

TCU Intermodal Retiree Benefits Overview

Medical

The CSX Corporation Health Plan for Certain Retired Union Employees (the “Plan”), sponsored by CSX Corporation (“CSX” or the “Employer”), is a valuable employee benefit that includes Medical and prescription drug benefits to help you pay for the cost of a serious illness or injury. The Summary Plan Description has been prepared to help you better understand and use the medical and prescription drug benefits provided to certain retired former union employees. As the cost of health care continues to rise, it is more important than ever to understand your health benefits and learn to use the tools that can help you make the most of your health care dollars.

The Plan allows you to:

- Cover yourself and eligible family members through the Basic Benefit; and
- Select the Supplemental Benefit in addition to your Basic Benefit to provide additional benefits if you need them. You need information and tools to help you get the most out of your Medical benefits.

Basic Medical Benefit

The basic benefit (“Basic Benefit”) is administered by Aetna and pays 80% of covered expenses with a \$100 deductible per person. The Basic Benefit is subject to a lifetime maximum benefit (\$151,600 in 2016). The Basic Benefit is free for eligible retirees and their eligible dependents until the retiree becomes a Person Eligible Under Medicare. Upon the retiree becoming a Person Eligible under Medicare, the Basic Benefit is no longer free for continued dependent coverage. A monthly premium must be paid to continue the Basic Benefit (and the Supplemental Benefit, if elected) for eligible dependents.

Supplemental Medical Benefit

The supplemental benefit (“Supplemental Benefit”) is also administered by Aetna and provides an additional \$500,000 of medical coverage for the retiree and each dependent. The Supplemental Benefit is not free and requires the retiree to pay a monthly premium to participate. You will be billed directly by Aetna for this coverage. You must be enrolled in the Basic Benefit in order to be enrolled in the Supplemental Benefit. In addition, if you are required to pay premiums for the Basic Benefit, you must continue to pay these premiums after the Basic Benefit is exhausted in order to retain coverage under the Supplemental Benefit. The Supplemental Benefit is not available without the Basic Benefit.

Upon reaching the lifetime maximum benefit under the Basic Benefit, the Supplemental Benefit pays a percentage of the Covered Medical Expenses in excess of the Basic Benefit maximum. This percentage equals 100% of the first \$4,000 in excess of the Basic Benefit maximum and 80% of the remaining Covered Medical Expenses, but not to exceed \$500,000 in the covered individual’s lifetime. Thus, the lifetime maximum amount of reimbursement under the Supplemental Benefit is \$500,000.

If this document inadvertently states anything that is inconsistent with the governing plan document or summary plan description, the language of such documents will govern the interpretation of the benefits.

Prescription

The Prescription Drug Benefit Program covers prescription drugs that are to be taken on an outpatient basis and is administered by CVS Caremark.

You or your doctor can find out if a medication is on the plan's formulary by visiting CVS Caremark's web site at www.caremark.com.

You have two ways to fill prescriptions: at a retail pharmacy or by mail order, through CVS Caremark Mail Service. You can fill your prescriptions at the pharmacy of your choice:

- Network pharmacies: You may fill your prescription for up to a 30-day supply at a pharmacy that belongs to CVS Caremark's pharmacy network. When you use a network pharmacy, your out-of-pocket expenses are lower and there are no claim forms to complete. Simply show your ID card and make the appropriate copayment at the time of your purchase.
- Out-of-network pharmacies: You also may fill prescriptions at out-of-network pharmacies, but you'll pay more out of your own pocket when you do (except when a drug is prescribed for an emergency condition). You will also need to file a claim for drugs purchased at an out-of-network pharmacy.

Mandatory Mail Maintenance Prescriptions – CVS Caremark Mail Service Pharmacy If you take medications on a regular basis for a chronic (ongoing) condition (such as high blood pressure, asthma, allergies, or diabetes), you may order up to a 90-day supply with refills through CVS Caremark Mail Service Pharmacy. To order by mail, send your original prescription, together with an order form and a check, money order, or credit card number for the applicable copayment to CVS Caremark. Contact CVS Caremark at 866-273-8571 to request mail service order forms or print forms at www.caremark.com.

Enrollment

Participation in the Plan is not automatic; you must enroll in order to have coverage. You and your dependents can enroll within 31 days of the date you become eligible for coverage. If you gain a new child after you first enroll, you can enroll your new child within 31 days of the date he or she becomes your dependent. If you fail to enroll yourself or your dependent when first eligible, you forever waive coverage under the Plan for the persons not timely enrolled. You must enroll in the Basic Benefit in order to enroll in the Supplemental Benefit.

Basic Life Insurance

CSX provides eligible TCU Intermodal retirees with a \$2,000 basic life insurance policy at no cost to you.

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