discover
your group benefits

Sun Life Financial
Access to your benefits is easy on the Internet

Our Plan Member Services website makes it easy to access the benefits information you need and make claims for expenses covered by your plan. Here are some of the things you can do at www.sunlife.ca/member:

- Sign up for direct deposit and submit claims online for faster claims processing!
- View medical and dental claim information to help you keep track of your claims.
- Update your personal information on the website, such as your address, telephone number, e-mail address and password—it’s easier on the web!
- Travelling soon? Print a wallet card so you have contact numbers while you’re away.
- Print a personalized Pay-Direct drug card.
- Check the balance of your Health Spending Account to help you manage your account.
- Check when you’re eligible for your next pair of eyeglasses, so you know when you are covered to purchase a new pair.
- Check when you’re eligible for coverage of your next dental exam—book your appointment when you know you’ll be covered.
- Download personalized medical and dental claims forms—less information for you to complete.

Please note: Plan Member Services available on the Internet may vary according to your plan.

How to access Plan Member Services

To access our website, you will need an Access ID and password. Register online for your Access ID and password. Once you have them, go to www.sunlife.ca/member and sign in. You now have access to your benefits on the Internet!

Sign up for direct deposit

Direct deposit lets you arrange to have claim payments deposited directly to your bank account. It’s easy to sign up for this convenient service on the Plan Member Services website. Just click on Direct Deposit at the top of the screen.

Once you have signed up, instead of receiving a paper claims statement and a reimbursement cheque in the mail, you will receive an e-mail letting you know when your claim has been processed. You can then sign on to the Plan Member Services website to view or print the details of your claim. Your claim details are available for six months. If you require paper copies for future reference, please make sure to print your claim statements as soon as possible.

Direct deposit is the fastest and easiest way to receive reimbursement for your eligible expenses. Be sure to sign up today.
How to submit a claim

If you have a medical or dental expense that your plan either fully or partially covers, there are a number of easy ways to submit a claim for reimbursement. To submit a claim, you will need to know your contract number, and either your member ID or employee number. If you don’t know them, please contact your benefits plan administrator.

Internet

When you sign up for direct deposit, you can submit claims on our Plan Member Services website. Your payment gets to you faster—deposited directly to your bank account, usually within 24 to 48 hours from the time your claim has been processed. Just follow the easy steps to submit your claim. When your claim has been processed, we will send you an e-mail to notify you about the status of your claim.

Mail

All eligible expenses can be claimed by mailing your claim submissions. You can get claim forms from your plan administrator or, using your Access ID and password to enter our Plan Member Services website, you can download personalized medical and dental forms.

Just complete the claim form, enclose the original receipts and mail it to the regional office nearest you. Be sure to keep a copy of the claim form and receipts for your records.

For most medical and dental claims, we can usually process your claim in three to five working days from when we receive it. More complex claims can take longer. Upon approval of your first claim, you’ll receive a claim statement in the mail.

Electronic submission

Many dentists choose to submit claims electronically on behalf of their patients. This means you won’t need to complete a claim form.
Coordinating benefits with a spouse

If you have a spouse who also has a family benefits package, you may be able to claim benefits under both plans to maximize the amount of money you get back for your claims.

For example, let’s say you make a medical expense claim, and you receive a reimbursement for 80% of this expense. You would then claim under your spouse’s plan to be reimbursed for some or all of the remaining 20%.

Here is how the process works:

• Submit your own expenses to your plan first.
• Your spouse submits claims to his or her plan first.
• For your children’s expenses, you must first submit claims to the plan of the parent with the earlier month and day of birth in the calendar year. For example, if you were born in October and your spouse was born in April, your children’s claims would be submitted first to your spouse’s plan.
• If one plan covers less than 100% of any claim, simply return a copy of that plan’s benefit statement to the other plan along with copies of the receipts. That plan will then determine whether you are covered for any remaining unpaid amount.

Save money on quality eyewear

As an added feature of your benefit plan, Preferred Vision Services Inc. (PVS) offers you the opportunity to save up to 20% on the purchase of all frames, prescription lenses, contact lenses, and lens add-ons at registered PVS locations. You can use this service regardless of whether you have vision care coverage.

To find a participating practitioner near you, visit the PVS website at www.pvs.ca or call toll-free: 1 800 668-6444. After selecting your eyeware, tell the practitioner that you are covered under a plan through Sun Life Financial and pay the reduced price. Many locations also apply the discount to non-prescription eyeware and accessory items.

Health information at your fingertips

Looking for reliable information about health and well-being? Check out the Health & Wellness Companion! It has health assessments, drug and disease libraries, calculators and other great features. It’s all online – when you need it. So, whether you’re healthy and want to stay that way or want to get in better shape, the Health & Wellness Companion is a valuable resource! You access the Health & Wellness Companion from the Plan Member Services website.
Discover your group benefits

When people think of their compensation package at work, benefits coverage is often overlooked. But the truth is, your benefits plan represents one of the most valuable pieces of your total compensation package—and a significant investment by your organization in your health and well-being.

At Sun Life Financial, we want to ensure your group benefits experience is easy and that you make the most of what your plan has to offer. So take a few minutes to read through this and find out how your plan works.

www.sunlife.ca

Protecting your privacy

At Sun Life Financial, protecting your privacy is important to us. When you give us your personal information, we can assure you that it is collected, used or disclosed for purposes identified to you and with your permission. For more information about our privacy policy, visit www.sunlife.ca
how to connect

easy access to your benefits information

Website
To send us an e-mail, sign in to www.sunlife.ca/member with your Access ID and password, click on Contact Us on the bar at the top of the screen, select Group Claims Information and fill in the required information.

Telephone
Talk to a Customer Care representative between 8:00 A.M. and 8:00 P.M. (EST), Monday to Friday, excluding holidays at 1 800 361-6212.

Use your touch-tone telephone to access your benefits information 24 hours a day. You can check the payment status of claims, find out how much is left in your Health Spending Account, and more.

Mail

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Group Benefits are provided by Sun Life Assurance Company of Canada, a member of the Sun Life Financial group of companies.