



WHEN COVERAGE ENDS

**Medical and Vision Care Programs
for Pre-Medicare Retirees**

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WHEN COVERAGE ENDS

Medical and Vision Care Programs for Pre-Medicare Retirees

BNSF Group Benefits Plan

Effective January 1, 2014

This chapter describes when retiree coverage ends under the Medical and Vision Care programs for pre-Medicare retirees, as well as how coverage may continue after your [BNSF-sponsored coverage ends](#).

For You and Your Dependents

Coverage as a retiree for you and your covered dependents under the Medical and Vision Care programs for pre-Medicare retirees of the BNSF Group Benefits Plan will end on the first to occur of the following:

- ▶ The date any Medical or Vision Care program or Plan under the BNSF Group Benefits Plan ends;
- ▶ The date you and/or your dependent(s) are no longer eligible for coverage (including because you or a dependent becomes eligible for Medicare);
- ▶ The first day of the period for which you and/or your dependent(s) do not make the required contributions; or
- ▶ The date any insurance company cancels or otherwise does not renew the policy and [BNSF](#) does not purchase replacement coverage under which you and/or your dependent(s) would qualify.

Defined terms: For the meaning of terms in [blue](#), click to see the *Defined Terms* section.



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For Your Dependents

Dependents will lose their retiree coverage on the first to occur of the following:

- ▶ The date you (the retiree) are no longer eligible for any reason other than your death; or
- ▶ The date the dependent no longer meets a program's eligibility rules for dependent coverage.

For details of when a child loses eligibility and coverage ends, see *When Coverage of a Child Ends*, in the *Dependents* section of the chapter of this SPD titled *Who Is Eligible and How to Enroll – Medical and Vision Care Programs for Pre-Medicare Retirees*.

Continued Coverage for Dependents if You Die

If you have eligible dependents covered under the Medical and/or Vision Care programs for pre-Medicare retirees at the time of your death, they may continue coverage as long as they continue to meet eligibility requirements and pay the appropriate premiums.

Continuing Health Care Coverage Under COBRA

If a covered dependent loses coverage due to a loss of dependent eligibility, he or she may have a right to [COBRA](#) continuation coverage under COBRA (the Consolidated Omnibus Budget Reconciliation Act of 1985, as amended). For more information, see the chapter of this SPD titled *Continuing Health Care Coverage Under COBRA – Medical and Vision Care Programs for Pre-Medicare Retirees*.

WHOM TO CALL ABOUT YOUR BENEFITS



For questions about eligibility for benefits, including continuation of coverage opportunities when your coverage as a retiree or dependent ends, call the BNSF Benefits Center at 877-451-2363.

DEFINED TERMS

About These Terms

The following definitions of certain words and phrases will help you understand the provisions to which the definitions apply.

Some definitions apply in a special way to specific benefits or provisions. So, if a term that is defined in another chapter of this SPD also appears as a defined term listed here, the definition in the other chapter will apply to that specific chapter rather than the definition below.

BNSF, company, employer – Burlington Northern Santa Fe, LLC, 2500 Lou Menk Drive, Fort Worth, TX 76131, and subsidiary companies.

Claims and Account Administrators – For identification of Claims and Account Administrators, see the chapter of this SPD titled *Administrative Information – Medical and Vision Care Programs for Pre-Medicare Retirees*.

COBRA – Consolidated Omnibus Budget Reconciliation Act of 1985, as amended.

COBRA Administrator – For identification of COBRA Administrators, see the chapter of this SPD titled *Administrative Information – Medical and Vision Care Programs for Pre-Medicare Retirees*.



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