

EMPLOYEE
BENEFIT BOOKLET





For: Dream Digital Group Inc. (the Employer)

# CustomCare Inc. (the Plan Administrator)

# **PURPOSE**

This booklet is designed to provide a general description of and operating procedures for the Plan, which has been established for the employees of <u>Dream Digital Group Inc.</u>

# PLAN ADMINISTRATOR

The Plan is administered by:

# CustomCare Inc.

3600 - 4th Street SE, Calgary, AB T2G 2W3

Phone: (403) 640-6620 Toll Free: (866) 820-2188 Fax: (403) 252-3020





#### **ELIGIBILITY**

Employees are eligible to join the Plan on the date the Employer has established. Please check with your Company Administrator to confirm your eligibility date and complete the necessary forms.

# **DEPENDENT ELIGIBILITY**

Dependents of Employees are eligible to receive benefits under the Plan. A Dependent is defined as:

- · A spouse, legal or common-law;
- Unmarried children under age 21, or under age 25 if they are full-time students;
- · Children who are incapable of supporting themselves because of a physical or mental disability.

# **CO-ORDINATION OF BENEFITS**

Benefits for Employees or dependents will be directly reduced by any amount payable under a government health plan. If the Employee or dependent is entitled to benefits for the same expenses under another health plan, benefits will be coordinated so that the total benefits from all plans will not exceed the actual expense incurred.

This Plan is the second payee with respect to expenses eligible under any other health plan. Claims should be first submitted to any other carrier that is providing health care coverage to the Employee or spouse. Any amount which is not paid by that carrier (for example, as a result of annual limits or coinsurance arrangements) may be submitted under this Plan.

# ANNUAL BENEFIT LIMIT

Each class of Employee has an Annual Benefit Limit as determined by the Employer. This is the maximum eligible expenditures the Employee and dependents can claim per Plan year. **The benefit year runs from January 1st to December 31st.** 

# ADDING/REMOVING DEPENDENTS

- 1. You will receive an email notification that you can login and complete your account set-up
- 2. Login to www.customcare.ca
- 3. Create new password. SAVE
- 4. Review information and make appropriate changes
- 5. Add Dependents
- 6. Set-up banking information
- 7. You can obtain the Benefit Booklet Online
- 8. Wait for verification email. Once received you may submit your claims Online or via the App

# TERMINATION OF COVERAGE

Your coverage under the Plan terminates in the event of:

- Termination of your employment.
- The Employer amends the policy so as not to include employees of your classification.
- The Plan terminates.
- If an employee is terminated by the employer, the employee has 30 days from date of termination to submit expenses that were incurred before that date. The annual benefit limit will be pro-rated for the months they have worked in that benefit year.

At the time coverage ceases for any Employee, coverage for the dependents of the Employee also ceases.

#### **CLAIMS**

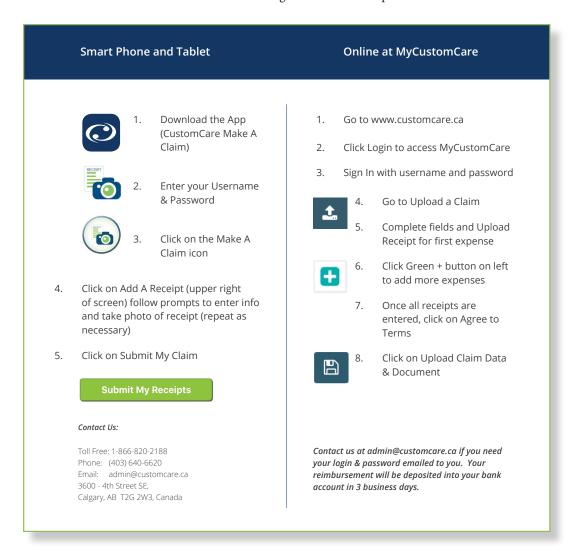
Making a claim is a simple and easy process, but there are a few points that are important to remember and be aware of:

- All expenses incurred should be paid for with Personal dollars.
- Ensure to keep official and original receipts of each expense.
  - a. Please note that all receipts must show paid in full OR:
  - b. If the receipt is going to be partially covered by another plan:
    - i. First submit the claim to the first payer insurer as per their directions.
    - ii. Use the statement the first payer sends as the receipt on the claim to CustomCare.
- Expenses are eligible to be claimed for 365 days (one year) from the date of the expense.
- The expense must have been incurred when the Employee was enrolled in the Plan.



#### **HOW TO MAKE A CLAIM**

- 1. Login using your username and password to one of our claim portals using your cell phone device or a computer
- 2. Please follow the instruction mentioned in the following schematic to complete the claim submission



- 3. Once your claim has been processed, you will receive a confirmation email notification.
  - Please note that you are required to keep all your original receipts on file for 7 years as recommended by the Canada Revenue Agency.
  - CustomCare also reserves the right to perform random audits to insure claims submitted are valid.

#### **CLAIMS PROCESSING**

When a claim is received, CustomCare will first review the claims for suitability and appropriate documentation. If there is any further information required, the Employer will be contacted and the claim will be held until all necessary data is obtained.

CustomCare uses the List of Eligible Medical Expenses established by the Canada Revenue Agency to determine the validity of all expenses claimed. A list of both qualifying and non-qualifying expenses is available on our website under the heading "What's Covered".

Claims will be processed the same day as received unless further information is required. There is a 3 business day turn around at which time the reimbursement will be direct deposited into your account.

Completed claims take 6 business days to process once received. After these 6 days, a reimbursement payment will be issued. The reimbursements are made out to the Employee personally.



#### LIST OF ELIGIBLE EXPENSES

# **Professional Medical Services**

Includes any services performed by a qualified medical practitioner (meaning a person who is authorized to practice as such in the jurisdiction in which the service is rendered). Practitioners include, but are not limited to:

- Acupuncturist
- Chiropodist
- Chiropractor
- Christian Science Practitioner
- Dentist
- Dermatologist
- Dietician
- Massage Therapist
- Medical Doctor
- Naturopath

- Occupational Therapist
- Optometrist
- Orthodontist
- Osteopath
- Pharmacist
- Physiotherapist
- Psychoanalyst
- Psychologist
- Speech Language Pathologist
- Therapist

# Medication

This includes any prescription drugs and medicines prescribed by a qualified medical practitioner and recorded by a licensed pharmacist.

#### **Medical Treatment**

Treatments prescribed by a medical doctor including, but not limited to:

- Insulin treatment
- X-rays
- Psychotherapy
- Laser Eye Surgery

<sup>&</sup>gt; Note: Dental Services include all levels of Dental care from Basic & Preventative to Major & Orthodontic.

<sup>\*</sup>Dermatologist - Only if deemed medically necessary. Cosmetic consults or procedures are not covered.



# Other Medical Expenditures Including But Not Limited To:

- Ambulance charges
- Artificial limbs
- Devices required as a result of disability
- Eye glasses
- Contact lenses
- Crutches
- Hospital Bills
- Vaccine

# Health Care Premium

Premiums paid to non-government Health Plans (e.g. Blue Cross) are eligible. Premiums paid for Provincial Health Care Plans are not eligible.

Note: This is not a comprehensive list. For a more comprehensive list please visit www.customcare.ca

