



HEALTH REIMBURSEMENT ACCOUNT PLAN

with Beniversal® MasterCard®

PLAN HIGHLIGHTS*

(page 1 of 2)

A. Plan Information for your Health Reimbursement Account (HRA)

1. Employer name: Premier Talent Partners.
2. Plan name: Premier Talent Partners Health Reimbursement Account Plan.
3. Eligibility requirements: Must be an employee of Premier Talent Partners who is enrolled in the employer sponsored health plan.
 - Shareholders who are employees who own more than 2% of the stock cannot participate.
 - An employee who is the spouse, child, parent or grandparent of a more than 2% owner cannot participate.
 - *If you or your spouse is reporting contributions to a Health Savings Account, you cannot participate in an HRA.*
4. The effective date on which you can begin participating in the Plan: On the first of the month once the eligibility requirements have been met.
5. Employer contribution per Plan Year: To be determined by Employer. If the contribution amount changes in subsequent Plan Years, the Employer shall provide written notice of the change to Participants prior to the first day of the Plan Year.
6. The Plan Year begins on January 1 and ends on December 31.
7. Plan effective date: May 1, 2005.
8. Plan number: 510.
9. Employer ID number: 94-3308724.
10. Name, address and telephone number of the Plan Administrator:
Premier Talent Partners
3595 Mt. Diablo Blvd. Suite 340
Lafayette, CA 94549
(415) 362-2211
11. Agent for service of process: Premier Talent Partners.

B. Account Information

1. Medical Expense Information

- (a) Eligible expenses under the Plan are defined by Internal Revenue Code Section 213(d) medical expenses except for:
 - Medical insurance premium
 - Dental expenses
 - Vision expenseNote: Claim submission required for eligible prescription expenses.
- (b) If expenses are eligible under both an HRA and Medical Flexible Spending Account (FSA) sponsored by your employer, your HRA funds will be used first until they are exhausted.
- (c) Eligible expenses must be provided to you, your spouse or eligible dependents who are covered by a group health insurance plan outlined in A.3. above.
- (d) Expenses must not be reimbursed from any other source.

2. Eligible Service Time Frames

- (a) For active participants:
 - Eligible services must be provided:
 - after your effective date in the Plan and
 - during the Plan Year.
- (b) If you become ineligible (including termination of employment) during the Plan Year:
 - Eligible services must be provided:
 - after your effective date in the Plan,
 - during the current Plan Year and
 - prior to the end of the month in which you become ineligible.
 - The Beniversal Card may no longer be used to access HRA funds. You may submit a claim for reimbursement of eligible expenses.

3. Claims for HRAs

Claim submission time frames

- (a) For active participants:
 - Claims must be received by Benefit Resource, Inc. before the end of the 60 day run-out after the Plan Year ends.
 - Claims denied during the run-out may be resubmitted, but must be received by Benefit Resource within 21 days after the run-out ends.
 - Any funds remaining in your account after this will be forfeited.
- (b) If you become ineligible (including termination of employment) during the Plan Year:
 - Eligible claims must be received by Benefit Resource before the end of the 60 day run-out after the last day of the month in which you become ineligible.



HEALTH REIMBURSEMENT ACCOUNT PLAN

with Beniversal® MasterCard®

*PLAN HIGHLIGHTS**

(page 2 of 2)

- Claims denied during this run-out may be resubmitted, but must be received by Benefit Resource within 21 days after the run-out ends.
- Any funds remaining in your account after this will be forfeited.

Claim reimbursements

- (a) Complete your claim following all instructions.
- (b) Claims received with proper documentation will be processed within 5 business days.
- (c) Claim reimbursements are processed daily.
- (d) There is a minimum reimbursement amount of \$15 (except during the run-out after the end of the Plan Year).
- (e) A claim should never be submitted for an expense that has been paid for with a Beniversal Card or reimbursed from any other source.

4. Beniversal Card for HRA

- (a) The Beniversal Card allows you to access HRA funds to pay for eligible medical services at qualified merchants.
- (b) The card may only be used to pay for eligible medical services after they have been provided. The IRS allows one exception: eligibility of orthodontia expenses can be based on either date of payment, date of service or payment due date on coupons/statements.
- (c) Payment of a current Plan Year medical service with the card must be completed before the Plan Year ends.
- (d) Once a new Plan Year begins, only HRA funds associated with the new Plan Year will be available on the card.
- (e) You are advised to save all documentation related to medical expenses paid with your card, as IRS regulations require all transactions to be verified for eligibility.
- (f) If a card transaction cannot be automatically verified, you will be contacted to submit documentation for that transaction.
- (g) Medical expenses paid with the card should never be submitted for claim reimbursement.