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President's Letter

What a lot of change we have encountered since my 3Q16 Encore letter! I seem to remember Quality Meetings back when I was a full time employee talking about "Embracing Change." I guess we are in that situation now, like it or not. As I mentioned in our Special Edition, sometimes we just need to put our fears and anxieties behind us and embrace the change the best we can.

New Medical Plan Status

I understand from Audrey Lamastro, Chevron's Global HR Benefits Manager, that 69% of eligible retirees have made their appointments with OneExchange as of October 17th and 18% have completed their enrollment. Appointments are now being made for November telephone conferences with the OneExchange Benefits Advisors. OneExchange feels this is about normal compared to



Mike Elgie, President

other companies they have dealt with. It does, however, show that there are still many retirees out there who have not made the call to OneExchange.

Customer Service Reps and Benefits Advisors

If you have not yet made a call for your appointment, you will likely be getting a call from a OneExchange Customer Service Rep. They are not to ask for any private information, medical numbers or anything like it. They are simply reminding you to call OneExchange to make your appointment with a Benefits Advisor. **The number is 844-266-1392.** If the person calling asks for personal information, **do not provide it.** They likely are not an OneExchange employee. Tell them that you have their number and you will call them back instead.

If you cannot understand the Customer Service Rep who calls you because of their dialect or accent, please ask for another Rep to talk to or excuse yourself, disconnect and call the number above again. Because of the need to contact over 42,000 retirees, OneExchange has had to hire a large number of temporary employees to accomplish the job. The one who calls you may not be quite the right fit. If that happens, please be patient and, as noted, ask for someone else.

The most important thing is that you must make your appointment and enroll with a Benefits Advisor. If you do not enroll, you will lose your access to Chevron's Medical Benefits. There are no rollovers from the old plans, which expire December 31, 2016. Going forward, next year during the 2018 enrollment you will be able to rollover the plan you select if you so choose.

A word about the Benefits Advisors: I noted that the Customer Service Reps calling you are likely temporary help. That is not the case with the Benefits Advisors. They are full time employees and licensed in the states where you live to advise on medical insurance. Even here if you are talking to a Benefits Advisor who you have some difficulty understanding for whatever reason, you have the right to ask for someone else. It is important that you are comfortable with your Benefits Advisor. And if you like your Benefits Advisor and want to continue to deal with this person, be sure to get his or her name and request that person in any future calls you may need to make. That can apply anytime this year or in the future if you happen to have questions. You might make a note of which days the person works so when you call for an appointment, you can request the person and know which days they work.

An additional way you can help yourself in the future and for other retirees who have not yet enrolled is to participate in the survey offered when you complete your telephone discussions with OneExchange and when you use their website. OneExchange needs to hear your feedback, good or bad so they can improve the service. It is the most efficient way to achieve that improvement.

OneExchange Website

The detailed information and costs of the various plans became available on the OneExchange website, medicare.oneexchange.com/chevron, on October 1 for most providers. Kaiser was live Oct. 3 and AARP-UHC and Group Health/Kaiser in the Northwest may are expected later in October. You will be able to search through and compare costs and general plan information before you talk to your Benefits Advisor. In addition, before you talk to your Benefits Advisor, it will speed things up and simplify the discussion if you set up the profiles of you and your post-65 dependents beforehand. It is a very straightforward process on the OneExchange website. You can input your doctors, prescriptions and persons with your medical power of attorney. That way when you "meet with" your Benefits Advisor on the phone, they will have the key information they need to work with you. If for whatever reason you are not able to do this pre-work, the Benefits Advisor will assist you in creating your profiles. It will just make the phone call a bit longer. But you will need your lists of doctors and prescriptions you are currently taking. Just having the prescription bottles there on the table when you talk will be helpful.

Please also be aware that the process, even simplified, may take a couple of hours. You will have to repeat various information for each insurance provider. It is frustrating to have to repeat it, but it is a Medicare requirement that the Advisors do so in that manner. OneExchange has been and will continue to work with Medicare to simplify the process. Remember, once you are all signed up this year, if you do not change plans next year, you will be able roll over and not go through this process again.

Do you need some help?

I also need to stress here, that if you are in a position where you need some assistance in performing this enrollment process, please arrange with a family member or close friend to help you with the Benefits Advisor phone call. The person does not even have to be in the same room with you. The Benefits Advisor can set up a conference call with a son or daughter or other designee in a city across the country, for example. You should note that need and advise the Customer Service Rep the name of that person and their phone number when you make your appointment call. That person helping you can also assist you with the call to make your enrollment appointment.

If you don't have anyone nearby who can help you, contact your local CRA president to see if he or she can get someone locally to assist you. The phone numbers are on the CRA website under the "About Us" pull down menu (see "Area/Chapter Locations").

Final Thoughts

We all remain a bit anxious about these changes and that is perfectly normal. Even though we are supposed to embrace change, it is not easy. We don't know exactly how all of these new plans will work for each of us. Hopefully we will all be able to identify plans comparable to our current plans or one very close. If for whatever reason, you have difficulties with arranging your medical insurance, your first step will be to ask to speak to a Benefits Advisor supervisor to see if they can resolve the issue. As always, CRA is there to help and advocate on your behalf as you work your way through the process and for ongoing use.

Please also see Al Horan's Benefits Corner column later in this issue. Al has lots of information that can be helpful as you investigate what plan is best for you.

So, hang in there, fill out your profile, make your appointments and **ENROLL**! The Holidays are coming up soon so it would be good to get all set up so you can enjoy them with a relaxed mindset.

Best regards and Happy Holidays,

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CRA News Briefs

Chevron Advocacy Network: 20 in 120

The "20 in 120" Chevron Advocacy Network membership campaign kicked off at the last Annual Meeting wrapped up in September. At that time, there were 902 retirees subscribed. This was an increase of 239 over the May figure of 663. The CRA and the Chevron Advocacy Network team thank you for your participation!

"Big Dog Garage" Tour

On August 6, El Segundo retiree and South Bay Chapter member Jim Stanton got the rare

opportunity to tour Jay Leno's private car collection in Burbank, CA. Accompanying Jim on his tour were Jim's son Bob and Chevron retiree Charlie Ryia. The facility is not open to the public. Tours are by invitation only. Way to go, Jim, on snagging an invite!

The "Garage" is located, on the southwest side of the Burbank Airport, now known as the "Bob Hope" Airport. It is a converted hangar now used to store Jay's 150 plus "expensive, beautifully maintained automobiles." Jay drives most of them for different occasion. Jay's favorite car to drive is his Million-Dollar, McLaren F-1. It is one of only 106 cars built between 1992 & 1998.



Jim Stanton and Jay Leno

Troy Drake: Family Matters

When Chevron retiree Troy Drake began studying his family genealogy, he proved to be a quick learner. It shouldn't have come as a surprise to him. After all, he spent his 32-year career with Unocal (from 1977 to 2005) and Chevron (from 2005 to 2009) as an auditor. "I quickly realized that genealogy is just like auditing," Troy says. "It involves hunting down sources, digging through records, and making sure there are no hidden secrets."

Troy had ample inspiration for becoming a family genealogist. He grew up in Hendersonville, N.C., a town in which several generations of Drakes had lived since the 1790s. But he only began digging into his family's heritage after a question arose as to who were his great grandparents. At that time, he was working for Unocal in Jakarta, Indonesia. But on visits home, he decided to begin renovations on his grandparents' 1920s house where he now lives.

"Being there and thinking about my grandfather's life prompted me to ask myself questions about the Drake family," Troy says. That, in turn, led him to the Hendersonville County Genealogical and Historical Society, which provided him with some key tips about researching his family history. At the courthouses of Hendersonville and Madison counties, he obtained copies of the birth and death records of numerous members of the Drake family. "I packed up the records in boxes and shipped them back to Jakarta, where I started doing research the old-fashioned way – studying every record and taking plenty of notes."

The Busy Life of a Volunteer

In 2009, when Troy retired from Chevron, he moved back to Hendersonville and entered a new phase in his interest in genealogy. He became a volunteer at the same society that had given him his first lessons in studying his family history.



Troy Drake assisting with geneology search

"Many of the people who come to learn about their genealogy don't even know who their grandparents were," Troy says. "We get them started. And they love it when we provide copies of original documents, some going back to the 1850s." Often, he finds to his surprise that visitors to the society are named Drake – and are family members he hadn't known before.

Troy is primarily involved in archiving historic artifacts that are donated to the society. The donations range widely – "everything from apple cider presses to wedding dresses and from photo collections to a courthouse desk from the early 1900s."

He also started and administers the society's Facebook page. His goal is to increase interest in the non-profit organization, which depends entirely on membership contributions.

Over the past seven years, Troy has logged more than 2,000 hours as a volunteer for the society. Chevron has matched his hours with a yearly contribution to the society.

Look Homeward, Angel

Troy's volunteer activities also extend to work on behalf of two city cemeteries. The first is the Oakdale Cemetery, which was established in 1885 and was the first rural cemetery in North Carolina. "The city asked for volunteers to photo the cemetery's tombstones, and I was the only volunteer to come forward," says Troy. "I'd already created two books of photos of every tombstone in two cemeteries where my family members are buried, so taking on the Oakdale assignment was a natural for me."

Troy used GIS property mapping provided to locate every tombstone and to create a revised mapping and survey of the cemetery. From 2013 to 2015, he photographed 2,735 tombstones. He also photographed a monument containing an angel that was reputedly the inspiration for the novelist Thomas Wolfe, when the author wrote his landmark work, "Look Homeward, Angel". "Wolfe's mother ran a boarding house in Asheville, which isn't far from Hendersonville, and apparently he became intrigued by the cemetery and the monument that gave the name to his novel."

For Troy, one cemetery led to another: the Pleasant Hill Cemetery, also in Hendersonville. It is the cemetery where five generations of Troy's family are buried, including his great-great grandmother who died during the Civil War. In all, the cemetery contained about 900 graves, including those of nine soldiers who had fought for either the Union or Southern side.

"In 2014, I heard that the cemetery had big problems," says Troy. "The property was owned by a church that wasn't maintaining it and was about to abandon it for lack of funds. So five of us organized a board to try to save it."

Just dealing with the cemetery's physical problems involved getting it mowed, removing fallen tree limbs, repairing the broken driveway, and working on tombstones in various degrees of disrepair. "Some of the graves were sunk down in the ground, and some didn't even have markers," says Troy.



Pleasant Hill Cemetery

The longer-term challenge involved raising awareness of the cemetery's financial problems. Troy used his genealogy skills to collect obituaries of the deceased who were buried at Pleasant Hill, before searching the Internet for names of their descendants. He and the other board members then sent letters to the family members asking for contributions to a long-term perpetual fund.

Troy also started and administers the cemetery's Facebook page to create more awareness by posting photos of all of the tombstones, organized by family names. He is also preparing family histories and photos of the people buried at Pleasant Hill for the cemetery archives. And he has created a GoFundMe site to request donations.

"We're currently selling plots to help reach our funding goal of \$100,000," says Troy. "The response has been quite positive."

The board has succeeded in acquiring property rights to the cemetery, become incorporated in North Carolina, and has applied for 501(c)(13) status.

Troy's efforts on behalf of the cemetery are tied to his strong roots in Hendersonville County and his ever-growing interest in genealogy. "It's especially appropriate for me, considering that the property was once called Drake Cemetery."

In addition to his busy life as a volunteer, Troy is an active member of CRA's Blue Mountain Chapter.

Jim Robertson: Blazing Trails

Jim Robertson had been working as a geologist in Chevron's Houston office since 1988, but when he retired from the company in 2002, he began to see the area with fresh eyes. His family had settled in northwest Harris County, within the greater Houston area, and he started dreaming of a greenway that would be rich in biking and hiking trails and a sanctuary for flora and fauna.

Nearby Cypress Creek offered promise, for it contained thousands of acres of land, some of which remained undeveloped. "I became excited about the idea of preserving the Cypress Creek corridor as a recreational area," says Jim. "I realized it could be a wonderful amenity because it is such a tremendous asset right in our backyard, and I started looking into ways of achieving this goal."

He soon learned that the Cypress Creek Flood Control Coalition had been formed in 1999, with a primary goal of flood mitigation, preservation, communication and education. Jim approached the organization in 2004 and became chairman of the Cypress Creek Greenway Project, which serves as a committee of the coalition. In this role, he has been able to blend his vision of recreational use with the coalition's prior objectives. "What I'd been doing on my own fit right in with the project and its goals," says Jim.

Jim had discovered a tract of land that had been bought by Harris County Precinct 3 in the 1980s for a future park. But turning his vision into reality required years of meetings involving county agencies. "Part of the complexity of the project is that there are 60 Municipal Utility Districts within 40 miles and a wide range of developers and potential partners to deal with," says Jim.



Jim Robertson "on the trail"

Meetings with the Harris County Flood Control District and Harris County Precinct 3 finally came to fruition when the county built and opened Cypress Park in 2014.

Meanwhile, Jim pressed forward with other park and pathway projects along the creek, identifying developers who owned property in the area and seeking funders who would enable the land to be converted into green spaces.

"Essentially, my role has been that of an advocate, who tries to pull together various groups and works to convince people of the value of creating a greenway," says Jim.

The value proposition involves the argument that homes are worth more when they are in the vicinity of parks and trails. This view was supported by a study that the Greenway Project undertook with a grant from the Houston-Galveston Area Council. "We found that homes appreciated in value by at least 10 percent when they were in proximity to green spaces." Jim says. "The perceived benefits included not only recreation but water quality and flood control."

Since Jim became involved with the greenway initiative, 24 parks have been built along Cypress



One of 15 trail projects

Creek in addition to 15 trail projects and 12 different land acquisitions. Not all of them were initiated by the Greenway Project, but in many cases the organization helped coordinate the projects. "These results confirm the interest in and viability of greenway projects," says Jim.

Meanwhile, progress continues on the construction of the Cypress Creek Greenway. Jim's vision is the creation of a continuous greenbelt of about 40 miles along Cypress Creek and Little Cypress Creek, stretching from west of U.S. 290 and east to the Spring Creek Greenway.

"We want to maintain the vitality of the corridor for existing and new families by developing its recreational areas," Jim says. "It's already being used in a wide range of ways, including not only hiking and biking, but also fishing, canoeing, kayaking, skim-boarding and off-road biking."

Having grown up on a farm in rural Ohio and worked outdoors much of his adult life as a geologist, Jim takes particular pride in seeing the trails built – and getting to use them himself. He says, "I get to walk the trails a few mornings a week, and I have six to eight options every time I start out. I'm especially gratified to see children, including my grandchildren, using the trails, without ever pausing to check their iPhones."

Jim also participated early on as a member of the Bayou Greenway initiative, which he describes as "one of the first efforts in the city of Houston to recognize the value of green spaces." He adds that efforts are underway to create greenways along 10 waterways in the greater Houston area. "It will be transformational for Houston," Jim adds.

As someone who has devoted the past 12 years to creating green spaces along Cypress Creek, Jim takes the long view of the projects he undertakes. "At one point, I speculated that it would take about 15 years for us to create a continuous greenbelt. Well, it's already been 12 years and we're not there yet. Maybe it'll have to be an intergenerational effort. But it'll be worth it."

When he isn't busy with the Cypress Creek Project, Jim has worked as a volunteer in Kenya through his affiliation with a Methodist church in Harris County. Jim has made seven visits to the country, working with local people on a variety of programs, including building homes for AIDS orphans and supporting light construction work at a local Methodist hospital

Cypress Creek

supporting light construction work at a local Methodist hospital. "Each time I go back, I see progress," Jim says. "I just wish I had more time to devote to that effort."

By being generous with his time, Jim is seeing progress wherever he works as a volunteer.

Joe Rainiero: Better Known as "Chaplain Joe"

Texaco retiree Joe Rainiero is proud of his gift of providing spiritual care to cancer sufferers and others with severe medical problems. "You have to be a communicator who can let people know your heart is right when you visit them in a hospital or help their family get through a tough time," Joe says.



"Chaplain Joe"

Fondly known as "Chaplain Joe" not only to patients and their families but also to his former working colleagues, he became an ordained chaplain in 1985 at the Assembly of God in Portchester, N.Y. He immediately began providing spiritual care at White Plains (N.Y.) Hospital, located a few miles from Texaco's headquarters in Harrison, N.Y. "I never had a problem balancing work and volunteerism though I had to be frequently on call for my job at Texaco."

Until he retired from Texaco in 2001, Joe ran the executive garage, which often entailed driving the CEO, other company executives and distinguished visitors ("including heads of state"). "Jim Kinnear (Texaco CEO) trusted me to drive him, not least because I knew all the back roads in the tri-state area," says Joe. "He also knew I played a good golf game, which often got me invited to play along with some of the executives."

Joe was so well liked and respected at Texaco that he served on the company's diversity committee and offered the final "toast" – "actually a kind of non-denominational prayer" – when Texaco closed its

headquarters at the time of its merger with Chevron in October 2001.

The next year, he moved to Sun Lakes, Ariz., where he quickly resumed his volunteerism, making spiritual visits to patients at "seven or eight hospitals." Shortly after his move to the Southwest, when Banner Gateway Medical Center opened in nearby Gilbert, Ariz., Joe launched its spiritual care department. He continued visiting patients and helping their families in both practical and emotional areas. However, his biggest challenge was to recruit and train a staff of more than 50 volunteers.

"I started off by going to seminaries and recruiting some of their students and graduates, then training them as volunteers," Joe explains. "I made clear early on that our job was to support patients and families going through a difficult journey. Sometimes the people wanted to talk; sometimes not. Either way, it was our job to be there for them."

He also visited men's groups, where he met retired pastors who became volunteers. And he expanded his search to a wide range of volunteers, including Mormons, Muslims and Buddhists, who could administer to the spiritual needs of patients who shared their religious beliefs. Joe has also done recruiting at CRA's Phoenix/Valley of the Sun Chapter, where he is a member.

One of his most successful recruits was Terry Gott, who currently serves as head of the hospital's spiritual care department.

"Joe recruited me several years ago to volunteer as a chaplain when my daughter was a patient at Banner Gateway," says Terry. "Today, I am privileged to be the full-time head of the spiritual care department that is still being impacted by Joe's tireless hours of service."

The hospital complex now includes the MD Anderson Cancer Center, one of the busiest cancer centers in the Southwest U.S., and Joe's ability to recruit and train volunteers has kept pace with the hospital's growth. And though he required cancer surgery, Joe has never slacked off in providing spiritual care.

"I'm now supposed to be a part-time employee, but I still put in more than 40 hours a week," says Joe, who continues to serve as volunteer chaplain coordinator. "I'm not about to retire – not when people need me."

Benefits Corner By Al Horan, Chair, CRA Benefits Committee

Post-65 Retirees - 2017 Changes in Health Coverage

As Mike Elgie points out in his letter, if you haven't already done so, post-65 retirees need to register with OneExchange and set up an appointment with a Benefits Advisor. The Benefits Advisor will do a search and work with you to select medical and drug coverage for 2017. Remember, after December 31 Chevron's Medical Plans for post-65 retirees and survivors will cease to exist! There is no automatic rollover to new coverage! If retirees and survivors do not purchase Medical Coverage through OneExchange, they will lose Chevron's contribution and they will not have Medical Coverage on January 1, 2017. (For more information please see pages 42-48 of the



Al Horan, Benefits

2017 "Open Enrollment is Here" booklet which was mailed to you by Chevron in early October. The booklet provides information about select opportunities, "enrollment milestones, in which to enroll in the future. Please phone the Chevron HR Service Center if you have questions about retiree health care eligibility or enrollment milestones. Their phone number is 1-888-825-5247 and their hours are Monday through Friday from 6AM to 5PM, Pacific Time.)

In preparation for your appointment to enroll in health care coverage for 2017, please read the 2017 "Enrollment Guide" that was mailed to you by OneExchange in early October. This is especially important for anyone who was unable to attend an OneExchange Informational Meeting in September/October or who was unable to view the OneExchange presentation that was available online. In addition, when working with the Benefits Advisor it's important that you share pertinent information with them so that they can find the best medical coverage and prescription drug coverage that meet your needs. Besides providing background information about your medical providers and your prescription drugs, you should also consider sharing information about any medical treatment or procedure you are expected to have in 2017 and the overall level of your health. With this information the Benefits Advisor will be able to recommend medical and drug coverages that best meet your immediate and long-term needs. The more information you provide the better the results will be.

When deciding what type of coverage makes the most sense for you, you should remember that typically the lower the premium is the more restrictive will be the coverage. Medicare Advantage Plans usually generate the lowest premiums, but, in the case of a HMO, you must use their medical providers otherwise there is no coverage. On the other hand, a PPO version of an Advantage Plan provides more flexibility. If you use providers that belong to their network, you typically pay less than using a provider outside of the network. These Plans also usually include Prescription Drug Coverage. The coverage and premiums can vary by insurance carrier/provider organization. If there is a match to your current medical providers, a Benefits Advisor may suggest that you consider joining a Medicare Advantage PPO Plan.

On the other hand Medigap Plans offer the most freedom of choice of medical providers but they typically cost the most. Also, these Plans do not include Prescription Drug Coverage. Therefore, you will need to purchase a separate Prescription Drug Plan. The combination of a Medigap Plan and a Prescription Drug Plan come the closest to duplicating the current Chevron medical coverage provided by the Chevron Medicare Plus Plan, the Senior Care Plan and the Standard Plan. It is my understanding that Benefits Advisors at One Exchange will typically recommend that retirees consider joining a Medigap Plan F or Medigap Plan N if they were previously covered by a former employer's medical plan, similar to the three Chevron Plans mentioned above. Medigap Plan F covers in full all deductibles, copayments, etc. that are the retiree's responsibility under Medicare Part A and Part B. The retiree's only responsibility is to pay the Plan's premium. (This is generally the most expensive Plan.) In the case of Medigap Plan N the retiree is responsible for the Medicare Part B deductible, copayments for office visits, copayments for emergency room visits, and excess provider charges that are permitted by law. The premiums are generally less than Medigap Plan F. The premiums for these Plans are determined by community rating method, an issue age rating method, or an attained age rating method. Depending upon the age of the retiree when the Plan is purchased the community method or the issue age method can be the least costly method over a long period. On the other hand the attained age method can be the most costly method over a long time. AARP – United Healthcare has the only community rated plans that I'm aware of. Few plans are issue age rated. Most plans are attained age rated.

To help understand the rating methods and the long term implications of such, I prepared the following summary:

- Community Rated Plan: Generally the same premium is charged to everyone who has the Medigap policy, regardless of age or gender. Premiums may increase because of inflation and other factors like usage.
- **Issue Age Rated Plan:** The premium is based on the age of the policyholder when the Medigap policy is purchased. The premium may increase because of inflation and other factors like usage.
- Attained Age Rated Plan: The premium for this Medigap policy is based on the age of the
 policyholder each year or every few years. The premium increases because of age, inflation
 and other factors like usage.

As mentioned, if you elect to join a Medigap Plan you will need to purchase separate Prescription Drug Coverage. (Generally, Medicare Advantage Plans include prescription drug coverage.) In order to search for Prescription Drug Coverage it will be necessary to make the Benefits Advisor aware of prescription medications you are taking. Under Government regulations a provider of drug coverage must offer at least two medications for each medical condition. However, it's possible that the drugs offered may not match the prescription drugs you are taking. Also, unlike the Chevron Medical Plans you will not have partial drug coverage if you are one of the 25% of individuals who go into the Coverage Gap ("Donut Hole"). However, if you are effected by the Donut Hole you should ask your Benefits Advisor to price out the cost of Prescription Drug Coverage with enhanced coverage while in the Coverage Gap. (Please note, if you go into Stage 4 – Catastrophic Prescription Drug Coverage Chevron has arranged for supplemental coverage.) The premium cost of Prescription Drug Coverage is competitively priced based on covered medications and whether there is enhanced coverage.

If you are presently covered by a Chevron Medical Plan, through OneExchange you are guaranteed the issuance of medical and drug coverage irrespective of the condition of your health. After the initial enrollment for 2017 health coverage, you will be permitted to freely change Medicare Advantage Coverage and Prescription Drug Coverage during future open enrollment periods generally irrespective of the condition of your health. However, with respect to Medigap Plans, insurers will generally require a statement of health. Some insurers have more stringent underwriting

requirements than other carriers. Therefore, it's important to make your selection of coverage carefully since most individuals do not change their Medigap coverage.

If you are presently a member of a Chevron Medical Plan, you will not be faced with a pre-existing condition limitation. However, if in the future you should change your medical coverage an insurance carrier could impose a pre-existing condition limitation which can last up to six months. Also, if a medical procedure is deferred until 2017, it's possible that the new carrier may make the medical provider refile documentation to justify the procedure. Where possible, it may be less involved to take care of any pressing medical procedure before the end of 2016. Likewise, I would suggest ordering your prescription medications before the end of the year since there could be a slight delay in effecting your new Prescription Drug Coverage. Also, you will need new prescriptions for your new prescription drug provider.

If you are presently a member of Kaiser through Chevron and you elect to enroll in a Kaiser Plan through OneExchange, you will need to provide OneExchange with your Kaiser provider/PCP name. The PCP number and the Kaiser medical number are not required to complete the application.

Finally, just a reminder that in the future you will advance the premiums for your new medical and drug coverage monthly and after the insurance carriers verify receipt of your premium to OneExchange, OneExchange will deposit Chevron's monthly contribution into your Health Reimbursement Arrangement (HRA) Account. For more information about HRAs please see the "Chevron Post-65 Retiree Health Care HRA Quick Reference Guide" that was mailed to you by OneExchange in early October.

Needless to say, this new arrangement is far more complicated and requires more involvement by retirees than the past Chevron Medical Coverage. Federal regulations require that personal information be repeated for each plan you enroll in. You will also need to listen to recorded messages for the plans in which you enroll. My suggestion is to remain calm, focused and engaged with the Benefits Advisor so that your objectives are met. As I mentioned in the beginning of this column, you must take action to secure your Medical and Prescription Drug Coverages now for 2017 otherwise you will not have coverage on January 1, 2017! If you haven't already phoned OneExchange, you must take immediate action by phoning them at 1-844-266-1392 to secure Medical and Prescription Drug Coverage for 2017.

Finally, Chevron Dental and Vision Coverages will cease as of December 31, 2016. However, CRA Dental Coverage will continue to be available through MetLife. Anyone who currently has Chevron Dental Coverage can take up new coverage through OneExchange or through CRA. OneExchange is also making available Vision Coverage which is offered through VSP.

Pre-65 Retirees – 2017 Changes in Health Coverage

As you know, Open Enrollment for pre-65 eligible retirees and their eligible dependents will run from October 17 through October 28, 2016. If you did not receive your Open Enrollment package, you should contact the Chevron HR Service Center at 1-888-825-5247 between the hours of 6AM and 5PM, Pacific Time, Monday through Friday.

If you are currently a member of a Chevron Medical Plan, your participation will continue in the same plan you elected for 2016, unless you are presently a member of Option 1 in which case you will automatically be enrolled in the Medical PPO Plan (formerly Option 2). If you are currently participating in Option 2, you will automatically be reenrolled as a member of the Medical PPO Plan. If you are currently participating in the High Deductible Health Plan (HDHP), you will automatically be reenrolled in the same Plan for 2017. Also, Chevron is introducing a new plan, the High Deductible

Plan Basic (HDHP Basis) which provides catastrophic coverage. If you wish to enroll in the HDHP Basic, you will need to take action between October 17 and October 28. (If you enroll in the HDHP or the HDHP Basic, you may be eligible to enroll in and contribute to a Health Savings Account (HSA)). If you are a participant of a HMO Plan, you will be automatically be reenrolled, provided the plan will continue to be offered in 2017. Please remember you and your pre-65 dependents must be enrolled in the same medical plan as you.

Starting with 2017 Anthem Blue Cross will replace United Healthcare as the administrator of the Medical PPO Plan, the HDHP and the HDHP Basic. Also all existing Chevron Dental Plans will be replaced by Delta Dental or DeltaCare USA. Prescription drug coverage will continue to be administered by Express Scripts and Vision Program will continue to be administered by VSP Vision Care.

If you are not currently enrolled in a Chevron Medical Plan and you are eligible to enroll, you will have a one-time option to enroll. If you do not take action to enroll in a Chevron Medical Plan or health coverage offered through OneExchange, you will forever forfeit your right to enroll at a later date! (For more information please see pages 42-48 of the 2017 "Open Enrollment is Here" booklet which was mailed to you by Chevron in early October. The booklet provides information about select opportunities, "enrollment milestones, in which to enroll in the future. Please phone the Chevron HR Service Center if you have questions about retiree health care eligibility or enrollment milestones. Their phone number is 1-888-825-5247 and their hours are Monday through Friday from 6AM to 5PM, Pacific Time.)

Tips and Helpful Information

Hospital Stay – Observation Status

You will probably recall that in earlier issues of the Benefits Corner I wrote about hospitals holding patients in emergency rooms for extended periods without admitting them as inpatients. As a result patients who required the care of skilled nursing facilities following a hospital stay were denied coverage under Medicare Part A because they did not satisfy the prerequisite of a three day inpatient hospital stay before being admitted to a skilled nursing facility for post-acute care. This is now changing. Hospitals are required to inform patients who are hospitalized for more than 24 hours that they are in observation status. No later than 36 hours after a patient begins to receive observation services, the patient must be informed, both orally and in writing, of their observation status. The written notice must explain that the individual is not an inpatient, the reasons why they are not an inpatient, and the implications of such for both the hospital and the patient. (Source: Center for Medicare Advocacy)

Sepsis – a Leading Cause of Death

Sepsis is a leading cause of death but it's little known. It is a life-threatening condition which is triggered by an infection that quickly spirals out of control. Typically sepsis effects people who are over age 65.

Sepsis develops when the body mounts an overwhelming attack against an infection that can cause inflammation in the entire body. When this happens, the body undergoes many changes, including blood clots and leaky blood vessels that impede blood flow to the organs. Blood pressure drops, multiple organs can fail, the heart is affected and death can result.

Sepsis appears to be rising. Between 2000 and 2008 the number of cases of sepsis doubled; and hospitals listed sepsis as the primary illness. The contributing factors to its increase are an aging population, an increase in antibiotic resistance, and better diagnosis. Sepsis is a contributing factor in up to 50% of hospital deaths.

The symptoms of sepsis are chills or fever, extreme pain or discomfort, clammy or sweaty skin, confusion or discrientation, shortness of breath and a rapid heart rate. Also, if blood pressure drops and chokes off blood supply to the organs, a person can go into sepsis shock. For every hour without antibiotics, the probability of dying goes up 8%. Anyone suspected of having sepsis should immediately go to a hospital emergency room.

A study by the CDC found that sepsis was most often associated with lung, urinary tract, skin and gut or intestinal infections and many sepsis patients had visited a doctor or been in a health care setting before developing sepsis. The CDC is urging health care providers to suspect sepsis if the underlying symptoms are present, and to act swiftly in treating the patient. The agency is also emphasizing prevention through better management of chronic diseases, vaccinations and antibiotics. (Source: New York Times)

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Encore In Memoriam: April-June 2016

As reported by Chevron during this period

Amoseas

Eichhorn, James Richard., Ret. 1992 Messick, W W., Ret. 1986 Rennie, Kathleen O., Ret. 1995

Caltex

Allen, Jon L., Ret. 1988 Delahunty, Paul F., Ret. 1988 Scott, Thomas Pringle., Ret. 1984 Wood, Herbert C., Ret. 1993

Chevron

Adcox, W R., Ret. 1990 Anderson, John B., Ret. 1973 Anderson, John G., Ret. 1990 Anderson, Roger L., Ret. 1991 Andrade, Henry W., Ret. 1989 Archer, R D., Ret. 1985 Atkins, Lanny C., Ret. 1995 Baba, Hiroko, Ret. 1989 Barry, Edwin A., Ret. 1999 Baughn, William H., Ret. 1986 Bechtold, Joseph D., Ret. 1990 Begley, Elmer C., Ret. 1992

Birsa, David S., Ret. 2004 Bone, Don L., Ret. 1986 Bonnell, John L., Ret. 1985 Bruce, F M., Ret. 1986 Cannatella, Joseph L., Ret. 1986 Caprio, Elaine J., Ret. 1994 Casebeer, Richard R., Ret. 1986 Caudel, Timothy A., Ret. 2010 Christianson, Denis A., Ret. 2008 Conatser, Earnest W., Ret. 1987 Contreras, Lucy, Ret. 1986 Cook, Edward T., Ret. 1982 Croft, A B., Ret. 1998 Cross, Donald D., Ret. 1990 Davidian, H, Ret. 1982 Davidson, AT., Ret. 1991 Denison, Gordon C., Ret. 1992 Eaton, Terrence J., Ret. 2010 Ellenburg, Charles B., Ret. 1987 Ellis, Thomas M., Ret. 1978 Engle, Esther L., Ret. 1992 Fedynyshyn, Joseph, Ret. 1991 Figel, Michael R., Ret. 1993 Forood, R F., Ret. 1985

Forster, Douglas J., Ret. 1977 Foster, Michael E., Ret. 2012 Galloway, R, Ret. 1983 Gambino, Joseph H., Ret. 1988 Gee, Victor, Ret. 1999 Glasgow, Kenneth L., Ret. 1979 Grant, Lois B., Ret. 1991 Gray, Joyce E., Ret. 1992 Green, Jack E., Ret. 1973 Green, Vaden B., Ret. 1981 Gregory, Paul E., Ret. 1986 Gumm, W A., Ret. 1986 Haslam, Agnes M., Ret. 1986 Hayduk, S, Ret. 1982 Hayes, William D., Ret. 1977 Hedrick, Karen R., Ret. 2003 Hewitt, Raymond D., Ret. 1991 Hogle, C K., Ret. 1985 Holmes, B C., Ret. 1984 Jackson, J H., Ret. 1992 Jennings, Arnold H., Ret. 1981 Johnson, Harold C., Ret. 1975 Johnson, Melvyn B., Ret. 1994 Joyner, Martha J., Ret. 2008

Jumonville, H N., Ret. 1983 Kamakeeaina, Edward K., Ret. 1997 Kealoha, James, Ret. 1990 Kehoe, William A., Ret. 1975 Kelleher, Lee F., Ret. 1995 Knight, Theron D., Ret. 1994 Kyle, Vince P., Ret. 2011 Lacrampe, Emile L., Ret. 1984 Ladnier, Aubrey J., Ret. 1992 Landry, Simon M., Ret. 1979 Laney, Johnny D., Ret. 1986 Lee, Arnold T., Ret. 1992 Lee, Ralph M., Ret. 1985 Lehr, Robert W., Ret. 2008 Lewis, Darryl W., Ret. 2015 Linder, Lois J., Ret. 1996 Longnecker, L C., Ret. 1982 Lusche, Robert E., Ret. 1986 Magnuson, H L., Ret. 1991 Maichele, Max E., Ret. 1986 Mallett, Beverly A., Ret. 1987 Manahan, Carl A., Ret. 1986 Mansfield, Robert G., Ret. 1986 Matherne, Malcolm, Ret. 1986 McFadden, Raymond D., Ret. 1986 McKindley, Roosevelt, Ret. 1992 McLean, Duncan, Ret. 1986 Menechios, CT., Ret. 1990 Minogue, H M., Ret. 1982 Mishler, Wilbur B., Ret. 1984 Moore, Herman O., Ret. 1986 Moore, Marie M., Ret. 1973 Nakano, K, Ret. 1990 Neumann, Bodo C., Ret. 1997 Newby, F J., Ret. 1986 Neyhouse, Robert L., Ret. 1992 Olson, Richard L., Ret. 1990 O'Neill, Donald M., Ret. 1985 Palmer, Robert A., Ret. 2001 Penman, Richard W., Ret. 1992 Rasmussen, Dave, Ret. 1982 Rayburn, James L., Ret. 1978 Rector, R H., Ret. 1983 Reyes, Josephine L., Ret. 2003 Richards, William D., Ret. 2013 Roeder, Curtis E., Ret. 1995 Roof, John O., Ret. 1985 Santiago, Angel L.., Ret. 1992 Seebold, James G., Ret. 2003 Sept, Donald H., Ret. 1986 Sheaffer, James, Ret. 1995 Simons, W T., Ret. 1988 Smedul, Raymond W., Ret. 1983 Smith, D R., Ret. 1986 Solberg, AB., Ret. 1985 Steele, Charley W., Ret. 1992 Steigman, Lilo, Ret. 2000 Swan, David A., Ret. 1999 Swanson, Richard W., Ret. 1988 Syme, John E., Ret. 1985 Thomas, J.E., Ret. 1992 Thomsen, Peter K., Ret. 1992 Trujillo, Victoriano, Ret. 1991 Wall, F G., Ret. 1986 Wheelock, John M., Ret. 1991 White, Forest M., Ret. 1987 Wilcox, Ronald L., Ret. 2002 Wilkins, Mary M., Ret. 1976 Wilson, Ralph E., Ret. 1977

Wilson, Vance B., Ret. 1986 Wise, John D., Ret. 1986

Getty

Ambler, Richard H., Ret. 1993 Ball, F Leroy., Ret. 1984 Brunson, James G., Ret. 1999 Casement, Wilbur E., Ret. 1983 Cole, Buddy L., Ret. 1984 Coss, Allan G., Ret. 1977 Craft, Joe K., Ret. 1984 Egloff, Sidney J., Ret. 1994 Farley, Ramsey W., Ret. 1995 Fiscus, Eddie, Ret. 1993 Gallemore, Margaret A., Ret. 1987 Glud, Stanley P., Ret. 1996 Greuel, Melvin J., Ret. 1984 Harris, James F., Ret. 1985 Hasting, Harold R., Ret. 1999 Heiser, William E., Ret. 1996 Hicks, Robert W., Ret. 1992 Hudman, Millard M., Ret. 1988 Jennings, Roy D., Ret. 1987 Kanak, Alfons L., Ret. 1989 Koenig, Andrew E., Ret. 1998 Lavelett, Dan H., Ret. 1989 Laws, Mary L., Ret. 1985 Miller, Richard B., Ret. 1984 Pennington, Robert D., Ret. 1994 Pierce, Marion W., Ret. 1993 Raybourn, George W., Ret. 1978 Reeves, Douglas W., Ret. 1999 Sample, John C., Ret. 1984 Scheck, Roger L., Ret. 2014 Stewart, Malcolm B., Ret. 1987 Tawadrous, Safwat D., Ret. 1995 Tippit, Gwendolyn S., Ret. 1999 Unterseher, Leroy L., Ret. 1998 Wheat, Nancy B., Ret. 1994 Wong, Helen M., Ret. 1985 Wright, Marion H., Ret. 1985

Gulf

Addison, Silas, Ret. 1981 Balsmeyer, Kent C., Ret. 1982 Barnes, Bobby N., Ret. 1986 Barnette, Everette W., Ret. 1985 Barton, Taylor J., Ret. 1976 Biss, Matthew A., Ret. 1982 Bretthauer, Henry H., Ret. 2005 Brewer, Frank J., Ret. 1986 Burgess, Jack D., Ret. 1992 Butler, Gladys L., Ret. 1975 Button, Robert D., Ret. 1996 Cain, Ralph W., Ret. 1978 Cericola, Anthony J., Ret. 1981 Clawson, Scott M., Ret. 1994 Collis, Jerry M., Ret. 1996 Compton, Jack S., Ret. 1978 Daugherty, Benny R., Ret. 1999 Deimer, David M., Ret. 1992 Dominique, Burt P., Ret. 1985 Donnigan, Robert G., Ret. 1983 Downie, Roderick L., Ret. 1992 Fertitta, Valentine J., Ret. 1986 Gambertoglio, Louis C., Ret. 1992 Gamblin, David O., Ret. 1997 Garrett, Johnnie M., Ret. 1998 Genuardi, Anthony, Ret. 1986

Gibbs, Jack M., Ret. 1985 Gray, Ira G., Ret. 1986 Hall, Warren W., Ret. 1983 Herrell, William R., Ret. 1983 Hightower, O V., Ret. 1997 Hughes, Leslie H., Ret. 1983 Ipoletta, James V., Ret. 1986 Jarecki, Elsie L., Ret. 1977 Kee, Clarence, Ret. 1994 Keith, David D., Ret. 1995 Kelly, Marie T., Ret. 1985 Kummer, Marjorie A., Ret. 1986 Litchult, Willard W., Ret. 1982 Mahaffey, Leonard A., Ret. 1977 Mansfield, Robert F., Ret. 1985 McGowan, Charles G., Ret. 1990 Mingee, James C., Ret. 1983 Moore, William E., Ret. 1990 Moyer, William F., Ret. 1981 Mulkey, Albert E., Ret. 1982 Mumford, Clarence S., Ret. 1982 Novotny, Paul V., Ret. 1987 Pace, Frank G., Ret. 1992 Padgett, Marion J., Ret. 1985 Petty, George L., Ret. 1986 Piletere, Henry J., Ret. 1984 Rhule, Robert Z., Ret. 1983 Ropelato, Edwin C., Ret. 2003 Ruf, Thomas E., Ret. 2001 Schlabach, Edgar J., Ret. 1983 Shaw, Perry L., Ret. 1992 Smiesko, Andrew, Ret. 1985 Smith, Elsie, Ret. 1986 Smith, Thomas W., Ret. 1981 Spidell, Sheldon K., Ret. 1990 Staff, Robert D., Ret. 1983 Stainback, Floyd L., Ret. 1988 Staley, Thomas H., Ret. 1985 Stevens, Herbert M., Ret. 1995 Stroud, Garner R., Ret. 1985 Suminski, Jeanne E., Ret. 2013 Talley, Robert J., Ret. 1992 Vogel, Raymond F., Ret. 1980 Volpi, Marius M., Ret. 1978 Watson, Leon E., Ret. 1983 Whitaker, William V., Ret. 1983 White, William D., Ret. 1999 Whitley, Jack D., Ret. 2004 Wilson, Willie D., Ret. 1989 Wise, Donald E., Ret. 1983 Wood, David H., Ret. 2001

MolyCorp

(No deaths reported)

Plexco

(No deaths reported)

Tenneco

(No deaths reported)

Texaco

Anderson, Harry B., Ret. 1985 Ashmore, Billie J., Ret. 1993 Attermeier, Fredric J., Ret. 1999 Austin, Carl E., Ret. 1985 Babin, James M., Ret. 1989 Babitzke, Ernest H., Ret. 1991 Bankston-Sheriff, Daisy E., Ret. 1999

Barnett, Jerry C., Ret. 1987 Becker, Leonard P., Ret. 1987 Berard, Russell J., Ret. 1987 Bergeron, Hartley J., Ret. 2002 Bergeron, John Clay., Ret. 2007 Berlin, Sherrill W., Ret. 1989 Bertrand, Bettye B., Ret. 1986 Bialo, Richard V., Ret. 1987 Bourg, John C., Ret. 1990 Broussard, Milton M., Ret. 1980 Brown, Robert G., Ret. 1984 Buinicky, Ernest P., Ret. 1982 Byfield, Lloyd G.., Ret. 1991 Byrd, Richard E., Ret. 1990 Caves, Darrell W., Ret. 1982 Chambers, William H., Ret. 1983 Choppin, Hazel M., Ret. 1986 Christensen, C Roy., Ret. 1998 Clifton, Charles E., Ret. 1982 Coffey, Joseph H., Ret. 1986 Collins, James W., Ret. 1993 Consilvio, Adorino A., Ret. 1978 Crockett, Leslie D., Ret. 1986 Denzlinger, Don M., Ret. 1985 Deslatte, Louis J., Ret. 1982 Desormeaux, Leo T., Ret. 1981 Dillard, Fay K., Ret. 1987 Dubberly, John L., Ret. 1982 Duhon, Larry L., Ret. 1989 Dushinske, William C., Ret. 1986 Foltz, George A., Ret. 1982 Fritts, Herbert R., Ret. 1982 Gard, Alton E., Ret. 1983 Garrison, Horace P., Ret. 1991 Gary, Allen J., Ret. 1989 Gill, Simon K., Ret. 2003 Harding, Robert, Ret. 2016 Hart, Richard H., Ret. 1994 Head, Mary K., Ret. 1999 Hemphill, William T., Ret. 1983 Henson, Larence E., Ret. 1989 Herring, Milton P., Ret. 1986 Hill, Thomas L., Ret. 1982 Hjort, Ivan E., Ret. 1989 Hodge, William J., Ret. 1986 Hopkins, S A., Ret. 1986 Hymer, Thomas H., Ret. 1991 Jaffee, Stephen H., Ret. 1998 Jambon, Joseph J., Ret. 1986 Jennings, Everett M., Ret. 1996 Jennings, James, Ret. 1984 Johnson, David W., Ret. 1985 Johnson, George M., Ret. 1988 Jones, James L., Ret. 1984 Kendall, Robert L., Ret. 1982 Kennedy, James Allen., Ret. 1999 Kerstukos, Joseph B., Ret. 1979 King, Ben H., Ret. 1984 King, Willie E., Ret. 1987 Lee, Raymond, Ret. 1985 Lemoine, Vincent A., Ret. 1989 Lewallen, Abner D., Ret. 1982 Linder, Lawrence W., Ret. 2002 Linn, Donald E., Ret. 1994 Livesay, Robert B., Ret. 1987 Loyacano, Phillip S., Ret. 1989 Martin, John N., Ret. 1982 Maslanka, Stanley C., Ret. 1988 McCormick, Patrick J., Ret. 1991

McCreary, Harry E., Ret. 1989 McCulloch, Charles D., Ret. 1983 McKinney, Edward A., Ret. 1981 Meaker, Harold N., Ret. 1990 Mendez, Carlos R., Ret. 1995 Merritt, William T., Ret. 1992 Messemer, Eleanor B., Ret. 1994 Mitchell, Kenneth C., Ret. 1982 Moloney, Ursula, Ret. 1971 Moore, Lester V., Ret. 1983 Nichols, William E., Ret. 1989 Norbom, Martin E., Ret. 1986 O'Donnell, James V., Ret. 1985 Pankau, Leon J., Ret. 1986 Parker, Percy E., Ret. 1998 Patrick, Olga, Ret. 1979 Payton, Howard F., Ret. 1993 Penry, Alvin R., Ret. 1988 Perkins, Ottis, Ret. 1982 Pilcher, Dan I., Ret. 1975 Pinney, Osborn J., Ret. 1982 Randazzo, Thomas M., Ret. 1983 Reagan, Louis V., Ret. 1986 Reid, Numa L., Ret. 1977 Reitz, Harold C., Ret. 1985 Rendon, Domingo, Ret. 2015 Rice, Donald W., Ret. 1989 Rosser, Milton D., Ret. 1987 Roth, Floyd W., Ret. 1981 Roy, Charley, Ret. 1988 Schroeder, Victor C., Ret. 1974 Seagraves, Milton D., Ret. 1989 Simmons, Theodore W., Ret. 1998 Sipes, Theron D., Ret. 1996 Spice, Robert J., Ret. 1982 Spottswood, Richard M., Ret. 1990 Stallard, Francis L., Ret. 1985 Stanley, CE., Ret. 1984 Stetler, Alan G., Ret. 2002 Subia, Felipe, Ret. 1982 Tate, Clyde D., Ret. 1986 Tatum, Bobby J., Ret. 1999 Teachout, Morris W., Ret. 1991 Templeton, Billie J., Ret. 1983 Theriot, Willie F., Ret. 1967 Thomson, Donald J., Ret. 1983 Thunem, Vernon L., Ret. 1987 Truett, John D., Ret. 1998 Viator, Jerry J., Ret. 1999 Walker, William T., Ret. 1989 Waterston, James, Ret. 1987 Wessman, Joseph H., Ret. 1983 Wilder, Hubert T., Ret. 1989 Williams, Velma B., Ret. 1983 Wright, Frank W., Ret. 1987

Unknown

Nielsen, K H., Ret. 2003

Unocal

Agar, Iris K., Ret. 1995 Akaka, Mark K., Ret. 1997 Alvarez, Ruth, Ret. 1987 Anderson, Dennis W., Ret. 1999 Arnett, Claire B., Ret. 1984 Bellamy, Robert B., Ret. 1986 Bollman, Shirley M., Ret. 1992 Burman, Maurice E., Ret. 1992 Burns, Kenneth M., Ret. 2010

Butt, Kathe R., Ret. 1992 Cochran, William L., Ret. 1987 Cook, Richard E., Ret. 1986 Cooperrider, Robert I., Ret. 1970 Dake, Sandra M., Ret. 1999 Davis, Lyle R., Ret. 1999 Dryselt, John Alan., Ret. 1986 Eaton, Grover E., Ret. 1995 Foret, Wilson P., Ret. 1981 Freeman, Billy Lee., Ret. 1986 Gault, Chester R., Ret. 1968 Golden, Allen, Ret. 1993 Haden, Joan I., Ret. 1989 Hall, Reedy D., Ret. 1996 Ham, Norma V., Ret. 1987 Hedley, Robert O., Ret. 1990 Higa, Kenneth, Ret. 1997 Hines, Clyde W., Ret. 1995 Horaist, Alfred B., Ret. 1989 Iona, Abraham P., Ret. 1983 Johnson, Michael W., Ret. 1981 Jones, David L., Ret. 1985 Kato, George H., Ret. 1969 Kelley, Arnold E., Ret. 1985 Kluewer, Vivian L., Ret. 1972 Knight, Maurine H., Ret. 1984 Lamprecht, Bettye J., Ret. 1992 Lujan, Dalio E., Ret. 2002 Marsh, Glenn A., Ret. 1986 McCarthy, Valerye H., Ret. 1966 Miller, Stanley A., Ret. 1989 Milton, Hilda H., Ret. 1965 Minette, Thomas N., Ret. 1990 Morel, Helen E., Ret. 1997 Nelson, Herman E., Ret. 1964 Nye, Stephen R., Ret. 1985 Orvis, William R., Ret. 1980 Padilla, Lawrence A., Ret. 1992 Pavlovich, Milan, Ret. 1995 Potts, Harold W., Ret. 1984 Pownall, John R., Ret. 1984 Ramm, Helen V., Ret. 1983 Redin, Tom W., Ret. 1986 Reineman, David L., Ret. 1986 Reynolds, Don W., Ret. 1992 Roberts, Dennis L., Ret. 1990 Robinson, Donald L., Ret. 1986 Sams, Eddie L., Ret. 1977 Schreiber, Stephen J., Ret. 2008 Scoggin, Hollis A., Ret. 1966 Sicuro, Joseph N., Ret. 1992 Simons, Virginia A., Ret. 1996 Smith, Wyborn D., Ret. 1978 Spradlin, Billy G., Ret. 1986 Stadheim, Jeffrey K., Ret. 2000 Stagg, Colin, Ret. 1986 Tomala, Chester W., Ret. 1992 Venable, Charles W., Ret. 1980 Wells, Larry J., Ret. 1988 Wilson, Gene V., Ret. 1989 Winchester, Mary E., Ret. 1982