

**Amendment to the  
Summary Plan Description for  
Black Hawk County Employee Medical Plan**

**\$500 Deductible Medical Option**

**Amendment #4 to the  
2015 Restated Summary Plan Description**

This Amendment is hereby made a part of the *Summary Plan Description (SPD)*, is effective July 1, 2018, and is as follows:

1. Subsection V. B. Enrollment and *Effective Date*, the Special Enrollment Period for Employees and Dependents section is deleted in its entirety and replaced with the following:

**Special Enrollment Period for Employees and Dependents.** If *you* are an eligible employee or an eligible dependent of an eligible employee but not enrolled for coverage under this *Plan*, *you* may enroll for coverage under the terms of this *Plan* if all of the following conditions are met:

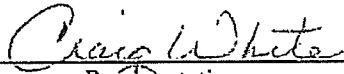
1. *You* were covered under a group health plan or had health insurance coverage at the time coverage was previously offered to the employee or dependent;
2. The eligible employee stated in writing at the time of initial eligibility that coverage under a group health plan or health insurance coverage was the reason for declining enrollment, but only if the Employer required a statement at such time and provided the employee with notice of the requirement and the consequences of such requirement at the time;
3. *Your* coverage described in paragraph 1. above was:
  - a. Terminated under a COBRA or state continuation provision and the coverage under such provision was exhausted; or
  - b. Terminated as a result of loss of eligibility for the coverage (including as a result of legal separation, divorce, death, termination of employment, or reduction in the number of hours of employment) or employer *contributions* toward such coverage were terminated; and
  - c. Was coverage under a group health plan with a plan year that differs from this *Plan*'s plan year and the other coverage terminated at the close of such other group health plan's plan year in relation to an open enrollment period or a qualifying change in status event within the meaning of the Employer's Section 125 cafeteria plan.
4. The eligible employee requested such enrollment not later than 31 calendar days after the date of exhaustion of coverage described in paragraph 3.a. above, or termination of coverage or employer *contributions* described in paragraph 3.b. above or termination of other group health plan coverage or a change in status event as described in paragraph 3.c. above.

Coverage will be effective on the date of the event described in paragraph 3.a, 3.b. or 3.c. above provided the *Plan* receives the application for coverage as required.

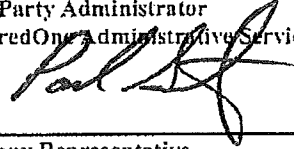
This Amendment does not change, alter, or amend any of the other provisions or limitations of the *SPD*.

This Amendment will be printed following receipt of the following signatures. Agreed to and accepted by:

Plan Sponsor  
Black Hawk County

  
\_\_\_\_\_  
Company Representative  
Chair  
\_\_\_\_\_  
Title  
CRAIG WHITE  
\_\_\_\_\_  
(Please print name of Company Representative)  
5/15/18  
\_\_\_\_\_  
Date

Third Party Administrator  
PreferredOne Administrative Services, Inc.

  
\_\_\_\_\_  
Company Representative  
CCO  
\_\_\_\_\_  
Title  
Paul Geiwitz  
\_\_\_\_\_  
(Please print name of Company Representative)  
5/24/18  
\_\_\_\_\_  
Date

**Important Note For Employers/Plan Sponsors:** PreferredOne recommends that each employer/plan sponsor This Amendment will be printed following receipt of the following signatures. Agreed to and accepted by:

provisions (including, but not limited to, the eligibility, enrollment, termination of coverage, and employee contribution/premium sharing provisions), employer's overall employee/workforce demographics, and all other relevant facts and circumstances to determine: (a) whether employer is an "applicable large employer" within the meaning of Section 4980H of the Internal Revenue Code and the guidance issued thereunder ("Section 4980H"); (b) the applicable date of Section 4980H; and (c) whether employer has any risk of penalties under Section 4980H (i.e., the employer shared responsibility penalties aka "pay or play penalties"). Employer is solely responsible for making such determinations and ensuring the Plan Document and each Summary Plan Description (SPD), including, but not limited to, the eligibility, enrollment, and termination of coverage provisions thereof, are drafted in a manner consistent with employer's strategy (if any) for mitigating such penalties. If employer is using the look back measurement method under Section 4980H (the "look back method"), employer is solely responsible for ensuring the Plan Document and each SPD contain the provisions needed to enable employer to use the look back method. Employer is also solely responsible for drafting and adopting a separate document containing employer's policies and procedures implementing the look back method and for administering such policies and procedures. Employer shall make such policies and procedures available to PreferredOne and employer's excess risk insurer upon request. PreferredOne has no responsibility for making any determinations or taking any actions referenced in this note and shall have no liability with respect to any penalties assessed against employer under Section 4980H.