

2020 AMENDMENT FOR CARES ACT AND OTHER CHANGES

ARTICLE 1 PREAMBLE; DEFINITIONS

- 1.1 **Adoption of Amendment.** The Employer adopts this Amendment to implement provisions of the Act and other regulations and Notices issued by the IRS or DOL which affect the Plan.
- 1.2 **Superseding of inconsistent provisions.** This Amendment supersedes the provisions of the Plan to the extent those provisions are inconsistent with the provisions of this Amendment.
- 1.3 **Construction.** Except as otherwise provided in this Amendment, any "Section" reference in this Amendment refers only to this Amendment and is not a reference to the Plan. The Article and Section numbering in this Amendment is solely for purposes of this Amendment and does not relate to the Plan article, section, or other numbering designations.
- 1.4 **Effect of restatement of Plan.** If the Employer restates the Plan then this Amendment shall remain in effect after such restatement unless the provisions in this Amendment are restated or otherwise become obsolete (e.g., if the Plan is restated onto a plan document which incorporates these provisions).
- 1.5 **Definitions.** Except as otherwise provided in this Amendment, terms defined in the Plan will have the same meaning in this Amendment. The following definition applies specifically to this Amendment:

The "Act" is the Coronavirus Aid, Relief, and Economic Security Act, also known as the CARES Act. This Amendment shall be interpreted and applied to comply with the Act.

ARTICLE 2 IDENTIFYING INFORMATION; EMPLOYER ELECTIONS

- 2.1 **Identifying information.**
- A. Name of Employer: **COUNTY OF MONTEREY**
- B. Name of Plan: **FLEXIBLE BENEFITS PLAN**
- 2.2 **Change in Status for Health Flexible Spending Account.** Will the Plan adopt the new change in status events for Participants related to Health Flexible Spending Accounts, as described in Section 4.2?
- Yes.**
- 2.3 **Change in Status for Dependent Care Flexible Spending Account.** Will the Plan adopt the new change in status events for Participants related to Dependent Care Flexible Spending Accounts, as described in Section 4.2?
- Yes**
- 2.4 **Effective Date.** This Amendment is effective as of January 1, 2020.

**ARTICLE 4
CHANGE IN STATUS EVENTS**

- 4.1 **Application.** For calendar year 2020 only, the Plan's provisions concerning "Change in Status" under the Plan are amended by the addition of the following provisions. Such provisions can apply to medical health coverage, the Health Flexible Spending Account and Dependent Care Flexible Spending Account, as elected at 2.2 to 2.3 above for mid-year elections made during calendar year 2020.
- 4.2 **Change in Status – Health or Dependent Care Flexible Spending Account.** Election 2.2 applies this Section to the Plan's Health Flexible Spending Account. Election 2.3 applies this Section to the Plan's Dependent Care Flexible Spending Account. A Participant who has previously rejected coverage under the flexible spending account may now elect to contribute prospectively to such account. A Participant who has previously elected an amount to be reimbursed under the flexible spending account may now adjust or revoke that amount, subject to the statutory and plan limitations on the maximum allowable contribution and the limitations elected above in Election 2.2 and/or 2.3.

**ARTICLE 6
CLAIMS SUBMISSION AND OTHER DEADLINES**

- 6.1 **Application.** The Plan's deadlines contained within its claims procedures, and various other statutory deadlines are temporarily extended by the "outbreak period" as set forth in IRS Notice 2020-23, EBSA Disaster Relief Notice 2020-01, the joint notice of the IRS and DOL published May 4, 2020, entitled "Extension of Certain Timeframes for Employee Benefit Plans, Participants, and Beneficiaries Affected by the COVID-19 Outbreak," and subsequent guidance. Such deadlines shall include but are not limited to HIPAA special enrollment, COBRA elections and claims procedure deadlines, including initial filing and appeal of adverse benefit determination.
- 6.2 **"Outbreak Period."** The "outbreak period" begins March 1, 2020 and extends until 60 days after the end of the National Emergency or such other date as announced by the IRS and DOL, or otherwise declared by the Federal government as a result of the national emergency due to the COVID 19 pandemic.

* * * * *

This Amendment has been executed this _____ day of _____, 20_____.

Name of Plan: _____

Name of Employer: _____

By: _____
EMPLOYER

CERTIFICATE OF ADOPTING RESOLUTION

The undersigned authorized representative of _____ (the Employer) hereby certifies that the following resolution was duly adopted by Employer on _____ and that such resolution has not been modified or rescinded as of the date hereof.

RESOLVED, this Amendment to the Flexible Benefit Plan is hereby approved and adopted and that an authorized representative of the Employer is hereby authorized and directed to execute and deliver to the Plan Administrator the Amendment and to take any and all actions as it may deem necessary to effectuate this resolution.

The undersigned further certifies that attached hereto is a copy of the Amendment approved and adopted in the foregoing resolution.

Date: _____

Signed: _____

[print name/title]

SUMMARY OF MATERIAL MODIFICATIONS

for

COUNTY OF MONTEREY

I

INTRODUCTION

This is a Summary of Material Modifications regarding the Flexible Benefit Plan ("Plan"). This is merely a summary of the most important changes to the Plan and information contained in the Summary Plan Description ("SPD") previously provided to you. It supplements and amends that SPD so you should retain a copy of this document with your copy of the SPD. If you have any questions, contact the Administrator. If there is any discrepancy between the terms of the Plan, as modified, and this Summary of Material Modifications, the provisions of the Plan will control.

II

SUMMARY OF CHANGES

This amendment is effective January 1, 2020.

You may now request reimbursement for the purchase of "over the counter" drugs without a prescription.

You may now request reimbursement of the purchase of menstrual care products, including tampons, pads, and other products.

You may now request reimbursement of telehealth services.

For calendar year 2020, you may have a change in status for your Health Flexible Spending Account:

- You may elect to contribute to your Health Flexible Spending Account if you declined to do so during the enrollment period.
- You may elect to increase your Health Flexible Spending Account, up to the maximum that we allow.
- You may elect to decrease the amount you contribute to your Health Flexible Spending Account on a prospective basis (*however, it may not be less than the amount you have already contributed to the plan or have already been reimbursed, if greater*).
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For calendar year 2020, you may have a change in status for Dependent Care Flexible Spending Account:

- You may elect to contribute to your Dependent Care Flexible Spending Account if you declined to do so during the enrollment period.
- You may elect to increase your Dependent Care Flexible Spending Account, up to the maximum that we allow.
- You may elect to decrease the amount you contribute to your Dependent Care Flexible Spending Account on a prospective basis (*however, it may not be less than the amount you have already contributed to the plan or have already been reimbursed, if greater*).

The deadlines for submitting claims, exercising HIPAA special enrollment rights, and electing COBRA coverage will be extended due to the pandemic. If you are submitting claims incurred after March 1, or electing special enrollment rights or electing COBRA coverage, you will have an extended period in which to submit claims or make these elections. Your Administrator will provide you with details.