



Beneplan Inc. Cost-Plus Agreement

Effective <DATE>

Company Name

And

Claims Adjudicator

Beneplan Inc <http://beneplan.ca> (herein referred to as “Beneplan” or “Beneplan Inc”)
500-150 Ferrand Drive
Toronto ON M3C 3E5
1-800-387-1670

The Beneplan Inc point of contact for Cost-Plus transactions is Vincenza Principato – vincenza@beneplan.ca .

This agreement hereby appoints Beneplan Inc as the claims adjudicator for the Plan Sponsor’s Cost-Plus arrangement.

1. Benefits and Class Structure

CLA – CEO, COO, and Executives

Benefit: \$10,000 per individual, per calendar year.

The benefit cannot be rolled over into the following calendar year. Claims must be made within twelve (12) months of the date of service. The benefit calculation is based on the occupation class and the comparable benefits compensation found in our industry’s marketplace for talent.

CLB – Employees with tenure of 15+ years

Benefit: \$1000 per certificate, per calendar year, subject to pre-approval. The benefit cannot be rolled over into the following calendar year. Claims must be made within twelve (12) months of the date of service.

CLB – Employees with tenure of less than 15 years

Not eligible for cost-plus claims.

2. Claims Adjudication

All expenses submitted to Beneplan Inc must be medically necessary and an eligible medical expense according to Canada Revenue Agency guidelines.

Please see <http://www.cra-arc.gc.ca/tx/ndvdl/tpcs/ncm-tx/rtrn/cmpltng/ddctns/lns300-350/330/llwbleng.html> for a full list of items.

Here is a summary of what can be claimed:

- Prescription drugs
- Paramedical services

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- Nursing services
- Dental care
- Medical equipment
- Home care products
- Physician services
- In vitro fertility programs
- Vision care expenses
- Medical services provided outside of Canada by licensed physicians or hospitals
- Travel expenses incurred to obtain medical services

Please also consult the list of which expenses are not considered eligible:

<http://www.craarc.gc.ca/tx/ndvdl/tpcs/ncm-tx/rtrn/cmpltng/ddctns/Ins300-350/330/ntllwbl-eng.html> .

They largely consist of cosmetic procedures which are not medically necessary.

Any non-eligible expenses submitted to Beneplan Inc will not be reimbursed. Original receipts will not be returned.

3. How to Make a Claim

Here are the steps on how to make a cost-plus claim with Beneplan:

1. Pay for the expenses out-of-pocket.
2. Photocopy and file all receipts and invoices.
3. Fill out the Beneplan Cost-Plus Claim Form, attach original receipts, and mail it to Beneplan Inc at 500-150 Ferrand Drive, Toronto ON M3C 3E5. Emailed claims can be sent to vincenza@beneplan.ca .
4. Beneplan will reimburse the member for the cost of the expenses, and add an amount owing on the next scheduled billing as a special item.
5. The Plan Sponsor must pay the next billing and include a separate cheque to the order of 'Beneplan Inc' for the amount on the billing.

4. Fees and Taxes

The CRA requires that cost-plus claims are subject to taxes. Here is a breakdown of all fees and taxes which each claim attracts:

1. 8% Beneplan Inc administration fee charged on the claim.
2. 2% Premium Tax charged on the claim.
3. 8% Ontario Retail Sales Tax for Insurance Premiums charged on the amount of the claim plus the above 10% fees and taxes.

Total fees and taxes are 18% of the claim.

5. Tax Deductibility

All cost-plus expenses are deductible by the Plan Sponsor as a business expense, providing that it meets the following criteria:

1. All employees of the Plan Sponsor are eligible to partake in the program;
2. Expenses are deemed eligible by the CRA; and,
3. Associated fees and taxes are paid.



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6. Premium Payment

Premiums are due upon the Plan Sponsor's receipt of the billing. The date which Beneplan Inc produces and emails the billing to the billing contact on file will be deemed to be the date that the Plan Sponsor is in receipt of the billing. Late premiums for cost-plus services will be subject to a 2% late penalty. Premiums which are over 45 days late will lead to the Plan Sponsor's account being suspended. Suspended accounts are not eligible for claims payment until any outstanding premiums have been collected.

Premiums over 60 days late may mean a permanent suspension of claims payment with all carriers who underwrite claims or risk for the Plan Sponsor as arranged and administered by Beneplan Inc.

Suspended accounts or suspended claims will be reinstated within 5 business days of any late premiums being received for outstanding claims or services.

7. Pre-Approval Process

In order for plan members in Class B of the program to make a claim, they must submit a pre-approval form to Beneplan Inc. Please see the enclosed pre-approval form. The form must be filled in by a licensed physician, as well as any other contributing practitioner who is completing the service or supplying the product.

Beneplan Inc will review the claim and make a decision based on the diagnosis of the practicing physician.

The Plan Sponsor reserves the right to override any decision made by Beneplan Inc.

8. Governing Laws

Notwithstanding the above, this agreement defers to the governing laws of the Province of Ontario and the Nation of Canada.

Signed Without Prejudice

Full Name, Title, and Signature of the Agent of the Plan Sponsor

Dated:

Full Name, Title, and Signature of the Agent of Beneplan Inc.

Dated: