

## DSM Benefits Temporary Plan Changes Allowed per COVID-19 Legislation Frequently Asked Questions (FAQ)

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Due to the COVID-19 pandemic, legislative updates impacting employee benefit plans were announced. In response, DSM has adopted plan changes which give employees additional time and flexibility to make midyear changes otherwise not allowed. Under this temporary law, employees who were eligible for, but missed a special enrollment deadline due to the pandemic, will be provided an extended enrollment opportunity beyond the 30 day enrollment window. The legislation also provides flexibility to change Flexible Spending Account elections without a special enrollment period.

### What enrollment changes can I make?

1. Missed Special Enrollment Window:

If you missed a special enrollment window during the COVID-19 outbreak, you will still be allowed to make updates to Medical coverage based on this special enrollment event. For example, if an eligible dependent lost coverage elsewhere, or became newly eligible, that dependent can now be enrolled into the DSM Medical Plan even if it is beyond 30 days. Special enrollment updates to the Medical Plan are retroactively effective based on the event date, as long the event occurred on or after March 1, 2020.

2. Changes to Your Health Care Flexible Spending Account Election (FSA):

If you wish to change your Health Care FSA election as a result of changing medical needs, you can reduce or even stop your Health Care FSA contributions on a go forward basis. The new annual election cannot be less than the total amount contributed year to date, or claims which have been reimbursed to date. Dependent Care FSA elections can also be increased or decreased, but cannot be less than the amount already contributed year to date.

Elections Changes Permitted for Health Savings Account (HSA) or Dependent Care FSA Plans:  
As always, HSA can be changed at any time. Dependent Care FSA elections can be updated if there is a change in the Cost of Coverage. Both events can be reported on the DSM benefits enrollment website by visiting [www.my.adp.com/DSM](http://www.my.adp.com/DSM). Once you log on to the site, click on 'Report a Qualifying Change' and select the applicable Plan event. These plans allow changes to be made on a go forward basis, but you cannot elect an amount less than what you have contributed to date.

Temporary for 2020: Additional Election Updates Permitted for FSA Plans: Health Care FSA contributions may be decreased or stopped on a go forward basis, but cannot be less than has been contributed year to date or what has been spent from the FSA. Dependent Care FSA annual elections can be increased or decreased without a qualifying Cost in Coverage Change event, but also cannot be less than what has been contributed year to date.

### How Can I Make the Special Enrollment Elections?

Enrollment updates related to a missed special enrollment period or Health Care FSA elections, are not available on the DSM benefits enrollment website. To update your Medical coverage and/or FSA election, call the DSM Benefits Center to speak with a representative who will submit your updates for you. They can be reached at 1 (866) 353-9740, Monday - Friday, 9:00 a.m. to 7:00 p.m. ET.

### What information will I need?

If you are changing your FSA contributions to reduce or stop contributions, please review your account on the Wageworks FSA site, prior to making your new election. You can check your current balance by logging on to the Wageworks site at <https://www.wageworks.com> to validate your current spend amount and avoid any delays. You can also call and speak with a representative at: 1-877-WageWorks (877-924-3967). Representatives are available 24 hours a day, 7 days a week.

If you are adding a new dependent to Medical coverage, be prepared to provide your dependent's Social Security number and date of birth. Newly added dependents must also be approved via the Dependent Verification Service (DVS) by submitting documentation which supports your dependent's eligibility. Typically requested documents include a birth certificate for a new baby, or a marriage certificate for your spouse / domestic partner. Enrollment will not be complete without this important documentation.

### How long will it take for my changes to be made?

Once approved, your enrollment update will be delivered to Horizon, Express Scripts and Wageworks, as applicable. FSA changes will be pended until verified by Wage Works to confirm that your newly elected goal amount is not less than your year to date contributions and not less than the amount spent.. New enrollments can take up to 2 weeks from the date it is processed. However, the effectiveness of your coverage will be as of the date of the special enrollment event or as of the date you made the change to your FSA/HSA contribution.

### Will I receive a confirmation of these updates?

Once your elections have been approved, you should download and print your confirmation statement by logging on to: [www.my.adp.com/DSM](http://www.my.adp.com/DSM). If you have not accessed the system since last annual enrollment, you will be required to reset your password. Once logged in, navigate to Current Benefits and click on View Benefits to download your statement. This is a confirmation of your enrollment which should be kept for your records. Be sure to compare the statement with your payroll deductions to verify it accurately reflects your updates.

### How will premiums be handled?

Employees who choose to retroactively add an eligible dependent to medical coverage, will be responsible for owed premiums. The increased cost will be based on the election(s) made and the effective date. Premiums will be updated via payroll as soon as administratively possible.

Premiums paid related to the retroactive waiving of coverage or loss of dependent eligibility, will not be refunded.

### What if I had claims?

Upon enrollment approval, any claims incurred during the period in which your dependent was not covered, may be submitted to Horizon for reimbursement. You can download a copy of the claims form by visiting our website at: [www.myDSMbenefits.com](http://www.myDSMbenefits.com).

However, if you or your dependent is dropped from the DSM Medical Plan retroactively, any paid medical and/or prescription claims may be reversed if incurred during the period you or the dependent is no longer covered. The provider may request reimbursement and you will be directly responsible for those costs.

### What if I need to make other enrollment changes?

This legislation is intended to allow flexibility to those who missed their special enrollment deadline due to the COVID-19 outbreak or who need to make Spending Account updates due to changes in medical needs. If you are expecting to have a life event or will be eligible for special enrollment rights in the

coming months, you will have the opportunity to make those updates as normal. Any other enrollment updates not permissible by the legislation can be made during DSM's Annual Enrollment in the Fall, with January 1, 2021 effect.

Who can I contact with questions?

For benefits or enrollment questions, contact the DSM Benefits Center at 1 (866) 353-9740, Monday - Friday, 9:00 a.m. to 7:00 p.m. ET.

To confirm your current Health Care FSA spending, call Wageworks at: 1-877-877-924-3967 or log on to the Wageworks site at <https://www.wageworks.com>. Representatives are available 24 hours a day, 7 days a week.

What other DSM benefits resources are available?

Employee Assistance Program (EAP): As part of our Brighter Living Solutions at DSM, our EAP continues to provide confidential support 24/7 to all DSM employees and members of their household. DSM supports up to 5 free visits which includes Teledoc appointments. Call 1-800-523-5668 or visit [www.MagellanAscend.com](http://www.MagellanAscend.com).

Wellness Program: Wellness is more important than ever. The DSM Brighter Living Wellness Program offers many online resources at: <http://www.brighterliving.dsm.com> to help support your physical activity, nutritional, sleep and stress management needs.

Rethink Benefits: Rethink's research-based program provides support to families raising children with learning, social or behavior challenges, or developmental disabilities. Support is available through live teleconsultations, over the phone or via video, with skilled behavioral experts. Rethink also offers a monthly podcast, webinars and a variety of educational resources and videos on their website. To learn more about this no cost benefit, visit: <http://dsm.rethinkbenefits.com>.

Visit [www.myDSMbenefits.com](http://www.myDSMbenefits.com) to learn more about these and other benefits available through DSM.