



CRITICAL ILLNESS

Critical illness insurance with access to health care professionals for any health concern

Sun Life's Critical Illness insurance provides a benefit for covered cancer, heart attack, stroke, and more

5 reasons to choose a critical illness plan

Cancer diagnoses are among the leading causes of STD, LTD, Stop Loss, Life and critical illness claims

1. 5th leading cause of STD claims³
2. 2nd leading cause of LTD claims³
3. Leading cause for stop-loss claims⁴
4. Leading cause of critical illness claims overall⁵
5. Leading cause of death for people aged 25-64⁶

Covered conditions by category		
Circulatory conditions category <ul style="list-style-type: none"> • Heart attack • End-stage heart failure • Stroke • Coronary artery disease* 	Cancer conditions category <ul style="list-style-type: none"> • Cancer • Non-life threatening cancer* 	Employees can purchase \$5,000 to \$50,000 of coverage, payable as a lump sum (\$5,000 for children). Maximum benefit payable is once per covered condition, up to 100% per category, 200% total benefit payable. The inclusion of the Recurrence Benefit may allow for additional payments if qualified. ²
Other conditions category <ul style="list-style-type: none"> • Benign brain tumor • Coma • Major organ failure • Paralysis • Severe burns 	Childhood conditions category <ul style="list-style-type: none"> • Cerebral palsy • Complex congenital heart disease • Cystic fibrosis • Type 1 diabetes mellitus • Muscular dystrophy 	

Covered conditions may vary by state.

* Partial benefits (payable at 25%) may allow other covered conditions to be paid within the same category, up to the maximum for the category.

Insured dependent children are covered for each category/condition applicable to the plan elected. Childhood conditions apply only to Dependent Children. Coverage for cancer may be excluded or offered as stand-alone coverage.

Introducing Health care support services¹

Offered in partnership with CompPsych, employees can speak with benefits and claims experts and RNs to request help understanding their health care benefits and options.

Top five reasons for calls into the service:

1. Explanation of benefits—what's covered/not covered/how plan works
2. Fee negotiation assistance
3. Explanation of a recent diagnosis (clinical)
4. Claims questions
5. Plan comparison during open enrollment

This service is not limited to covered illnesses; employees and their families can tap into the service for any health concern.

Additional plan highlights

- Guaranteed Issue (depending on group size and participation)
- Recurrence Benefit rider²
- Annual Wellness Screening Benefit
- Portability/continuation (subject to state availability)

To learn more, call your broker or our Employee Benefits Internal Sales Desk at 877-736-4739.

Evidence of Insurability may be required when employees initially enroll, apply for insurance after the initial enrollment, or apply for an increase in insurance. Coverage will not be in effect until the Application is approved by Sun Life.

See reverse for important disclosures.



1. Value-added services are offered only on specific lines of coverage, and carry a separate charge, which is added to the cost of the insurance. The cost is included in the total amount billed. HealthChampion® (a health care support service) is not insurance and is provided by ComPsych®. ComPsych® and HealthChampion® are registered trademarks of ComPsych Corporation. Sun Life is not responsible or liable for care, services, or advice given by any provider or vendor of the Services. Sun Life reserves the right to discontinue any of the Services at any time.
2. Refer to the rider for Recurrence Benefit criteria. Payable only once per applicable covered condition, up to a maximum. Not payable for coronary artery disease or any childhood condition. Subject to state availability.
3. Gen Re, Disability Fact Book, 2013-2014, pages 11-12, Last accessed on 10/8/2013. Used with permission. Includes claims for malignant neoplasms.
4. Sun Life Financial Stop-Loss research report, "Leading catastrophic claims conditions" published in 2014. The report covered a four-year study of catastrophic claims that Sun Life paid. Includes claims for malignant neoplasms, leukemia, lymphoma, and/or multiple myeloma.
5. American Association for Critical Illness, "2012 Critical Illness Insurance Buyer Study", conducted by Gen Re Life Corporation, 2012, p. 4 within the Sun Life Financial Critical Illness White Paper, Last Accessed on 10/8/2013. Used with permission.
6. Gen Re, Life Fact Book, 2013-2014, p.4, Last accessed on 10/8/2013. Used with permission. Includes claims for malignant neoplasms.

This is a limited benefit policy. It does NOT provide basic hospital, basic medical, or major medical insurance. The certificate has exclusions, limitations, and benefit waiting periods for certain conditions that may affect any benefits payable. Benefits payable are subject to all terms and conditions of the certificate. The policy, certificate and rider, if applicable, may not be available in all states and may vary based on state laws and regulations.

Note regarding Employees Covered or Considering Coverage under Health Savings Accounts (HSA) Established in Connection with High Deductible Health Plans (HDHP):

Based on the limited available regulatory guidance, Sun Life believes its critical illness plans are appropriate for use with an HSA and may be purchased when employees and/or their family members are covered under an HDHP. However, Sun Life cannot provide legal or tax advice. If there are legal or tax questions, we suggest that employees consult their own legal or tax advisor before purchasing this insurance.

The exclusions and limitations listed below may vary by state.

What exclusions apply to the benefits payable?

In addition to the exclusions stated in the Covered Conditions section of the Certificate, we will not pay any benefit that is caused by, contributed to in any way, or resulting from any Critical Illness condition diagnosed outside the United States or Canada without confirmation of the diagnosis by the type of specialist physician specified for each of the Covered Conditions in the certificate who practices in the United States or Canada.

We will not pay a benefit for any Critical Illness that is due to or results from: intentionally self inflicted injuries; elective plastic or cosmetic surgery; active military duty; participation in war, declared or undeclared, or any act of war; active participation in a riot, rebellion or insurrection; committing or attempting to commit an assault, felony or other criminal act; engagement in dangerous conduct or hazardous activity where there is a likelihood of death or serious injury; being legally intoxicated or under the influence of any narcotic unless taken on the advice of a physician and taken as prescribed; or improper or illegal use of inhalants or huffing.

Covered Conditions have specific diagnostic criteria that must be met (along with supporting documentation) for a benefit to be paid. For additional information regarding covered conditions, please request an outline of coverage.

What limitations apply to the benefits payable?

In addition to the limitations stated in the Covered Conditions section of the certificate, we will not pay any benefit for any Critical Illness that is diagnosed in the first exclusionary period following the effective date of any Insured's insurance and results from a Pre-Existing Condition.

Pre-Existing Condition means during the exclusionary period prior to any Insured's effective date of insurance or the effective date of an increase in any Insured's amount of insurance, any condition for which any Insured sought medical treatment, consultation, advice, care or services, including diagnostic measures for the condition, regardless of whether the condition was diagnosed or suspected at that time; took prescribed drugs or medicines for the condition; or had symptoms for which an ordinarily prudent person would have consulted a health care provider for diagnosis, care or treatment.

When newborn children, newly placed foster children, or newly adopted children are added to Dependent Children Insurance within a certain number of days (as noted in the certificate) of birth, placement, or adoption, the Pre-Existing Condition limitation does not apply.

The Sun Life Financial group of companies operates under the "Sun Life Financial" name strictly as a marketing name, and no legal significance is expressed or implied. In the United States and elsewhere, insurance products are offered by members of the Sun Life Financial group that are insurance companies. Sun Life Financial, Inc., the publicly traded holding company for the Sun Life Financial group of companies, is not an insurance company and does not guarantee the obligations of these insurance companies. Each insurance company relies on its own financial strength and claims-paying ability.

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 12-GP-01, 12-SD-C-01, 13-SD-C-01, 12-SD-R-01, and 13-SD-R-01, subject to state availability. Product offerings may not be available in all states and may vary depending on state laws and regulations. Not available in New York. This flyer is not available for use in Georgia. In Connecticut, "Critical Illness" means "Specified Disease."

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