100% covered (no deductible)		100% covered (no deductible)	
Office visit – PCP or specialist	20% after deductible		\$20 after deductible	
Telehealth	20% after deductible		\$0	
Urgent care	20% after deductible		\$20 after deductible	
Emergency room	20% after deductible		20% after deductible	
Hospital services (semi-private room and board) or outpatient facility	20% after deductible		20% after deductible	
Mental health services – inpatient	20% after deductible		20% after deductible	
Mental health services – office visit or outpatient	20% after deductible		\$20 after deductible	
Prescription Drug Coverage	HDHP + HSA		HRA PLAN	
	30-Day Supply	100-Day Supply	30-Day Supply	100-Day Supply
Generic	\$10 copay after deductible	\$20 copay after deductible	\$10 (no deductible)	\$20 (no deductible)
Brand name	\$30 copay after deductible	\$60 copay after deductible	\$30 (no deductible)	\$60 (no deductible)
Specialty	20% after deductible (not to exceed \$150)	N/A	20% not to exceed \$200 (no deductible)	N/A

Kaiser Permanente’s telehealth empowers you to choose where, when, and how you get care. When you enroll in a Kaiser Permanente plan, you have access to care and virtual consultations in the way that is most convenient for you, including video, phone, and email.

To schedule an appointment, you can sign in to kp.org or call the 24/7 advice line at 1-833-574-2273. A doctor or nurse will diagnose and treat your health concerns, work with you to create a personalized care plan, and prescribe medication as needed.

Use Your Benefits Wisely

Our plans give you the tools you need to make informed decisions about how you spend your health care dollars.

Stay In-Network and Save

If you use in-network providers, you will save money because in-network providers have agreed to accept our plans' negotiated fees as payment in full. When you go out-of-network, you pay the difference between the negotiated fee and the provider's billed charge (in addition to your applicable deductible and coinsurance amounts). Remember, our Kaiser plans do not cover out-of-network services except in emergencies. To find network facilities:

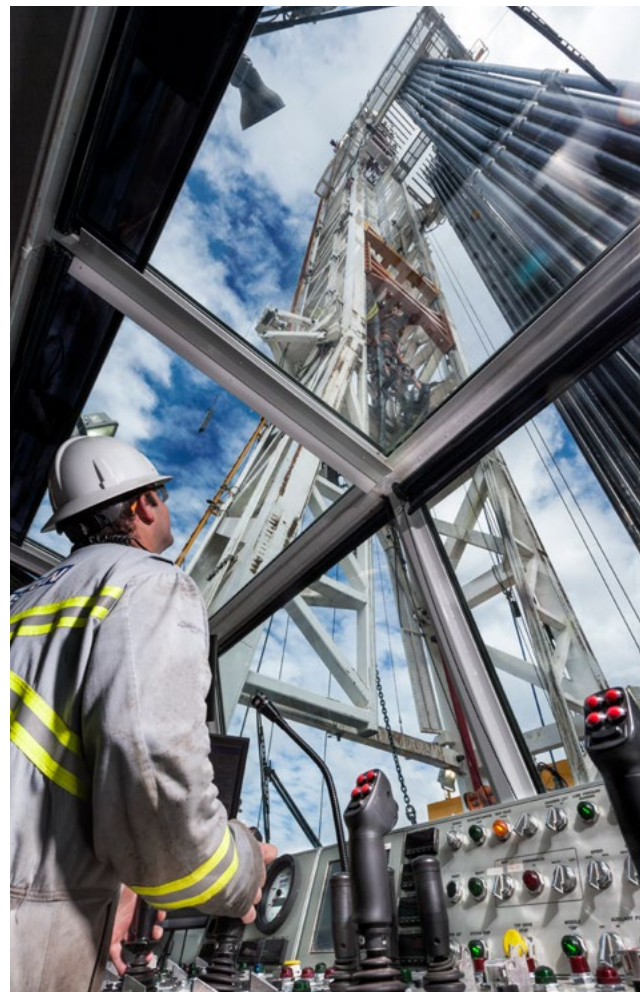
BCBSTX 1-800-311-1593 www.bcbstx.com

Kaiser Permanente 1-800-464-4000 kp.org

Rules About Kaiser Service Areas

Kaiser has specific rules about coverage in its service areas:

- ▶ When you choose a Kaiser Plan, you are enrolling in the **Southern California** medical plan.
- ▶ Kaiser requires members to live or work in the service area at the time of enrollment and receive covered services from plan providers in the service area determined by ZIP codes.
- ▶ For information about the service areas, please call the Kaiser Member Service Contact Center at 1-800-464-4000.
- ▶ If you enroll in the Kaiser plan and then no longer live or work in the Kaiser service area, you may not be able to continue participating in the plan.
- ▶ If you visit the service area of another region, you may be able to receive certain care, but you are responsible for notifying Kaiser first.
- ▶ **IMPORTANT:** If you are an Ensign employee living outside of Southern California who primarily works in Kaiser's southern region and you want to enroll in the Kaiser plan, you must contact the Ensign Benefits Department by phone or email before you enroll. Refer to the enclosed Important Contact Information.



Know Where to Go

To get the right care when you need it, it's important to understand your options. If you need help deciding where to go, call the number on the back of your medical ID card or download the plans' mobile apps.

Consider visiting ...	To take care of ...
Your primary care physician's office	Routine checkups, preventive care, immunizations, managing your general health, guidance to a specialist for the next level of care
Telemedicine BCBSTX MDLIVE and Kaiser	A wide range of non-emergency medical conditions by phone or video chat at any time, from anywhere
An urgent care center	Sprains, minor infections, minor broken bones (like a finger) or minor burns
A hospital emergency room	Life-threatening conditions, major broken bones, difficulty breathing, chest pain, severe injuries or burns

Use Your Plan Wisely

- **Get your free in-network preventive care.** All Ensign plans cover certain preventive care, such as annual physicals, routine screenings and immunizations at no cost to you as long as you use an in-network provider.
- **Save on medications.** Ask your doctor for a generic alternative to a brand-name prescription drug.
- **Explore GoodRx.** Compare prescription prices, print free coupons and discover discounts by visiting www.goodrx.com or by downloading the app for iOS or Android. Keep in mind, prescriptions purchased using GoodRX do not count toward your deductible.
- **Keep good records.** Save your medical receipts and review them, just in case a provider or carrier makes an error. You should review your explanation of benefits (EOB) statements to make sure services like preventive care were billed correctly.



Health Savings Account (HSA)

If you choose the HDHP + HSA plan through either BCBSTX or Kaiser, you will automatically be eligible for an HSA through WEX. The account lets you use pretax dollars to pay for eligible health care expenses. The HSA works like a regular savings account – you put funds into it, and your balance earns interest and rolls over from year to year. The full balance of the account is yours to keep, even if you leave the company. **Ensign will help you build your HSA by contributing:**

- ▀ **BCBSTX: \$750** for individual coverage or **\$1,500** for family coverage
- ▀ **Kaiser: \$500** for individual coverage or **\$1,000** for family coverage

The HSA also has triple tax advantages:

1. You contribute to the account through pretax payroll deductions, which lowers your taxable income – you pay taxes on less money.
2. The account grows (through interest and investment earnings) tax-free.
3. Withdrawals are tax-free, as long as you use them to pay for eligible health care expenses.

How the HSA Works

- ▀ You may have to submit information to WEX to open your HSA.
- ▀ Build your account through pretax payroll deductions, up to the annual IRS contribution limits.
- ▀ When Ensign's contribution is factored in, you may contribute up to \$3,850 if you only cover yourself or up to \$7,750 if you cover one or more family members. If you are age 55 or older, you may contribute an additional \$1,000.
- ▀ You may change or stop your contributions at any time.
- ▀ Use your HSA or watch it grow. You may use HSA funds to pay for current eligible expenses or save them to use after you retire.
- ▀ When you register your account for the first time, two debit cards will be mailed to the address listed in your account. If you are already registered, you will continue to use the debit card you already have. You also have the option to pay for expenses out of pocket and submit a claim for reimbursement.
- ▀ If you do not register your account, you will forfeit the Ensign contribution.

Important HSA Rules

- ▀ You should only use the account to pay for qualified medical, prescription drug, dental and vision expenses. You are responsible for making sure that the money you spend is for a qualified expense. A complete list of eligible expenses can be found in Publication 502 on www.irs.gov.
- ▀ If you use the funds to pay for an ineligible expense, the funds used for the expense will be taxed as income and subject to a 20% penalty.
- ▀ You should keep your receipts in case the IRS asks for documentation.
- ▀ You may not contribute to an HSA if you or your spouse is enrolled in a Health Care FSA, if you are enrolled in an HRA or if you have other medical coverage through Medicare or a plan that is not a qualified HDHP.
- ▀ Complete eligibility rules are available in Publication 969 on www.irs.gov.
- ▀ The IRS sets a minimum annual deductible for HDHP with HSA health plans (\$1,500 for individual coverage and \$3,000 for family coverage in 2023.)



Health Reimbursement Arrangement (HRA)

- ▶ **If you choose the HRA medical plan with BCBSTX or Kaiser, Ensign will fund an HRA to pay for eligible health care expenses:**
 - **BCBSTX HRA: \$500** for individual coverage and **\$1,000** for family coverage
 - **Kaiser HRA: \$500** for individual coverage and **\$1,000** for family coverage
- ▶ HRA funds will automatically apply when BCBSTX or Kaiser processes your medical and pharmacy claims.
- ▶ The HRA is funded solely by Ensign – you can use it to help offset your medical plan expenses.
- ▶ Unused HRA funds can be rolled over into future years.
- ▶ If you leave the company or the HRA plan is no longer offered, you will forfeit the funds.
- ▶ If you have an HRA, you may also participate in a Health Care FSA. HRA funds will be automatically applied first before FSA funds are used to pay eligible expenses.

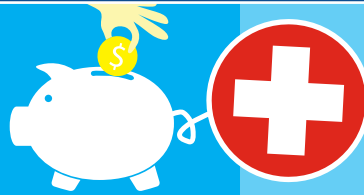
Comparing the Health Savings Account (HSA) and Health Reimbursement Arrangement (HRA)

HSA

HRA

What is it?

An employee-owned account used to pay for eligible health care expenses or save for the future.



An employer-owned account that can be used for eligible health care expenses.

Why choose it?

An HSA stays with you if you change jobs, and it rolls over each year. Ensign will make a contribution to your account to get your savings started.



The account is funded solely by Ensign – you do not make contributions.

Account rules



The 2023 annual maximum contribution from all sources set by the IRS is \$3,850 for individual coverage or \$7,750 for family coverage.



Your employer owns the account and can decide not to roll over balances.

Taxes and interest

Your contributions are pretax, and your account earns interest.



There are no tax implications, and the account does not earn interest.



Flexible Spending Accounts (FSAs)

Ensign offers two money-saving options to help pay your out-of-pocket expenses for health care and dependent day care. You decide at enrollment how much you want to put into one or both accounts, up to the annual contribution limits. You make contributions through pretax payroll deductions in equal amounts throughout the year.

- For the Health Care FSA, the entire amount you elected for the year is available for use when the plan year begins.
- You may not have a Health Care FSA if you also contribute to an HSA, per IRS rules.
- For the Dependent Care FSA, your account balance is available as you contribute each pay period.
- You will not be able to change your annual contribution election during the year unless you have a qualified family status change, such as marriage or a new baby.
- The Health Care FSA allows you to roll over up to \$610 in unused funds at the end of the plan year. You forfeit unused funds over \$610 after the claim deadline.
- Dependent care claims incurred on or before March 15, 2024 must be submitted by March 31, 2024. Any unused funds after March 31, 2024 will be forfeited.

	Health Care FSA	Dependent Care FSA
Eligible expenses For complete lists, search for publications 502 (health care) and 503 (dependent care) on www.irs.gov	<ul style="list-style-type: none"> ◆ Out-of-pocket expenses such as coinsurance and copays not paid by your medical plan ◆ Out-of-pocket expenses for dental treatments not paid by your dental plan ◆ Out-of-pocket expenses for glasses, contacts or copays not paid by your vision plan 	Day care expenses that allow you and your spouse to work, including: <ul style="list-style-type: none"> ◆ Day care, after-school care or summer day camp for dependent children under age 13 ◆ Day care for your dependents who are mentally or physically incapable for caring for themselves
Contribution limits	\$3,050	\$5,000, or \$2,500 if you are married and filing separate tax returns
Reimbursement window	For FSA-eligible expenses you have during the plan year (January 1 to December 31, 2023), you must submit claims for reimbursement by March 31, 2024.	



Dental Plan

Our dental plan through Guardian covers important care like cleanings and fillings for you and your enrolled family members. To find a Guardian network provider in your area, download the free mobile app or visit www.guardiananytime.com.

Plan Feature or Service	In- or Out-of-Network
Annual deductible	\$50 employee \$150 family
Preventive and diagnostic services – exams, X-rays, certain labs, cleanings, fluoride treatments, sealants	Plan pays 100% (no deductible)
Basic services – fillings, simple extractions, oral surgery, anesthesia, endodontics, periodontics	Plan pays 80% after deductible
Major services – inlays, onlays, crowns, bridges, dentures	Plan pays 50% after deductible
Annual maximum – for preventive, basic and major care	\$1,500 per person
Orthodontia – for children up to age 19	Plan pays 50% \$1,500 lifetime maximum per person

Out-of-Network Dental Costs

The plan still covers part of the cost for your care with out-of-network providers, but Guardian will only cover its portion of the allowable charges for each type of care. If you use out-of-network providers, you will be responsible for your portion of the allowable amount plus any charges over that amount.

ID Cards

ID cards are not required with Guardian and VSP. However, you can print dental ID cards from the member portal or download via the mobile app.

Vision Plan

Our Vision Service Plan (VSP) coverage helps you save money as you take care of your eyes. Visit vsp.com to learn about additional discounts and savings.

Covered Services and Supplies	In-Network Cost	Out-of-Network Reimbursement
Eye exams – every calendar year	\$10 copay	Up to \$45
Eyeglass frames – every other calendar year	\$10 copay \$150 retail allowance or \$170 allowance for featured frame brands (can also be used for non-prescription sunglasses)	Up to \$70
Eyeglass lenses ¹ – every calendar year	\$10 copay	\$30 to \$100 (depending on lens type)
Contact lens exam – fitting and evaluation	Up to \$60 copay	N/A
Elective contact lenses – instead of glasses; every calendar year	\$150 retail allowance	Up to \$105
Medically necessary contact lenses – instead of glasses; every calendar year	Covered in full	Up to \$210

¹Polycarbonate lenses covered in full for dependent children, standard progressive lenses covered in full; average savings of 30% on other lens enhancements.

Find a VSP Provider

1. Visit vsp.com or call 1-800-877-7195 to request a doctor listing.
2. Identify yourself as a VSP member and be prepared to provide the following information: The employee's name, the last four digits of their Social Security number and their date of birth. If a dependent is seeking services, they will also need to provide the dependent name and date of birth. (The provider will verify your eligibility and vision plan coverage and will request authorization for services and materials. If you are not currently eligible for services, the provider will let you know.)
3. There are no claim forms to complete when you use a VSP provider.

Life and AD&D Insurance

Basic Life and AD&D

Ensign provides basic life and Accidental Death and Dismemberment (AD&D) coverage through Guardian **at no cost to you**. AD&D pays a benefit in addition to any life insurance if you die or are injured in an accident.

Basic Life	Basic AD&D
Coverage equal to your basic annual earnings (minimum benefit of \$50,000)	Coverage equal to your basic annual earnings (minimum benefit of \$50,000)

Optional Life and AD&D Insurance

If you want more coverage than what the company-provided plans offer, you may purchase optional life and AD&D insurance for yourself, your spouse and your children at group rates through payroll deductions. If you currently have optional life and AD&D, you won't be subject to Evidence of Insurability (EOI). Guardian requires EOI, if you want to purchase optional life coverage for yourself or your spouse over a certain amount (\$200,000 for yourself and \$50,000 for your spouse).

	Employee Optional	Spouse Optional	Child Optional Children 14 days to 26 years
Optional Life	<ul style="list-style-type: none"> Available in \$10,000 increments up to \$500,000 EOI required for amounts over \$200,000 	<ul style="list-style-type: none"> Available if you also purchase employee optional life Available in \$5,000 increments up to \$250,000 (not to exceed 50% of employee coverage) EOI required for amounts over \$50,000 	<ul style="list-style-type: none"> Available if you also purchase employee optional life \$5,000 or \$10,000 in coverage No EOI required Birth to 14 days allows for a \$500 benefit
Optional AD&D	<ul style="list-style-type: none"> Available in \$10,000 increments up to \$500,000 	<ul style="list-style-type: none"> Available if you also purchase employee optional AD&D Available in \$5,000 increments up to \$250,000 (not to exceed 50% of employee coverage) 	<ul style="list-style-type: none"> Available if you also purchase employee optional AD&D \$5,000 or \$10,000 in coverage No EOI required

Full guarantee issue amounts are only available to new hires without EOI.

Evidence of Insurability: Proof of Good Health for Optional Life Coverage

- ✔ You can download the EOI form from the Forms tab of the Dayforce portal at <https://sso.dayforcehcm.com/ensignenergy> that you should complete, sign and submit to Guardian for approval. You may also request a form from the benefits department.
- ✔ Until Guardian has approved your application, your coverage amount in effect will be the guaranteed issue amount - \$200,000 for employees and \$50,000 for spouses.
- ✔ EOI is not required for optional child life coverage.
- ✔ If you do not elect optional life insurance for yourself or your dependents when you are first eligible, you will have to submit EOI for any amount of coverage.

Choose Your Beneficiaries

You will need to designate beneficiaries. You are automatically the beneficiary for any dependent life coverage you have. It's important to keep this information updated so that our plan administrators can follow your wishes if you have a claim. You can designate your beneficiaries when you enroll or update them any time through the Dayforce portal.



Disability Coverage

Disability coverage replaces a portion of your income if you must be absent from work because of a non-work-related health condition or injury.

Optional Disability

Non-executive/non-office employees may purchase optional plans through payroll deductions. Employees pay 50% of the premiums on a post-tax basis.

Optional Short-Term Disability (STD)	Optional Long-Term Disability (LTD)
<ul style="list-style-type: none"> Plan replaces 60% of your base earnings, up to \$1,500 per week Benefits begin after 14 days of absence Benefits last for up to 24 weeks 	<ul style="list-style-type: none"> Plan replaces 60% of base earnings, up to \$10,000 per month Benefits begin after 180 days of disability (as defined by the plan) Benefits last until you reach age 65 or are no longer disabled A pre-existing condition exclusion may apply

Company-Paid Disability for Executives, Office Management and Office Personnel

For **executives, office management and office personnel**, Ensign pays the full cost of disability coverage.

Short-Term Disability (STD)	Long-Term Disability (LTD)
<ul style="list-style-type: none"> Plan replaces 60% of your base earnings, up to \$3,000 per week Benefits begin after 7 days of absence Benefits last for up to 25 weeks 	<ul style="list-style-type: none"> Plan replaces 60% of base earnings, up to \$10,000 per month Benefits begin after 180 days of disability (as defined by the plan) Benefits last until you reach age 65 or are no longer disabled Any benefit you may receive is taxable income to you A pre-existing condition exclusion may apply

TravelAid

Travel with peace of mind thanks to Guardian's TravelAid program. TravelAid provides employees and their dependents with an around-the-clock safety net for both personal and business travel. Services include, but are not limited to:

- Travel medical kits and lost document assistance
- Emergency travel arrangements and prescription replacements
- Physician and hospital referrals
- Specialized security resources

IdentityWorks Identity Protection

IdentityWorks from Experian monitors your identity information and notifies you of potential fraud. This program is available to you and your covered dependents, if enrolled in a BCBSTX medical plan. Sign up now to take advantage of their services, including credit monitoring, identity restoration, Experian IdentityWorks ExtendCARE and up to \$1 million in Identity Theft Insurance. Visit www.bcbstx.com and log into your Blue Access Member portal or call 1-877-890-9332 from 8.a.m. to 8 p.m. Monday to Friday or 10 a.m. to 7 p.m. Saturday and Sunday (Central Time).

Airrosti to Help Resolve Physical Pain

Airrosti is a program for you and your covered dependents if you are enrolled in a BCBSTX medical plan. Airrosti is a safe and highly effective alternative to surgery, pain management, and long-term chiropractic or physical therapy treatment programs. Whether you've been living with chronic pain or if you've recently experienced an acute injury, Airrosti providers will focus on diagnosing the root cause of your pain. They then work to resolve that pain to help you quickly return to pain-free activity and avoid injury recurrence — **often within only 3 visits.**



Airrosti treatment consists of individualized in-clinic or virtual one-on-one care to help resolve issues such as:

- ▶ Pain in the back, neck, shoulders, hips, elbows, knees, and feet
- ▶ Acute sports/athletic injuries like pulls and strains
- ▶ Repetitive stress/wear and tear injuries like tendonitis, frozen shoulder, and carpal tunnel syndrome.

Airrosti offers a complimentary, virtual triage for any ache or pain – acute or chronic. For more information, visit www.airrosti.com or call 1-800-404-6050, or schedule your free screening now at www.airrosti.com/vip-chat.

Learn to Live for Support During Difficult Times

If you are experiencing stress, anxiety, social anxiety, depression, or issues with substance abuse, support from Learn to Live can help – **at no cost to you.**

Ensign employees and their covered dependents (aged 13+) enrolled in a BCBSTX medical plan, have access to private and confidential Learn to Live benefits, which include:

- ▶ Immediate 24/7 access to self-paced online programs in English and Spanish
- ▶ Ability to start, stop and save your progress
- ▶ Coaching via phone, email and text

Receive support from Learn to Live at any time by logging into the Blue Access Member at www.bcbstx.com. Select “Wellness”, and then “Digital Mental Health”.

Employee Assistance Program (EAP)

The Employee Assistance Program (EAP) is available 24 hours a day for confidential support and guidance. Ensign pays the full cost of this service, which is available to you and all members of your household. EAP telephonic and online services and resources can help you with:

- ▶ Parenting and child care
- ▶ Elder care
- ▶ Personal relationships
- ▶ Work and career
- ▶ Online will preparation
- ▶ Financial concerns
- ▶ Legal issues

Through the EAP, you can also have up to three in-person counseling sessions for each issue requiring services. If you participate in a medical plan, be sure to let your EAP specialist know you have medical coverage so they can refer you to a provider who participates in both programs if more than three sessions are necessary.

You may participate in the EAP through GuidanceResources or Uprise Health. To reach GuidanceResources, visit guidanceresources.com. Register for an account with web ID **Ensign** or talk with a specialist at 1-877-262-2327. To contact Uprise Health, call 1-800-386-7055 or visit ibhworklife.com. Log in with the user name, Matters.

Your Costs for Coverage

Health Plans

	BCBSTX Medical Biweekly Rates		
	HDHP + HSA	HRA	Hybrid
Employee only	\$28.15	\$47.82	\$50.75
Employee and spouse	\$119.43	\$166.21	\$176.40
Employee and child(ren)	\$87.99	\$128.49	\$136.37
Employee and family	\$174.78	\$241.82	\$256.64

	Kaiser Medical Biweekly Rates	
	HDHP + HSA	HRA
Employee only	\$32.64	\$49.53
Employee and spouse	\$131.85	\$170.96
Employee and child(ren)	\$98.24	\$132.40
Employee and family	\$193.05	\$248.76

	Dental Biweekly Rates
Employee only	\$7.39
Employee and spouse	\$14.04
Employee and child(ren)	\$13.36
Employee and family	\$21.68

	Vision Biweekly Rates
Employee only	\$1.92
Employee and spouse	\$3.85
Employee and child(ren)	\$4.13
Employee and family	\$6.59

Your Costs for Coverage

Optional Life and AD&D Insurance - Employee and Spouse

Age	Employee Rate per \$1,000 in coverage	Spouse Rate per \$1,000 in coverage	Calculate Biweekly Premium		
Under 25	\$0.09	\$0.09			
25-29	\$0.09	\$0.09			
30-34	\$0.10	\$0.10	Desired coverage	÷ 1,000 =	Unit of coverage
35-39	\$0.13	\$0.13			
40-44	\$0.18	\$0.18			
45-49	\$0.28	\$0.28	Unit of coverage	× rate for your age =	Monthly premium
50-54	\$0.44	\$0.44			
55-59	\$0.75	\$0.75			
60-64	\$0.86	\$0.86	Monthly premium	× 12 =	Annual premium
65-69	\$1.43	\$1.43			
70-74	\$2.17	\$2.17			
75+	\$5.25	\$5.25	Annual premium	÷ 26 =	Biweekly deduction

Optional Life Insurance - Child

\$5,000 or \$10,000 in coverage: \$0.16 per \$1,000 of coverage

Optional Disability

Non-executive/non-office employees

STD per \$10 in weekly benefit	LTD per \$100 of covered payroll
\$0.22	\$0.55

401(k) Retirement Plan

The Ensign 401(k) plan through Charles Schwab helps you plan for a successful retirement. You are eligible for the plan if you are at least 18 years old and have at least 6 consecutive months of service with the company.








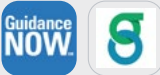

- Contribute through pretax payroll deductions (up to the IRS contribution limit of \$22,500 for 2023).
- If you are age 50 or older and you are already contributing the maximum amount, you may make an additional “catch-up” contribution of \$7,500.
- Ensign will match the first 3% of your salary you contribute into the plan dollar for dollar. The company match for the next 2% of pay you contribute is 50%. That means that if you contribute at least 5% of your pay, Ensign matches 4%.
- You own 100% of your own contributions to the plan, any funds you roll over from another account and any investment earnings on those contributions.
- You also own 100% of Ensign’s matching contributions to your account – our plan does not require you to have a certain number of years of service to own the matching funds.
- You choose the investments that best fit your investment knowledge, timeline for retirement and your level of comfort with the ups and downs of financial markets.
- You can make changes to your account at any time throughout the year.
- Learn more about the plan and manage your account at workplace.schwab.com.
- Keep your beneficiaries up to date at workplace.schwab.com, or call 1-800-724-7526 to speak to a representative.

Find out more!

To learn more, visit workplace.schwab.com or Ensign’s Intranet (Compass) under the 401k section.



Important Contact Information

Benefit	How to Access	Mobile App
Benefits Mailbox	benefitsUSA@ensignenergy.com	
Benefits Contact	<p>Alexus Witcher-Peterson Coordinator, Human Resources 1-661-368-3201 (direct) alexus.witcher@ensignenergy.com</p>	<p>Cheryl Feinstein U.S. Benefits Supervisor 1-303-385-4117 (direct) or 1-303-519-6091 (cell) cheryl.feinstein@ensignenergy.com</p>
Medical, Prescription Drug Coverage and HRA	<p>BCBSTX (Blue Choice network) 1-800-311-1593 www.bcbstx.com HSA and HRA Group number 275774 PPO Group number 270240</p>	<p>Kaiser – California Only 1-800-464-4000 www.kp.org</p> 
Telemedicine	<p>MDLIVE for BCBSTX 1-888-680-8646 Text 635-483 MDLIVE.com/BCBSTX</p>	<p>Kaiser – California Only 1-877-524-7373 (M-F 7a.m. to 7 p.m. PST) 1-888-576-6225 (after hours)</p> 
Health Savings Account for HDHP + HSA participants	<p>WEX 1-866-451-3399 www.wexinc.com</p>	
Dental Plan	<p>Guardian 1-800-541-7846 www.guardiananytime.com Group number 565803</p>	
Vision Plan	<p>VSP 1-800-877-7195 www.vsp.com Group number 12324406</p>	
Flexible Spending Accounts	<p>WEX 1-866-451-3399 www.wexinc.com</p>	
Life, AD&D and Disability	<p>Guardian 1-888-262-5670 (to initiate an STD claim), 1-800-538-4583 (LTD) 1-800-525-4542 (Life) www.guardiananytime.com Basic Life and AD&D policy number 565803 Optional Life and AD&D policy number 568648 STD and LTD policy number 565803</p>	
Employee Assistance Program (EAP)	<p>ComPsych GuidanceResources 1-877-262-2327 guidanceresources.com Web ID: Ensign</p>	<p>Guardian Uprise Health 1-800-386-7055 ibhworklife.com User name: Matters</p> 
401(k) Retirement Plan	<p>Charles Schwab 1-800-724-7526 workplace.schwab.com</p>	

Get Benefits Information When You Need It

ONLINE: You can find important benefits information on the US Benefits Hub at <https://myensignenergybenefits.com>.

BY TEXT: To receive important text reminders during Annual Enrollment and benefit updates throughout the year, text EnsignBenefits to (833) 340-0265. If you are already enrolled to receive text messages, you do not need to re-enroll.

