



Inpatriate Health Plan - A basic health care solution

Are you looking to provide health care coverage to international employees moving to Canada or returning Canadian expatriates who no longer have government sponsored health care coverage?



The Sun Life Financial Inpatriate Health Plan provides employees and their dependents who have recently arrived in or returned to Canada a basic health care solution until they qualify for government sponsored health care coverage.

And, once covered under this Plan, it helps them meet the eligibility requirements for extended health care coverage under your Sun Life Financial group benefits plan.

Who is eligible for coverage?

To be eligible for coverage your employee must:

- be actively at work,
- be living in Canada,
- be less than 75 years of age,
- not currently have coverage under any government sponsored health care plan or comparable coverage.

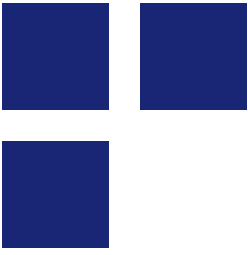
A spouse and dependent children can also be covered by the Inpatriate Health Plan while they are waiting for government sponsored health care coverage.

What does the Inpatriate Health Plan cover?

The overall lifetime maximum per insured person is \$1,000,000, while the annual maximum is \$500,000 per insured person. The cost for each service is based on the services provided by the government sponsored health care plan in the employee's province or territory of residence, unless stated otherwise.

Here is an overview of the health care services covered under the Inpatriate Health Plan:

In-patient hospital services	■ Standard ward accommodation and meals, based on the interprovincial rates
Physician services	■ Reasonable and customary charges for services
Paramedical Practitioner services	■ 100% for eligible licensed paramedical practitioners based on province of residence. Subject to \$500 combined annual maximum
Ambulance services	■ Same as the coverage offered by government sponsored health care plan of the employee's province of residence
Home care services	■ \$5,000 lifetime maximum subject to pre-approval
Out-patient hospital services	■ Charges are based on interprovincial rates
Dental surgery in a hospital	■ Expenses for dental surgery performed in a hospital only if required when the patient is at medical risk. Pre-approval of services required
Out-of-province emergency medical services	■ Physician services, licensed ambulance and prescription drugs charges based on the inter-provincial rates
Other covered services	■ Diagnostic services, hearing aids, durable equipment and eye exam



How do you enrol an employee?

There are three easy steps:

- 1 Contact your Sun Life Financial group representative to request the coverage.
- 2 Sign a participation application.
- 3 Submit an enrolment form completed by each eligible employee.

Does an eligible employee or their dependents need to provide medical evidence?

If an eligible employee applies during the first 31 days after starting work for you in Canada, he/she will automatically be covered. Otherwise, the employee and any dependents will have to complete an “Enrolment/Statement of Health Form” in order to be considered for coverage. We will evaluate the “Enrolment/Statement of Health Form”. Once a decision is made, we’ll let you know if the coverage is approved.

How does billing work?

- If we administer your plan, we’ll send you a separate invoice for the Inpatient Health Plan.
- If you do your own administration for your regular group benefits plan, you can calculate and remit the payment for any employees that are covered by the Inpatient Health Plan. We’ll provide you with a simple form you can use when remitting your payment.

For either billing method, you can remit your payment along with any other Sun Life Financial group benefits premium.

Are there any other services that are not covered?

The Inpatient Health Plan does not cover expenses for:

- services not covered under a government sponsored plan where your employee resides,
- expenses or supplies that are covered under any provincially sponsored drug insurance plan,
- services required for an organ transplant as a donor or as a recipient,
- injuries sustained due to civil disorder, war whether or not war is declared,
- services for out-of-province expenses for elective or non-emergency medical treatment or surgery,
- injuries incurred due to high risk sports activities,
- services incurred after the date of termination of coverage,
- services payable by any government or group medical plan.

Under what circumstances will the coverage be terminated?

In addition to the standard termination clauses, coverage for your employees and their dependents will terminate when:

- your employee leaves Canada to work in another country,
- your employee or any dependents are eligible to be covered by a government sponsored health care plan,
- your employee is no longer employed by you,
- your employee reaches age 75, or their coverage under your Extended Health Care benefit plan has been terminated, whichever is earlier.

Where can I get more information?

If you need more information, rates or are interested in participating in this plan, please contact your Sun Life Financial group representative.

This brochure provides the highlights but not all the details of the Inpatient Health Plan. The complete terms, conditions, exclusions and limitations governing the coverage are found in the group insurance policy issued by Sun Life Assurance Company of Canada.

Sun Life Assurance Company of Canada is a member of the Sun Life Financial group of companies.

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