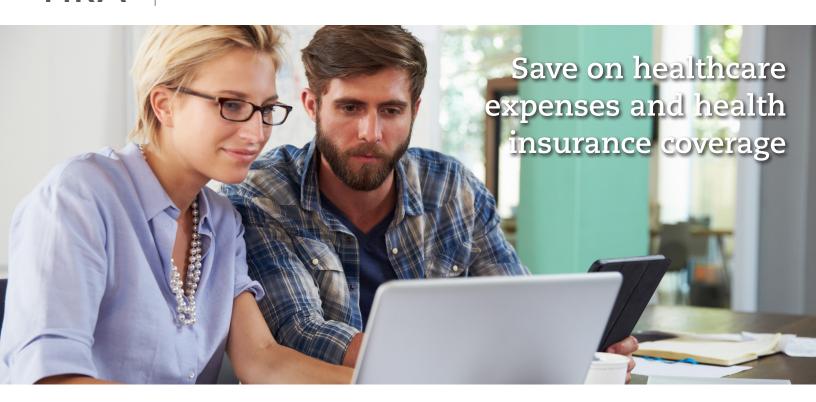


Health Reimbursement Arrangements



TASC offers you the benefits of a Section 105 Medical Reimbursement Plan that is designed specifically for small employers, also known as a Qualified Small Employer Health Reimbursement Arrangement (HRA).

A Qualified Small Employer HRA is a tax-advantaged benefit that allows you to save on the cost of healthcare and have more choice in your healthcare planning.

Enrolling in a TASC Qualified Small Employer HRA provides you tax-free dollars funded solely by your employer that may be used to reimburse medical insurance premiums under an individual policy and 213(d) healthcare expenses.

This flyer offers a general description of a TASC Qualified Small Employer HRA Plan. Your specific Plan and the benefits available may differ slightly. You will receive a customized Summary Plan Description (SPD) outlining your Plan within 60 days of enrollment.

How a Qualified Small Employer HRA Works

Qualified Small Employer HRA Plans are employer-funded medical reimbursement plans. Your employer sets aside a specified amount of pre-tax dollars on an annual basis for you to use to pay for healthcare expenses (as defined by your Plan). These contributed funds are available to you completely tax free!

Participants must have a form of Minimum Essential Coverage, such as an individual health insurance policy or coverage under a spouse's or parent's employer-sponsored health plan, in order to receive tax-free reimbursements from the Qualified Small Employer HRA.

Qualified Small Employer HRA Features

- Plan funds are immediately available
- Unused funds may rollover to the next Plan Year (if your Plan allows)
- Online claims submission
- Daily reimbursement processing
- Direct deposit
- 24/7 account management
- Toll-free customer service available

Reimbursement Requirements

Most Plan types include reimbursement of the following healthcare expenses:

- Individual Health Insurance Premiums
- Deductible Expenses
- Coinsurance Expenses
- Copay Expenses
- Prescription Medication
- Uninsured Medical Expenses

You will receive specific information about your Plan from your HR Department.





Track account activity online at www.tasconline.com.

Reimbursement Process

You may request reimbursement any time a qualifying expense has been incurred. The service related to the expense needs only to have taken place; it need not be paid before requesting reimbursement. Simply submit a Request for Reimbursement form along with the required substantiation to TASC (via online form, fax, or mail) for timely processing.

Qualified reimbursements are limited to the following:

- eligible expenses must be incurred during the Plan Year and pursuant to the Plan design;
- eligible Plan Participants must incur the expense; and
- expenses must not be previously reimbursed under this or any other benefit Plan, or claimed as an income tax deduction.

Once a request is reviewed and approved by TASC, a reimbursement check will be mailed directly to your home address or processed through your bank (if you elect Direct Deposit). The Plan contribution limit will be factored in.

Runout Period

The three months following the end of the Plan Year are called the runout period. During this time, you may submit Requests for Reimbursement for expenses from the previous Plan Year if you have a positive balance.

