



# HAYS COUNTY CAFETERIA PLAN SALARY REDIRECTION/REDUCTION AGREEMENT

Cafeteria Plan Year: January 1, 2019 – December 31, 2019

Open Enrollment     Newly Eligible Employee as of \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Date of first deduction: \_\_\_\_ - \_\_\_\_ - \_\_\_\_    Payroll Mode:     Semi-monthly     Monthly

Social Security # \_\_\_\_\_    Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_    First Name: \_\_\_\_\_    Middle Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_    City: \_\_\_\_\_    State: \_\_\_\_\_    Zip code: \_\_\_\_\_

Department \_\_\_\_\_    Work Phone Number: \_\_\_\_\_

Work E-Mail: \_\_\_\_\_

On a separate benefit enrollment form(s), I have enrolled for certain benefit or insurance coverage(s) and understand that my required contribution amounts will be deducted from my paycheck by my employer. Unless this agreement is amended or terminated, these deductions will be continuous and in an amount equal to my required contribution for my elected coverage as prorated for each payroll period throughout the plan year. The amount of my required contribution has been provided to me. In the event of a rate change, I authorize a corresponding change in the amount deducted from my salary without signing a new Salary Redirection Agreement. Amounts corresponding to "employer-provided" non-elective benefits (if any) will not be deducted from my paycheck. In addition, pre-tax contributions reduce my compensation for Social Security tax purposes; therefore, my Social Security benefits could be decreased. I elect to receive the following coverage(s) under the Cafeteria Plan as elected in the pre-tax column. Any previous election and Salary Redirection Agreement under the Cafeteria Plan relating to the same benefits as selected below are hereby revoked. My employer's deduction of any premium/contribution amounts hereunder shall evidence acceptance of this Agreement.

Check the desired coverage(s) below. (Note: If this is an annual enrollment, your existing coverage elections will remain the same (as adjusted for any increase/decrease in premium or required contribution, except as indicated below.)

	Pre-Tax	After-Tax		Pre-Tax	After-Tax
Medical Coverage	_____	_____	Vision Care Insurance	_____	_____
Dental Insurance	_____	_____	Accident Insurance	_____	_____
			Hospital Confinement Indemnity	_____	_____
Group Life Insurance (if family, must be after-tax)			Personal Sickness Indemnity	_____	_____
▪ Dearborn National (term-life)	_____	_____	Cancer Insurance	_____	_____
			Critical Illness	_____	_____
▪ Texas Life (whole)	_____	_____	Short-Term Disability Insurance	_____	_____

**Required acknowledgement to participate in the Cafeteria Plan:**

I certify that the features and benefits under the Cafeteria Plan have been explained to me completely. By Initialing, I acknowledge that I understand the "Important Information Regarding Participation in the Cafeteria Plan" on the back of this form and agree to be bound by those requirements and any other requirements of the Cafeteria Plan.

**Waiver of Pre-tax benefits under the Cafeteria Plan:**

By initialing, I elect to waive all pre-tax benefits under the Flexible Benefits Plan. Except for a change in status, I understand that I cannot elect pre-tax benefits until the next anniversary date, and that any after-tax coverage shall be outside the plan

Employee's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## IMPORTANT INFORMATION REGARDING PARTICIPATION IN THE CAFETERIA PLAN

I understand and agree to the following:

- Restrictions on Election Changes: On or after the first day of the plan year, I cannot change or revoke this Salary Redirection Agreement with respect to pre-tax premiums before the next anniversary date of the plan unless a "change in status" occurs (as defined under the Plan and the Internal Revenue Code), and the change is caused by and consistent with the "change in status".
- Commencement of Coverage and Status of Prior Elections: Execution of this Salary Redirection Agreement does not begin coverage under the component benefit plans or insurance policies. The terms and conditions and actual coverage effective date of the underlying coverage will be determined under the separate benefit plans or insurance policies. Prior to the anniversary date each year, I will be offered the opportunity to add, drop or change coverage for the following plan year. If I do not complete and return a new Salary Redirection Agreement form at that time, benefit plans or policies currently in effect will continue.
- Use of Personal Information: In addition to and without limiting in any way the rights my employer, the Plan, their service provider and their respective agents, employees, subcontractors, and assigns may have under applicable state or federal law or regulation, I hereby specifically authorize those parties to use my personal information (including, but not limited to benefit elections, wages, employment status, number of dependents, marital status and health and dependent child care information) as is reasonably required to administer the Plan (including evaluating and processing requests for payment of claims) and detecting and preventing fraud or misrepresentation. I further authorize my employer, the Plan, their service provider and their respective agents, employees, subcontractors and assign to further disclose any such personal information as is reasonably required for such purposes. I hereby expressly waive and release any claims related to the use, disclosure or release of such information so long as the information is used in furtherance of Plan administration or to detect or prevent fraud or misrepresentation.
- Effect of Pre-Tax Contributions on Benefits Payments: Paying for coverage on a pre-tax basis may cause insurance claim payments under health and medical coverage to be subject to federal and state taxes if claim payments (combining the total from all health and medical policies/plans) are in excess of medical expenses. Paying for disability income policies with pre-tax premiums will cause the benefits payable thereunder to be taxable. Such coverage may be funded on an after-tax basis to preserve the excludability of policy benefits.