

## **NOTICE OF SUMMARY MATERIAL MODIFICATION (SMM)**

*Notice of Summary Material Modification (SMM). If this SMM was delivered to your email and you would like to receive a hard copy, you may request same at no charge by contacting People Operations.*

Devereux Flexible Spending and Dependent Care Participant and Beneficiaries,

This document serves as notice of material changes to the Devereux sponsored health benefit plan(s). It describes the changes that affect your benefit plans and updates the Summary Plan Description (SPD).

Read this Summary of Material Modification (SMM) carefully and retain this document with your copy of the SPD for future reference. Contact us at People Operations if you have any questions.

### **Impacted Plans:**

- Flexible Spending Account
  - Medical Flexible Spending
  - Dependent Care Accounts

### **CHANGES TO THE PLAN**

In light of the Consolidated Appropriations Act, 2021 the following changes will be permitted on the BESTFlex Plan:

#### **INCREASE IN DEPENDENT CARE AGE:**

The Dependent Care FSA age limit has been temporarily changed to 14 for 2021 for participants who made their Dependent Care FSA election in 2020. If your child turned 13 during the plan year, you can continue to use your Dependent Care FSA to pay for care through the end of the 2021 plan year.

#### **EXTENDED GRACE PERIOD FOR HEALTHCARE AND DEPENDENT CARE FSA**

For the Plan Year ending 12/31/2020, your Dependent Care FSA option temporarily includes a grace period, which extends your plan year. The duration of the grace period has been increased through 12/31/2021. This allows you to continue to incur eligible expenses until 12/31/2021 and submit them for reimbursement from your HealthCare FSA and Dependent Care FSA prior to the end of this new temporary grace period (12/31/2021).

#### **HEALTHCARE FSA SPEND DOWN**

After a mid-year termination of a Healthcare FSA (provided the loss of coverage was between 1/1/2020 and 12/31/2021), you may temporarily continue to incur expenses for reimbursement for your Healthcare FSA through the end of the plan year in which your participation ended under certain circumstances. The amount available for reimbursement of expenses is limited to the amount you contributed to the Plan as of your termination date. You may, alternatively, be offered and choose to elect COBRA continuation coverage in f you wish to have access to your full election amount through the end of the plan year. All Claims must be submitted for reimbursement by the end of the plan's standard runout period (12/31/2021).