SUNADVANTAGE™

Group Benefits solutions for small businesses with 3 to 49 employees

Life's brighter under the sun

Sun Life Financial | Group Benefits

SALT

AT SUN LIFE WE BELIEVE

IN THE REWARDS OF EMPLOYEE HEALTH

Attract and retain top talent

Attract and retain top talent with a group benefits plan that will keep your employees motivated, engaged and healthy.

The workforce is changing – employees expect their employer to provide them with the health and wellness benefits they need to proactively manage their health and the health of their families.

With SunAdvantage group benefits, you can be sure that you're offering your employees a health and wellness plan that offers the most comprehensive coverage available on the market.

Manage your costs

Manage your costs and return on investment while keeping your employees healthy and working. Disability management solutions help employees return to work faster, while drug risk management solutions help manage increasing drug costs and work towards long-term sustainability.

Additionally, these benefits provide your employees with coverage to help them and their families stay healthy and motivated:

- Health Spending Accounts (HSA's) and Personal Spending Accounts (PSA's)
- Critical illness insurance
- Health and dental plans

Making your job easier

Because your time is precious, we've made sure that our SunAdvantage plans are easy to set-up and administer. Here are some other ways we're helping to make it easier for you:

- Dedicated support
- Seamless onboarding
- Customized coverage guides
- Friendly help that's always available
- Digital services

At Sun Life, we appreciate your business and the trust you have in us to provide your employees with the group benefits services they need to help them stay healthy.

The next sections demonstrate the comprehensive coverage your plan members will receive with SunAdvantage group benefits.

Let's work together to help you and your employees achieve the rewards of a healthy workforce!

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FOR SMALL BUSINESSES,
TIME IS MONEY

That's why we've designed an affordable and flexible group benefits solution to suit your unique business needs.

SunAdvantage standard coverage includes Life, Dependent Life and Accidental Death and Dismemberment (AD&D) Insurance. In addition, SunAdvantage offers you the ability to customize your plan, with options including Short-Term Disability, Long-Term Disability, Extended Health Care, Dental Care, Health Spending Account, Employee Assistance Program, Critical Illness Insurance, Cost Plus benefit coverage as well as Optional Life and AD&D.

SUNADVANTAGE OFFERS...

Affordable flexibility	Flexible plan design options to meet your employee needs and fit your budget
Easy administration	From day one with services such as our plan sponsor administration kit, easy to use plan sponsor website and toll free access to your own dedicated Customer Service Administrator
Responsiveness	Quick and accurate claims payment, including a simple mobile and online benefits claiming experience that will have payment in your employees' bank account within 24 to 48 hours
Clear communications	Our plain language **my coverage guide** will help your employees make the most of their benefits plan from day one
Wide range of services	Sun Life also offers individual wealth and insurance products designed to support your goals of achieving long term financial security and health

SMALL BUSINESS BENEFITS

TO MEET YOUR NEEDS

Characteristics of a qualified customer

SunAdvantage is designed to meet the needs of customers with the following characteristics:

Continuance	In business for 3 months, one year for LTD
Stability	A stable financial history
Cost sharing	Able to cover 50% of the cost of EHC and Dental (in Quebec, the minimum is 25%).
Location	Non-residential business
Turnover	A moderate rate of employee turnover
Age distribution	A good employee age demographic
Minimum participation	A minimum participation of three employees ready to participate in each benefit
Participation rate	An eligible employee participation rate of 75% or more. (In Quebec, the minimum is 100%)
Income	Salary levels should be sufficient to allow employees to participate in the plan. In addition, commissions and bonuses should be a small percentage of an employee's total earnings

LIFE INSURANCE
(REQUIRED BENEFIT)

The Life Insurance benefit provides basic financial protection to a plan member's beneficiary if the member dies.

The plan provides Life coverage in multiples of the member's salary, or as a flat amount. The plan allows a company to identify up to three classes of members with different life schedules.

Minimum Amount	$20,000 (earnings based, flat amounts subject to size restrictions)	
Maximum Amount	Up to $750,000 (subject to plan and size restrictions)	
Earnings Multiples	1 to 5 times salary (subject to plan and size restrictions)	
Flat Amounts	Up to $200,000 (earnings restrictions apply)	
Reduction	50% at age 65	
Termination	Age 70	
Non-Evidence Maximums	3 - 4 lives	$75,000 to $100,000
	5 - 9 lives	$100,000 to $150,000
	10 - 14 lives	$125,000 to $200,000
	15 - 19 lives	$140,000 to $225,000
	20 - 24 lives	$155,000 to $250,000
	25 - 29 lives	$175,000 to $275,000
	30 - 39 lives	$200,000 to $325,000
	40 - 49 lives	$225,000 to $375,000
Premium Waiver	Included in the event of total disability	
Conversion	Various options are included	
Optional Life	Available in addition to Basic Life and Dependent Life for qualifying groups	

DEPENDENT LIFE INSURANCE

(REQUIRED BENEFIT UNDER 20 MEMBERS)

Dependent Life Insurance assists in providing financial protection for a plan member in the event of a spouse or child's death. This benefit is provided as a flat amount.

Spouse Amount	Units of $5,000 up to $20,000
Child Amount	1/2 of spouse amount
Child Coverage Status	From birth
Premium Waiver	Included in the event of total disability
Conversion	Various options are included

ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) INSURANCE

(REQUIRED BENEFIT UNDER 20 MEMBERS)

Accidental Death and Dismemberment (AD&D) provides an additional benefit if a plan member dies, loses the use of a limb, is paralyzed or loses hearing, speech or sight as the result of an accident.

The AD&D coverage will match the Life schedule.

Optional AD&D coverage is available in conjunction with Optional Life for qualifying groups.

Additional benefits:

Up to $10,000	Repatriation
Up to $10,000	Rehabilitation
Up to $5,000	Spouse Occupational Training
Up to $5,000 annually for up to 4 years	Child Education Benefit
Up to $5,000	Family Transportation
Premium Waiver	Included in the event of total disability
Conversion	Various options are included

SHORT-TERM DISABILITY (STD)
(OPTIONAL BENEFIT)

Short-Term Disability (STD) insurance provides replacement of lost income if a plan member is temporarily unable to work because of total disability.

The plan covers injuries and illnesses not related to work until the time when a member is able to return to work, or until Long-Term Disability benefits start. STD may provide coverage for rehabilitation to ensure members fully recover and return to a productive and self-sufficient lifestyle.

Waiting Periods	Accident: 0 to 14 calendar days Sickness: 3, 7 or 14 calendar days
Duration of Benefits	13, 15, 16, 17 or 26 weeks
Benefits Formula	Taxable & Non-Taxable: 50%, 55%, 60%, 66.7% or 67% Taxable: 70%, 75% or 80%
Payment Frequency	Weekly
1st Day Hospital (option)	Available on a 3 & 7 day waiting period
Maximum	Up to $1750 per week (20+ lives)
Definition of Total Disability	Own occupation

LONG-TERM DISABILITY (LTD)
(OPTIONAL BENEFIT)

Elimination Period	90, 105, 112, 120 or 180 calendar days
Duration of Benefits	Age 65 and 2, 5 or 10 years
Offsets	Primary
Own Occupation Definition	1 or 2 years (3 years available on selected risks)
Benefit Formulas	Taxable & Non-Taxable: 50%, 55%, 60%, 66.7% or 67% Taxable: 70%, 75% or 80% Graded benefit formulas available upon request
Maximum	Up to $12,000 per month
Non-Evidence Maximums	Up to $6,000
Survivor Benefits (Option)	3 or 6 months
All Source Cap	85% (Taxable & Non-Taxable)
Cost of Living (Option)	1%, 2%, 3%, 4% or 5%
Premium Waiver	Included in the event of total disability

Long-Term Disability (LTD) insurance can provide financial assistance if a plan member cannot work for an extended period of time because of total disability. It supplements disability benefits available from government programs.

LTD may provide coverage for rehabilitation to help members fully recover and return to a productive and self-sufficient lifestyle.

EXTENDED HEALTH CARE (EHC)

(OPTIONAL BENEFIT: MANDATORY IN QUEBEC*)

Extended Health Care (EHC) helps plan members and their dependents pay for necessary medical expenses that are not covered by their provincial plans. There is a choice of annual deductible amounts that members pay, as well as a choice of reimbursement levels.

Deductibles*	
• Single	$0, $25, $50, or $100
• Family	$0, $25, $50, $100 or $200
• Single parent or Couple	$0, $25, $50, $100 or $200
(upon request) $0 deductible applies to hospital, travel and vision fees	
Drugs*	
• Pay-Direct Drug Card Plan	Standard with Mandatory Generic Substitution and Prior-Authorization. Coverage for prescription-requiring medications assigned a valid drug identification number (DIN) by Health Canada will vary depending on the drug formulary selected.
Per-prescription Deductibles	$0 to $10
• Per-prescription Dispensing Fee Caps	$0, $5 to $10
• Coinsurance	50% to 100%
Other Health Care Coverage	
Hospital	
• Room and Board	Semi-private or private
• Coinsurance	50% to 100%
Paramedical[1]	
• Maximum	$100 to $1,000, or $1,250 combined
• Coinsurance	50% to 100%
Vision (Option)	
• Maximum	$75 to $500
• Coinsurance	100%
Other Medical Services and Equipment[2]	Included
• Coinsurance	50% to 100%
Out-of-Province Emergency	60 days ($3,000,000 lifetime maximum)

* Note: For Quebec insureds, RAMQ minimum plan design requirements may limit or preclude some selections.

1 Professional health services (up to an annual amount) covers certain licensed paramedical specialists, such as acupuncturists, audiologists, chiropractors, dieticians, naturopaths, occupational therapists, physiotherapists, podiatrists, psychologists/social workers, speech therapists and massage therapists. Our standard is that a doctor's referral is not required for massage therapy though it can be added on request.

2 Medical services and equipment includes private duty nursing, ambulances, laboratory tests, artificial limbs, hearing aids. Medical cannabis is optional coverage available under this category, with it's own benefit maximum. Coverage is available to members who meet the clinical criteria as defined by Sun Life. Prior approval is required.

Faster. Easier. More connected.

We help your employees appreciate your investment in their group benefits plan. Your employees will appreciate the convenience of the My Sun Life Mobile app that lets them submit their EHC claim anytime, anywhere, and have a deposit in their bank account usually within 24 to 48 hours.

EMERGENCY TRAVEL ASSISTANCE

(SUPPLEMENT TO THE EXTENDED HEALTH CARE BENEFIT)

Medi-Passport our Emergency Travel Assistance benefit, is provided by Allianz Global Assistance (AZGA Service Canada Inc.).

In the case of a medical emergency while an insured member is traveling outside their home province, Medi-Passport will supplement the emergency portion of Extended Health Care coverage.

Services are covered if obtained within 60 days of the plan member leaving the province where they live.

On the spot medical assistance	Assistance with locating and obtaining appropriate medical care, including advance of funds to secure care, when needed
Transportation home or to a different medical facility	Determined by medical condition and available needed services
Meals and accommodation expenses if a return trip is delayed due to a medical emergency	$150 per day maximum per person up to 5 days
Travel expenses home if stranded by medical emergency, for a plan member or unattended child	Cost of transportation minus any redeemable portion of the original ticket
Travel expenses of a family member to visit the bedside of a hospitalized insured	Limit of one round trip economy class ticket, if the plan member is hospitalized more than 7 consecutive days. Meals and accommodations for the visiting family member are covered to a maximum of $150 per day
Repatriation of a deceased insured member	$5,000 per return
Vehicle return	Up to $500
Lost luggage or documents	Assistance with contacting authorities
Coordination of coverage	Assistance with coordination of coverage under all the insured plan member's plans

Medi-Passport coverage is subject to any maximums applicable to the emergency portion of the Extended Heath Care benefit. Services will not be provided during any trip taken for the purpose of seeking medical attention.

Help is only a phone call away

World-wide access to a fully staffed coordination centre is available 24 hours a day.

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In addition to our best-in-class Plan Member website, your employees will appreciate the convenience of the My Sun Life Mobile app that lets them view details of their travel medical card right from their mobile device.

DENTAL CARE
(OPTIONAL BENEFIT)

Dental Care covers common preventative and diagnostic dental treatment as well as coverage for fillings, root canals, extractions and oral surgery and plan options are available for other dental and orthodontic treatments.

In keeping with SunAdvantage's philosophy of flexibility, you can choose from various levels of dental care.

Build on our most popular plan to meet all your needs.

Available Plan Features include:

Recall Frequencies	Choose from 5, 6, 9 or 12 months
Basic/Preventive*	Included
Major (Option)	5 insured minimum required. 3 lives if the group currently has Major Dental
Dependent Orthodontics (Option)	10 insured minimum required if there are 5 employees with family coverage and they currently have that benefit.
Adult Orthodontics (Option)	20 insured minimum required with Adult Orthodontics, and 10 lives if they currently have Adult Orthodontics
Deductibles	Single: $0, $25, $50 or $100 Family: $0, $25, $50, $100 or $200 Single parent or Couple (upon request): $0, $25, $50, $100 or $200
Co-insurance	Basic/preventive: 50% to 100% Major: 50% to 80% Orthodontics: 50% or 60%
Maximums (highest)	Basic/preventive: $2,500 (Unlimited for qualifying groups) Major: $3,000 Combined: $4,000 Orthodontic: $3,500 per lifetime
Fee Guide Year	Current year and fixed fee guide options
Fee Guide Practitioners	General or specialist
Benefit year equals	Policy or calendar year

Features:	Our most common plan:
White fillings	White fillings on front and back teeth
	Every 6 months
Bitewing x-ray frequency	10 units
Scaling/Root Planing	Adults and children
Fluoride	

* Basic/Preventative plan features include:
  - Preventive and diagnostic treatment, such as examinations, cleanings, x-rays
  - Basic coverage, including fillings, extractions, root canals

Optional major coverage for dentures, crowns and bridges as well as orthodontic braces, are available.
Options and coverage will vary, depending on the number of members enrolled in the plan.

Faster. Easier. More connected.

In addition to our best-in-class Plan Member website, your employees will appreciate the convenience of the My Sun Life Mobile app that lets them submit their dental claim anytime, anywhere, and have a deposit in their bank account usually within 24 to 48 hours.

Consider different procedures to create the right balance between cost and benefits.

HEALTH SPENDING ACCOUNT (HSA)
(OPTIONAL BENEFIT)

Benefits, enhanced

Funded by plan sponsors and administered by Sun Life, a Sun Life Financial Health Spending Account (HSA) allows plan members to submit claims for eligible expenses, such as:

- Deductibles and co-insurance amounts
- Expenses over any plan maximums that may be in place
- Health and dental expenses a group benefits plan may not cover, for example, orthodontics, laser eye surgery and physician fees

Plan design and administration

Participation	A minimum of 5 active employees must participate in the HSA
Administration	Both health and dental benefits must be in place to establish an HSA The benefit plan year is 12 months and must align with other health and dental benefits Plan members have 90 days from the end of the benefit year to submit HSA claims All benefits must align to a 90-day proof-of-claim period
Enrolment	Employees can enrol in the HSA plan even if they waive health or dental coverage
Credit allocation	Credits are allocated once a year at the beginning of the benefit year The minimum annual credit allocation is $4,500 for all employees combined Two options available: • The same number of credits for all employees, or • A variable number of credits per employee
Billing	Invoices are mailed once a month Invoices are not combined with the premium statement for insured benefits

Health Spending Accounts (HSA) are an easy way for plan sponsors to supplement the products and services their group benefits plan covers. They can enhance the flexibility of the group health and dental benefits at a cost that is both predictable and manageable.

How it works

Once each year, plan sponsors contribute credits to their plan members' HSA. Plan members then use these credits to pay for a variety of health and dental expenses. Any credits remaining in plan members' accounts at the end of a benefit year are automatically carried forward to the following benefit year. Plan members have until the end of the second benefit year to use these credits, or they'll lose them.

PERSONAL SPENDING ACCOUNT (PSA)
(OPTIONAL BENEFIT)

A simple solution to staying competitive

As an employer, you need to stay competitive. One way to attract top talent is by offering programs that provide employees with access to enhanced health and wellness solutions. A PSA is a natural extension of the health and disability solutions you're already offering employees through your core benefits plan. And because it's offered digitally, it's easy to use and easy to manage!

How PSA works

Employers allocate a defined amount of credits to each employee's account. Employees can then use their allocated credits towards reimbursements for a wide variety of health and wellness expenses that are not covered by their regular health benefits plan.

Health and wellness solutions for the modern workforce

Offer more opportunities for health and wellness outside of your regular benefits plan. Sun Life's PSA covers a wide range of eligible expenses supporting the mental, physical, and financial well-being of working Canadians.

Some examples of eligible expenses include:

- Fitness club memberships
- Treadmills and exercise bikes
- Child and elder care
- Estate planning and legal expenses

Product features, design, and administration

Digitized – integrated into Sun Life's digital platform, employees can submit claims through the **my Sun Life Mobile app** or through mysunlife.ca.

Simple – One inclusive list of health and wellness categories* that's available to businesses of all sizes.

Administration – Employees can self-manage their account through the simplicity of our digital platform.

Credit allocation – Allocate a defined amount of credits to each employee's account monthly or annually*.

Carry-forward arrangements – Choose from three carry-forward arrangements[1] (no carry-forward, balance carry-forward, or expense carry-forward).

* Unlimited only applies to large groups (SunSolutions and National accounts). SunAdvantage has a carry-forward balance of 12 months.
[1] The same carry-forward provision must apply to all plan members covered under the same contract.

EMPLOYEE ASSISTANCE PROGRAM (EAP): SUN LIFE RIGHTDIRECTIONS™

(OPTIONAL BENEFIT)

Our Sun Life RightDirections™ Employee Assistance Program (EAP) provides the professional counseling and support employees may need to resolve issues that can affect performance at work including:

- Family and social relationships
- Personal problems
- Dependency issues
- Workplace related issues
- Legal and financial advice*
- Wellness issues (for example, nutrition support and health coaching)
- Crisis

Sun Life's RightDirections™ is a 24/7, fully confidential source of assistance for employees and their families. Having around-the-clock access to this network of professionals helps provide the support employees need to resolve a variety of issues and bring their best to work. Plus, employees can access the RightDirections™ service in the way it makes sense for them – whether it's through digital capabilities and online resources or traditional means.

Sun Life RightDirections™ is a flexible model that comprises of three options – Essential, Enhanced and Elite.

ESSENTIAL

- 3 telephone sessions per issue
- Access to e-counseling, First Chat (online secure messaging), MyMigo
- Unlimited access to online tools and resources on the RightDirections™ website

ENHANCED

All the benefits of the Essential plan, plus...

- Clinically appropriate telephone sessions**
- 3 in-person counseling sessions per issue
- Video counseling
- Online group counseling
- Self-directed online tools

ELITE

All the benefits of the Enhanced plan, plus...

- Clinically appropriate in-person counseling sessions**
- Manager coaching***

Note: For Quebec insureds, RAMQ minimum plan design requirements may limit or preclude some selections.

* Does not include will preparation, employment or workplace issues, criminal or tax law, asset management, retirement planning or accounting services.
** As deemed clinically appropriate based on initial assessment within the short-term, solution focused EAP counseling model.
*** Absence management coaching (demedicalized approach) by telephone, on-site mediation, on-site training. Number of sessions dependent on plan sponsor choice.

Employee Assistance Programs (EAP) provide 24/7 counseling services when plan members need assistance in dealing with a crisis, personal, family or work related issues, or addictions.

GROUP CRITICAL ILLNESS INSURANCE (CII)
(OPTIONAL BENEFIT)

Critical Illness Insurance (CII) is not intended to replace other benefits - it is designed to complement them. Offering CII as part of a benefits plan can help employees protect themselves and their families if they should face serious illness. They will be better able to access the medical treatment they need, and focus on their recovery without worrying about the financial burden.

The choice is yours

Our Critical Illness insurance plans are designed to let employers choose what's best. We offer two levels of protection, an essential plan (A) that covers the three most common critical conditions and a comprehensive plan (B) that covers 25 conditions.

Covered conditions	A	B
Cancer (Life-threatening)	✓	✓
Heart attack	✓	✓
Stroke	✓	✓
Aortic surgery		✓
Aplastic anemia		✓
Bacterial meningitis		✓
Benign brain tumour		✓
Blindness		✓
Coma		✓
Coronary artery bypass surgery		✓
Deafness		✓
Dementia, including Alzheimer's disease		✓
Heart valve replacement or repair		✓
Kidney failure		✓
Loss of independent existence		✓
Loss of limbs		✓
Loss of speech		✓
Major organ failure on waiting list		✓
Major organ transplant		✓
Motor neuron disease		✓
Multiple sclerosis		✓
Occupational HIV infection		✓
Paralysis		✓
Parkinson's disease and specified atypical parkinsonian disorders		✓
Severe burns		✓

Participation requirements	
Size of group	**Plan options available**
3 to 24 employees	Mandatory participation by all employees
25 to 49 employees	Mandatory participation by all employees PLUS voluntary top-up*

Maximum coverage without evidence of insurability (Mandatory Plan)	
Size of group	**Plan options available**
3 to 24 employees	$25,000
25 to 49 employees	up to $50,000

Conversion

Provided employees have not terminated their Critical Illness insurance voluntarily, the conversion privilege allows them to continue their coverage when the group Critical Illness insurance benefit terminates (e.g. when they change employment).

* Proof of good health is required for voluntary coverage. Voluntary and mandatory combined maximum of $100,000.

MEDICAL AND DENTAL COST PLUS BENEFIT COVERAGE

(OPTIONAL BENEFIT)

Group benefits plans provided by Sun Life include coverage for most medical and dental services available. Reimbursement for these services is generally subject to some level of coinsurance and/or deductible, and there may be a maximum amount paid for certain services. In addition, there may be some expenses that are not covered under a group plan.

Often, employers provide a "cost plus" arrangement that extends coverage beyond the base group benefits plan for designated classes of employees and their eligible dependents. These benefits can be processed on a "cost plus" basis if such expenses qualify as medical, dental or hospital expenses under the Income Tax Act (Canada).

The process is simple. First, the employer identifies any classes of employees who are eligible for the "cost plus" arrangement. Eligible employees accumulate their claim expenses and provide them to their benefits administrator a few times a year. The benefits administrator completes the "cost plus" form and sends it and the original receipts to their designated Sun Life claims office along with a cheque payment equal to the claim amount, administration fees and applicable taxes. A claim payment is forwarded to the employee in the same manner as any other regular claim payments.

Please consult your tax advisor to see whether a "cost plus" arrangement is right for your business.

REQUESTING
A QUOTE

When submitting your request for quotation, there is a minimum amount of information that you must provide so that we can properly evaluate the risk and prepare a competitive quote:

- Name, location and type of business;
- Sex, age, earnings, occupation and dependent status for each plan member;
- Benefit specifications (plan design);
- Name of present carrier and benefits offered (if any);
- Length of time with current carrier (if applicable) exceeds 18 months; and
- Rate history and claims experience if applicable.

If any additional information can also be provided it would be helpful, for example:

- Members not actively at work, due to disability or maternity leave, for example; or
- Any members involved in hazardous activities.

ALWAYS CHECK WITH
A LICENSED ADVISOR

The information described on the preceding pages is an illustration of benefits available.

The number of employees participating as well as other factors could affect the availability of the benefits described. Please check with your licensed advisor to ensure that your needs are satisfied.

ABOUT SUN LIFE FINANCIAL

A market leader in group benefits, Sun Life Financial serves more than one in six Canadians, in over 12,000 corporate, association, affinity and creditor groups across Canada.

Our core values – integrity, service excellence, customer focus and building value – are at the heart of who we are and how we do business.

Sun Life Financial and its partners have operations in 22 key markets worldwide including Canada, the United States, the United Kingdom, Hong Kong, the Philippines, Japan, Indonesia, India, China and Bermuda.

Life's brighter under the sun

www.sunlife.ca

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