

HEALTH COVERAGE CHOICE . . . OFFERING YOU OPTIONS

	Plan basics	Health and Dental Choice A	Health Choice B	Health Choice C
Supplemental prescription drug coverage	<ul style="list-style-type: none"> ■ Available to age 65 ■ Reimbursement of eligible drug expenses ■ We will pay up to \$5 towards the dispensing fee ■ Excludes oral contraceptives ■ includes smoking cessation medication (\$250 lifetime maximum) 	<ul style="list-style-type: none"> ■ 80% reimbursement ■ \$400 per year maximum 	<ul style="list-style-type: none"> ■ 80% reimbursement ■ \$600 per year maximum 	<ul style="list-style-type: none"> ■ 80% reimbursement ■ \$1,000 per year maximum
Supplemental health care	<ul style="list-style-type: none"> ■ Medically necessary supplemental health care expenses including: <ul style="list-style-type: none"> – hearing aids (\$300 maximum every 5 years) – accidental dental (\$2,000 per year maximum) – ground ambulance service ■ Prosthetic appliances/medical equipment and in-home nursing (\$2,500 per year combined maximum/\$20,000 combined lifetime maximum) including: <ul style="list-style-type: none"> – prosthetic appliances, i.e. artificial limbs; – wheel chairs (\$1,000 lifetime maximum), walkers, hospital bed, traction kits; – oxygen, casts, crutches, braces; – orthopedic shoes (\$150 per year); – blood glucose monitor (\$150 every 5 years); – wigs and hairpieces (\$100 per year). ■ Paramedical practitioners expenses (\$25 per visit maximum to \$250 per year maximum for each practitioner). The following paramedical practitioners are covered: <ul style="list-style-type: none"> – acupuncturist – physiotherapist – speech language pathologist – chiropractor, including one x-ray examination per calendar year – osteopath, including one x-ray examination per calendar year – naturopath – podiatrist or chiropodist, including one x-ray examination per calendar year – psychologist(\$50 per visit maximum to \$250 per year maximum) 	<ul style="list-style-type: none"> ■ 80% reimbursement to the stated maximums 	<ul style="list-style-type: none"> ■ 80% reimbursement to the stated maximums 	<ul style="list-style-type: none"> ■ 80% reimbursement to the stated maximums
Preventative dental	<ul style="list-style-type: none"> ■ The following are eligible dental care expenses: <ul style="list-style-type: none"> – examinations and diagnosis – tests, x-rays and lab exams – recall visits every 9 months – preventative services – space maintainers – fillings – extra units of scaling 	<ul style="list-style-type: none"> ■ 80% reimbursement ■ \$700 per year maximum 	<p>Dental can be added as an optional benefit to your plan.</p> <ul style="list-style-type: none"> ■ 80% reimbursement on basic services ■ 50% reimbursement on major restorative dental after a 1 year waiting period, includes: <ul style="list-style-type: none"> – crowns, onlays, bridges, dentures, and associated repairs and adjustments ■ \$700 per year combined maximum 	<p>Dental can be added as an optional benefit to your plan.</p> <ul style="list-style-type: none"> ■ 80% reimbursement on basic services ■ 50% reimbursement on major restorative dental after a 1 year waiting period, includes: <ul style="list-style-type: none"> – crowns, onlays, bridges, dentures, and associated repairs and adjustments ■ \$700 per year combined maximum
Vision: prescription eye wear, eye exam	<ul style="list-style-type: none"> ■ Reimbursement of prescription eye wear and eye exam expenses 	<ul style="list-style-type: none"> ■ 100% reimbursement ■ \$150 maximum every 2 years ■ Includes \$50 per eye exam maximum 	<ul style="list-style-type: none"> ■ 100% reimbursement ■ \$150 maximum every 2 years ■ Includes \$50 per eye exam maximum 	<ul style="list-style-type: none"> ■ 100% reimbursement ■ \$150 maximum every 2 years ■ Includes \$50 per eye exam maximum
Semi-private hospital coverage	<ul style="list-style-type: none"> ■ Reasonable and customary costs based on the insured person's province of residence 	<ul style="list-style-type: none"> ■ 50% reimbursement ■ \$5,000 per year maximum 	<ul style="list-style-type: none"> ■ 50% reimbursement ■ \$5,000 per year maximum 	<ul style="list-style-type: none"> ■ 50% reimbursement ■ \$5,000 per year maximum
Emergency Travel Medical	<ul style="list-style-type: none"> ■ Available until the age of 80 ■ Coverage is available for the first 30 days of a trip 	<ul style="list-style-type: none"> ■ No coverage 	<ul style="list-style-type: none"> ■ \$1 million lifetime maximum 	<ul style="list-style-type: none"> ■ \$1 million lifetime maximum

All annual or lifetime maximums are per person. Annual maximums are based on a calendar year and no unused portion may be carried forward for use in subsequent years.



Health Coverage Choice

For all provinces except Quebec

Moving
on with
benefits



Sun
Life Financial

Leave your group plan but enjoy personal coverage

For many of us, a change in job, personal situation or even retiring means leaving a health and dental care plan behind. Considering the uncertainty these changes can cause, health care may be the last thing you want to worry about.

When you don't have a group benefit plan, health care expenses can add up. But now you can transition quickly and easily from your group insurance plan to personal health insurance coverage.

Your personal plan

Introducing Health Coverage Choice – a personal health insurance plan that provides affordable coverage for unexpected health problems, emergencies and everyday health-related expenses not covered by provincial plans.

Canadian residents up to the age of 74 can purchase Health Coverage Choice. After the policy is in effect, premiums are guaranteed for one year. After that it can be renewed each year for life.

Are you eligible?

Because you have been covered by a group health plan - whether it was through your employer, your spouse's plan or your parent's plan, you can apply for Health Coverage Choice quickly and easily. There are no medical requirements and, depending on the timing of your application, no gaps in coverage.

You have 60 days from the day your group coverage ends to purchase Health Coverage Choice.

If you are applying for supplemental health care and prescription drug coverage, you must have had supplemental health care and prescription drug coverage through your group plan.

If you are applying for supplemental health care, prescription drug and dental coverage, you must have had supplemental health care, prescription drug and dental coverage through your group plan.

If you meet these eligibility requirements, your coverage is guaranteed.

Coverage for your family

Your spouse and dependants who were included on your group plan can be added to your new personal plan. If you have a baby after your coverage is in place, simply contact us within 30 days of the birth and the baby can be added to your plan for a small additional premium.

There are even tax advantages

With Health Coverage Choice you can have the coverage you need – AND you may even qualify to claim your premiums and save valuable tax dollars.* If you are self-employed and unincorporated, you may be eligible to deduct the premiums as a business expense.

** To confirm eligibility for a tax deduction, we recommend you talk to your professional tax advisor.*

Making a claim is easy

- For your prescription drugs, all you need is your Pay Direct drug card.**
- For your dental and health care claims, easy-to-use forms are supplied with your welcome package and are also available on our Web site.

*** Health Coverage Choice does not include a drug benefit for anyone over the age of 65. This is because prescription drugs are covered in most provinces through government sponsored drug plans.*

Important details you need to know

Your policy contains the complete details of the terms and conditions of coverage. Your policy has important exclusions and restrictions. It will be sent to you in your welcome package. Please read your policy carefully and file it in a safe place.

- Coverage through Health Coverage Choice is not identical to your group coverage.
- You must be a resident of Canada and be covered under the provincial health plan in your province of residence to apply for Health Coverage Choice. If you are applying for family coverage, your family must also have provincial health care coverage.
- If you have dependent children between the ages of 21 and 24, they must be full-time students to be covered.
- Your spouse must be 74 years old or younger to be eligible.
- Rates may change from year to year.

There are three plans to choose from

Health and Dental Choice A, with health, drug and dental benefits.

Health Choice B, with health and drug benefits.

You have the option of adding dental coverage.

Health Choice C, with health and drug benefits. You have the option of adding dental coverage.



No access to the Internet? No problem.

If you don't have access to the Internet and would like more information on Health Coverage Choice, please call our Customer Service Centre at 1 800 SUN-LIFE (1 800 786-5433).

Apply today – avoid any gaps in coverage Applying is quick and easy.

1. Go online. Purchase Health Coverage Choice through our Web site at www.sunlife.ca/healthreplacement. This is the place to find complete plan details, answers to commonly asked questions and application forms.
2. Guaranteed coverage. You and members of your family who were covered under your group plan, and meet the age requirements, are automatically eligible. And coverage is guaranteed when you apply within 60 days of your group coverage ending.
3. Calculate your premiums. Premium rates are based on your current age and province of residence.
4. Give us your information. Just complete the online application forms. You'll need to provide:
 - Information about your current group insurance coverage. This is to verify that you currently have appropriate group insurance and are applying within 60 days of your coverage terminating.
 - The birth date of your spouse and any dependent children to be included in Health Coverage Choice. This information is used to calculate your premiums.
5. Wait for coverage to begin. As long as you meet our eligibility requirements, your coverage will begin the day after your group health and dental benefits have ended. If your group health benefits have already ended, your coverage will begin the next business day after your eligibility is confirmed.

www.sunlife.ca/healthreplacement

If Health Coverage Choice does not meet your needs, Sun Life Financial offers other Personal Health Insurance plans.

For more information on Health Coverage Choice or other Personal Health Insurance plans:

- talk to your advisor
- visit our Web site at www.sunlife.ca/healthreplacement
- e-mail us at servicenow@sunlife.com
- call our Customer Service Centre, toll free at, 1 800 SUN-LIFE (1 800 786-5433)

Sun Life Financial is a leading international financial services organization providing a diverse range of wealth accumulation and protection products and services to individuals and corporate customers. Tracing its roots back to 1865, Sun Life Financial and its partners today have operations in key markets worldwide, including Canada, the United States, the United Kingdom, Hong Kong, the Philippines, Japan, Indonesia, India, China and Bermuda.

