

Benefit Summary

This is a general summary of the coverage provided under your group plan and should be read together with the information contained in your booklet. For more information, including exclusions, limitations and other conditions, please refer to the appropriate sections of your booklet.

General Information

Waiting Period	3 months of continuous employment
Termination	Termination of coverage may vary from benefit to benefit as indicated in this Summary. Coverage may also end on an earlier date, as specified in the <i>General Information</i> section of your booklet.

Extended Health Care

Benefit year	January 1 to December 31
Deductible	None
Drug card plan	Included
Reimbursement level	
<i>Prescription drugs</i>	80%
<i>Drug substitution limit</i>	Charges in excess of the lowest priced equivalent drug are not covered unless specifically approved by Sun Life. To assess the medical necessity of a higher priced drug, Sun Life will require the covered person and the attending doctor to complete and submit an exception form.
<i>In-province hospital</i>	100% of the difference between the cost of a ward and a semi-private hospital room
<i>Convalescent hospital</i>	100% up to \$20 per day for a maximum of 180 days for treatment of an illness due to the same or related causes

<i>Out-of-province emergency services</i>	100% Emergency Travel Assistance included Maximum of 60 days per trip Lifetime maximum of \$1,000,000 per person for out-of-Canada services
<i>Out-of-province referred services</i>	80%
<i>Medical services and equipment</i>	100%
<i>Paramedical services</i>	100% up to a maximum of \$500 per person per specialty in a benefit year for the paramedical specialists listed below: <ul style="list-style-type: none"> ■ licensed psychologists or social workers ■ licensed massage therapists ■ licensed speech therapists ■ licensed physiotherapists ■ licensed naturopaths ■ licensed acupuncturists ■ licensed audiologists ■ licensed dieticians ■ licensed occupational therapists ■ licensed osteopaths or osteopathic practitioners, including a maximum of one x-ray examination each benefit year ■ licensed chiropractors, including a maximum of one x-ray examination each benefit year ■ licensed podiatrists or chiropodists, including a maximum of one x-ray examination each benefit year
<i>Vision care</i>	100% up to a maximum of \$200 in any 12 month period for a person under age 18 or in any 24 month period for any other person
Termination	When you retire or reach age 70, whichever is earlier

Dental Care

Benefit year	January 1 to December 31
Deductible	Individual – \$25 per benefit year Family – \$50 per benefit year
Fee guide	The current fee guide for general practitioners in your province of residence

Reimbursement level

Preventive procedures 80% after the deductible

Basic procedures 80% after the deductible

Maximum benefit

Benefit year maximum \$1,500 per person

Late applicant maximum If you apply for coverage either for yourself or your dependents more than 31 days after becoming eligible, the maximum benefit is \$100 per person during the first year for all expenses

Termination

When you retire or reach age 70, whichever is earlier

Long-Term Disability

Maximum amount

66.67% of your monthly basic earnings up to a maximum of \$5,000
The maximum amount may be reduced by benefits and payments provided from other sources as described in the *Long-Term Disability* section of your booklet

Tax status

Your employer has indicated that all employees covered under this disability plan are paying the full cost of the premium. Therefore, the benefit payments are not taxable income.

Proof of good health

Approval required for coverage in excess of \$4,000, and any increase in that coverage of 25% or more or \$500, whichever is greater

Elimination period

4 months

Maximum benefit period

The period ending on the last day of the month in which you reach age 65
Benefits may also end on an earlier date as specified in the *Long-Term Disability* section of your booklet

Termination

The day you reach age 65 less the elimination period or the day you retire, whichever is earlier

Life***Employee Basic Life***

Amount

\$50,000

Reduction Coverage is reduced to 50% of the above amount when you reach age 65

Termination When you retire or reach age 70, whichever is earlier

Employee Optional Life

Amount You can choose coverage in units of \$10,000

Maximum – \$250,000

Minimum – \$50,000

Proof of good health Approval required on the initial Optional Life coverage amount and any increase in that coverage requested by the employee

Termination When you retire or reach age 65, whichever is earlier

Dependent Life

Amount Spouse – \$10,000

Child – \$5,000

Termination When you retire or reach age 70, whichever is earlier

Converting Life coverage If Life coverage ends or reduces for any reason other than your request, the group Life coverage may be converted to an individual Life policy with Sun Life without providing proof of good health. For more information, please refer to the *Life Coverage* section of your booklet.

Accidental Death and Dismemberment

Employee Basic Accidental Death and Dismemberment

Amount Equal to Employee Basic Life coverage

Termination When you retire or reach age 70, whichever is earlier

Employee Optional Accidental Death and Dismemberment

Amount Equal to Employee Optional Life coverage

Termination When you retire or reach age 65, whichever is earlier