



Disaster Child Care Benefit Plan

Introduction

The Disaster Child Care Benefit Plan (“Plan”) was created as a temporary program to assist employees with unexpected childcare costs in response to daycare and school closures as a result of the COVID-19 pandemic. This Plan will commence September 1, 2020 and end December 31, 2020 (“Plan Period”) and reimburses employees up to \$1,800 of eligible child care and tutoring service expenses. Child(ren) must be under the age of 18 on the date the expense was incurred in order to meet eligibility requirements.

Description of Benefit

Costs eligible to be reimbursed through this Plan must be for a qualified disaster relief payment defined under Internal Revenue Code (“IRC”) Section 139 but, within this Plan specifically, limited to child care and tutoring services expenses. Pursuant to President Trump’s declaration that the COVID-19 pandemic is a national emergency falling under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (the “Stafford Act”) on March 13, 2020, the reimbursed payments under this Plan will be non-taxable to employees.

Reimbursement Amount

The maximum reimbursement benefit amount is \$1,800 for the Plan Period.

Claim Submission Deadline

The deadline for submission of eligible expenses incurred during the Plan Period for reimbursement is March 31, 2021.

Eligibility

Eligible Employees

You are eligible to participate in the Plan if you are a full-time or part-time employee. Your coverage in this Plan remains effective during the Plan Period as long as you maintain your eligibility status. **Per Diem employees are not eligible to participate in this Plan.**

Only services for the following dependents will be covered under the Plan:

- Biological children, stepchildren, adopted children or children for whom you or your spouse/domestic partner have legal guardianship and who are under the age of 18 on the date expenses were incurred.
- Eligibility of dependent children will be verified by requiring a birth certificate, adoption paperwork or legal guardianship documents signed by a judge.

Status Changes

Full-time or Part-time Status Change

If you were a full-time or part-time employee as of September 1, 2020, and change to per diem status during the Plan Period, only expenses incurred prior to your status change date are eligible for reimbursement. Your eligibility to participate in the Plan ends as of your status change date. The deadline for submission of eligible expenses for reimbursement is March 31, 2021.

New Hires

If you are hired as a full-time or part-time employee during the Plan Period, your eligibility to participate in the Plan begins on your hire date. You may submit eligible claims incurred on or after your hire date.

Termination of Employment

If you were a full-time or part-time employee as of September 1, 2020, and terminate your employment with Sharp during the Plan Period, only expenses incurred within the period of your employment are eligible for reimbursement. Your eligibility to participate in the Plan ends as of your termination date. The deadline for submission of eligible expenses for reimbursement is March 31, 2021.

Per Diem Status Change

Per Diem employees are not eligible to participate in the Plan. If you were a per diem employee as of September 1, 2020 and transfer to a full-time or part-time position during the Plan Period, your eligibility to participate in the Plan begins on your status change date. You may submit eligible claims incurred on or after your status change date to full-time or part-time status.

Leave of Absence

If you are a full-time or part-time employee on a leave of absence as of September 1, 2020, or you begin or return from a leave of absence during the Plan Period, you are eligible to participate in the Plan before, after, and during your leave of absence.

Reimbursable Expenses

The following is a partial list of eligible and ineligible expenses:

Reimbursable Expenses

- After school care or extended day Plans.
- Au pair expenses (not airfare or other fixed costs).
- In-home care (unless care was provided by a child of the employee (or spouse) under age 19, or is otherwise claimed as a dependent by the employee or spouse on IRS documents).
- Dependent day care center expense.
- Pre-kindergarten or nursery school.

Non-Reimbursable Expenses

- Advance payment of day care expense.
- Chauffeur.
- Care provided by a tax dependent or child / stepchild of the employee under age 19.
- Cook.
- Educational expenses: kindergarten and above.
- Fees for extracurricular activities such as team or individual sports.
- Food expenses.

- FICA and FUTA taxes of the day care provider
- Nanny expenses.
- Relative of a participant, expenses paid for child care (unless the relative is a tax dependent of the participant or spouse or is a child under age 19).
- Sick-child facility (if expenses incurred to enable the participant to work when the child is ill).
- Summer day camp (custodial in nature rather than educational).
- Tutoring services (unless services provided by a child under age 17).
- Gardner.
- Household services, e.g., housekeeper, maid or cook.
- Incidental expenses, e.g., extra charges for diaper changing, special activities, etc.
- Maid.
- Music or piano lessons.
- Overnight camp.
- Registration fees or care.
- Transportation expenses.
- Volunteer work- expenses incurred to enable participant to volunteer.

Duplicate Claims

Participants of Sharp HealthCare Dependent Day Care Flexible Spending Account (FSA)

The Disaster Child Care Benefit Plan is separate and apart from your Flexible Spending Account, if you have one. Expenses you have reimbursed through your Dependent Care FSA cannot be reimbursed a second time through the Disaster Child Care Plan. Both payments will be reported to the IRS and could trigger an audit of your records. Duplicate claims may also subject you to corrective action

Two Sharp Employees

The Disaster Child Care Benefit Plan provides a benefit of up to \$1,800 for reimbursement of eligible child care expenses incurred during the Plan Period for each employee. This means that two Sharp employees who are married or certified domestic partners are each eligible for the benefit. However, the same child care expenses cannot be submitted twice. Both payments will be reported to the IRS and could trigger an audit of your records. Duplicate claims may also subject you to corrective action.

Reimbursement Process

Reimbursement After Completion of Service

This is a reimbursement Plan. Once the service is completed, you will submit a claim form with receipts and one of the necessary dependent eligibility verification documents listed on page 1 (under Eligibility) for each dependent child. In order to be eligible to receive reimbursement, the expenses incurred must be for an eligible dependent (see Eligibility).

Required Documentation

All costs for which reimbursement is claimed must be supported by reasonable documentation. Claims for reimbursement must include all of the required documentation listed in the chart below. **Health Equity will deny the claim if this documentation is not attached to the claim request.** This will delay the reimbursement of your claim.

Required Documentation	
Claim for Reimbursement	All claims for reimbursement shall be processed via the Health Equity website, or by completing a claim form and faxing or mailing the claim to Health Equity.
Proof of Cost	The claim should include the name of the service provider, date of service, service description, service recipient, and the amount paid. Copies of itemized billing statements and itemized receipts of cost are acceptable.
Verification of Dependent	Each submitted claim must include documentation that the service was provided for an eligible dependent. Documentation to provide proof of dependent eligibility includes the following: <ul style="list-style-type: none"> ▪ Copy of a birth certificate for a biological child. ▪ Court document signed by a judge showing that you and/or your spouse/domestic partner are the legal guardian(s) of the child. ▪ Copy of adoption documentation.

How to Submit Your Reimbursement Request

You may submit your claim using the Health Equity website at www.wageworks.com or by faxing or mailing a completed claim form and required documents. The claim must include proof of cost and verification of dependent. The following chart provides details on the methods of submission:

Method	Description
Secure Upload	You may log onto your secure account at www.wageworks.com and then attach your scanned claim for reimbursement and the required documentation.
Mobile App	Submit claims and EZ Receipts using Mobile Application: http://wageworks4me.com/aboutmobile/
Fax	You may fax your claim for reimbursement and required documentation to Health Equity at: 1-877-353-9236
Mail	You may mail your claim for reimbursement to Health Equity at: Claims Administrator P.O. Box 14053 Lexington, KY, 40512

Payment of Claim

Claims will be reviewed within 3 business days after receipt. You may check the status of your claim by logging in to your account at www.wageworks.com. Reimbursement payments will be distributed to you by either direct deposit (received approximately by the 5th business day) or by check (received approximately by the 10th business day). The reimbursement payments will be distributed by Health Equity.

Denied Claims

If your claim is denied, you will receive communication from Health Equity specifying the reason for denial. The denial communication will be sent to the e-mail address and the U.S. mail address you have on file with Health Equity.

Administrative Information

The Plan is administered through Health Equity. If you have questions regarding the Plan contact a Health Equity Plan representative at 1-877-924-3967 or the Sharp Benefits Hotline at 1-858-499-4336.

Secure Website For Account Balance Information

Eligible employees may access Health Equity's secure website at www.wageworks.com to review account balance, transactions pending, and payment status information. The website has the following functionality and will allow participations to:

- Review reimbursement transactions as well as transaction status (Paid, Pending, and Denied).
- Upload scanned request forms and receipts over a secure, encrypted connection.

Sharp HealthCare reserves the right to change these benefits if you are unable to work your regularly scheduled shift. The purpose of this program is to enable you to work your regularly scheduled shift at Sharp.