

## Contract Amendments

### Suicide and Self-Inflicted Injuries Exclusion

Sun Life is amending the suicide and/or self-inflicted injuries exclusions that can be found in your Disability, Life, AD&D, Critical Illness, EHC and Dental plans.

#### Contract changes

These amendment will be effective November 1, 2017 and will apply to all lines of benefits, as set out below.

#### Why are we changing the suicide and self-inflicted injuries exclusion clause?

The suicide and/or self-inflicted injuries exclusion found in your current benefit plans contains dated wording regarding the insured person's mental state. It will be removed or replaced, as described below.

Although Sun Life's standard health and dental plans do not include a self-inflicted injuries exclusion, some Clarica heritage plans may contain such an exclusion. This amendment will remove the exclusion from these plans.

The current standard exclusion found in a Sun Life disability plan refers to "intentionally self-inflicted injuries". For any disability plans which refer to an insured's mental state, we will revise the provision to reflect the current standard.

For all other benefit types, we will replace "sane or insane" with the provision set out below.

These changes will not impact how we adjudicate claims under your plan and will not impact your plan's experience.

#### New Contract Wording

The amendments to your contracts are as follows:

- EHC & Dental – The attempted suicide and self-inflicted injuries exclusion will be removed.
- Disability – Any references to "attempted suicide, while sane or insane" will be removed.

Group Benefits are provided by Sun Life Assurance Company of Canada, a member of the Sun Life Financial group of companies.



- Optional Life/AD&D and Critical Illness – The references to “while sane or insane” will be replaced with “regardless of whether the insured person has a mental illness or intends or understands the consequences of their actions”.

## Drug & Alcohol Exclusion

Effective November 1, 2017, we will also remove the drug and alcohol exclusion from disability contracts. We had previously removed this exclusion from our new SunScript standard, as it creates the impression that conditions related to substance use are singled-out for unique claims management and must meet ‘different’ criteria under the benefits plan. This is not correct. This exclusion identifies the same need for treatment as outlined in the appropriate treatment exclusion. In other words, all claimants, regardless of the cause of their disability must receive appropriate treatment to be eligible for disability benefits.

## Prior Authorization Clause

In addition to the changes described above, to help clarify the eligibility criteria of drugs in our Prior Authorization program, if applicable, we will amend two provisions found in your extended health care plan, as set out below, effective November 1, 2017. This will not impact how we review Prior Authorization requests, nor your plan’s experience.

## New Contract Wording

To the General Description of Coverage, we will add the following text in bold font:

Extended Health Care coverage pays for eligible services or supplies, for a covered person, that are medically necessary for the treatment of an illness. **However, there are additional eligibility requirements that apply to drugs (see *Prior authorization program* for details).**

To the Prior Authorization provision, we will include a list of factors (also in bold font) that help us determine the clinical (eligibility) criteria applied to drugs in this program.

The covered person will be **eligible for coverage** for these drugs if the information provided by the covered person and the attending doctor meets Sun Life’s clinical criteria based on factors such as:

- **Health Canada Product Monograph.**
- **recognized clinical guidelines.**
- **comparative analysis of the drug cost and its clinical effectiveness.**

- recommendations by health technology assessment organizations and provinces.
- the covered person's response to preferred drug therapy.

If not, the claim will be declined.

## Note

You may find that your benefit plan uses the words, “covered person”, “insured person” or “employee”. In each case, the amendment will apply with a slight variation in wording to align it with your current provision.

## What you need to do

Keep this Focus Update as a record of these changes and file it with your Sun Life group contract(s) for future reference – this serves as an amendment to your contract(s) effective November 1, 2017. The next time your contract is amended, updated wording will be included to reflect the above changes.

## Questions?

Contact your Sun Life Financial group benefits representative.