



OVERVIEW OF MEDICAL OPTIONS AND CASH ACCOUNTS FOR PRE-MEDICARE RETIREES

CONTENTS

MEDICAL OPTIONS OVERVIEW	4
Your Medical Program Options	4
CASH ACCOUNTS OVERVIEW.....	5
Health Savings Account (HSA)	5
About the HSA	5
How You May Use the Account	6
Paying Expenses from the Account	6
Proof of Expense.....	6
Qualifying Dependents and Age Limits.....	6
Eligible Expense Details.....	6
When You Retire.....	6
Balances Remaining in a Limited Purpose Health Reimbursement Account (Limited Purpose HRA)	7
Balances Remaining in a General Purpose Health Reimbursement Account (General Purpose HRA)	8
WHO TO CALL ABOUT YOUR BENEFITS.....	10
DEFINED TERMS	11

OVERVIEW OF MEDICAL OPTIONS AND CASH ACCOUNTS

Effective Jan. 1, 2021

MEDICAL OPTIONS OVERVIEW

You have the opportunity to make several important choices about your Medical Program coverage when you first enroll and during each annual enrollment period.

You may select Option 1 or Option 2 for coverage. Both offer the Blue Cross Blue Shield (BCBS) network. For coverage details, see the *Medical Program for Pre-Medicare Retirees* chapter of this Summary Plan Description (SPD). If you have questions about what is covered, call BCBS at 888-399-5945.

Note that Internal Revenue Service (IRS) “dual coverage” rules do not allow you – the retiree – to participate simultaneously in medical coverage that includes making contributions to an HSA (such as the BNSF Medical Program for Pre-Medicare Retirees) and another plan that pays for medical expenses, unless the other plan also has an HSA.¹ For more information about dual coverage rules, see *Important Rules and Administrative Information in Brief* in the chapter of this SPD titled *Medical Program for Pre-Medicare Retirees*.

Your Medical Program Options

1 WHO TO COVER	You Only	You + Spouse	You + Child(ren)	You + Family
2 CHOICE OF TWO DEDUCTIBLES	Option 1 ▶ \$1,500 deductible for you only ▶ \$3,000 deductible for you + family		Option 2 ▶ \$3,000 deductible for you only ▶ \$6,000 deductible for you + family	
3 CHOICE OF HSA CONTRIBUTIONS ¹ <small>(How much you would like to contribute to your tax-advantaged HSA)</small>	You choose the amount of tax-advantaged contributions you would like to make to your Health Savings Account to use for current and future health care costs.			

¹ Due to this restriction, BNSF Medical Program participants who are also enrolled in a government-sponsored health plan such as TRICARE or VA may not participate in an HSA.

CASH ACCOUNTS OVERVIEW

Following is a summary of how the accounts work and where to get information about expenses eligible for reimbursement from the accounts, as determined by the IRS.

Health Savings Account (HSA)

An HSA is available to most participants in the Medical Program for Pre-Medicare Retirees.

About the HSA Because the Medical Program qualifies as a high deductible health plan under current Internal Revenue Service (IRS) rules, you may choose to make tax-deductible contributions to an HSA, up to federal annual limits. You may use the tax-free dollars in your HSA to reimburse yourself for eligible medical, prescription drug, dental, vision and hearing expenses.

In addition:

- ▶ The HSA is yours. You take your account with you even after your BNSF pre-Medicare medical coverage ends.
- ▶ Any account balance rolls over each year.
- ▶ The account earns interest and offers investment options. Check with the [HSA Account Administrator](#) for information about available options.
- ▶ The HSA is separate and apart from the BNSF Group Benefits Plan and is not an [ERISA](#) plan.
- ▶ For Medical Program claims and administrative purposes, *you are considered to be an HSA participant even if you do not set up an account with the HSA Account Administrator.*²

HSA Contribution Limits

The amount of voluntary, tax-deductible dollars you may contribute to an HSA is set by the federal government. For calendar year 2021, contribution limits are:

- ▶ You only coverage: \$3,600.
- ▶ Family coverage: \$7,200.
- ▶ Additional catch-up contributions: \$1,000.

However, you may not contribute to an HSA after reaching age 65 unless you delay enrolling in Medicare.

² Does not apply if the HSA is unavailable to you because of your enrollment in a government-sponsored health plan such as TRICARE or VA.

- How You May Use the Account**
- ▶ Use your HSA to help pay your share of eligible health care expenses (medical, prescription drug, dental, vision and hearing), including deductibles and your share of coinsurance.
 - ▶ You may use HSA money for the eligible expenses of tax dependents whether or not they are covered by BNSF benefit programs. Note the age restrictions for dependent children; see [Qualifying Dependents and Age Limits](#).
 - ▶ You may build up your HSA to pay retiree medical premiums and eligible out-of-pocket expenses after your BNSF coverage for pre-Medicare retirees ends.

- Paying Expenses from the Account**
- ▶ You may pay eligible expenses directly with a provided debit card, using tax-free dollars from your account, up to the current balance in your account.
 - ▶ You may have funds transferred from your HSA to your checking or savings account to reimburse yourself for eligible expenses.
 - ▶ If you have any BNSF Limited Purpose Health Reimbursement Account (Limited Purpose HRA) funds remaining, you will have a separate debit card from the one that accesses the balance in your HSA. (For HRA details, see [Balances Remaining in a Limited Purpose HRA](#) in this chapter.)

Proof of Expense No proof of expense is needed to use funds from your HSA. However, the IRS may ask for proof during an audit, so it is important to keep receipts and document expenses you pay through your HSA. Income taxes and IRS penalties apply if account funds are used for ineligible expenses.

- Qualifying Dependents and Age Limits** Expenses can be reimbursed from your HSA for:
- ▶ You and your spouse;
 - ▶ Your child who qualifies as your tax dependent, which generally means the child is under **age 19**, or under **age 24** if a full-time student; or
 - ▶ Anyone who qualifies as your dependent for income tax purposes (such as a parent who lives with you).

Eligible Expense Details For a list of expenses that qualify for tax-free payment or reimbursement, go to www.IRS.gov > Forms and Publications > Publication 502 and Publication 969.

When You Retire If you retired prior to Jan. 1, 2017, your HSA stayed with UMB Bank, the prior account holder. Any remaining HRA balance was transferred to HealthEquity.

If you retired on or after Jan. 1, 2017, your HRA balance was moved to and remains with HealthEquity, but your BNSF HSA moved out from under the BNSF program and became a retail account at HealthEquity (the HSA [Account Administrator](#)). Since the HSA belongs to you, the retiree, you can decide to leave it with HealthEquity or move it to another bank and continue to use the funds to reimburse yourself for qualified out-of-pocket health care expenses.

Balances Remaining in a Limited Purpose Health Reimbursement Account (Limited Purpose HRA)

A Limited Purpose HRA contains only balances left over from your prior participation in a BNSF medical option that included an HRA.

About the Limited Purpose HRA

- ▶ Any balance remaining in a BNSF Limited Purpose HRA is available for your use as long as you or an eligible dependent remains enrolled in BNSF medical coverage. Otherwise, you forfeit any balance. If you are eligible and enroll in coverage under the BNSF Medical Program for Medicare-Eligible Retirees, the account is converted to a post-Medicare HRA.
- ▶ Any account balance rolls over each year.
- ▶ You cannot make contributions to the HRA.
- ▶ The account does not earn interest or investment returns.
- ▶ HRAs are part of the Medical Program for Pre-Medicare Retirees under the BNSF Group Benefits Plan and are subject to [ERISA](#).

How You May Use the Account

- ▶ You cannot use funds from a Limited Purpose HRA to pay expenses for medical services or prescription drug expenses.
- ▶ You may use a Limited Purpose HRA to pay your share of eligible *non-medical* health care expenses, including vision, dental and orthodontia expenses. This includes such eligible expenses of tax dependents whether or not they are covered by BNSF benefit programs.

Paying Expenses from the Account

- ▶ You pay eligible expenses directly with a provided debit card or request reimbursement from the HRA [Account Administrator](#), using tax-free dollars, up to the current balance in your account.
- ▶ You will have a separate debit card for your Limited Purpose HRA from your HSA debit card. (For HSA details, see the [Health Savings Account](#) section of this chapter.)

Proof of Expense

You must provide the HRA [Account Administrator](#) proof of any expense paid through your Limited Purpose HRA. Even if you use your provided debit card to make a purchase that the merchant validates electronically, you still may be asked for proof that the expense was eligible. Be sure to keep receipts for all expenses. Failure to substantiate an expense will result in your debit card being temporarily deactivated until you provide adequate proof of the charge.

Qualifying Dependents and Age Limits

Expenses can be reimbursed for:

- ▶ You and your spouse;
- ▶ Children (natural, adopted, step, foster) under **age 26** regardless of the child's student, marital, residency or tax-dependency status; and
- ▶ Anyone who qualifies as your dependent for income tax purposes (such as a parent who lives with you).

Eligible Expense Details For a list of expenses that qualify for tax-free payment or reimbursement, go to www.IRS.gov > Forms and Publications > Publication 502 and Publication 969.

- If Your BNSF Coverage Ends**
- ▶ ***If not eligible to continue coverage under the BNSF Medical Program for Medicare-Eligible Retirees³*** – As a retiree or dependent, when your BNSF medical coverage ends, such as when you become eligible for Medicare, your Limited Purpose HRA balance will remain available to any family members who are covered under the BNSF Medical Program for Pre-Medicare Retirees.
 - ▶ ***If eligible to continue coverage under the BNSF Medical Program for Medicare-Eligible Retirees³*** – As a retiree or surviving spouse, any HRA balance will be rolled into the HRA provided under the Medical Program for Medicare-Eligible Retirees, following a 90-day claims run-out period after the calendar year has ended, as long as you choose coverage through BNSF’s approved provider. At that time, the balance will be converted to a General Purpose HRA. In the case of a covered spouse who becomes Medicare-eligible before the retiree, the HRA remains in the name of the retiree.

Balances Remaining in a General Purpose Health Reimbursement Account (General Purpose HRA)

A General Purpose HRA contains only balances left over from your prior participation in a BNSF medical option that included an HRA.

- About the General Purpose HRA**
- ▶ Any balance remaining in a BNSF General Purpose HRA is available for your use as long as you or your eligible dependent remains enrolled in BNSF medical coverage. Otherwise, you forfeit any balance. If you are eligible and enroll in coverage under the BNSF Medical Program for Medicare-Eligible Retirees, the account is converted to a post-Medicare HRA.
 - ▶ Any account balance rolls over each year.
 - ▶ You cannot make contributions to the HRA.
 - ▶ The account does not earn interest or investment returns.
 - ▶ HRAs are part of the Medical Program for Pre-Medicare Retirees under the BNSF Group Benefits Plan and are subject to [ERISA](#).
- How You May Use the Account**
- ▶ Use your General Purpose HRA to help pay your share of eligible health care expenses (medical, prescription drug, dental, vision and hearing), including deductibles and your share of coinsurance.
 - ▶ You may use General Purpose HRA money for the eligible expenses of tax dependents whether or not they are covered by BNSF benefit programs.
- Paying Expenses from the Account** You pay eligible expenses directly with a provided debit card or request reimbursement from the HRA [Account Administrator](#), using tax-free dollars from your account, up to your account’s current balance.

³ Participation in the BNSF Medical Program for Medicare-Eligible Retirees is subject to eligibility requirements.

Proof of Expense	You must provide the HRA Account Administrator proof of any expense paid through your General Purpose HRA. Even if you use your provided debit card to make a purchase that the merchant validates electronically, you still may be asked for proof that the expense was eligible. Be sure to keep receipts for all expenses. Failure to substantiate an expense will result in your debit card being temporarily deactivated until you provide adequate proof of the charge.
Qualifying Dependents and Age Limits	Expenses can be reimbursed for: <ul style="list-style-type: none"> ▶ You and your spouse; ▶ Children (natural, adopted, step, foster) under age 26 regardless of the child's student, marital, residency or tax-dependency status; or ▶ Anyone who qualifies as your dependent for income tax purposes (such as a parent who lives with you).
Eligible Expense Details	For a list of expenses that qualify for tax-free payment or reimbursement, go to www.IRS.gov > Forms and Publications > Publication 502 and Publication 969.
If Your BNSF Coverage Ends	<ul style="list-style-type: none"> ▶ <i>If not eligible to continue coverage under the BNSF Medical Program for Medicare-Eligible Retirees⁴</i> – When your BNSF medical coverage ends under this Medical Program for Pre-Medicare Retirees, such as when you become eligible for Medicare, your General Purpose HRA balance will remain available to any family members who remain covered under the Medical Program. ▶ <i>If eligible to continue coverage under the BNSF Medical Program for Medicare-Eligible Retirees⁴</i> – As a retiree or surviving spouse, any General Purpose HRA balance will be rolled into the HRA provided under the Medical Program for Medicare-Eligible Retirees, following a 90-day claims run-out period after the calendar year has ended, as long as you choose coverage through BNSF's approved provider. In the case of a covered spouse who becomes Medicare-eligible before the retiree, the HRA remains in the name of the retiree.

⁴ Participation in the BNSF Medical Program for Medicare-Eligible Retirees is subject to eligibility requirements. Please see the *Who Is Eligible and How to Enroll* chapter of this SPD for details.

WHO TO CALL ABOUT YOUR BENEFITS



For questions about eligibility for coverage or enrollment in the Medical Program, call the BNSF Benefits Center at 833-277-8051. Benefits Center representatives are available Monday through Friday, 7 a.m. to 7 p.m. Central time.

For questions about the Medical Program options, covered expenses or claims, see the respective chapters.

For questions about the HSA, General Purpose HRA or Limited Purpose HRA, eligible expenses, using the debit card or claims for reimbursement, call HealthEquity at 866-346-5800 or visit my.healthequity.com.

DEFINED TERMS

About These Terms

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

ERISA – Employee Retirement Income Security Act of 1974, as amended.

Account Administrator – The administrator for the General Purpose HRA, Limited Purpose HRA and HSA is identified in the section titled *Claims and Account Administrators for the Group Benefits Plan* in the chapter of this SPD titled *Administrative Information – Medical and Vision Care Programs for Pre-Medicare Retirees*.



Previous view: Return to your previous page by right clicking and selecting the “previous view” option.

To add the handy "previous view" button to your toolbar, open your Adobe Reader tools and select Page Navigation, then Previous View.