



EMPLOYEE BENEFITS NEW HIRE GUIDE 2022

ENROLL ONLINE kindermorgan.hrintouch.com



Read this guide carefully. This guide provides you with information to help you better understand the benefit plans and options available to you. This is only a summary of our benefits and may not reflect the benefit plans in effect for all employees in all circumstances, nor cover all applicable limitations and/or restrictions. We have done our best to accurately explain the benefits in effect under the plans; however, the plans and payment of benefits are governed by the official plan documents.

Log into our Benefits Online Portal 24/7 at kindermorgan.hrintouch.com to view and manage your benefits. Important resources such as our Summary Plan Descriptions (SPDs) and our Summary of Benefits and Coverage (SBCs) can be located under Plan Resources.



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## Benefits Summary

Read and review this guide and the summary below to learn about our benefits offerings. Your coverage will default as shown below if you do not enroll within 30 days. If you have questions, you can contact the Benefits Department at benefits@kindermorgan.com or leave a message at (866) 775-5790 option 3. Please refer to the applicable Summary Plan Description (SPD) for more Plan details. **Important Note:** Coverage and applicable benefits deductions will be processed retroactive to your hire date.

BENEFIT PLAN	COVERAGE NOTES
Medical & Prescription Drug (Rx)	We offer several medical coverage options; prescription drug coverage is bundled with medical. <b>Default: Employee Only in the HDHP Base -</b> <b>regular rate.</b> Read pages 14 and 15 for premium details.
Dental and Vision	We offer one dental plan and one vision plan. Default: No Coverage
Basic Life and Basic Accidental Death & Dismemberment (AD&D)	Default: 2x annual base pay Basic Life and AD&D coverage (each).
Optional Employee Life	New hires can elect 3x annual base pay not to exceed \$500,000 without Evidence of Insurability (EOI). <b>Default: No Coverage</b>
Optional Spouse Life	New hires can elect Optional Spouse Life up to \$50,000 without EOI. <b>Default: No Coverage</b>
Optional Child Life	You can elect Optional Child Life to cover eligible children for \$10,000 each; EOI is not required. <b>Default: No Coverage</b>
Voluntary AD&D	Maximum election is 5x annual base pay for employee or family coverage. <b>Default: No Coverage</b>
Spending Accounts Pre-Tax Contributions	You can elect to make Health Savings Account or Flexible Spending Account pre-tax contributions for eligible expenses based on Plan and IRS regulations and limitations. <b>Default: No Coverage</b>
Voluntary Benefits	We offer Voluntary Benefits that may fit your needs and budget. <b>Default: No Coverage</b>
Disability Benefits	We provide Short-Term Disability and Long-Term Disability benefits should you be unable to work for an extended period of time.
Savings Plan - 401(k)	We contribute 5% of your eligible pay to your Savings Plan. You will be automatically enrolled at a contribution rate of 6% of your eligible pay with 1% automatic annual increases (up to 12%). You can change your contribution rate at any time.
Retirement Plan - Pension	Based on age and years of service, we contribute 4% or 5% of your eligible pay. No employee contributions are allowed or required.

**/**,

## Enroll Online Within 30 Days

## Enroll Online 24/7 from work or home

Kinder Morgan's Benefits Online Portal powered by Benefitfocus© makes enrolling online simple and fast. Enroll within 30 days of your hire date by following these simple steps:

1 Access the portal by clicking Benefits Online (KMOnline home page > Common Resources) OR log in from home or anywhere at kindermorgan.hrintouch.com OR download the Benefitplace mobile app by scanning the QR code below.



#### Welcome to Benefits Online!

Important benefits resources are at your fingertips. Here you can locate our SPDs and SBCs under Plan Resources, review enrollment materials, learn about our Wellness 360° program, and more!

- 2 Click the orange Enroll Now button to access the enrollment system and follow the prompts to enroll. Your coverage and payroll deductions will be retroactive to your hire date. You have 30 days from your hire date to enroll!
- **3** After you complete and save your elections, print your Employee Summary Report and double-check your benefits and covered dependents.

### ENROLLMENT CHECKLIST:

Check your Profile on the enrollment system to make sure the information on the About You and Communication Preferences sections are accurate.

Adding Dependents? You'll need to provide and upload proof of eligibility (i.e. birth certificates, marriage certificate, SSN, etc.) to the portal's Document Center within 30 days of hire. See page 11 for eligibility requirements.

After you complete your enrollment, print and review your Employee Summary Report and be sure to check your benefit elections and covered dependents carefully.

#### **Qualified Life Event**

Think carefully about your benefit choices. You can change your elections during the year only if you experience a qualified life event such as marriage, birth or adoption of a child, divorce or legal separation, etc. You must report your life change and submit relevant documentation within 30 days after the life event occurs. Report a life event by clicking the blue My Benefits button on our Benefits Online Portal home page, and then click the Life Change link on the enrollment system menu.

### Medical and Rx Options

### Medical & Prescription Drug (Rx) Coverage

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

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

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

Safety is one of our core values at Kinder Morgan. With this in mind, if you provide proof of full COVID-19 vaccination, your remaining 2022 premiums will be reduced by \$25 per pay period. Go to KMOnline to record and upload your vaccine card (PDF). To find a vaccine center location near you, go to www.vaccines.gov.

#### HDHP BASE

HDHP BUY-UP

**PPO** Preferred Provider Organization

**EPO** Exclusive Provider Organization

**OOA** Out-of-Area

KAISER California Only

If you do not actively enroll, you will default to Employee Only coverage in the HDHP Base medical option. Review pages 14 and 15 for details about the rates. Both the HDHP Base and HDHP Buy-up have the same coverage provisions, but with different premiums, deductibles, and out-of-pocket maximums.

If you enroll in the HDHP Buy-up, the Company will make an annual employer contribution to your HSA. The contribution is prorated based on the 1st of the month following your benefits effective date and timely HSA verification. You must be actively employed to receive the contribution.

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



**Compare features and costs** before you choose a medical plan. Read the Medical/Rx SPD and use the estimator tools on the enrollment system to compare and find the plan that best fits you and your family. The 2022 benefits costs can be found on pages 14 and 15 of this guide.

## Rx and EAP Information

### CVS Caremark Drug Program

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

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

#### Medical and Prescription ID Cards

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

### Access your healthcare information

You can have your healthcare information at your fingertips. Register and use the wellness tools and resources available on the BCBSTX website at **bcbstx.com** and create your personalized benefits hub at **myhealth.myevive.com**.

#### **Employee Assistance Program** (EAP)

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

You can also log in anytime to the Magellan website at magellanascend.com to take advantage of the many services and online programs available.

## Medical and Rx Charts

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

	HDHP In-Network	BASE <sup>1</sup> Out-of-Network <sup>2</sup>	HDHP E In-Network	BUY-UP <sup>1</sup> Out-of-Network <sup>2</sup>
Annual Deductible Individual <sup>1</sup> Family	\$3,250 \$6,500	\$6,500 \$13,000	\$1,850 \$3,700	\$3,700 \$7,400
<b>Annual Out-Of-Pocket (OOP)</b> Individual Family	\$7,000 \$14,000	\$14,000 \$28,000	\$4,800 \$7,500	\$9,600 \$15,000
HDHP HSA Annual Company Contribution	N/A		\$500 Individual (EE Only) \$1,000 (Family)	
<b>Doctor Visits</b> Primary Care Specialist	20%* 20%*	40%* 40%*	20%* 20%*	40%* 40%*
Lab and X-rays (non-hospital)	20%*	40%*	20%*	40%*
Well-Child/Adult Visits	\$0/visit	40%	\$0/visit	40%
Hospital Surgery Outpatient Inpatient	20%* 20%*	40%* 40%*	20%* 20%*	40%* 40%*
Certain Diagnostic Testing (i.e. MRI)	20%*	20%*	20%*	20%*
Emergency Room Care	20%*	20%*	20%*	20%*
Mental Health & Substance Abuse Outpatient Inpatient	20%* 20%*	40%* 40%*	20%* 20%*	40%* 40%*

This is not a complete list of covered services, The Medical SPD found on the Benefits Portal (Plan Resources) provides more information, or contact BCBS at 855-676-4476 if you have questions.

<sup>1</sup> HDHP – The Annual Deductible must be met before HDHP benefits are paid. Eligible medical and Rx expenses go toward meeting the deductible. Employees enrolled in the Employee Only tier adhere to the Individual Deductible and Out-of-Pocket (OOP) maximum amounts, while all other coverage tiers adhere to the Family Deductible/OOP. **Buy-up Plan:** The Family deductible and OOP provisions can be met by one or more members of the family. **Base Plan:** The Family deductible can be met by one or more members of the family. If one member of the family meets the individual OOP (\$7,000), the plan will pay at 100% for that member only; the remaining family members will be required to meet the other \$7,000 to meet the family OOP of \$14,000.

#### <sup>2</sup> Subject to the Allowable Amount.

<sup>3</sup> PPO/EPO/OOA - The Family deductible and OOP provisions can be met by a combination of two or more family members.

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

## Medical and Rx Charts

### BCBSTX - PPO/EPO/OOA

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

KINDER MORGAN

WELLNESS 360° EMOTIONAL Our Wellness 360° Programs offer you several ways to stay healthy physically, emotionally and financially. Click on the Wellness 360 tab on our Benefits Online Portal to explore and learn more. You can also register and log in to the BCBSTX portal at bcbstx.com to find more health-related links and resources including gym membership information.

#### PRESCRIPTION DRUGS

(Caremark Advanced Choice Network)

Generic, Brand & Non-Brand

#### Generic

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

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

Retail 30-Day Supply 25% Coinsurance (\$40 minimum)

Mail Order 90-Day Supply 25% Coinsurance (\$80 minimum)

Specialty Rx/\$150 copay<sup>2</sup>

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

Retail 30-Day Supply 25% Coinsurance (\$60 minimum)

Mail Order 90-Day Supply 25% Coinsurance (\$120 minimum)

Specialty Rx/\$225 copay<sup>2</sup>

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

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

Maintenance Drugs taken on a regular long-term basis (30 days or more) must be filled with a 90-day prescription through the CVS Caremark mail order service or a local CVS pharmacy. If this is not done, there will be NO COVERAGE effective with the third fill. Note: If you are enrolled in a HDHP, you generally pay the full cost for health services, including prescription expenses, until your annual deductible is met.

## **Dental and Vision Benefits**

## **Dental Benefits**

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

#### CIGNA DENTAL HIGHLIGHTS (in-network)

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

### Vision Benefits

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

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

## Life and AD&D Benefits

### Life and AD&D Insurance

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

For additional protection you can purchase Optional Life or Voluntary AD&D coverage for you and your family. You pay the full cost of this coverage (see page 14). Your premiums may go up in the future due to your age and/or your spouse's age since rates are age-based.

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

#### **OPTIONAL LIFE HIGHLIGHTS**

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

Generally, the employee's base wage as of the hire date, and age as of December 31 of the prior year are used to calculate coverage and premiums (same age calculation for optional spouse coverage). Current pay is used to calculate coverage amounts if benefits become payable.

Evidence of Insurability (EOI) is also known as proof of good health. EOI may be required if you enroll for Optional Employee or Spouse life in excess of the amounts stated in the chart above. You will only pay premiums for the approved amount of insurance pending approval for the additional coverage.

#### VOLUNTARY AD&D HIGHLIGHTS

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



### **Beneficiary Designation**

Protect your loved ones by naming your beneficiary designations online for Life and AD&D insurance, and your Retirement and Savings Plan. To learn more, go to the Benefits Online Portal for instructions > Forms. Refer to the SPD and/or insurance certificate for Life and AD&D Plan terms and conditions.

## Voluntary Benefits

### Coverage for your Lifestyle

Kinder Morgan offers several voluntary benefits for your consideration. Review the options below to see if the additional coverage fits your needs. You pay the full cost of these benefits through after-tax payroll deductions. The rates will be displayed as you enroll online. For more plan details go to the Benefits Online Portal > Health & Welfare > Voluntary Benefits.

#### **Critical Illness Insurance** (offered by Securian)

Provides a lump sum payment due to sickness. Employees can elect coverage of \$15,000 or \$30,000, and employee only or family coverage options are available.

#### Accident Insurance (offered by Securian; non-occupational)

Provides a lump sum payment for any covered accident. Employees can elect a High or Low Plan, and employee only or family coverage options are available.

#### Hospital Indemnity Insurance (offered by Securian)

Provides a lump sum and daily payments if hospitalized due to sickness or accident. Employees can elect a High or Low Plan, and employee only or family coverage options are available.

#### **Pre-paid Legal**

LegalEASE provides legal assistance to employees to help deal with family and financial matters, estate planning, wills and more.

#### **Identity Protection**

Allstate provides credit, financial and identity monitoring services. They offer a full-managed identity theft restorations process and unlimited access to Transunion credit reports/scores and more.

#### **Pet Insurance and Prescription Program**

Pet insurance, provided by Nationwide, covers all pets with no age limit; but pre-existing limitations may apply. The plan includes your choice of reimbursement levels, an annual deductible and annual maximum.

#### **Total Pet Program**

Pet Benefit Solutions offers a Total Pet Program which provides discounts on pet food, toys, prescriptions and flea and tick preventatives. The program also offers a veterinary discount plan, a 24/7 pet helpline and a lost pet recovery service.

**NOTE:** Voluntary Benefit elections roll over from year to year unless you cancel coverage. You can add or cancel pet insurance, the pet program, and identity protection coverage at any time.

For more Voluntary Benefits details and information, click on the Voluntary Benefits link found under the Health & Welfare tab on our Benefits Online Portal.

## Eligible Dependent Requirements

## **Eligible Dependents**

Kinder Morgan offers you valuable healthcare benefits that cover eligible dependents. Proof of eligibility for coverage is required for each dependent(s) you add and enroll. If you are adding dependent(s) for coverage you must upload proof of eligibility within 30 days of your date of hire or they will NOT BE COVERED.

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

#### DEPENDENT DOCUMENTATION REQUIREMENTS

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

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



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

## **Spending Accounts**

### **Pre-Tax Contributions**

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

HSA & FSA CONTRIBUTIONS	HSA <sup>1</sup>	Health Care FSA	Limited Purpose FSA (LFSA) <sup>2</sup>	Dependent Care FSA <sup>*</sup>
Annual Contribution Limits (EO/Family)	\$3,650/\$7,300	\$2,850	\$2,850	\$5,000
Eligible Expenses (per IRS) <sup>3</sup>	Health Care	Health Care	Dental & Vision	Dependent Care
Plan Year End Date (to incur expenses)	N/A	03/15/2023		03/15/2023
Claim Filing Deadline	N/A	03/31/2023		·
Annual HSA Company Contribution (EO/Family)	\$500/\$1,000	N/A	N/A	N/A

<sup>1</sup>An employee age 55 or older can make an additional \$1,000 in "catch-up" contributions to an HSA. <sup>2</sup> The LFSA is generally used for dental and vision expenses; eligible medical/Rx expenses can be submitted after the annual medical deductible is met (proof required) <sup>3</sup> Eligible health care expenses can include qualifying medical, dental, or vision expenses. A Dependent Care FSA can be used to pay for eligible child and adult care services while you work, such as day camps, after school programs, and child and adult daycare.

**Important HDHP and HSA notes**: The Annual HSA Company Contribution applies only if you are enrolled in the HDHP Buy-up. You must select HSA coverage when enrolling to receive the employer contribution. Both employee and employer contributions go toward meeting the IRS annual limit. The Company Contribution is prorated based on the month of hire rules and timely identity verification by our administrator (see page 4). (EO = Employee Only).

**HealthEquity HSA investment default information**: To optimize the value of your HSA, your HealthEquity HSA cash balance (deposited funds that are not invested) will be defaulted to the standard Enhanced Rates program. Members can start earning the highest interest rates available on their HSA cash balance under this program (not federally insured). You can change this election to the Basic Rates (federally insured with lower interest rates) at any time on the HSA Interest Rates page on the HealthEquity portal.

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

## HSA and FSA Features

### Health Savings Account (HSA)

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

### Flexible Spending Accounts (FSAs)

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

**Health Care FSA** (if enrolled in the PPO, EPO, OOA, Kaiser; or you decline medical) You can use your health care FSA dollars to pay for eligible out-of-pocket medical, prescription drug, dental, and vision expenses for you, your spouse, and your tax dependents. Out-of-pocket expenses can include deductibles, coinsurance and co-pays.

Limited Purpose Health Care FSA (if enrolled in a HDHP medical option) A Limited Purpose FSA generally pays for eligible dental and vision expenses.

#### Dependent Care FSA\*

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

#### \*Dependent Care FSA Notice

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

**NOTE:** IRS rules and regulations governing HSAs and FSAs can impact your participation in a tax advantaged plan (Example: your Medicare status may affect your HSA contributions). Go to www.IRS.gov for more information or consult with a tax advisor.



## **Benefits Costs**

The 2022 benefits costs are provided below. Note: If you provide valid proof of full vaccination for COVID, the medical premiums listed below will be reduced by \$25 per pay period for the remainder of 2022. A special COVID notice and the 2022 reduced medical rates are presented on the next page. To record your vaccine information, go to the KMOnline home page.

#### 2022 PREMIUMS

MEDICAL BENEFITS (Bi-Weekly Cost)	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	EMPLOYEE + CHILDREN	EMPLOYEE + FAMILY
BCBSTX HDHP Base	\$25.00	\$60.81	\$45.10	\$ 71.20
BCBSTX HDHP Buy-up	\$49.04	\$105.39	\$70.70	\$127.03
BCBSTX PPO	\$99.26	\$241.52	\$172.22	\$308.36
BCBSTX EPO	\$123.71	\$282.10	\$224.99	\$370.94
BCBSTX Out-Of-Area (OOA)	\$99.26	\$241.52	\$172.22	\$308.36
KAISER (California)	\$116.04	\$258.69	\$188.88	\$325.45

#### DENTAL BENEFITS (Bi-Weekly Cost)

Cigna	\$7.87	\$16.29	\$17.31	\$24.71
VISION BENEFITS (Bi-Weekly Cost)				
VSP	\$3.86	\$5.50	\$6.44	\$10.30

#### VOLUNTARY AD&D INSURANCE BENEFITS (Monthly Cost; after-tax)

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

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

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

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

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

## **Special Notice**

ZUZZ REDUCED MEDICAL PREMIUMS									
MEDICAL BENEFITS (Bi-Weekly Cost)	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	EMPLOYEE + CHILDREN	EMPLOYEE + FAMILY					
BCBSTX HDHP Base	\$0.00	\$35.81	\$20.10	\$46.20					
BCBSTX HDHP Buy-up	\$24.04	\$80.39	\$45.70	\$102.03					
BCBSTX PPO	\$74.26	\$216.52	\$147.22	\$283.36					
BCBSTX EPO	\$98.71	\$257.10	\$199.99	\$345.94					
BCBSTX Out-Of-Area (OOA)	\$74.26	\$216.52	\$147.22	\$283.36					
KAISER (California)	\$91.04	\$233.69	\$163.88	\$300.45					

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#### Special Notice - COVID Vaccine Medical Rate Reduction

If you provide full proof of vaccination against COVID, the medical premiums you will pay for the remainder of 2022 will be reduced by \$25.00 per pay period for all plans. If you choose not to be vaccinated and do not provide a medical or religious exemption your medical premiums will NOT be reduced.

To qualify for the rate reduction, you must be fully vaccinated and provide proof as soon as possible or gualify for a reasonable alternative standard under HIPAA, Title VII of the Civil Rights Act (Title VII), or the ADA. You must upload your proof of vaccination to the KMOnline vaccine intake portal or qualify for a reasonable alternative standard. If you have already uploaded your vaccine documentation to the portal, no further action is necessary.

\*The Kinder Morgan, Inc. Master Employee Welfare Benefit Plan (Plan) is committed to helping you achieve your best health. A medical rate reduction for participating in the vaccine incentive program, a wellness component of the Plan's medical plan, is available to employees eligible for coverage under the medical plan. If you think you might be unable to be vaccinated to meet the standard for the reduction, you might qualify for an opportunity to earn the same \$25 per pay period rate reduction by different means. To determine if you qualify for a reasonable alternative standard, you will be required to complete and submit a form to initiate our review to help you find an alternative option that is right for you based on your health status. You may also qualify for the \$25 per pay period rate reduction if you qualify for a religious exemption under Title VII or require reasonable accommodation under the ADA that prevents you from receiving the COVID vaccine. To complete the form, go to KMOnline > Common Resources > Forms Online > Benefits > Vaccine Accommodation Request. Please contact your Human Resources Representative if you have questions regarding the completion of the form.

## Savings and Retirement Programs

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

### Savings Plan - 401(k)

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

Register on the Empower Retirement portal to choose your investment options, increase or change your contributions, and access educational and interactive planning tools. Register at **www.empowermyretirement. com**.

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

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

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

### Your Contributions

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

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

### Automatic Enrollment for New Hires

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

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

## Savings and Retirement Programs

### Retirement Plans - Pension

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

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

### Company Contribution and Interest Credits

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

#### CONTRIBUTION CREDITS

Age + Serv	ice as of	12/3	il of t	he pi	rior y	ear		L	.ess	tha	an 5(	C =	4%	5			50	an	d ak	oov	e =	5%	

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

### Check Your Personal Retirement Account Balance

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

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

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

#### KM Retirement Plans (A & B)

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





### Other Benefits

Kinder Morgan offers resources on our intranet site to help manage your work and home life. Explore KMOnline to read and review important company news and announcements and find helpful quick links to HR/Benefits resources, including access to our Benefits Online Portal and Kronos, our time and attendance application. Click on the Company Store link to purchase Kinder Morgan branded items or use the Bolty chat box if you have guestions or need assistance. We encourage you to discover more about Kinder Morgan on KMOnline.

### Employee Stock Purchase Plan (ESPP)

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

### Business Travel Accident Plan (BTA)

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

2022 Holiday Schedule		Paid Time Off Schedule							
DATES OBSERVED	HOLIDAY	YEARS OF CREDITED SERVICE	ANNUAL PTO HOURS						
Friday, December 31	New Year's Day	0 – 4 years	120						
Monday, January 17	MLK Day	5 - 9 years	160						
Friday, April 15	Good Friday	10 - 19 years	200						
Monday, May 30	Memorial Day	20+ years	240						
Monday, July 4	Independence Day	20. years	2-10						
Monday, September 5	Labor Day								
Thursday, November 24	Thanksgiving Day	Note: New hires will receive prorated PTO based on hire							
Friday, November 25	KM designated holiday	date for the first year.							
Friday, December 23	KM designated holiday								
Monday, December 26	KM designated holiday								

#### Daid Time Off Schedule

# Contact List

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PROVIDER	TELEPHONE	SERVICE/GROUP ID	WEBSITE								
KM Benefits Department	(866) 775-5790 Select option 3	Benefits	KMONLINE > Benefits Online Portal								
Benefits Online Portal kindermorgan.hrintouch.com	View and manage your benefits and locate important benefits resources and information $24/7$										
Ask Bolty!	Questions? Get answers by clicking the Bolty Chat button on KMOnline or the Bolty icon on Microsoft Teams!										
Blue Cross Blue Shield of Texas Health Advocacy Solutions (HAS)	(855) 676-4476	Medical (TX041826)	bcbstx.com myhealth.myevive.com								
CVS Caremark	(800) 840-0357	Prescription (5101)	caremark.com								
Magellan EAP	(800) 424-6207	Employee Assistance Program	magellanascend.com								
Kaiser (California HMO)	(800) 464-4000	Medical - CA Only	kaiserpermanente.org								
Cigna	(800) 244-6224	Dental (3339023)	mycigna.com								
Vision Service Plan	(800) 877-7195	Vision (12055862)	vsp.com								
HealthEquity	(866) 346-5800 (877) 924-3967	Health Savings Account (HSA) Flexible Spending Accounts (FSA)	my.healthequity.com healthequity.com/wageworks								
Securian	(844) 301-0133	Life & AD&D (70318) Travel Assistance Legacy Planning	lifebenefits.com lifebenefits.com/travel securian.com/legacy								
Benefits Service Center	(866) 301-2359	Retirement Plan (LifeWorks)	myplansconnect.com/kindermorgan								
Empower Retirement	(844) 465-4455	401(k) Savings Plan	empowermyretirement.com								
Computershare	(800) 633-9394	Employee Stock Purchase Plan (ESPP	) www-us.computershare.com/employee								
VOLUNTARY BENEFITS :	For more information,	go to the Benefits Online Portal > Hea	Ith & Welfare > Voluntary Benefits								
Securian File a claim	(888) 254-1308 (800) 328-9442	Critical Illness, Accident and Hospital Indemnity Insurance	lifebenefits.com/km securian.com/benefits								
LegalEASE	(888) 416-4313	Legal Services/Assistance	legaleaseplan.com/kindermorgan								
Allstate Identity Protection	(800) 789-2720	Identity Theft Protection	myaip.com								
Nationwide Pet Insurance	(800) 540-2016	Pet Insurance	petbenefitsportal.com								
Pet Benefit Solutions	(800) 891-2565	Total Pet Program (including Rx)	petbenefits.com								



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