2024 Union Pacific Retiree Medical Program High Deductible Health Plan (HDHP)

Retiree medical coverage and costs for United HealthCare and BlueCross/BlueShield of Nebraska.

The following table provides an overview of the Retiree Medical Program available to eligible Union Pacific retirees for 2024. For more detailed information, review the 2024 UHC and BCBS Retiree Medical Guides.

Dental coverage is not available to retirees. Retirees will continue to receive the EyeMed Vision discount with no additional cost.

	In-Network	Out-of-Network	Notes
PREMIUMS	Individual • \$513/month Family • \$1,151 /month	Individual • \$513/month Family • \$1,151 /month	This is the amount paid up front for healthcare coverage.
PREVENTIVE CARE	Plan pays 100% – deductible does not apply	No benefits are paid for an Out-of- Network Provider	See the 2024 Retiree Medical Guides for a description of services treated as Preventive Care Services under the plan. If you have questions regarding whether a particular service is covered preventive care, please contact MyQHealth.
ANNUAL	Covered Medical Expenses		This is the amount a retiree pays before coinsurance applies.
DEDUCTIBLE	Individual • \$3,000 Family • \$3,200/person, up to \$6,000 family max	Individual • \$6,000 Family • \$6,000/person, up to \$12,000 family max	The Annual Deductible applies to both Medical and Pharmacy benefits and must be met before the Plan pays benefits. The Annual Out-of-Pocket Maximum also applies to both Medical and Pharmacybenefits.
	Prescription Drugs		
	Annual Deductible applies to Rx expenses.	Annual Deductible applies to Rx expenses.	
COINSURANCE	Covered Medical Expenses		This is the portion of covered expenses for which the retiree and the
	After deductible is met, plan pays 85%, retiree pays 15%	After deductible is met, plan pays 65%, retiree pays 35%	plan share responsibility after the retiree meets the annual deductible.
	Prescription Drugs		
	Retiree pays: Tier 1 coverage subject to \$10 - \$25 co-pay, Tiers 2 & 3 subject to 25% - 40% coinsurance.	Retiree pays: Tier 1 coverage subject to \$10 - \$25 co-pay, Tiers 2 & 3 subject to 25% - 40% coinsurance.	Minimum and maximum co-pays are applicable to prescription drugs.
OUT-OF-POCKET MAXIMUM	Covered Medical & Prescription Drug Expenses		This is the most a retiree will pay out-of-pocket in 2024.
	Individual	Individual	
	• \$5,000	• \$10,000	
	Family • \$5,000/person, up to \$10,000 family max	Family • \$10,000/person, up to \$20,000 family max	

The above table highlights certain features of the 2024 Union Pacific Retiree Medical Program. The 2024 UHC Retiree Medical Guide and BCBS Retiree Medical Guide (the "Guides") serve as the official plan documents for the Plan. Should any information found in this table conflict with the Guides, the terms of the Guides will control. Union Pacific reserves the right, at its discretion, to amend, change or terminate any of its benefit plans, programs, practices or policies at any time for any reason. Nothing in this table shall be construed as creating an expressed or implied obligation on the part of the Company to establish or maintain any such benefit plan, program, practice orpolicy.