

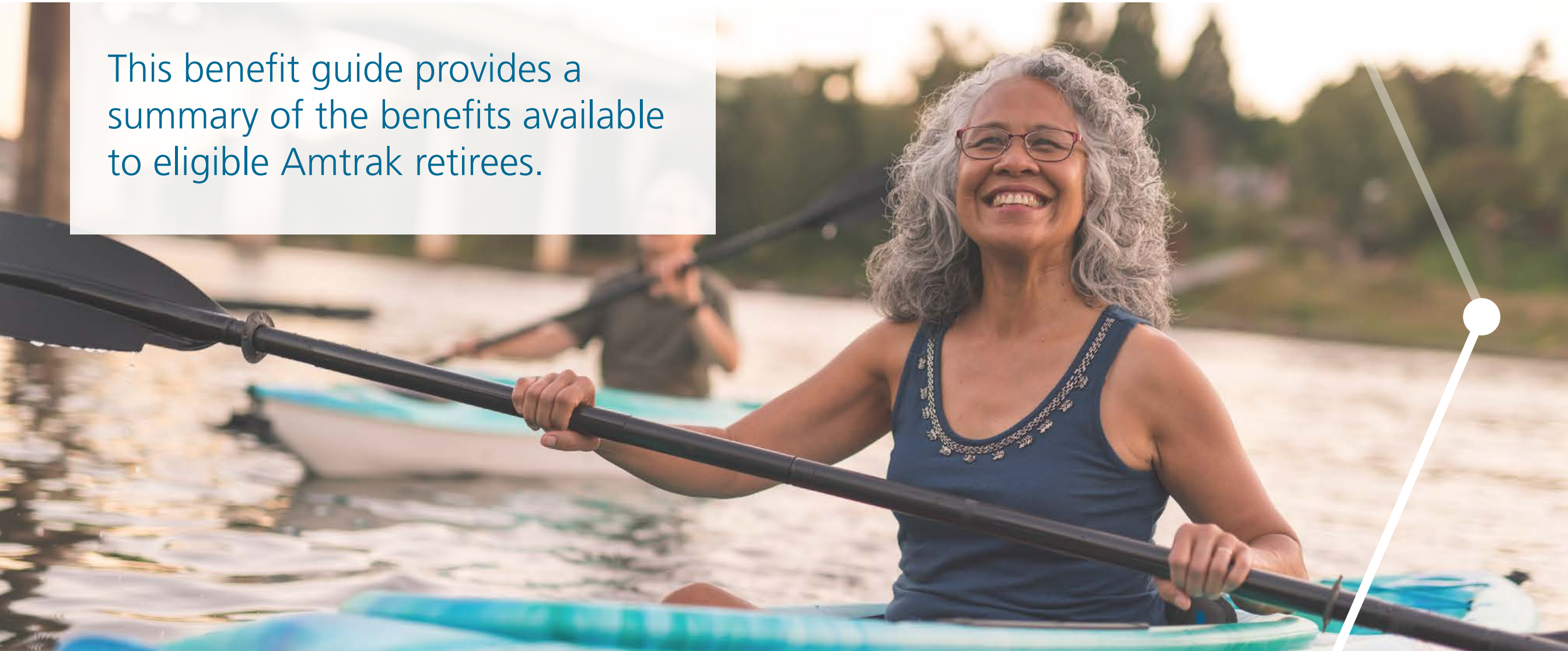
Benefits Guide





Your Amtrak Benefits

This benefit guide provides a summary of the benefits available to eligible Amtrak retirees.





Who Is Eligible

You are eligible for the benefits described in this guide if you retired as an agreement-covered employee and meet the criteria described below.

Your Eligibility

In retirement, your retiree medical coverage depends on both your age and your total years of credited railroad service at the time you leave Amtrak:

AGE	SERVICE REQUIREMENT	MEDICAL PLAN
60-65 (and not Medicare eligible)	30 credited years of total railroad service	<ul style="list-style-type: none">• Early Retiree Medical Plan• UnitedHealthcare GA-23111 Plan P (Supplements Early Retiree Medical Plan)

In addition to the Amtrak coverage noted in the table above, you may be eligible for coverage through the National Railroad plans provided by UnitedHealthcare.

- For those age 65 or older (or Medicare eligible), you may be eligible for the UnitedHealthcare GA-23111 Plan F.
- For those under age 65 (and not Medicare eligible), you may be eligible for the UnitedHealthcare GA-23111 Plan A, B and C.

Dependent Eligibility

Your eligible dependents may also be covered under your benefits. Your eligible dependents are your:

- Legally married husband or wife or your eligible same-sex domestic partner;
- Children up to age 26; and
- Children age 26 or older who:
 - Are primarily dependent on you for care and financial support; and
 - Have a permanent physical or mental handicap that began before age 26; and
 - Became handicapped while covered under this plan or any other group plan.
- Children who are otherwise eligible and who are alternate recipients under a Qualified Medical Child Support Order.

Your children include:

- Your natural children;
- Your stepchildren;
- Legally adopted children (beginning on the date the legal adoption proceedings started) and children placed for adoption;
- Your biological grandchildren, provided their legal residence is with you and they are dependent mainly on you for care and financial support; and
- Children of your covered same-sex domestic partner.

To be eligible, your dependents must live in the United States and have a Social Security number. You will be required to provide documentation for any dependent added to your benefits.

Remember to Keep Your Dependents' Information Up to Date

Make sure any dependents you enroll satisfy the eligibility rules under the Amtrak plans. Enrolling dependents, old or new, who do not meet the eligibility criteria under the Amtrak plans may be deemed an intentional misrepresentation or possibly fraud. If a dependent is no longer eligible, it is your responsibility to make the change immediately at AmtrakBenefits.com or by calling the Amtrak Benefits Service Center at **800-481-4887**. Amtrak reserves the right to request verification of dependent eligibility at any time.

Domestic Partner Coverage

You may cover a same-sex domestic partner, same-sex civil union partner or same-sex spouse, regardless of where you live. You may enroll eligible dependents as defined in Amtrak's medical and vision benefits.

To be eligible, you and your domestic partner must provide the required documentation, such as a government (state or municipality) registration of domestic partnership, or an Amtrak Affidavit of Domestic Partnership. Visit AmtrakBenefits.com for a copy of the Amtrak Affidavit of Domestic Partnership.

When you enroll a same-sex domestic partner there may be tax implications, and the income tax treatment for domestic partner coverage may differ by state. Therefore, before enrolling your partner, you should contact a tax advisor to determine the impact of imputed income on your income taxes.

Domestic partner coverage for opposite-sex domestic partners is not available, except in California. To enroll your domestic partner or get information about coverage, visit AmtrakBenefits.com or call the Amtrak Benefits Service Center at **800-481-4887**.

Enrolling in Benefits

When to Enroll

You can enroll during Annual Enrollment each year. The benefits you elect will be effective from January 1 through December 31 of the following year. You cannot change your elections during the year unless you have an IRS-qualified family status change. Examples of qualified family status changes include your marriage, divorce, birth or adoption of a child, loss of coverage, and moving in or out of a network area. For a complete list of IRS-qualified family status changes, visit [AmtrakBenefits.com](https://www.amtrakbenefits.com) or call the Amtrak Benefits Service Center at **800-481-4887**.

Any changes you make to your benefits due to a family status change must be made within 31 days¹ of the family status event and must be relevant to the event. If you do not make a change within this 31-day¹ period, you must wait until the next Annual Enrollment period to change your benefit elections. You will be required to provide proof of the family status change, such as a marriage or birth certificate.

¹ Sixty days if you, your spouse or eligible child loses coverage under Medicaid or a State Children's Health Insurance Program (S-CHIP) or becomes eligible for state-provided premium assistance. Contact the Amtrak Benefits Service Center at 800-481-4887 for more information.

How to Enroll

During the enrollment period, you can enroll online or by phone:



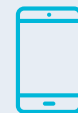
Online: [AmtrakBenefits.com](https://www.amtrakbenefits.com)

After you log on, click on the **Enroll Now** button. The system will lead you through the screens you need to complete. Please print your enrollment confirmation and keep it for your records.



By Phone (toll-free): **800-481-4887**

Customer Service Representatives are available Monday through Friday, except holidays, 8 a.m. – 8 p.m., Eastern Time.



Through the **Alight App**

Download the Alight mobile app to your Apple or Android device and log into your account to make your benefit elections.

Confirming Your Elections

A few weeks after you enroll, you will receive an Enrollment Confirmation Statement with your benefit elections. Review this statement carefully. If your confirmation statement is incorrect, call the Amtrak Benefits Service Center at **800-481-4887**. You have two weeks from the date of the confirmation statement to submit any corrections.

Special Enrollment Rights

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) provides you with certain special enrollment rights pertaining to your healthcare coverage. If you gain a new dependent through marriage, birth, adoption or placement for adoption, you may add this dependent to your health coverage, provided you enroll your dependent within 31 days of the marriage, birth, adoption or placement for adoption.

Federal Government-Required Notices and Certifications

Access an electronic copy of the required notices on [AmtrakBenefits.com](https://www.amtrakbenefits.com).

NEW RETIREES – ENROLL WITHIN 31 DAYS

If you want to enroll for benefits, you must enroll within 31 days of your retirement date. Coverage will begin on the first day of the second month following your retirement date. **If you don't enroll, you will need to wait until the next Annual Enrollment period to enroll for benefits, unless you have a qualifying family status change.**



Medical

It's important to review your healthcare options to make sure you have the coverage that best meets your family's needs.

Pre-Age 65 Coverage

Participants under 65 have access to the Early Retiree Medical Plan. This plan is administered through Aetna (with prescription drug coverage through CVS/caremark) and provides:

- Reliable, comprehensive coverage.
- 100 percent coverage – at no additional cost to you – for in-network preventive care, including well-visits, screenings and routine immunizations.
- Broad national network of credentialed doctors, hospitals and other healthcare professionals that offer discounted rates to help you make the most of your dollars.

If you receive care outside of the Aetna network, a separate out-of-network deductible and out-of-pocket maximum applies. Amounts you pay for in-network covered expenses count toward the in-network deductible and out-of-pocket maximum. Amounts you pay for out-of-network covered expenses count toward both the in- and out-of-network deductibles and out-of-pocket maximums.

Age 65 and Over

Your eligibility for coverage under the Early Retiree Medical Plan ends the first of the month in which you turn age 65 or you become eligible for Medicare, which ever occurs first. Coverage under the Plan for any covered dependents would also end at the time you lose eligibility due to age. Dependents would be eligible for COBRA continuation coverage and will receive a COBRA continuation packet in the mail or can contact the Amtrak Benefits Center for additional information.

Your dependents coverage will end the earlier of the first of the month in which they turn age 65, they become eligible for Medicare or the first of the month in which you attain (or would have attained) age 65.

Other Coverage through the National Railroad Plan

There is also coverage that may be available to you outside of the Amtrak Early Retirement Plan. The National Railroad Plan offers coverage through the United Healthcare Plans, including both Pre-65 and Age 65 and over options. Contact United Healthcare for more information.

MEDICARE ELIGIBILITY

If you are eligible for Medicare, you are no longer eligible for the Early Retiree Medical Plan. Enrollment in Medicare Part A automatically occurs when you apply for Railroad Retirement or Social Security retirement benefits. However, you must actively enroll in Medicare Part B; you should do so as soon as you are eligible to avoid possible penalties and late fees.



WHEN YOU TURN 65

The first of the month in which you reach age 65, Medicare (Parts A and B) becomes your primary insurer with supplemental coverage through UnitedHealthcare.



About the Early Retiree Medical Plan

The Early Retiree Medical Plan is administered through Aetna and generally pays 80 percent of the reasonable and customary cost of care, after you satisfy the \$100 annual deductible. You may receive care from any doctor you choose. However, when you see a provider who is part of the PPO network, the doctor or provider will charge you less for medical care. There is no benefit maximum and prescription drug coverage is included.

With Aetna, you have access to a wealth of tools and resources to help you achieve your health goals. There is no additional cost to use these programs and resources.

- **Simple Steps to a Healthier Life** – Complete this Health Assessment to gain valuable insight to your health and personalized recommendations.
- **24-Hour Nurse Line** – When your health questions can't wait, you have a resource to turn to – the Informed Health Line. With one call, you can get information on a wide range of health and wellness topics or learn about a medical test or procedure. Just call **800-556-1555** — the nurse is waiting.
- **Smoking Cessation** – Aetna's comprehensive smoking cessation program is available to all Amtrak participants. The program includes coaches, easy access to medications and 24/7 peer support. It's completely confidential and free — call **866-213-0153** or log on to [aetna.com](https://www.aetna.com).

SUPPLEMENTAL COVERAGE (NATIONAL RAILROAD PLAN)

You may purchase additional coverage through UnitedHealthcare to supplement the Early Retirement Medical Plan. The Plan (GA-23111 Plan P), pays 70 percent of the remaining 20 percent that the Early Retiree Medical Plan does not pay. Coverage is provided for most major medical expenses and some wellness and preventive care. There is a \$500,000 lifetime benefit maximum. Please note that this is not an Amtrak plan.

PREVENTING HEALTHCARE FRAUD

Beware and take steps to prevent healthcare fraud. Protect your health insurance ID card like you would any other credit card. Healthcare fraud takes many forms, and being aware of the most common types of fraud can help you take measures to avoid and prevent these abuses. Common forms of healthcare fraud include:

- Doctors billing for services they did not provide, or performing procedures you do not need
- Doctors billing non-covered services (e.g., cosmetic surgery) as a covered service
- Offering money or other incentives to go to a specific provider or to refer coworkers, family, or friends to a specific provider
- Waiving patient coinsurance, copays, or deductibles that apply in accordance with plan provisions

To report suspected healthcare fraud, contact Aetna at aetnasiu@aetna.com or call **800-338-6361**.

For Retirees and Dependents Under Age 65

AETNA IN TOUCH CARE

From routine lifestyle changes to more serious disease management goals – Aetna In Touch Care can help. When you're facing a chronic or acute health challenge, Aetna provides powerful resources – when you need it most.

In the most urgent circumstances, Aetna In Touch Care connects you to one-on-one nurse support. You have direct phone access to a highly experienced registered nurse. You work with one nurse for all of your critical needs. Your nurse is assigned to you and available to your whole family. Over time, your nurse becomes intimately familiar with your health history.

In less severe situations, Aetna In Touch Care supports you with dynamic virtual care. Virtual care provides convenient, personalized online tools. These tools are designed to help you adopt new lifestyle behaviors.

These resources are completely confidential and are included in your Aetna coverage at no additional cost. To get started, contact a nurse today at **855-743-3388**.

TELEHEALTH

Access high-quality care quickly from the comfort of your own home. Through Aetna's TeleHealth services, you have 24/7 access to a network of licensed doctors, pediatricians, psychologists, and therapists, who can diagnose, treat, and prescribe medication (when necessary) for a wide range of medical and behavioral health conditions. Telehealth is a great resource if you or a family member need extra behavioral health support for anxiety, depression, family issues, and more. Plus, you'll pay the same \$20 copay for a TeleHealth visit as you would for a visit to your primary care doctor.

Over 1,000 Amtrak employees and their dependents are already utilizing TeleHealth services - so don't wait! Get started today by contacting your TeleHealth provider:

Aetna TeleHealth member.teladoc.com/aetna
855-835-2362



For Retirees and Dependents Under Age 65

Medical Benefits Summary For Retirees and Dependents Under Age 65

	EARLY RETIREE MEDICAL PLAN	SUPPLEMENTAL COVERAGE (GA-23111 PLAN P) (THROUGH UNITEDHEALTHCARE) ¹
2021 Monthly Contribution	Amtrak provides at no cost to retirees/dependents ²	\$140 per plan participant ³
Lifetime Individual Maximum	Unlimited	\$500,000
Annual Deductible	\$100	\$100
What Is Covered	Covers major medical expenses, including wellness and preventive care	Covers major medical expenses, including some wellness and preventive care
What The Plan Pays	Covers preventive care at 100% and most other expenses at 80% of reasonable and customary (R&C)	Covers 70% of amount not covered by the Early Retiree Medical Plan
Lifetime Individual Maximum	Unlimited	\$500,000
Prescription Drug		
Generic	\$2	Not covered
Brand Name	\$6	
Mail Order	\$5	

¹ The Supplemental Coverage is not an Amtrak plan. This summary information is provided on an illustrative basis for your convenience. These plans are not sponsored or administered by Amtrak. These plans fall under the National Railroad Plan and are administered by United Healthcare. Contact United Healthcare for plan details.

² FOP employees who retire on or after October 1, 2007 pay \$50 per month.

³ All rates are subject to change on June 1 of each year.

Prescription Drug

Your prescription drug benefits are administered through CVS/caremark. For more information, contact **800-378-0182**. You can have your prescriptions mailed directly to your home or pick them up at any CVS pharmacy or in-network local or national retail pharmacy, including Walmart, Target, Walgreens and most major grocery store chains.

MANDATORY 90-DAY SUPPLY FOR MAINTENANCE MEDICATIONS

If you take a medication for a chronic condition, you must fill the prescription as a 90-day supply – via CVS 90-day retail or CVS/caremark mail order. Filling these prescriptions via a 90-day supply provides significant advantages both in cost (due to deeper discounts) and adherence. When you are newly prescribed a medication for a chronic condition, you will be required to move to a 90-day supply after the third prescription.

MEDICATION SAFETY REMINDER

You are responsible for ensuring you are ready to work safely every day. Some prescriptions, over-the-counter medicines and/or supplements have impairing side effects by themselves or in combination. Make sure your treating doctor or pharmacist knows about everything you take – medicines and supplements – to make sure there are no side effects that might impact your safety.





About Medicare

Medicare coverage – should you enroll? In a word, yes.

You and/or your eligible dependents must enroll in Medicare when first eligible. If you fail to enroll when first eligible, you may be subject to penalty surcharges for late enrollment so it is important that enroll timely. For specific information about Medicare coverage, call **800-MEDICARE (800-633-4227)** or visit www.medicare.gov.

When a participant becomes eligible for Medicare, their eligibility for the Amtrak Early Retirement Medical Plan ends. In addition, when the Amtrak Retiree becomes eligible for Medicare at age 65, eligibility for coverage ends for both the retiree and their covered dependents. Covered dependents may be eligible to continue their coverage through COBRA coverage continuation. Contact Amtrak Benefits Center for more information on COBRA coverage.

You may be able to purchase additional coverage through the National Railroad United Healthcare plans. Contact United Healthcare for more information.



Medicare At-a-Glance

	MEDICARE PART A	MEDICARE PART B	MEDICARE PART D
What does it cover?	Covers necessary medical care in a Medicare-certified hospital, skilled nursing facility, home health agency or hospice. Some coverage is subject to a deductible or benefit maximums.	Covers 80% of approved major medical expenses, such as physician services, emergency room visits, diagnostic tests, lab work and durable medical equipment, after an annual deductible. Also pays for home healthcare services for which Part A does not pay, and some Part A inpatient services that exceed Part A time limits.	Covers prescription drugs.
What does it cost?	It's free for workers age 65 and older who have 40 or more quarters of Medicare-covered employment.	You pay a monthly contribution established by Medicare, which is subject to change each year. If you don't enroll when first eligible, you'll pay extra when you do enroll. ¹	The monthly premium depends on where you live and the coverage you select.
Do I need to enroll?	No, enrollment is automatic when you apply for Railroad Retirement or Social Security benefits.	Yes, you must actively enroll through the Railroad Retirement Board or Social Security.	Maybe. It depends on the coverage you choose. You can purchase a stand-alone Medicare Part D Prescription Drug Plan (PDP) and pair it with a Medicare Supplement Plan or Medicare Advantage Plan of your choosing. Some Medicare Advantage Plans will also offer Part D prescription drug coverage as a part of their benefit package.

¹ If you are still actively working or your spouse is still working and you elect coverage under his/her employer's plan, you may delay enrollment in Medicare Part B without paying a penalty for late enrollment.

MEDICARE ADVANTAGE PLANS

You may also participate in a Medicare Advantage plan (formerly known as Medicare Part C). With a Medicare Advantage plan, you generally get all your Medicare covered health care, including prescription drugs, through that plan. In many cases, there are extra benefits and lower copayments than in Medicare Parts A, B and D. However, you may have to see doctors that belong to the plan or go to certain hospitals to get services.



Other Medical Coverage

For Retirees and Dependents Under Age 65

If you are not eligible for the Early Retiree Medical Plan or Medicare, you may purchase coverage through UnitedHealthcare under one of the following plans. Contact UnitedHealthcare at **800-842-5252** for more information and to enroll.

UnitedHealthcare Medical Plan Benefits Summary

Medical Plan	GA-23111 Plan A	GA-23111 Plan B	GA-23111 Plan C
Monthly Cost (Per Person)	\$380 ¹	\$515 ¹	\$665 ¹
Annual Deductible (Per Person)	\$1,000	\$750	\$500
Annual Out-Of-Pocket Maximum (Per Person)	\$15,000	10,000	\$7,500
Lifetime Maximum (Per Person)	\$500,000		
Medical Coverage	50% of eligible expenses after the deductible for most covered medical care	60% of eligible expenses after the deductible for most covered medical care	70% of eligible expenses after the deductible for most covered medical care

¹All rates are subject to change on June 1 of each year.

This summary information is provided on an illustrative basis for your convenience. These plans are not sponsored or administered by Amtrak. These plans fall under the National Railroad Plan and are administered by United Healthcare. Contact United Healthcare for plan details.



Resources

The Amtrak Benefits Service Center can help you enroll and answer benefit questions. You can also get help by contacting the benefit administrators below.

Benefit/Resource	Administrator	Phone Number	Website
Amtrak Benefits Service Center		800-481-4887 Monday – Friday, except holidays 8 a.m. – 8 p.m., ET	AmtrakBenefits.com
Medical	Aetna	855-5AMTRAK (526-8725)	aetna.com
Care Advocacy Services	Aetna In Touch Care	855-743-3388	aetna.com
Mental Health and Substance Abuse Resources	Aetna Behavioral Health	855-226-8287	aetnabehavioralhealth.com
TeleHealth	Teladoc Inpathy MDLIVE Arcadian Telepsychiatry	855-835-2362 800-442-8938 855-824-2170 866-535-4977	member.teladoc.com/aetna — mdlive.com/BHCOMM —
Prescription Drug	CVS Caremark	800-378-0182	caremark.com
COBRA Coverage	Amtrak Benefits Service Center	800-481-4887 Monday – Friday, except holidays 8 a.m. – 8 p.m., ET	AmtrakBenefits.com
Supplementary Medical	UnitedHealthcare	800-842-5252	myuhc.com
Medicare Parts A, B and D		800-633-4227	medicare.gov
Retirement (401(k) Savings Plan)	Fidelity Investments	877-477-AMTK (2685)	netbenefits.com/amtrak
Retirement (Railroad Retirement Annuity)	U.S. Railroad Retirement Board	877-772-5772	rrb.gov
Retirement (Amtrak Retirement Income Plan)	Milliman	800-655-0225	MillimanBenefits.com
Social Security Benefits		800-772-1213	ssa.gov

DID YOU FORGET ANYTHING?

Review the Guide a Second Time,
to Ensure You're Making the
Right Decisions

