

## Administration Guide

for Client-administered group plans

Use this guide if you administer your benefits online through our website **or** if you "self-administer" your benefits and prepare your own billing statements.

Our guides are stored and regularly updated on our Plan Sponsor Services home page.



## Contents (use these handy links)

| Introduction  | 1         |
|---|-----------|
| Other guides  | _<br>1    |
| Protecting members' privacy   |           |
|   |           |
| Who is eligible?  |           |
| <u>Plan member</u>  |           |
| <u>Spouse</u>   |           |
| Dependent children  |           |
| Overage student   |           |
| <u>Disabled dependents</u>  | <u>3</u>  |
| Types of plans and effective dates  | 4         |
| Determining effective dates for new members   | · ·       |
| Mandatory benefit plan  |           |
| Non-mandatory benefit plan  |           |
| Combined mandatory and non-mandatory plans  |           |
| For any coverage requiring proof of good health (see Enrolling in the plan section) |           |
| When a member refuses coverage  |           |
| Reinstating a former plan member  |           |
| If your plan has optional benefits  |           |
| Enrolling in the plan   | 7         |
|   | · ·       |
| The Enrolment form  |           |
|   |           |
| When proof of good health (Statement of Health form) is required                    | <u>/</u>  |
| Submitting a Statement of Health form   |           |
| Naming a beneficiary  | <u>9</u>  |
| Revocable and irrevocable beneficiaries   | 9         |
| Changing a beneficiary designation  | 9         |
| More about beneficiary designations   |           |
| Beneficiaries in Québec   |           |
| Maintaining plan member records   | 12        |
|   |           |
| Recording plan member changes   |           |
| Change from single to family status   |           |
| Adding or removing dependents, newborns, change in spouse, etc                      | <u>13</u> |
| Updating student information  |           |
| Adding coverage that was initially refused due to comparable coverage               |           |
| Adding coverage that was initially refused (other than due to comparable coverage)  |           |
| Terminating coverage  | <u>14</u> |
| Changes due to age or retirement  |           |
| Changing a beneficiary designation  | <u>14</u> |
| Plan members who are approved for disability  |           |
| Maternity/parental leave  | <u>14</u> |
|   |           |

Administration Guide Sun Life Financial

| If your contract has Paid-Up Life  | 15        |
|--|-----------|
| Adding or changing Optional Life benefits                                | <u>15</u> |
| Voluntary termination  | <u>16</u> |
| Purchasing individual insurance when benefits end or reduce              | 17        |
| Who to call  |           |
| Administrative exceptions  | <u>18</u> |
| Waiver of waiting period   | 18        |
| Other administrative exceptions  |           |
| Tax status of employer-paid premiums                                     | <u>19</u> |
| Premiums   |           |
| How premiums are calculated  | 21        |
| How to prepare your premium statement                                    |           |
| Using a customized premium statement                                     |           |
| Calculating salary-based benefits  | <u>22</u> |
| Waiver of premium for plan members on disability                         | <u>23</u> |
| If you have an Administrative Services Only (ASO) arrangement            | <u>23</u> |
| Submitting claims  | <u>24</u> |
| Internet and electronic  | 24        |
| Paper – mail   | <u>24</u> |
| Coordinating benefits with other plans                                   |           |
| Extended Health Care   |           |
| Out-of-province medical expenses   |           |
| Prescription drug expenses   |           |
| Expenses for paramedical services (e.g. chiropractor or physiotherapist) |           |
| Claims for medical equipment expenses                                    |           |
| Pay-Direct Drug plans  |           |
| Dental   |           |
| Health Spending Account  |           |
| Disability   |           |
| Life   |           |
| Living Benefits  |           |
| Other claims   |           |
| Administration and claim forms   | 36        |
| Ordering supplies  | 36        |
| <del></del>  |           |