

MEMBER HONORARIUM & EXPENSE CLAIM – JANUARY 1, 2025

Submit Promptly. Not Payable after 6 months from meeting date.

MEMBER & MEETING INFORMATION – <u>Mandatory for Payment and Audit Purposes</u>									
Member Name:							OMA #:		
Meeting Date: Month:	Day	: Year:		Start T	ime:	a.m./p.m.	End Time:	m./p.m.	
If meeting was 2 days, please enter start and end times for second day				Start Time:		a.m./p.m.	End Time:	m./p.m.	
Group or Meeting Name: Complete a <u>separate</u> form for <u>each</u>	meeting					• •		.	
Meeting Location: 0	MA Office (150 Blo	or Street West) Or (specify	y):						
Role: Chair Grou	up Member	□Other (specify capa	acity/role or rea	son for atte	endance):				
Signature:				OMA Meeting Staff Contact:					
HONORARIUM Please rou For more in		OMA Finance use only Meeting ID#							
Type of Honorarium	Time	Rate see table on reverse	Claim	ed	Paid Reaso		for changes		
Meeting	# hours								
Meeting	# half-days								
Teleconference	# hours								
Travel	# hours								
HONORARIUM CLAIMED	÷		\$						
		ust credit card slips) to a nation, see over - item #		nses <u>in</u>	OMA Finan	ce use only	Form #		
Type of Expense			Claimed		Paid	Reason for changes			
Air / Bus / Train / Flight Pass (<i>please circle mode</i>) Not to exceed Air Canada Economy - Flex class air-fare / Via Rail Economy-Plus train fare									
Automobile	# kms	@ 0.66/km							
Parking									
Taxi									
Hotel (not to exceed OMA negotia	ated rates)	# night(s)							
Meals									
Others (please specify, e.g. Caregiving – see over point #4 under 2C)									
EXPENSES CLAIMED			\$						
TOTAL HONORARIUM & EXPENSES			\$						
DONATION/REDIRECTION					(Please specify	amounts)			
Ontario Medical Foundation / Ontario Medical Student Bursary Fund: Honoraria & Expenses Honoraria Only Other Amount A Charitable Donation Receipt for tax purposes will be issued annually for donations to OMF and OMSBF									
Re-direct to your unit's discretionary account: Honoraria & Expenses Honoraria Only Other Amount \$									
To Submit this form: 1. By Email – sign, scan form & receipts and email to: <u>MemberHonoraria@oma.org</u> 2. By Fax – sign, include receipts and Fax to: Fax: 416-599-9309									

By Post – sign, attach receipts, and return to:

3.

Ontario Medical Association, Finance, Member Claims, 150 Bloor St. West, Suite 900, Toronto, ON M5S 3C1

To receive payment by Direct Deposit / EFT, please access and complete the required documentation available at https://www.oma.org/member/your-association/about-oma/financial-matters-and-expense-claims/ and return to OMA at address above.

OMA – Claim Guidelines

Honorarium and out-of-pocket expenses may be claimed by members participating in OMA related business meetings per the Financial Matters Policy summarized below:

- OMA Board of Directors
- CMA Council: Delegates appointed by the Board
- Committees, Subcommittees, Task Forces and Working Groups: established according to policy and subject to funding.
- Others: meetings in which members take part on the request of, and are responsible to the Board of Directors.

For detailed meeting specifics please refer to complete Financial Matters Policy – <u>https://www.oma.org/member/your-association/about-oma/financial-matters-and-expense-claims/</u>

• Each member under 70 years of age whose expenses are normally paid by the Association is automatically covered by a \$400,000 Accidental Death and Dismemberment policy while on OMA business.

1. HONORARIUM

A. Rates for Meeting, Teleconference, and Travel Honorarium:

OMA Honorarium Basic Rates		ing Attendance sed for meetings up to 2 hours)	Teleconference	Travel
Days Served since January 1	Hourly Rate	Half-Day Rate	Hourly Rate	Hourly Rate
Up to 15	138.00	480.00	138.00	138.00
15.5 to 25	168.00	587.50	168.00	168.00
More than 25	193.00	675.00	193.00	193.00

B. Honorarium for Meetings:

Meeting duration	Basis for honorarium			
0.5 to 2.0 hours	Hourly			
2.5 to 4.5 hours	1 Half-day			
5.0 to 9.5 hours	1 Full day			
More than 9.5 hours (on same calendar day)	3 Half-days			
Teleconferences and travel are calculated on an hourly rate rounded to the nearest half hour				

- Members will be paid at the highest tier for all days served during the calendar year, retroactively if necessary.
- Members of designated bodies and Committee chairs will be paid a premium rate of 25% for meetings of the designated body to reflect time spent outside formal meetings which would not otherwise be paid.

C. Honorarium for Travel:

- Travel honorarium is payable in half-hour increments, at the same hourly rate as meeting time, for time spent travelling to and from an eligible
 meeting for any round trip of one-half hour or more (see table).
- Eligible travel time starts when the member leaves his/her home or office and ends when he/she returns (excluding the time spent in eligible meetings). Travel honorarium is not payable for time spent on personal activity of any nature. Members must schedule their travel as close in time as reasonably possible to the start and end of the meeting.
- If a member chooses other than the most efficient means of travel, travel honorarium will be paid as an allowance reflecting normal travel time by the most efficient means for that trip.

2. OUT-OF-POCKET EXPENSES

- A. Hotel Accommodation: Limited to the most cost effective accommodation within a reasonable distance from the meeting location unless otherwise coordinated by OMA Staff. This information will be updated as it becomes available.
 - When a meeting is held in a hotel, members who stay in the meeting hotel will be reimbursed up to the negotiated OMA rate for that hotel.
 - An allowance of \$100 per night may be claimed as a guest in a private home in lieu of hotel.

B. Meal Allowance:

- Reasonable cost of meals required during the member's absence from home. Maximum daily expense is \$90 including gratuity and taxes. **Personal Expenses:**
- C. Personal Expenses:
 - Not responsible for expenses of spouses, except where specifically allowed in the Financial Policy.
 - Not responsible for entertainment and other items of a personal nature such as laundry, personal telephone calls, in-room and bar charges (including in-room bar). Please omit these items from your claim or indicate your reason for considering them an OMA responsibility.
 - Essential laundry and pressing may be claimed if 3 or more consecutive days of business are required without the opportunity to return home.
 - Caregiving reimbursement: Maximum reimbursable amount will be \$99 for each half day of meeting time and \$162 for each full day of meeting time.

3. NOTES - Claim Submission Deadlines, Cancelled Meetings and Issuing T4 for tax returns:

- Claims for reimbursement of expenses and honorarium will be honoured if received no later than 6 months from the date of the meeting.
- Claims for meeting honoraria will be honoured when a scheduled meeting has been cancelled provided the cancellation was beyond the member's control and the member incurred financial loss beyond his/her capacity to mitigate.
- T4's for honoraria will be issued annually and withholding taxes will be based on the basic personal amount unless a TD1 form has been completed. TD1 forms can be printed from the following Canada Revenue Agency website https://www.canada.ca/content/dam/craarc/formspubs/pbg/td1/td1-25e.pdf and https://www.canada.ca/content/dam/craarc/formspubs/pbg/td1/td1-25e.pdf and https://www.canada.ca/content/dam/craarc/formspubs/pbg/td1/td1-25e.pdf and https://www.canada.ca/content/dam/craarc/formspubs/pbg/td1/td1-25e.pdf and https://www.canada.ca/content/dam/cra-arc/formspubs/pbg/td10-25e.pdf and https://www.canada.ca/content/dam/cra-arc/formspubs/pbg/td10-25e.pdf and https://www.canada.ca/content/dam/cra-arc/formspubs/pbg/td10-25e.pdf and https://www.canada.ca/content/dam/cra-arc/formspubs/pbg/td10-25e.pdf and https://www.canada.ca/content-dam/cra-arc/formspubs/pbg/td10-25e.pdf and https://www.canada.ca/content-dam/cra-arc/formspubs/pbg/td10-25e.pdf and https://www.canada.ca/content-dam/cra-arc/formspubs/pbg/td10-25e.pdf and <a href="https://wwww.canada.ca/content-dam/cra-arc/formspubs/pbg/