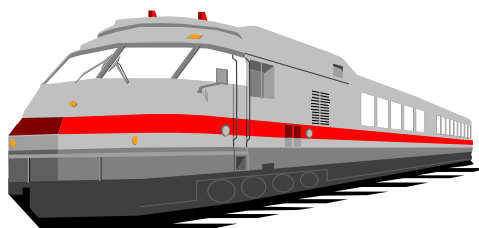


BrightStar Care of San Francisco & Marin

PRE-TAX COMMUTER EXPENSE PROGRAM HANDBOOK

2015



Administered by



PENSION DYNAMICS
COMPANY LLC

2300 Contra Costa Blvd. * Suite 400 * Pleasant Hill * CA * 94523-3987
Phone (925) 956-0514, Fax (866) 320-1931
www.PensionDynamics.com

**BrightStar Care of San Francisco & Marin
PRE-TAX COMMUTER EXPENSE PROGRAM**

BrightStar Care of San Francisco & Marin is pleased to sponsor an employee benefit Program known as the “BrightStar Care of San Francisco & Marin Pre-Tax Commuter Expense Program” (the “Program”) for you. BrightStar Care of San Francisco & Marin is providing you with the opportunity to use pre-tax dollars to pay for eligible Commuter Expenses by entering into a salary reduction arrangement.

This Program Summary describes the basic features of the program, how it operates, and how you can get the maximum advantage from it. In the event there is a conflict between this summary and the Program itself, the terms of the Program will control. Upon request, you may obtain a copy of the actual Pre-Tax Commuter Expense Program document from the Program Administrator (BrightStar Care of San Francisco & Marin).

Identification Of Program:

Company Name: BrightStar Care of San Francisco & Marin
Program Name: BrightStar Care of San Francisco & Marin Pre-Tax Commuter Expense Program
Address: 150 Shoreline Hwy, Suite B28
City: Mill Valley, CA 94941

What Is A Pre-Tax Commuter Expense Program?

A Pre-Tax Commuter Expense Program, also known as a Section 132 Program, allows you to use pre-tax dollars to pay for your Qualified, Work Related, Transportation and Parking Expenses.

Who Can Participate?

As an employee of BrightStar Care of San Francisco & Marin, you are eligible to participate in this Pre-Tax Commuter Expense Program as of the first of the month following your date of hire. This Plan is only for reimbursement of your own Commuting Expenses, not those of your spouse or other family members.

What Tax Advantages Are Available Through The Program?

The Program permits you to pay for eligible Commuter Expenses (defined in Q& A – 8) with pre-tax dollars through salary reduction rather than after-tax pay. The use of pre-tax dollars reduces your taxable income and you save income, Social Security and other taxes on the amount of your salary reduction.

The Table Below Illustrates This Savings.

	With Commuter Program	Without Commuter Program
Monthly Base Salary	3,000.00	3,000.00
Pre-Tax Transportation	(100.00)	0.00
Pre-Tax Parking	(150.00)	0.00
Adjusted Taxable Income	2,750.00	3,000.00
Federal Withholding (20%)	(550.00)	(600.00)
State Withholding (5%)	(137.50)	(150.00)
Social Security (6.20%)	(170.50)	(186.00)
Medicare (1.45%)	(39.88)	(43.50)
CA SDI (1.20%)	(33.00)	(36.00)
Subtotal	1,819.13	1,984.50
<u>Expenses</u>		
Transportation	Paid by plan	(100.00)
Parking	Paid by plan	(150.00)
Spendable income	1,819.13	1,734.50

This is a savings of \$84.63 a month which equals a total savings of \$1,015.56 annually.

How Do I Enroll?

Assuming you are eligible, you become a Participant by completing the attached Pre-Tax Commuter/Parking Enrollment Form and submitting it to your Human Resources representative. Your participation will begin on the first of the month following your submission. Your deductions will be taken monthly thereafter.

May I Enroll In Both The Parking And The Transportation Accounts?

Yes, as long as you have expenses that qualify under both programs and as long as you do not exceed the Monthly Maximums. Each account is tracked separately.

How Is My Account Funded?

When you complete the Pre-Tax Commuter/Parking Enrollment Form you specify the amount you wish to have deducted from your salary each month for either Transportation and/or Parking Expenses. Your deductions will be taken monthly and credited to the appropriate account(s). You may then submit receipts for your eligible Transportation and/or Parking Expenses against the balance available for reimbursement.

What Is An "Eligible" Commuter Expense?

"Transportation Expenses" are defined as expenses incurred for a pass, token, fare card, voucher, or similar item for transportation (a) on mass transit facilities including BART, Muni, ferry, cable car, etc., or (b) in a Commuter Highway Vehicle (Vanpool) if such transportation is in connection with travel between your residence and place of employment. A Commuter Highway Vehicle is any highway vehicle with a seating capacity of at least six adults (not including the driver), and for which at least 80% of the mileage is for the purposes of transporting employees in connection with travel between their residences and their places of employment.

"Parking Expenses" are defined as expenses incurred to park your car on or near the business premises of your employer, or expenses incurred to park your car at a location from which you commute to work by (a) mass transit, (b) Commuter Highway Vehicle, or (c) carpool.

What Is An "Ineligible" Commuter Expense?

Individual carpools, bridge tolls and taxi fares are not eligible for reimbursement through this Plan. Individual carpools include "casual" carpools at bridges and other public locations. Also carpools you organize in your personal vehicle are not eligible Commuter Expenses.

What Is The Maximum Qualified Commuter Expense Benefit I May Elect?

The maximum amount you may contribute to each account cannot exceed the maximum amount specified in Code Section 132(f). The maximum amounts are:

For Parking Expenses	\$250/month
For Transportation Expenses (Public transportation/vanpool)	\$130/month

How Do I Receive Reimbursement Under The Program?

Requests for reimbursement should be sent to Pension Dynamics. Request for Reimbursement Forms can be found on our website here: <https://www.pensiondynamics.com/resources/forms>.

Claims can also be submitted electronically through our website at www.pensiondynamics.com. Instructions for online claims submission are here: <https://pensiondynamics.com/resources> under the section *Important Information*.

Reimbursement will be made by direct deposit into your bank account when you submit a completed Direct Deposit Form. The Direct Deposit Form can be found here: <https://www.pensiondynamics.com/resources/forms>

Commuting Expenses cannot be reimbursed until the expense has been incurred. For example, services for the month of January cannot be reimbursed until January 1st. Also, you can only be reimbursed your current account balance. If you send in a claim for \$130.00 for services for January and you have \$50.00 deducted twice a month we will reimburse \$100.00 once

the January contributions are posted and the month has begun. The remaining \$30.00 will be reimbursed once additional contributions are posted to your account.

If your employment terminates mid-year, either voluntarily or involuntarily, your coverage in this plan will terminate as of that date. You will have 90 days to submit claims incurred while you were an active employee.

Can I Change My Election?

Once executed, the agreement to reduce your salary will remain in effect until you submit a new Pre-Tax Commuter/Parking Enrollment Form stating a revised amount. If you are discontinuing the program, simply put \$0.00 as the elected amount. The requested change will be implemented on the first payroll of the month following your submission of the written request.

Failure To Elect

If you do not sign a new form for the Program, the most recent Pre-Tax Commuter/Parking Enrollment Form will apply, with the same reduction of compensation. If there is no signed Pre-Tax Commuter/Parking Enrollment Form on file at all, it is understood that you have chosen not to Participate in the Program.

What If I Overestimate My Expenses?

If your reimbursement request was for less than your current account balance, the unused amounts will roll over and be available for future reimbursements. You may need to adjust your monthly deduction amount for the next coverage period in order to use up your surplus account balance. For example, if your monthly parking election (and anticipated monthly expense) is \$100, but you only incur \$75 worth of eligible parking expenses in January, you might want to change your election for February (prior to February 1st) to \$75 in order to use up the \$25 surplus from January. Then you may want to increase your election back to \$100 for March (prior to March 1st). At no time may you exceed the Monthly Maximums set forth In Code Section 132(f).

What If I Underestimate My Expense?

If your reimbursement request was for an amount that was less than the monthly maximum amount but more than your current account balance, the excess part of the reimbursement request will be carried over into the following month(s) to be paid out as your balance becomes adequate (subject to monthly maximums described above). Remember, though, you may not be reimbursed for an expense that was incurred prior to your participation in the plan.

How Long Will The Program Remain In Effect?

Although we expect to maintain the Program indefinitely, we reserve the right to modify or terminate the Program at any time. It is also possible that future changes in state or federal tax laws may require that the Program be amended or modified.

What Happens If A Pre-Tax Commuter Claim Form Is Denied?'

You will be notified in writing within 30 days of the date you submitted your request. Such notification will set out the reasons your request was denied.

What Effect Will Program Participation Have On Social Security And Other Benefits?

Program participation will reduce the amount of your taxable compensation. Accordingly, there could be a decrease in your Social Security benefits or other benefits (e.g. pension, disability and life insurance), which are based on taxable compensation.

If you have any further questions regarding the terms of this program, contact your Human Resources Representative. You may also contact Pension Dynamics with questions via email at Benefits@PensionDynamics.com.

Web Site Registration Instructions and Online Claim Entry Submission

1. Go to www.PensionDynamics.com (Internet Explorer Recommended)
2. Click the **LOGIN** button (upper right corner of home page)
3. Click on **FLEX**
4. Click on **REGISTER** (Below login boxes)
5. Click on **PENSION DYNAMICS CORP. TEMPORARY LOGIN ID & EMPLOYER CODE**

Follow the instructions on the registration page:

6. Enter your SSN (no dashes or spaces) in the Login ID field.
7. Enter your Employer Code (**31715825**) in the Employer Code field and click CONTINUE.
8. Enter a login ID of your choice that is at least 6 but not more than 100 characters in length. Note: Since Social Security Numbers are no longer used as the login ID, the login ID you create may not be 9 characters in length.
9. Enter an e-mail address to be used to receive e-mails re: forgotten passwords.
10. Enter a secret question or use a predefined secret question to prompt your memory of your password.
11. Enter the answer to the secret question.
12. Click **SUBMIT**.
13. Click the continue link.
14. Enter a new password in the New Password field.
15. Re-enter the password in the Confirm New Password field.
16. Click **CHANGE PASSWORD**.
17. You are now logged on to the **Pension Dynamics** web page powered by *myRSC*.
18. Click the "Online Claims Entry" link or the icon.
19. Click "Start New Claim Form."
20. Select the type of claim you wish to enter.
21. You may choose to "Submit Online" or "Fax."
22. Choosing to "Submit Online" allows you to upload the receipt in the form of a pdf document, bmp, gif, png, or jpg file.
 - a. If you choose to "Submit Online" you will not have to print and fax.
 - b. You can still choose to print and fax the forms by selecting the "Fax" option.
23. To upload the receipt, click browse, locate the pdf, bmp, gif, png or jpg file. All claims will require a receipt to be uploaded so please be aware that:
 - a. Dependent Daycare claims can be submitted with a provider's signature instead of submitting a receipt however we currently do not have a way for the provider to sign electronically. If you are not able to provide a receipt containing all of the need information, you will need to submit this form via fax. The form can still be completed online, it would just be printed, signed by the provider and then faxed to us once completed.
24. Click "OK" when asked to verify the upload.
25. You can click the "View" link to view the file you uploaded and make sure it is readable.
26. Complete the claim fields and click "Save the Claim." You cannot save unless you have attached a receipt, if you have selected "Submit Online."
27. You can continue to enter claims and upload/attach receipts until you click "Submit the Claim Form Online."
28. You will receive an email, if you have selected to receive emails, notifying you the claim has been received by your TPA.

If you have any questions, please call (925) 956-0514 or e-mail us at Benefits@PensionDynamics.com.

COMMUTER/PARKING ENROLLMENT

Plan Year: January 1, 2015 through December 31, 2015

INSTRUCTIONS: Complete this Enrollment Form if you wish to participate in **any** portion of the commuter plan. You may elect to participate in one or any combination of the two benefits outlined below. Return the completed forms to your in-house Benefits Administrator. Pension Dynamics will set up your account within two (2) business days after receiving the completed forms from your employer. After your account is set up, please go to www.pensiondynamics.com and log in to your account per the instructions included in your plan handbook. If you do not have a copy of the handbook for this benefit please contact your in-house Benefits Administrator or Pension Dynamics.

Company/Plan Name _____

SECTION 1. EMPLOYEE INFORMATION (all fields in this section are required)

Name _____ Social Security Number _____ Date of Birth _____ Date of Hire _____
Address _____ E-mail Address _____
City _____ State _____ Zip Code _____ Phone Number _____

SECTION 2. PLAN PARTICIPATION (To terminate your participation in a benefit, please elect zero for the benefit you wish to terminate)

Transportation Expense Reimbursement Account

I elect \$ _____ monthly.

I authorize my employer to reduce my salary on a pre-tax basis, **not to exceed \$130 per month**, to be used for the reimbursement of my eligible transportation expenses.

Parking Expense Reimbursement Account

I elect \$ _____ monthly.

I authorize my employer to reduce my salary on a pre-tax basis, **not to exceed \$250 per month**, to be used for the reimbursement of my eligible parking expenses.

Decline I am declining participation in **both** benefits.

SECTION 3. mySourceCard™ (if applicable, please refer to your plan's handbook)

I elect to receive a mySourceCard™ debit card

Mother's Maiden Name (required for security purposes only)

SECTION 4. PARTICIPANT AUTHORIZATION

I understand that:

- ❖ I will be using the benefit exclusively for my regular daily direct commute from home to work and return. I will not give, barter, exchange, convey, or otherwise transfer this benefit to any other person.
- ❖ I understand that this election will go into effect the first of the month after I submit this form to the appropriate Human Resources/Payroll representative. I further understand that this election will remain in place until I change or rescind it in writing. To change or rescind this election I understand I will need to complete a new election form and submit it to the appropriate Human Resources/Payroll representative.
- ❖ I further understand and agree that false certification or claims may result in disciplinary action taken by my employer up to and including dismissal from employment and possible prosecution for Federal Income Tax evasion.

Employee Signature

Date