



YOUR RIGHTS UNDER ERISA

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

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YOUR RIGHTS UNDER ERISA

(Employee Retirement Income Security Act of 1974)

Medical and Vision Care Programs for Pre-Medicare Retirees

BNSF Group Benefits Plan

Effective January 1, 2016

As a participant in the Medical Program and/or Vision Care Program for retirees under the BNSF Group Benefits Plan for Pre-Medicare Retirees, you are entitled to certain rights and protections under the Employee Retirement Income Security Act of 1974, as amended ([ERISA](#)).

YOUR RIGHTS UNDER ERISA

Receive Information About Your Plan Benefits

[ERISA](#) provides that all BNSF Group Benefits Plan participants will be entitled to:

- ▶ Examine, without charge, at the [Plan Administrator's](#) office and other locations, such as worksites, all documents governing the Plan, including insurance contracts and a copy of the latest annual report (Form 5500 series) filed by the BNSF Group Benefits Plan with the U.S. Department of Labor and available at the Public Disclosure Room of the Employee Benefits Security Administration.
- ▶ Obtain, upon written request to the Plan Administrator, copies of documents governing the operation of the Plan, including insurance contracts, copies of the latest annual report (Form 5500 Series), and an updated Summary Plan Description. The Plan Administrator may make a reasonable charge for the copies.
- ▶ Receive a summary of the Plan's annual financial report. The Plan Administrator is required by law to furnish each participant with a copy of this summary annual report.

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



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Continue Health Benefits Coverage

In addition, you are entitled to:

- ▶ Continue health care coverage for your spouse and/or children if there is a loss of coverage under the Medical and/or Vision Care program as a result of a [COBRA](#) qualifying event. Your spouse and/or children may have to pay for such coverage. See the chapter of this BNSF Group Benefits Plan Summary Plan Description titled *Continuing Health Care Coverage Under COBRA – Medical and Vision Care Programs for Pre-Medicare Retirees* for the rules governing your COBRA continuation coverage rights.
- ▶ Reduction or elimination of exclusionary periods, if any, for coverage of pre-existing conditions under your group health coverage, if you have creditable coverage from another health plan. You should be provided a certificate of creditable coverage, free of charge, from your group health plan or health insurance issuer:
 - When you lose coverage,
 - When you become entitled to elect COBRA continuation coverage,
 - When your COBRA continuation coverage ceases, if you request it before losing coverage, or
 - If you request it up to 24 months after losing coverage.

Without evidence of creditable coverage, you may be subject to a pre-existing condition exclusion for 12 months (18 months for late enrollees) after your enrollment in some group health plans.

Enforce Your Rights

If your claim for a benefit is denied or ignored in whole or in part, you have a right to know why this was done, to obtain copies of documents relating to the decision without charge, and to appeal any denial, all within certain time schedules. After completion of the appeal process (see *If Your Claim Is Denied* and subsequent sections that apply to you in the separate chapter of this Summary Plan Description titled *Claims Procedures – Medical and Vision Care Programs for Pre-Medicare Retirees*), you have the right to bring a civil action under ERISA Section 502(a).

Under [ERISA](#), there are steps you may take to enforce your rights. For instance, if you request materials from the [Plan Administrator](#) and do not receive them within 30 days, you may file suit in a federal court. The court may require the Plan Administrator to provide the materials and pay you up to \$110 a day until you receive the materials, unless the materials were not sent because of reasons beyond the control of the Plan Administrator. If you have a claim for benefits that is denied or ignored, in whole or in part, you may file suit in a state or federal court. However, you first must exhaust all of your administrative remedies described in this Summary Plan Description (SPD) before filing suit for any benefits covered by ERISA. You may not begin a lawsuit later than one year after being notified of the [Claims Administrator's](#) final decision.

In addition, if you disagree with an action concerning the qualified status of a domestic relations order or a medical child support order, you may file suit in federal court. You may not begin a lawsuit later than 90 days after being notified of the Plan Administrator's final decision.

If it should happen that the people who operate the Plan (called “fiduciaries”) misuse the Plan’s money, or if you are discriminated against for asserting your rights, you may seek assistance from the U.S. Department of Labor or you may file suit in a federal court. The court will decide who should pay court costs and legal fees. If you are successful, the court may order the person you have sued to pay these costs and fees. If you lose, the court may order you to pay these costs and fees – for example, if it finds your claim is frivolous.

WHOM TO CONTACT FOR ASSISTANCE WITH QUESTIONS



If you have any questions about the Group Benefits Plan, you should contact the [Plan Administrator](#).

If you have questions about this statement or about your rights under ERISA, or if you need assistance in obtaining documents from the Plan Administrator, you should contact the nearest area office of the Employee Benefits Security Administration, U.S. Department of Labor, listed in your telephone directory, or the Division of Technical Assistance and Inquiries, Employee Benefits Security Administration (EBSA), U.S. Department of Labor, 200 Constitution Avenue N.W., Washington, DC 20210. You also may obtain certain publications about your rights and responsibilities under ERISA by calling the publications hotline of the Employee Benefits Security Administration.

Following is a list of EBSA regional offices at the time this SPD was published. For the most recent list, look on the EBSA website at dol.gov/ebsa for EBSA Regional Offices.

OFFICES OF THE EMPLOYEE BENEFITS SECURITY ADMINISTRATION, U.S. DEPARTMENT OF LABOR

Atlanta Regional Office
61 Forsyth Street, S.W.
Suite 7B54
Atlanta, GA 30303
Phone: 404-302-3900

Dallas Regional Office
525 S. Griffin Street
Room 900
Dallas, TX 75202-5025
Phone: 972-850-4500

Philadelphia Regional Office
170 S. Independence Mall West
Suite 870 West
Philadelphia, PA 19106-3317
Phone: 215-861-5300

Boston Regional Office
JFK Federal Building
15 New Sudbury Street
Room 575
Boston, MA 02203
Phone: 617-565-9600

Kansas City Regional Office
2300 Main Street
Suite 1100
Kansas City, MO 64108
Phone: 816-285-1800

San Francisco Regional Office
90 7th Street
Suite 11-300
San Francisco, CA 94103
Phone: 415-625-2481

Chicago Regional Office
230 S. Dearborn Street
Suite 2160
Chicago, IL 60604
Phone: 312-353-0900

Los Angeles Regional Office
1055 E. Colorado Boulevard.
Suite 200
Pasadena, CA 91106-2357
Phone: 626-229-1000

Seattle District Office
300 Fifth Avenue
Suite 1110
Seattle, WA 98104
Phone: 206-757-6781

Cincinnati Regional Office
1885 Dixie Highway
Suite 210
Ft. Wright, KY 41011-2664
Phone: 859-578-4680

Miami District Office
1000 S Pine Island Road
Suite 100
Plantation, FL 33324
Phone: 954-424-4022

Washington, DC District Office
1335 East-West Highway
Suite 200
Silver Spring, MD 20910
Phone: 202-693-8700

New York Regional Office
33 Whitehall Street
Suite 1200
New York, NY 10004
Phone: 212-607-8600

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, 2301 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*.



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COBRA – Consolidated Omnibus Budget Reconciliation Act of 1985, as amended. For more information on your COBRA rights, see the chapter of this SPD titled *Continuing Health Care Coverage Under COBRA – Medical and Vision Care Programs for Pre-Medicare Retirees*.

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

Plan Administrator – Vice President and Chief Human Resources Officer, BNSF Railway Company, 2301 Lou Menk Drive, Fort Worth, TX 76131.