



MY HEALTH CHOICE

- Health Plan (Standard)
- Health and Dental Plan (Enhanced)

Plans designed to go where you go.

We've got you covered.

Whether it's for a new job, or a change in employment status, at some point we will all leave an employee group plan. And, it's usually at this time that a loss of benefit coverage is top-of-mind. But with My Health CHOICE, you don't have to be without a health plan.

What is included?

There are two My Health CHOICE coverage options:

1. Standard Extended Health Care Insurance
2. Enhanced Extended Health Care Insurance, including dental coverage. (IMPORTANT NOTE: You must have selected dental coverage under your group plan to be eligible for the Enhanced coverage.)

Access to Best Doctors® is included in both coverage options. Should you, your spouse or dependent children be diagnosed with, or suspect you suffer from, a serious medical condition, Best Doctors can help to verify the diagnosis and best treatment options. www.bestdoctorscanada.com.

Enrol without proof of good health!

Coverage is available to you if you are between 18-74. If your spouse[†] was covered by your group plan and is between 18-74, you may also choose to enrol them. Coverage is also available for your dependent children. All you need to do is call 1-877-893-9893 within 60 days of the date your employee group benefits ends – remember no proof of good health is required and once enrolled coverage for you and your spouse is renewable for life! Coverage for your dependent children continues until their 21st birthday or until their 25th birthday if they are a full-time student*.

If you were unable to enrol within 60 days of your employee group coverage ending, you may apply for Personal Health Insurance (PHI) Direct. For more information on PHI Direct, please visit www.healthinsuranceincanada.ca or call 1-866-292-2517.

How much does the coverage cost?

Good news! Maintaining your healthcare coverage is very affordable. Your monthly premiums are based on your age at the beginning of your policy year (the anniversary of your enrolment date), and the province you live in. Please see your full list of provincial rates included with this brochure.



When will the coverage begin?

Coverage starts the day after your group benefits end - so you won't have a gap in your health coverage! Once your enrolment is processed, Sun Life Financial will send you a welcome package that includes more information about Best Doctors® services, along with your policy and billing statement. Your drug card, issued by Assure, will be sent to you shortly after (not available to residents of Quebec).

How do I use the drug card?



This Pay Direct Drug card is to be used at the pharmacy when purchasing medications. When you present this card to your pharmacist, the portion that is covered by the plan will be paid automatically! You only pay the remainder.

This card ensures immediate reimbursement for your eligible prescription drug purchases.

For Quebec residents: When leaving your group plan, you must enrol for prescription drug coverage with RAMQ unless you are eligible for this coverage elsewhere. My Health CHOICE does not take the place of a group health insurance plan providing prescription drug coverage and is second payor to comply with RAMQ legislation. For more information on RAMQ, please visit: www.ramq.gouv.qc.ca/en/citoyens/assurancemedicaments or call 1-800-561-9749.

How do I apply?

It's easy!

If applying within 60 days of your employee group benefits ending:

It's easy - one call does it all!

Simply call Sun Life Financial at 1-877-893-9893 and one of our licensed Financial Services Consultants** will help you enroll!

If you missed the 60-day period:

You still have options! Apply for Personal Health Insurance Direct online at www.healthinsuranceincanada.ca or call 1-866-292-2517.

Out of province/country coverage

Both coverage options include travel and medical assistance for situations arising from a medical emergency.

10-day money back guarantee

If your enrolment is approved we'll send you your policy. It includes all the specifics of the plan. If no claims have been paid, you can cancel the coverage within 10 days of receiving the policy and any paid premiums will be returned.

How do I submit a claim?

You have a choice in how to submit your claims. You can choose to 'Sign in' to your account using your Access ID (online registration available) at mysunlife.ca where you'll be able to view your coverage amounts and submit claims electronically making the reimbursement process faster. Or you can complete the paper claim form, included in your Welcome Package, and mail it along with your original receipts to Sun Life.

When will the coverage end?

Your coverage will terminate on the earliest of:

- the premium due date, subject to the 31-day grace period, for non-payment of premiums;
- the 1st of the month that either falls on or follows the day that you cancel the policy;
- the date you are no longer a resident of Canada;
- the date you are no longer covered by a provincial or territorial government health care plan;
- the date of your death.

Spousal and/or Dependent child coverage will terminate on the earliest of:

- the date your eligible spouse and/or dependent child no longer satisfies the required definition as shown next page*;
- the date your spouse and/or dependent child is no longer a resident of Canada;
- the date your spouse and/or dependent child is no longer covered by a provincial or territorial government health care plan;
- the date your coverage lapses, expires or otherwise terminates.



My Health CHOICE - Extended Health Care and Dental Insurance Plans (Standard and Enhanced)

Here are the two plans available to you, your spouse[‡] and your dependent children*. To request a quote for coverage, please call Sun Life Financial at 1-877-893-9893.

Here is an overview of your coverage options :

Coverage Options	Health Plan - Standard	Health and Dental Plan - Enhanced
Eligible expense limits		
Lifetime maximum (not applicable to emergency travel medical)	\$250,000	\$300,000
Drugs		
Prescription Drugs	80% reimbursement, up to a maximum of \$1,000 per insured, per calendar year Coverage of reasonable and customary dispensing fees up to the plan reimbursement	80% reimbursement, up to a maximum of \$2,000 per insured, per calendar year Coverage of reasonable and customary dispensing fees up to the plan reimbursement
Drugs covered	Costs of drugs or supplies that are prescribed in writing by a dentist or physician and are obtained from a pharmacist are covered	Costs of drugs or supplies that are prescribed in writing by a dentist or physician and are obtained from a pharmacist are covered
Vision care		
Vision	Maximum \$150 every two calendar years	Maximum \$200 every two calendar years
Eye examination	Up to \$50 every two calendar years (per calendar year for dependents under age 18)	Up to \$50 every two calendar years (per calendar year for dependents under age 18)
Paramedical services		
Paramedical services	\$300 per practitioner, up to a maximum of \$500 for all services combined Includes: physiotherapist, chiropractor, osteopath, podiatrist, naturopath, chiropodist, registered massage therapist, acupuncturist, & speech therapist	\$300 per practitioner, up to a maximum of \$650 for all services combined Includes: physiotherapist, chiropractor, osteopath, podiatrist, naturopath, chiropodist, registered massage therapist, acupuncturist, & speech therapist
Psychologist	\$60 per visit, maximum seven visits per calendar year	\$60 per visit, maximum ten visits per calendar year
Hospital in Canada		
Semi-private hospital	85% reimbursement Maximum of \$175 per day, for a total maximum of \$5,000	85% reimbursement Maximum of \$200 per day, for a total maximum of \$5,000
Convalescent hospital	\$20 per day, for a maximum of 180 days	\$20 per day, for a maximum of 180 days
Medical services and equipment		
Ambulance (in Canada)	Unlimited ground ambulance	Unlimited ground ambulance. Air ambulance to a maximum of \$5,000 per instance
Private duty nursing	\$5,000 (\$25,000 lifetime maximum)	\$5,000 (\$25,000 lifetime maximum)
Accidental dental	\$5,000 lifetime maximum	\$5,000 lifetime maximum
Hearing aids	\$350 every five years	\$500 every five years
Best Doctors®	Best Doctors will arrange a referral, necessary appointments and can help book accommodations if out-of-town travel is required.	Best Doctors will arrange a referral, necessary appointments and can help book accommodations if out-of-town travel is required.

‡ Spouse means your spouse by marriage or a person of the same or opposite sex with whom you have been cohabiting with for at least one year and who is represented publicly as your spouse.

* 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 attending an educational institution recognized under the Income Tax Act (Canada), they are considered an eligible dependent until the age of 25 as long as the child is entirely dependent on you for financial support.



If you have questions about My Health CHOICE - Extended Health Care and Dental Insurance, please call Sun Life Financial at **1-877-893-9893** to speak with a licensed Financial Services Consultant** today!

Coverage Options	Health Plan - Standard	Health and Dental Plan - Enhanced
Medical services & equipment	<p>\$2,500 per insured person per calendar year for all expenses listed in this category:</p> <ul style="list-style-type: none"> • Splints, trusses, braces or crutches: \$300 • Breast prostheses, artificial limbs, eyes, and other prosthetics: \$200 • Orthopedic shoes, orthopedic alterations & orthotics (prescription required): \$200 • Blood glucose monitor: \$250 every five years • Other: Reasonable and customary for diagnostic services; casts; stockings; surgical brassieres; stump socks; radiotherapy or coagulotherapy; oxygen, plasma and blood transfusion <p>The following expenses in this category are subject to the same \$2,500 calendar year limit as outlined above, but have the following lifetime maximums:</p> <ul style="list-style-type: none"> • Wheelchair: \$4,000 • Hospital beds: \$1,500 • Wigs (medically necessary): \$350 	<p>\$5,000 per insured person per calendar year for all expenses listed in this category:</p> <ul style="list-style-type: none"> • Splints, trusses, braces or crutches: \$500 • Breast prostheses, artificial limbs, eyes, and other prosthetics: \$200 • Orthopedic shoes, orthopedic alterations & orthotics (prescription required): \$200 • Blood glucose monitor: \$300 every five years • Other: Reasonable and customary for diagnostic services; casts; stockings; surgical brassieres; stump socks; radiotherapy or coagulotherapy; oxygen, plasma and blood transfusion <p>The following expenses in this category are subject to the same \$5,000 calendar year limit as outlined above, but have the following lifetime maximums:</p> <ul style="list-style-type: none"> • Wheelchair: \$4,000 • Hospital beds: \$1,500 • Wigs (medically necessary): \$350
Emergency travel medical		
Emergency travel medical *** (out of province/country)	<p>Up to \$1 million (lifetime maximum) of emergency hospital expenses covered during the first 60-days of travel subject to a nine-month pre-existing condition limitation.</p> <p>Travel assistance, medical assistance, family service and support, and additional services (i.e. assistance in finding lost luggage) for situations arising from a medical emergency.</p> <p>This coverage terminates when you reach age 80.</p>	<p>Up to \$1 million (lifetime maximum) of emergency hospital expenses covered during the first 60-days of travel subject to a nine-month pre-existing condition limitation.</p> <p>Travel assistance, medical assistance, family service and support, and additional services (i.e. assistance in finding lost luggage) for situations arising from a medical emergency.</p> <p>This coverage terminates when you reach age 80.</p>
Dental Care		
Dental coverage (Note that a one year waiting period applies to restorative dental care.)	Not covered	<p>80% reimbursement for diagnostic and preventative dental procedures: oral examinations, recall procedures, (every nine months) periodontal scaling, root planing, routine extractions and for children under age 12, space maintainers</p> <p>50% reimbursement for restorative dental care: endodontics (root canal) & periodontics, crowns (and repairs), onlays restorations, dentures (and repairs/adjustments), bridgework, surgical services, major oral surgery & anaesthesia, drug injections, lab procedures</p> <p>Maximum of \$750 in the first calendar year of coverage, maximum of \$1,000 per calendar year in subsequent years.</p>

**** Identified as Financial Security Advisors in the province of Quebec**

Unless otherwise stated, all maximums are per insured person per calendar year. For maximums with a multi-year period (eg. every two years), the period begins on the date the first expense under that maximum is incurred. This coverage is second payor to any government - sponsored health coverage. In Quebec, this plan will be second payor to comply with RAMQ legislation.

*** Emergency travel medical does not cover any pre-existing condition. A pre-existing condition is a medical condition where symptoms have appeared or required medical attention, hospitalization or treatment (this includes changes in medication or dosage) during the nine-month period before you leave your province. Certain provisions may apply, please read your policy carefully before you travel.

† Excludes mental, nervous and chronic pain conditions (e.g. Fibromyalgia).

This brochure provides the highlights but not all the details of the My Health CHOICE - Extended Health Care and Dental Insurance, Standard or Enhanced plans. The terms, conditions, exclusions and limitations governing this coverage are outlined in the individual policy, issued by Sun Life Assurance Company of Canada, a member of the Sun Life Financial group of companies. A sample policy is available by request from a Financial Services Consultant** by calling 1-877-893-9893.

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