



your **group** benefits  
quick reference guide

**Land Trust Alliance of British  
Columbia**

**All other employees**

**Contract Number 180642  
Effective February 1, 2021**

For a complete version of your booklet please visit [www.mysunlife.ca](http://www.mysunlife.ca)  
A paper copy of your booklet is available through your employer.

## **Respecting your privacy**

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## **You have a choice**

We will occasionally inform you of other financial products and services that we believe meet your changing needs. If you do not wish to receive these offers, let us know by calling 1-877-SUN-LIFE (1-877-786-5433).

## 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>	100% Maximum of \$3,000 per person per benefit year
<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% of the difference between the cost of a ward and a semi-private room, 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 \$3,000,000 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"> <li>■ licensed psychologists or social workers</li> <li>■ licensed massage therapists</li> <li>■ licensed speech therapists</li> <li>■ licensed physiotherapists</li> <li>■ licensed naturopaths</li> <li>■ licensed acupuncturists</li> <li>■ licensed audiologists</li> <li>■ licensed dieticians</li> <li>■ licensed occupational therapists</li> <li>■ licensed osteopaths or osteopathic practitioners, including a maximum of one x-ray examination each benefit year</li> <li>■ licensed chiropractors, including a maximum of one x-ray examination each benefit year</li> <li>■ licensed podiatrists or chiropodists, including a maximum of one x-ray examination each benefit year</li> </ul>
<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
Lumino Health Virtual Care services	Included
Termination	When you retire or reach age 85, whichever is earlier

**Dental Care**

Benefit year	January 1 to December 31
Deductible	None

Fee guide	The current fee guide for general practitioners in the province where the employee lives
Reimbursement level	
<i>Preventive procedures</i>	80%
<i>Basic procedures</i>	80%
<i>Major procedures</i>	50%
Maximum benefit	
<i>Benefit year maximum</i>	\$2,000 per person TMJ expenses are not included in the benefit year maximum. A separate lifetime maximum applies.
<i>Lifetime maximum</i>	TMJ procedures – \$1,000 per person
<i>Late applicant maximum</i>	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 85, whichever is earlier

### Long-Term Disability

Maximum amount	66.7% of the first \$2,600 of your monthly basic earnings, plus 50% of the next \$3,000, plus 40% of the balance of your monthly earnings, if any, up to a maximum benefit of \$10,000. For coverage in excess of the amount indicated under <i>Proof of good health</i> , your coverage is subject to approval by Sun Life. Refer to <i>Proof of good health</i> below for further information. The maximum amount may be reduced by benefits and payments provided from other sources as described in the <i>Long-Term Disability</i> 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 \$3,300, 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 <i>Long-Term Disability</i> section of your booklet
Termination	The day you reach age 65 less the elimination period or the day you retire, whichever is earlier

**Critical Illness – Contract No. 131806  
(including Best Doctors services)**

***Employee Critical Illness***

Amount	\$25,000
Termination	When you retire or reach age 65, whichever is earlier

**Life**

***Employee 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

***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 <i>Life Coverage</i> section of your booklet.
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**Accidental Death and Dismemberment**

***Employee Accidental Death and Dismemberment***

Amount	Equal to Employee Life coverage
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Termination

When you retire or reach age 70, whichever is earlier

**Employee Assistance Program – Contract No.180642**

Contact information

Assistance is available 24 hours a day, seven days a week from Shepell

You can call Shepell toll free at 1-855-544-7722. You can also access EAP services at [www.workhealthlife.com/sunlife](http://www.workhealthlife.com/sunlife).