

Attachment "BLET-B"

HEALTH & WELFARE

Railroad Employees National Health and Welfare Plan GA-23000

Eligibility -

- (1) Provide extended benefit coverage to eligible dependents for one full calendar year following the death of a covered employee.
- (2) Provide extended coverage to furloughed employees for twelve (12) months following the month in which such employees last rendered compensated service or received vacation pay, provided the employer has transmitted at least three (3) monthly payments to the Plan on behalf of such employees prior to furlough. During such 12-month period, the furloughed employee shall be reported under "active" employee status.
- (3) Provide full Plan coverage to an employee who is suspended or dismissed from service, and to his eligible dependents, until final disposition of the matter under the *Railway Labor Act*. Until such final

disposition, the employee shall be reported under “active” employee status.

- (4) Provide full Plan coverage to an employee who becomes disabled, and his dependents, until such time as the employee and/or his dependents become eligible for Medicare.
- (5) Eliminate the seven (7) calendar days per month eligibility requirement (the so-called “7-day rule”) for benefit coverage under the health and welfare, dental and vision plans.
- (6) Employees on active military status (and their dependents) will be covered to the same extent as provided for under disability provisions.
- (7) Extend full coverage for college students under age 25 for six months following their graduation date.

Life/AD&D Insurance -

- (1) Increase Active Employee Life Insurance to \$50,000.00.
- (2) Increase Retired Employee Life Insurance to \$10,000.00.
- (3) AD&D - increase coverage to the following:

TABLE OF COVERED LOSSES AND BENEFIT AMOUNTS

<u>COVERED LOSSES</u>	<u>BENEFIT AMOUNTS</u>
Life	\$30,000
A hand	\$8,000
A foot	\$8,000
Sight of an eye	\$8,000
Loss of more than one of the above in any one accident	\$16,000
Paralyzation	\$25,000

Loss of sight of an eye means that the eye is entirely blind and that no sight can be restored in that eye.

Loss of a hand means that all of the hand is cut-off at/or above the wrist.

Loss of a foot means that all of the foot is cut-off at/or above the ankle.

**Loss of a hand or foot shall also include the loss of use of a hand or foot even if the limb is still intact.*

Paralyzation means the loss of use of the extremities of the body as a result of an accident, such as, but not limited to paraplegia, quadriplegia, or hemiplegia occurring from a traumatic brain injury.

Not more than \$30,000 will be paid for all covered losses caused by all injuries which are sustained in one accident.

Prescription Drug Benefit -

- (1) Prescription drug co-pays shall be as follows:
 - Retail: generic – no co-pay; brand name -- \$5.00
 - Mail Order: generic – no co-pay; brand name \$10.00.

Coordination of Benefits -

- (1) Increase Coordination of Benefits to allow reimbursement up to a maximum of 100% of allowable charges.

Lifetime Maximum -

- (1) Increase lifetime maximum under CHCB and MMCP out-of-network to unlimited.

Reasonable and Customary Determinations -

- (1) Increase the threshold for R&C determinations to the 95th percentile of data selected by the Plan.

Hearing Benefits -

- (1) Provide an annual hearing benefit of \$1500 for each covered person.

- (2) In addition to the \$1500 benefit described in (1) above, provide hearing tests as a covered benefit when medically necessary to diagnose or treat illnesses other than hearing loss.

Birth Control/Reversal -

- (1) Provide coverage under the plan for voluntary sterilization and/or reversal, as well as benefits for contraceptive medications.

Employee Contributions -

- (1) Eliminate any and all reference to required employee contributions as referred to in current National Agreement.

Employee Opt-Outs -

- (1) Increase payments to employees who opt-out of Plan coverage from \$100 per month to \$200 per month.

Mobile Facilities -

- (1) Amend the current Plan definition of a facility to include a mobile facility used by licensed physicians or other qualified medical personnel to deliver services to employees and their dependents billed under covered codes as directed by the American Medical Association or other governing bodies.

Managed Medical Care Program (MMCP)-

- (1) Reduce all co-payments under MMCP to \$5.00 per visit including emergency room.
- (2) Reduce all out-of-network penalties to 10%.
- (3) Reduce annual out-of-network out-of-pocket maximums to \$500 per person and \$1,000 per family.
- (4) Provide out of network coverage for:
 - Immunizations and well-person physical benefits without annual caps to include annual routine physical exams, (including diagnostic testing and immunizations); well-woman visits (including breast examination and/or mammogram, pelvic examination and pap smear); child preventive care given in connection with routine pediatric care, (including immunizations for children as recommended by CDC).
 - Annual prostate cancer screening at no cost to the participant.
 - Annual influenza vaccinations at no cost to the participant.
 - Sigmoidoscopy or colonoscopy for participants over 40 years of age at no cost to the participant.
 - Other screening tests as recommended by the United States Preventive Disease Task Force at no cost to the participant.
- (5) Establish defined criteria for new managed care markets that, when met, will trigger the automatic establishment of MMCP in such markets.

Comprehensive Health Care Benefit (CHCB)-

- (1) Provide uniform application of immunizations and well-person physical benefits provided under MMCP to CHCB and/or BHCB

without annual caps to include annual routine physical exams, (including diagnostic testing and immunizations); well-woman visits (including breast examination and/or mammogram, pelvic examination and pap smear); child preventive care given in connection with routine pediatric care, (including immunizations for children as recommended by CDC).

- (2) Provide 90/10 co-insurance under the CHCB plan.
- (3) Eliminate the annual deductible.
- (4) Provide benefits comparable to MMCP for employees who do not live in MMCP network areas.
- (5) Reduce annual out-of-pocket maximums to \$500 per person and \$1000 per family.
- (6) Provide annual prostate cancer screening at no cost to the participant.
- (7) Provide annual influenza vaccinations at no cost to the participant.
- (8) Provide sigmoidoscopy or colonoscopy for participants over 40 years of age at no cost to the participant.
- (9) Provide other screening tests as recommended by the United States Preventative Disease Task Force at no cost to the participant.

Managed Mental Health and Substance Abuse Benefit (MHSA)-

- (1) Reduce all co-payments under MHSA to \$5.00 per visit including emergency room.

- (2) Reduce all out-of-network penalties to 10%.
- (3) Amend the current requirement that Out-of-Network outpatient services be administered by a license psychologist to allow that such care may be administered by Masters level clinicians.
- (4) Eliminate lifetime maximum benefit for Mental Health services.

CHCB, MMCP (BHCB, HMO, If Applicable) B Cost Containment Through Health Management

- (1) Establish toll-free Nurse Line and other services to provide employees and their families' resources to help in decision making.
- (2) Implement a more comprehensive disease management program. Research and interview vendors that provide disease management programs that can be targeted to Plan members who need to manage emerging chronic and acute conditions such as cardiac disease, diabetes, asthma, low back pain, depression. Adopt comprehensive disease management programs to reduce emergency room visits, inpatient admissions, and acute episodes while promoting quality of care, treatment compliance and slowing rate of disease progression.

Railroad Employees National Early Retirement Major Medical Benefit Plan (GA-46000)

Eligibility -

- (1) Provide coverage for anyone collecting an annuity pursuant to the Railroad Retirement Act who was formerly covered by GA-23000.
- (2) Provide automatic enrollment into GA-46000, with a written notification to the employee.
- (3) Provide extended benefits for up to five (5) calendar years to a dependent spouse who is under the age of 65 when the retired employee qualifies for Medicare due to age.
- (4) Eliminate the COBRA exclusion from age annuitant eligibility.
- (5) Increase the lifetime maximum under GA-46000 to \$250,000 and provide for annual increases consistent with the rate of medical inflation.

Managed Care -

- (1) Establish managed care benefits under GA-46000 that are identical in all respects to the MMCP under GA-23000.

Comprehensive Care -

- (1) Establish comprehensive care benefits under GA-

46000 that are identical in all respects to the CHCB under GA-23000.

General –

- (1) Provide lifetime benefit limits, deductibles, and out-of-pocket maximums that are identical to GA-23000.

Railroad Employees National Dental Plan (GP12000-A)

Eligibility -

- (1) Provide full Plan benefits to new employees and eligible dependents on the first day of the month following the month in which such employees render compensated service.
- (2) Provide full Plan coverage to an employee and eligible dependent who is suspended or dismissed from service until final disposition under the *Railway Labor Act*.
- (3) Establish dental benefit coverage for employees who are eligible for GA-46000.

Benefits –

- (1) Eliminate the annual deductible.

- (2) Increase the annual maximum to \$3,000.00.
- (3) Increase Type B coverage to 100%.
- (4) Increase Type C coverage to 75%.
- (5) Increase orthodontia benefit to 90% with a maximum of \$2,500.00.
- (6) Provide orthodontia coverage to all employees and covered dependents regardless of age.
- (7) Eliminate the alternate treatment provisions of the Plan.

RAILROAD EMPLOYEES NATIONAL VISION PLAN

Network -

- (1) Expand network coverage to the Vision Service Plan (VSP) Standard Network to all covered employees.
- (2) Provide full Plan benefits to new employees and eligible dependents on the first day of the month following the month in which such employees render compensated service.

In-Network Benefits -

- (1) Increase the frame allowance to \$250.
- (2) Provide full coverage for the following options:
 - Scratch Coating
 - UV Protection

Anti-Reflective Coating

Photochromic Lenses

Progressive Lenses

- (3) Increase allowance for contact lenses to \$250 annually.
- (3) Add laser surgery benefit. Provide full coverage for laser surgery to correct vision in one or both eyes.

Hospital Associations

- (1) Hospital Association benefits will continue to be set by the individual Hospital Association.
- (2) Effective January 1, 2005, the so-called ADues Offset@ formula for Hospital Association members, as provided in Article V, Financing the Policy Contract, of the 1973 Collective Bargaining Agreement, will be amended to provide a monthly payment equal to the individual COBRA rate projected for the calendar year of providing employee medical care for the Railroad Employees National Health and Welfare Plan (the National Plan).
- (3) Thereafter, adjustments, if any, shall be made annually on January 1st of each subsequent year.
- (4) The so-called Apick-up fees@ for any employees (or dependents, if applicable) transferring from Hospital Association Railroads to Non-Hospital Association Railroads will be borne by the Railroads.
- (5) Disabled or Retired Hospital Association members whose coverage is disrupted for any reason other than non-payment of Association

dues will be allowed to enroll in the Railroad Employees National Early Retirement Major Medical Benefit Plan (GA-46000) without penalty provided they would have met the eligibility requirements at the time they retired.

Supplemental Sickness Benefit Plan - Provident Policy R-5000

Amend the provisions of Provident Policy R-5000, the Supplemental Sickness Benefit Plan, to provide the following effective January 1, 2005:

- (a) Amend the Plan so that the combined benefit limits payable under the Plan are 90% of the employee=s regular daily rate, including payments from RRB, if eligible.
- (b) Remove requirement that employee must be eligible for Railroad Retirement sickness benefits in order to qualify for benefits hereunder.
- (c) Amend the Plan to change the maximum duration for the payment of benefits to 18 months from 12 months.
- (d) Employees will be eligible for these benefits after three months of service, regardless of eligibility under RRB.

GENERAL

- (1) The JPC shall be joint policyholders and will jointly participate in the selection of the insurance company or companies or other administrators required to administer all benefit Plans covering employees subject to this Agreement, shall jointly determine the plan

benefits needed to meet the changing needs of the employees and otherwise jointly administer all of the Plans' activities. The Joint Plan Committee shall oversee and administer the Railroad Employees National Health and Welfare Plan, the Railroad Employees National Early Retirement Major Medical Benefit Plan, the Railroad Employees National Dental Plan, the Railroad Employees National Vision Care Plan, the various plans established to provide supplemental sickness benefits to covered employees and any and all plans which may hereafter be developed or introduced to provide health and welfare benefits to active and retired employees and their eligible dependents.

(2) Eliminate the exclusion of benefits for treatment by a family member who is otherwise a qualified provider, from any and all plans containing such exclusion.