# EMPLOYER VANTAGECARE RETIREMENT HEALTH SAVINGS (RHS) PLAN ADOPTION AGREEMENT

| Plar | n Number: 8   | Check one:                            | ☐ New Plan                                      | Amendment to Existing Plan  |
|------|---|---------------------------------------|---|---|
| Em   | ployer Retirement Health Savings Plan Name:   |                                       |   |   |
| I.   | Employer Name:  |                                       |   | State:  |
|      | I. The Employer hereby attests that it is a unit of a state or local government or an agency or instrumentality of one or more units of a state or local government.  |                                       |   |   |
| III. | Effective Date of the Plan:   |                                       |   |   |
| IV.  | The Employer intends to utilize the Trust to plan(s) established by the Employer:   |                                       |   |   |
| v.   | Eligible Groups, Participation and Participa  | ant Eligibility R                     | equirements                                     |   |
|      | A. Eligible Groups  |                                       |   |   |
|      | The following group or groups of Employe Plan (check all applicable boxes):   | ees are eligible to                   | participate in the Va                           | intageCare Retirement Health Savings  |
|      | All Employees   |                                       |   |   |
|      | ☐ All Full-Time Employees   |                                       |   |   |
|      | ☐ Non-Union Employees   |                                       |   |   |
|      | Public Safety Employees – Police  |                                       |   |   |
|      | ☐ Public Safety Employees – Firefighters  |                                       |   |   |
|      | General Employees   |                                       |   |   |
|      | Collectively-Bargained Employees (Spe   | ecify unit(s))                        |   |   |
|      | Other (specify group(s))  |                                       |   |   |
|      | The Employee group(s) specified must cornordinances, rules, regulations, personnel methe Employer.  | respond to a grounanuals or other o   | up(s) of the same de                            | esignation that is defined in the statutes, sions in effect in the state or locality of |
|      | B. Participation  |                                       |   |   |
|      | Mandatory Participation: All Employees the Plan and shall receive contributions pur   |                                       |   | to participate in   |
|      | If the Employer's underlying welfare benefit pla<br>whole or part a non-collectively bargained, self-<br>(IRG) Section 105(h) will apply. These rules in<br>if the Plan discriminates in favor of highly com<br>discuss these rules with appropriate counsel. | insured plan, the inay impose taxatio | nondiscrimination rec<br>n on the benefits rece | uirements of Internal Revenue Code<br>wed by highly compensated individuals             |
|      | C. Participant Eligibility Requirements   |                                       |   |   |
|      | Minimum service: The minimum per<br>Employee is eligible to participate or to   |                                       |   |   |
|      | <ol> <li>Minimum age: The minimum age recage is required).</li> </ol>   | quired for eligibil                   | ity to participate is                           | (write N/A if no minimum  |

### VI. Contribution Sources and Amounts

# A. Definition of Earnings

|   | The definition of Earnings will apply to all RHS Contribution Features that reference "Earnings", including Direct Employer Contributions (Section VI.B.1.) and Mandatory Employee Compensation Contributions (Section VI.B.2.) |  |   |  |
|---|---|--|---|--|
| Definition of earnings:   |   |  |   |  |
| В.  | Direct Employer Contributions and Mandatory Contributions   |  |   |  |
|   | 1. Direct Employer Contributions  |  |   |  |
| The Employer shall contribute on behalf of each Participant   |   |  |   |  |
|   | % of Earnings   |  |   |  |
| ☐ \$ each Plan Year ☐ A discretionary amount to be determined each Plan Year  |   |  |   |  |
|   |   |  | Other (describe):                           |  |
|   | 2. Mandatory Employee Compensation Contributions  |  |   |  |
| The Employer will make mandatory contributions of Employee compensation as follows:   |   |  |   |  |
| Reduction in Salary % of Earnings or \$ will be contributed for the Pla   |   |  |   |  |
|   | Decreased Merit or Pay Plan Adjustment - All or a portion of the Employees' annual merit or pay plan adjustment will be contributed as follows:   |  |   |  |
| An Employee shall <u>not have</u> the right to discontinue or vary the rate of Mandatory Contribu Employee Compensation.  |   |  |   |  |
| 3. Mandatory Employee Leave Contributions  The Employer will make mandatory contributions of accrued leave as follows (provide formula for determining Mandatory Employee Leave contributions):  Accrued Sick Leave  Accrued Vacation Leave |   |  |   |  |
|   |   |  | Other (specify type of leave) Accrued Leave |  |
|   |   |  |   |  |
|   |   |  | A - E                                       |  |

An Employee shall not have the right to discontinue or vary the rate of mandatory leave contributions.

# C. Limits on Total Contributions (check one box)

The total contribution by the Employer on behalf of each Participant (including Direct Employer and Mandatory Employee Contributions) for each Plan Year shall not exceed the following limit(s) below. Limits on individual contribution types are defined within the appropriate section above.

| There is no Plan-defined limit on the percentage or dollar amount of earnings that may be contributed.  |   |  |  |  |  |  |
|---|---|--|--|--|--|--|
|   | ☐ % of earnings*  *Definition of earnings: ☐ Same as Section VI.A ☐ Other   |  |  |  |  |  |
|   |   |  |  |  |  |  |
|   | s for the Plan year.  |  |  |  |  |  |
| See Section V.B. for a discussion of nondiscrimination rules that may apply to non-collectively bargained self-insured Plans.   |   |  |  |  |  |  |
| VII. V  | esting for Direct Employer Contributions  |  |  |  |  |  |
| A.  | Vesting Schedule (check one box)  |  |  |  |  |  |
|   | The account is 100% vested at all times.  |  |  |  |  |  |
|   | The following vesting schedule shall apply to Direct Employer Contributions as outlined in Section VI.B.1.:   |  |  |  |  |  |
|   | Years of Service Vesting  |  |  |  |  |  |
|   | Completed Percentage  |  |  |  |  |  |
|   | %   |  |  |  |  |  |
|   | %   |  |  |  |  |  |
|   | %   |  |  |  |  |  |
|   | %   |  |  |  |  |  |
|   | %<br>%  |  |  |  |  |  |
|   |   |  |  |  |  |  |
|   | <u></u>   |  |  |  |  |  |
|   |   |  |  |  |  |  |
|   | <u></u> %   |  |  |  |  |  |
|   |   |  |  |  |  |  |
| В.  | The account will become 100% vested upon the death, disability, retirement*, or attainment of benefit eligibility (as outlined in Section IX) by a Participant.                   |  |  |  |  |  |
|   | *Definition of retirement (check one box):  |  |  |  |  |  |
|   | Retirement as defined in the primary retirement plan of the Employer  |  |  |  |  |  |
|   | Separation from service   |  |  |  |  |  |
|   | Other   |  |  |  |  |  |
| c.  | Any period of service by a Participant prior to a rehire of the Participant by the Employer shall not count toward the vesting schedule outlined in A above.                      |  |  |  |  |  |
|   | orfeiture Provisions  |  |  |  |  |  |
|   | orienture Provisions on separation from the service of the Employer prior to attainment of benefit eligibility (as outlined in Section IX), or                                    |  |  |  |  |  |
| Upon separation from the service of the Employer prior to attainment of benefit eligibility (as outlined in Section 1A), of upon reversion to the Trust of a Participant's account assets remaining upon the participant's death (as outlined in Section XI), a Participant's non-vested funds shall (check one box): |   |  |  |  |  |  |
|   | Remain in the Trust to be reallocated among all remaining Employees participating in the Plan as Direct Employer Contributions for the next and succeeding contribution cycle(s). |  |  |  |  |  |
|   | Remain in the Trust to be reallocated on an equal dollar basis among all Plan Participants.   |  |  |  |  |  |
|   | Remain in the Trust to be reallocated among all Plan Participants based upon Participant account balances.  |  |  |  |  |  |
|   | Revert to the Employer.   |  |  |  |  |  |

| •  | ,   | ry Requirements to Receive Medical Benefit Payments from the vantageCare Retirement Fleatin Savings Fiant<br>Participant is eligible to receive benefits: |  |
|----|---|---|--|
|    |   | At retirement only (also complete Section B.)   |  |
|    |   | Definition of retirement:   |  |
|    |   | Same as Section VII.B.  |  |
|    |   | Other   |  |
|    |   | At separation from service with the following restrictions  |  |
|    |   | ☐ No restrictions   |  |
|    |   | Other   |  |
|    |   | At age only   |  |
|    |   | At retirement and age (also complete section B)  Definition of retirement:  |  |
|    |   | Same as Section VII.B.  |  |
|    |   | Other   |  |
|    |   | Other   |  |
|    |   | At retirement or age  |  |
|    |   | Same as Section VII.B.  |  |
|    | •   | Other   |  |
|    |   |   |  |
|    |   | Other, specified as follows (also complete Section B if applicable):  |  |
| В. | Termination prior to general benefit eligibility: In the case where the general benefit eligibility as outlined in Section IX.A includes a retirement component, a Participant who separates from the service of the Employer prior to retirement will be eligible to receive benefits: |   |  |
|    |   | Immediately upon separation from service.   |  |
|    |   | At age  |  |
| c. | A Participant that becomes totally and permanently disabled   |   |  |
|    | П   | as defined by the Social Security Administration  |  |
|    |   | as defined by the Employer's primary retirement plan  |  |
|    |   | other   |  |
|    |   | become immediately eligible to receive medical benefit payments from his/her VantageCare Retirement Health<br>ngs Plan account.                           |  |
| D. | Upor  | the death of the Participant, benefits shall become payable as outlined in Section XI.  |  |

#### X. Permissible Medical Benefit Payments

| Ben | efits eligible for reimbursement consist of:   |  |
|-----|--|--|
|     | All Medical Expenses eligible under IRC Section 213* other than direct long-term care expenses, and including non-prescription medications allowed under IRS guidance. |  |
|     | The following Medical Expenses (select only the expenses you wish to cover under the VantageCare Retirement H. Savings Plan):  |  |
|     | Medical Insurance Premiums   |  |
|     | ☐ Medical Out-of-Pocket Expenses*  |  |
|     | Medicare Part B Insurance Premiums   |  |
|     | Medicare Part D Insurance Premiums   |  |
|     | Medicare Supplemental Insurance Premiums   |  |
|     | Prescription Drug Insurance Premiums   |  |
|     | COBRA Insurance Premiums   |  |
|     | ☐ Dental Insurance Premiums  |  |
|     | ☐ Dental Out-of-Pocket Expenses*   |  |
|     | ☐ Vision Insurance Premiums  |  |
|     | ☐ Vision Out-of-Pocket Expenses*   |  |
|     | Qualified Long-Term Care Insurance Premiums  |  |
|     | ☐ Non-Prescription medications allowed under IRS guidance*   |  |
|     | Other qualifying medical expenses (describe)*  |  |
|     | * See Section V.A. for a discussion of nondiscrimination rules which may apply to non-collectively bargained, self-insured Plans.                                      |  |

### XI. Benefits After the Death of the Participant

In the event of a Participant's death, the following shall apply:

# A. Surviving Spouse and/or Surviving Dependents

The surviving spouse and/or surviving eligible dependents (as defined in Section XII.D.) of the deceased Participant are immediately eligible to maintain the account and utilize it to fund eligible medical benefits specified in Section X above.

Upon notification of a Participant's death, the Participant's account balance will be transferred into the Vantagepoint Money Market Fund\* (or another fund selected by the Employer). The account balance may be reallocated by the surviving spouse or dependents.

\* Please read the current Vantagepoint Mutual Funds prospectus carefully prior to investing. An investment in this fund is neither insured nor guaranteed and there can be no assurance that the Fund will be able to maintain a stable net asset value of \$1.00 per share. Vantagepoint Mutual Funds are distributed by ICMA-RC Services, LLC, a wholly-owned broker-dealer affiliate of ICMA Retirement Corporation. Member NASD/SIPC.

If a Participant's account balance has not been fully utilized upon the death of the eligible spouse, the account balance may continue to be utilized to pay benefits of eligible dependents. Upon the death of all eligible dependents, the account will revert to the Plan to be applied as specified in Section VIII.

#### B. No Surviving Spouse or Surviving Dependents

If there are no living spouse or dependents at the time of death of the Participant, the account will revert to the Plan to be applied as specified in Section VIII.

## XII. The Plan will operate according to the following provisions:

## A. Employer Responsibilities

- 1. The Employer will submit all VantageCare Retirement Health Savings Plan contribution data via electronic submission.
- 2. The Employer will submit all VantageCare Retirement Health Savings Plan Participant status updates or personal information updates via electronic submission. This includes but is not limited to termination notification and benefit eligibility notification.
- **B.** Participant account administration and asset-based fees will be paid through the redemption of Participant account shares, unless agreed upon otherwise in the Administrative Services Agreement.
- C. Assignment of benefits is not permitted. Benefits will be paid only to the Participant, his/her Survivors, the Employer, or an insurance provider (as allowed by the claims administrator). Payments to an third-party payee (e.g., medical service provider) are not permitted with the exception of reimbursement to the Employer or insurance provider (as allowed by the claims administrator).
- **D.** An eligible dependent is the Participant's lawful spouse and any other individual who is a person described in IRC Section 152(a), as clarified by Internal Revenue Service Notice 2004-79.
- E. The Employer will be responsible for withholding, reporting and remitting any applicable taxes for payments which are deemed to be discriminatory under IRC Section 105(h), as outlined in the VantageCare Retirement Health Savings Plan Employer Manual.

### XIII. Employer Acknowledgements

A. The Employer hereby acknowledges it understands that failure to properly fill out this Employer VantageCare Retirement Health Savings Plan Adoption Agreement may result in the loss of tax exemption of the Trust and/or loss of tax-deferred status for Employer contributions.

| B. Check this box if you are including supporting documents that include plan provisions. |       |  |
|---|-------|--|
| EMPLOYER SIGNATURE  |       |  |
| By:   | Date: |  |
| Title:  |       |  |
| Attest:   | Date: |  |
| Title:  | _     |  |
| Accepted: VANTAGEPOINT TRANSFER AGENTS, LLC   |       |  |
| angele C. Montez  |       |  |
| Assistant Secretary   |       |  |