Best Doctors’ Services – A value-added benefit

Health Coverage Choice from Sun Life Financial includes access to Best Doctors – an international physician network that can help you understand your medical condition and treatment options. If you suspect that you, your spouse or dependent child has a medical condition, Best Doctors can help you get the information you need to make more informed decisions about your healthcare. Best Doctors can help you get:
- the right information,
- the right diagnosis,
- the right treatment.

Note: Best Doctors is not part of the policy. We cannot guarantee its availability. It may be withdrawn at any time.

Leaving an employer no longer means leaving your health and dental benefits behind.

With Health Coverage Choice, you can continue receiving coverage similar to the group health benefits you have today.

Health Coverage Choice provides coverage for health-related expenses that aren’t covered by your provincial health plan. This includes your day-to-day expenses for things like prescription drugs and visits to the chiropractor or physiotherapist, as well as coverage for unexpected medical emergencies. You can continue to have control over how you take care of your health and well-being. Health Coverage Choice provides you with excellent options for the health services you and your family need – at the level of care you deserve. Once issued, the plan is renewable every year for life.

Consider Health Coverage Choice when you are leaving a group benefits plan because you are:
- retiring – most employers do not continue to provide group benefits to retirees
- starting your own business,
- taking contract work, or
- leaving your spouse’s or parent’s plan.

mySunLife.ca

At mysunlife.ca, you can manage your Health Coverage Choice plan – it’s easy, secure and paperless. With this web service, you can:
- submit claims online,
- have claim payments deposited into your bank account, and
- view your coverage details and claim history.

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Questions? We’re here to help.

Talk to an advisor about Sun Life Financial today!
Visit www.sunlife.ca/hcc
Call 1 877 SUN-LIFE (1 877 786-5433)

Health Coverage Choice is only available if you apply within 60 days of leaving your group benefits plan.

DON’T WAIT – APPLY NOW

TIP: PLANNING FOR RETIREMENT

Health coverage is an important part of your post-retirement plan. Many few employers offer health benefits during retirement, and many medical services are not covered or are only partially covered by provincial plans. Health Coverage Choice can help fill this gap.

Are you eligible?

Because you have been covered by an employee benefit plan – whether it was through your employer, your spouse’s plan or your parent’s plan – you can apply for Health Coverage Choice quickly and easily.
- You must apply within 60 days of your group benefits ending.
- You may include your spouse and dependent children (if applicable) if they were insured through your group benefits plan.
- There are no medical requirements.
- Every person included on the application must have had similar health coverage under your group benefits plan. For example, to include dental coverage, you must have been covered for dental under your group benefits plan.
- All applicants must be Canadian residents covered under a provincial health plan and be age 74 or younger on the date you apply.

Plan types

There are three types of plans to choose from:

<table>
<thead>
<tr>
<th>HEALTH AND DENTAL CHOICE A</th>
<th>HEALTH CHOICE B</th>
<th>HEALTH CHOICE C</th>
</tr>
</thead>
</table>

Life’s brighter under the sun

For Canadian residents outside of Quebec.

Sun Life Financial

Take care of it right away with my Sun Life Mobile.

With my Sun Life Mobile app you can:
- understand more about the drugs you may be prescribed,
- submit claims, and
- manage your coverage right on your smartphone.

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# PLAN DETAILS

**Healthcare**

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Choice A</th>
<th>Choice B</th>
<th>Choice C</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prescription</strong></td>
<td>80% reimbursement</td>
<td>80% reimbursement</td>
<td>80% reimbursement</td>
</tr>
<tr>
<td><strong>Drugs</strong></td>
<td>$400 annual maximum</td>
<td>$300 annual maximum</td>
<td>$300 annual maximum</td>
</tr>
<tr>
<td><strong>Medical equipment and services</strong></td>
<td>• $1,500 annual maximum for hospital beds</td>
<td>• $2,000 annual maximum</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• $2,500 annual maximum for hospital beds</td>
<td>• $5,000 annual maximum</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• $4,000 annual maximum</td>
<td>• $10,000 annual maximum</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• $5,000 annual maximum</td>
<td>• $20,000 annual maximum</td>
<td></td>
</tr>
<tr>
<td><strong>In-home nursing</strong></td>
<td>$2,500 annual maximum and $25,000 lifetime maximum</td>
<td>$2,500 annual maximum and $25,000 lifetime maximum</td>
<td>$2,500 annual maximum and $25,000 lifetime maximum</td>
</tr>
</tbody>
</table>

### Paramedical practitioners

- **Prosthodontists**:
  - $300 maximum every 2 years, including $50 maximum per eye exam

### Medical equipment and services

- **Hospital beds**: $2,500 annual maximum and $20,000 lifetime maximum combined with medical equipment and services

### Orthopedic shoes

- $500 annual maximum

### Blood glucose monitor

- $500 annual maximum

### Medically necessary wigs and hair pieces

- $500 annual maximum

### Wheelchairs, walkers and traction kits

- $1,000 lifetime maximum

### Hospital bed, oxygen

- Reasonable and customary services and charges

### Casts, crutches

- Reasonable and customary services and charges

### Prosthetic appliances (eg. artificial limbs)

- Reasonable and customary services and charges

### Vision care includes coverage for:

- Prescription glasses
- Prescription contact lenses
- Prescription sunglasses
- Laser eye surgery

### Preventive Services

- **Examinations and diagnosis**
- **Tests, x-rays, and lab exams**
- **White fillings**
- **Scaling and extractions**
- **Breast prostheses (3200 annual maximum)**
- **Recall every 9 months**
- **Minor emergency treatment**

### Restorative Services

- **Endodontics**
- **Oral surgery**
- **Orilips**
- **Dentures (and repairs)**

### Annual Maximums

<table>
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<td><strong>Medical equipment and services</strong></td>
<td>$2,500 annual maximum and $20,000 lifetime maximum combined with medical equipment and services</td>
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<td>$2,500 annual maximum and $20,000 lifetime maximum combined with medical equipment and services</td>
</tr>
<tr>
<td><strong>Orthopedic shoes</strong></td>
<td>$350 annual maximum</td>
<td>$200 annual maximum</td>
<td>$200 annual maximum</td>
</tr>
<tr>
<td><strong>Blood glucose monitor</strong></td>
<td>$350 every 5 years</td>
<td>$250 every 5 years</td>
<td>$250 every 5 years</td>
</tr>
<tr>
<td><strong>Medically necessary wigs and hair pieces</strong></td>
<td>$300 annual maximum</td>
<td>$350 lifetime maximum</td>
<td>$350 lifetime maximum</td>
</tr>
<tr>
<td><strong>Wheelchairs, walkers and traction kits</strong></td>
<td>$1,000 lifetime maximum</td>
<td>$4,000 lifetime maximum</td>
<td>$4,000 lifetime maximum</td>
</tr>
<tr>
<td><strong>Hospital bed, oxygen</strong></td>
<td>$1,500 lifetime maximum</td>
<td>$4,000 lifetime maximum</td>
<td>$4,000 lifetime maximum</td>
</tr>
<tr>
<td><strong>Casts, crutches</strong></td>
<td>$300 annual maximum</td>
<td>$300 annual maximum</td>
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<tr>
<td><strong>Prosthetic appliances (eg. artificial limbs)</strong></td>
<td>Reasonable and customary services and charges</td>
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</tr>
<tr>
<td><strong>Vision care includes coverage for</strong></td>
<td>• 80% reimbursement</td>
<td>• 80% reimbursement</td>
<td>• 80% reimbursement</td>
</tr>
<tr>
<td></td>
<td>• $500 annual maximum</td>
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### Note:

- You must apply to your province of residence as first payor. You can submit a claim to us for the unpaid portion.
- All plans include: • Pay Direct drug card • No deductible • Smoking cessation medication ($250 lifetime maximum)
- You may change your rates each year. If we do change the rates we will send you written notice 45 days before the change.
- Waiting periods begin on the policy effective date.

This brochure does not form part of your policy. If there are any inconsistencies between the content of this brochure and your policy, the terms of your policy will apply.

Your policy includes exclusions and limitation of coverage.