

Personal Health Insurance

Extended health care and dental plans

Before you choose a plan, it's important that you understand its specific coverage details, definitions, limitations and exclusions. If you want higher coverage levels and are willing to be medically underwritten – where we review your health in greater depth through tools such as a detailed health questionnaire – then you should consider Personal Health Insurance. Learn more by reading this summary, including the **Need to Know – Personal Health Insurance** section. For full product information, including exclusions and limitations, a sample policy can be downloaded from the product selection page of your online application.

You may want to consider personal health insurance if:

- You don't have health benefits through your employer
- You're losing your group coverage
- You'd like additional benefits not offered by your employer's plan or your province's or territory's health and drug coverage.

You must have provincial or territorial health and drug coverage to apply for personal health insurance.

We make it easy to replace health care and dental coverage for you and your family. If you're age 18-69, you can:

- visit sunlife.ca/personalhealth, or
- call us at 1-866-292-2517, Monday to Friday, 8 a.m. to 8 p.m. ET.

You can get coverage for you, your spouse and your dependent children. Your dependent children can also apply for their own Personal Health Insurance coverage once they're no longer eligible under your plan due to their age or student status.

To be eligible, you and each person included in the application must be a resident of Canada and covered under provincial or territorial health and drug insurance. Quebec residents must have and continue to have group drug coverage through an employer, a membership in an order or association or, if not, through RAMQ.

The coverage maximums below are per insured person and per calendar year unless we state otherwise. A calendar year is January 1st to December 31st. These plans don't cover expenses that government health plans cover.

If you've lost your workplace or retiree group benefits coverage in the last 60 days – or will be losing your group benefits – because you are leaving your job or retiring, and you want coverage for your current health needs, you should consider Health Coverage Choice. There is no medical underwriting with Health Coverage Choice. Learn more about Health Coverage Choice by visiting sunlife.ca/hcc, or by calling 1-866-637-4556.

	Basic Plan	Standard Plan	Enhanced Plan	
Prescription drugs	<p>All 3 plans include:</p> <ul style="list-style-type: none"> • Pay Direct Drug card • No deductible • Smoking cessation medication (\$250 lifetime maximum) 	<ul style="list-style-type: none"> • 60% reimbursement • \$750 annual maximum • Excludes oral contraceptives • Up to \$5.00 paid towards dispensing fee on prescriptions 	<ul style="list-style-type: none"> • 70% reimbursement on first \$7,000 of annual eligible expenses (\$4,900 paid expenses) • 100% reimbursement on next \$93,000 of annual eligible expenses • Excludes oral contraceptives • Coverage of reasonable and customary dispensing fees up to the plan reimbursement 	<ul style="list-style-type: none"> • 80% reimbursement on first \$5,000 of annual eligible expenses (\$4,000 paid expenses) • 100% reimbursement on the next \$245,000 of annual eligible expenses • Includes oral contraceptives • Coverage of reasonable and customary dispensing fees up to the plan reimbursement

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		Basic Plan	Standard Plan	Enhanced Plan
Supplemental Health Care	Deductible and reimbursement	<ul style="list-style-type: none"> 60% reimbursement No deductible 	<ul style="list-style-type: none"> 100% reimbursement No deductible 	<ul style="list-style-type: none"> 100% reimbursement No deductible
	Hearing aids	<ul style="list-style-type: none"> \$400 maximum every 5 years 	<ul style="list-style-type: none"> \$500 maximum every 5 years 	<ul style="list-style-type: none"> \$600 maximum every 5 years
	Accidental dental	<ul style="list-style-type: none"> \$2,000 per fracture or injury 	<ul style="list-style-type: none"> \$2,000 per fracture or injury 	<ul style="list-style-type: none"> \$2,000 per fracture or injury
	Ambulance	<ul style="list-style-type: none"> Ground or air ambulance services 	<ul style="list-style-type: none"> Ground or air ambulance services 	<ul style="list-style-type: none"> Ground or air ambulance services
	In-home nursing¹ and home care	<ul style="list-style-type: none"> \$2,500 annual maximum and a \$20,000 lifetime maximum combined with medical equipment and services 	<ul style="list-style-type: none"> Combined \$5,000 annual maximum and a combined \$25,000 lifetime maximum 	<ul style="list-style-type: none"> Combined \$10,000 annual maximum and a combined \$30,000 lifetime maximum
Medical equipment and services		Medical equipment and services have a \$2,500 annual maximum and a \$20,000 lifetime maximum combined with in-home nursing and home care	Medical equipment and services have a \$5,000 annual maximum	Medical equipment and services have a \$5,000 annual maximum
	Orthopedic shoes	<ul style="list-style-type: none"> \$150 annual maximum 	<ul style="list-style-type: none"> \$225 annual maximum 	<ul style="list-style-type: none"> \$250 annual maximum
	Blood glucose monitor	<ul style="list-style-type: none"> \$150 every 5 years 	<ul style="list-style-type: none"> \$300 every 5 years 	<ul style="list-style-type: none"> \$300 every 5 years
	Medically necessary wigs and hair pieces	<ul style="list-style-type: none"> \$100 annual maximum 	<ul style="list-style-type: none"> \$500 lifetime maximum 	<ul style="list-style-type: none"> \$500 lifetime maximum
	Wheelchairs, walkers and traction kits	<ul style="list-style-type: none"> \$1,000 lifetime maximum 	<ul style="list-style-type: none"> \$4,000 lifetime maximum 	<ul style="list-style-type: none"> \$4,000 lifetime maximum
	Continuous glucose monitors and sensors	<ul style="list-style-type: none"> Reasonable and customary services and charges 	<ul style="list-style-type: none"> Reasonable and customary services and charges 	<ul style="list-style-type: none"> Reasonable and customary services and charges
	Hospital bed, oxygen	<ul style="list-style-type: none"> Reasonable and customary services and charges 	<ul style="list-style-type: none"> \$1,500 lifetime maximum for hospital beds 	<ul style="list-style-type: none"> \$1,500 lifetime maximum for hospital beds
	Casts, splints	<ul style="list-style-type: none"> Reasonable and customary services and charges 	<ul style="list-style-type: none"> \$500 annual maximum 	<ul style="list-style-type: none"> \$500 annual maximum
Vision care	Prosthetic appliances (e.g. artificial limbs)	<ul style="list-style-type: none"> Reasonable and customary services and charges 	<ul style="list-style-type: none"> Reasonable and customary services and charges Breast prosthesis: \$200 annual maximum 	<ul style="list-style-type: none"> Reasonable and customary services and charges Breast prosthesis: \$200 annual maximum
	Vision care Includes coverage for: <ul style="list-style-type: none"> Prescription eye glasses Prescription contact lenses Prescription sunglasses Laser eye surgery 	<ul style="list-style-type: none"> No coverage 	<ul style="list-style-type: none"> 100% reimbursement \$250 maximum every 2 years, including \$50 maximum per eye exam 1 year waiting period before coverage begins 	<ul style="list-style-type: none"> 100% reimbursement \$300 maximum every 2 years, including \$50 maximum per eye exam 1 year waiting period before coverage begins

	Basic Plan	Standard Plan	Enhanced Plan	
Paramedical practitioners	<p>Paramedical practitioners Include:</p> <ul style="list-style-type: none"> Chiropractors, including 1 x-ray examination per calendar year Registered massage therapists Naturopaths and acupuncturists Osteopaths, including 1 x-ray examination per calendar year Physiotherapists Podiatrists or chiropodists, including 1 x-ray examination per calendar year Speech language pathologists Psychologists/social workers 	<ul style="list-style-type: none"> 60% reimbursement \$25 maximum per visit Up to \$250 per year, for each type of practitioner Psychologist/social worker: up to \$35 per visit up to \$500 per year 	<ul style="list-style-type: none"> 100% reimbursement No per visit maximum Up to \$300 per year, for each type of practitioner Psychologist/social worker: no per visit maximum up to \$1,000 per year 	<ul style="list-style-type: none"> 100% reimbursement No per visit maximum Up to \$400 per year, for each type of practitioner Psychologist/social worker: no per visit maximum up to \$1,500 per year
Emergency travel medical	<ul style="list-style-type: none"> No coverage 	<ul style="list-style-type: none"> 100% reimbursement \$1 million lifetime maximum Coverage provided for the first 60 days of a trip Covers travel outside of your province or territory or outside of Canada Available until the age of 80 If you have a pre-existing medical condition where symptoms have appeared or required medical attention, hospitalization or treatment (this includes changes in medication or dosage), and existed during the 9 months before your trip, expenses related to this condition are not included 	<ul style="list-style-type: none"> 100% reimbursement \$1 million lifetime maximum Coverage provided for the first 60 days of a trip Covers travel outside of your province or territory or outside of Canada Available until the age of 80 If you have a pre-existing medical condition where symptoms have appeared or required medical attention, hospitalization or treatment (this includes changes in medication or dosage), and existed during the 9 months before your trip, expenses related to this condition are not included 	
Semi-private hospital room	Optional on all plans			
<p>Consider adding the optional benefit of a semi-private hospital room to any of the three plans.</p>	<ul style="list-style-type: none"> 85% reimbursement Coverage up to \$200 daily and \$5,000 annually Convalescent hospital: \$20 per day up to 180 days per incident 	<ul style="list-style-type: none"> 85% reimbursement Coverage up to \$200 daily and \$5,000 annually Convalescent hospital: \$20 per day up to 180 days per incident 	<ul style="list-style-type: none"> 85% reimbursement Coverage up to \$200 daily and \$5,000 annually Convalescent hospital: \$20 per day up to 180 days per incident 	

		Basic Plan	Standard Plan	Enhanced Plan
Dental	Plans with preventive dental coverage include: <ul style="list-style-type: none"> • Examinations and diagnosis • Tests, x-rays, and lab exams • White fillings • Scaling and extractions • Recall visits every 9 months • Minor emergency treatment 	Included	Optional	
		Preventive <ul style="list-style-type: none"> • 60% reimbursement • \$500 annual maximum • 3 month waiting period before coverage begins 	<ul style="list-style-type: none"> • 70% reimbursement • \$750 annual maximum • 3 month waiting period before coverage begins 	<ul style="list-style-type: none"> • 80% reimbursement • \$750 annual maximum • 3 month waiting period before coverage begins
		Restorative <ul style="list-style-type: none"> • No coverage 	<ul style="list-style-type: none"> • No coverage 	<ul style="list-style-type: none"> • 50% reimbursement • \$500 annual maximum • 1 year waiting period before coverage begins • Includes endodontics, periodontics, oral surgery, crowns, onlays, bridges, dentures (and repairs)
	Orthodontics <ul style="list-style-type: none"> • No coverage 	<ul style="list-style-type: none"> • No coverage 	<ul style="list-style-type: none"> • 60% reimbursement • \$1,500 lifetime maximum • 2 year waiting period before coverage begins 	

¹ In-home nursing includes services of registered nurses, registered practical nurses or registered nursing assistants.

Need to know – Personal Health Insurance

Am I eligible for Personal Health Insurance?

To be eligible, you and each person included on the application must be age 69 or younger as of the application date. The plan is renewable for age 70 and over. You and each person included in the application must be a resident of Canada and covered under provincial or territorial health and drug insurance.

Coverage is also available for your dependent children. Your children and your spouse's children (other than foster children) are eligible dependents if they are not married or in any other formal union recognized by law, and are under age 21. If your child is a full-time student at an educational institution recognized under the Income Tax Act (Canada), they are an eligible dependent until the age of 25. They must also be entirely dependent on you for financial support. Your child is also an eligible dependent if:

- They are physically or mentally unable to support themselves.
- They became so while they depended on you for financial support under one of the two age requirements above.

Pre-existing illnesses and conditions

Visit [sunlife.ca/conditions](https://www.sunlife.ca/conditions) for a partial list of common conditions that result in uninsurability for Personal Health Insurance.

When will my coverage begin?

Your coverage will begin the day after it's approved by underwriting.

What is the 10-day free look period?

If you look over your new policy and decide it doesn't meet your needs, you can cancel it with no obligation within 10 days of receiving it. We'll refund your money.

(Continued on the next page)

Need to know – Personal Health Insurance (continued)

RAMQ – for residents of Quebec

It's mandatory for residents of Quebec to enrol for prescription drug coverage. Unless you're eligible for drug coverage through a private plan or a professional association (for example, your spouse's group benefit plan), you must enrol with RAMQ. To be eligible for any individual health plan such as Personal Health Insurance, you must be enrolled in RAMQ or another group plan that offers prescription drug coverage. That plan will pay drug expenses first. To claim any unpaid portion of your drug expenses at the pharmacy, you must send us the receipts by mail.

When can I cancel my policy?

You may cancel your policy at any time.

When will my coverage end?

Your coverage will end on the earliest of:

- 31 days after the premium due date, if you fail to make a payment;
- the last day of the month we receive your written request to end your coverage;
- the date you are no longer a resident of Canada;
- the date you are no longer covered by a provincial or territorial government health and drug plan; or
- the date of your death.

Spouse and/or dependent child coverage will end on the earliest of:

- the date of your or your spouse's death;
- 31 days after the premium due date, if you fail to make a payment;
- the last day of the month we receive your written request to end your coverage;
- the date your eligible spouse and/or dependent child no longer satisfies the eligibility requirements;
- the date your spouse and/or dependent child is no longer a resident of Canada; or
- the date your spouse and/or dependent child is no longer covered by a provincial or territorial government health and drug plan.

The emergency travel insurance coverage ends at age 80.

www.sunlife.ca

This flyer provides a summary of coverage. For full terms, conditions, limitations and exclusions, please refer to your policy issued by Sun Life Assurance Company of Canada. In the event of a discrepancy between this flyer and the policy, the terms of the policy take precedence.

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What doesn't my policy cover?

For full product information, including exclusions and limitations, a sample policy can be downloaded from the product selection page of your online application.

Waiting period for dental and vision coverage:

An insured person becomes eligible for preventive dental coverage three months after the start date of the policy, for restorative dental coverage 1 year after the start date, and for orthodontic coverage 2 years after the start date. An insured person becomes eligible for vision coverage one year after the start date of the policy.

Will my premiums change over time?

Premiums vary by age and by how much provincial and territorial health and drug plans cover. This means your premium reflects how old each insured person is and in which province or territory they live.

We may change your premium from time to time for a variety of reasons, including our claims experience for insured persons with similar policies, how long these policies remain active, and our expenses.

If we change your premium, we will give you at least 30 days written notice before the change is made.

How will I be billed?

We charge premiums monthly. If there's an amount owing once we process your application, we'll charge your first bill to you as soon as possible. After that, we'll charge you for all following premiums on the 1st of each month.

Consequences for consumer non-disclosure or misstatements

It's important to give us accurate information when you apply. Otherwise, we could cancel your policy or deny any claims.



Life's brighter under the sun