



Exempt Staff
Health Spending Account Plan Summary

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INTRODUCTION

The Health Spending Account (HSA) is one of the three accounts provided through the Flexible Spending Program and allows reimbursement for health and dental expenses that qualify for the medical expense tax credit in *The Income Tax Act* and regulations as interpreted by Canada Revenue Agency, and that have not been reimbursed by any other plan. These expenses are subject to change according to amendments made to the legislation. After reading the following summary, for any further questions regarding eligible expenses, please contact Sun Life Financial at:

Telephone: 1-800-361-6212

ELIGIBILITY

The HSA is available to exempt staff who work at least half-time and are permanent or have been appointed into a term position of six months or greater.

In order to be covered by the Extended Health Care Benefit Program, employees must be a resident of Canada and be eligible under provincial government health care benefits.

ELIGIBLE DEPENDENTS

All dependents must be residents of Canada and be eligible under the provincial government health care benefits in their province of residence.

Eligible dependents include:

Spouse – legal or common-law spouse provided the common-law spouse is publicly represented as a member's spouse and the member has cohabited for one year.

Dependent Child – means an unmarried natural, adopted, or stepchild who is dependent upon a member for financial support and who is:

- under 21 years of age;
- under 26 years of age and attending a college or university full-time;
- or physically or mentally incapable of self-support and became incapable to that extent while entirely dependent on a member for maintenance and support under the above

The HSA may be used to reimburse eligible medical and dental expenses for other family members who qualify as a dependent under *The Income Tax Act*, e.g. dependent grandparent.

Please contact Sun Life Financial for more information at 1-800-361-6212.

EFFECTIVE DATE OF COVERAGE

Coverage under the Health Spending Account for eligible exempt staff, will take effect as of the date of enrollment in the Extended Health Benefit Program.

Coverage for dependents will become effective on the date the member's coverage becomes effective, or on the date the member first acquires a dependent, whichever is later.

ELIGIBLE EXPENSES

Eligible expenses include, but are not limited to, the following:

Health and Dental Insurance Amounts

- Premiums
- Deductibles
- Co-insurance amounts
- Out-of-Canada health premiums

Professional Services

- Acupuncturist (if a qualified medical practitioner)
- Anesthetist
- Chiroprapist
- Chiropractor
- Christian Science practitioner or nurse
- Dental hygienist
- Dental mechanic (for the making or repairing of a complete upper or lower denture)
- Dentist
- Dermatologist
- Dietician
- Gynecologist
- Homeopath
- Naturopath
- Neurologist
- Nurse (R.N.)
- Nutritional counsellor (by written recommendation of a physician)
- Occupational therapist
- Oculist
- Optician
- Optometrist
- Orthopedist
- Osteopath
- Pediatrician
- Physician
- Physiotherapist
- Podiatrist
- Practical nurse (RNA – medical services only)
- Psychiatrist
- Psychoanalyst
- Psychologist (if licensed to provide therapy or rehabilitation)
- Speech therapist (pathological or audiological only)
- Surgeon
- Therapist/Therapist

- Obstetrician
- X-ray technician

Dental Services

- Dental x-rays
- Extracting teeth
- Filling teeth
- Gum treatment
- Oral surgery
- Straightening teeth

Hospital Services

- Oxygen masks, tent
- Use of operating room
- Other hospital charges

See also Professional Services, Laboratory Examinations and Tests, and Medical Treatments

Laboratory Examinations & Tests

- Blood tests
- Cardiographs
- Metabolism tests
- Spinal Fluid tests
- Other laboratory Tests
- X-ray examinations

Medical Treatments — If Prescribed

- Blood transfusion
- Diathermy
- Electric shock treatments
- Healing services
- Hydrotherapy
- Injections
- Insulin treatments
- Pre-natal, post-natal treatments
- Radium therapy
- Transplants: for 1998 and later years, on behalf of a patient who requires a bone marrow or organ transplant, the reasonable costs of locating a compatible donor and arranging for the transplant, including legal fees and insurance premiums; and reasonable traveling, board, and lodging expenses for the donor and a companion, as well as the recipient and a companion incurred in respect of the transplant.
- Ultra-violet ray treatments
- Vaccines
- Whirlpool bath therapy
- X-ray treatments

Care and Treatment Facilities

- Accommodation in a hospital (semi-private or private)
- Treatment, meals, and lodging in treatment centres for alcoholism or drug addiction
- Care and supervision in a special school, institution, or other place for a mentally or physically disabled individual; including care in a group home for a severely disabled individual
- Care in own home
- Care of a blind person
- Care of a person certified to be mentally incompetent
- Full-time attendants or care in a nursing home (for confinement to a bed or wheelchair)
- Payments to a licensed private hospital

Medicines

- Cost of prescriptions
- Insulin or substitutes
- Liver extract — injectable for pernicious anemia
- Oxygen
- Tapes or tablets for sugar content tests by diabetics, if the procedure has been required by a physician
- Vitamin B-12 for pernicious anemia
- Any medicine or drug purchased by a member, a spouse, or a dependent, as prescribed by a medical practitioner or dentist and as recorded by a licensed pharmacist

Apparatus and Materials

(including repairs and replacement batteries where applicable):

Note that all items prescribed by regulation, as indicated by an asterisk (*) below, must be prescribed by a medical practitioner to be eligible.

- Artificial eye
- Artificial kidney machine, including reasonable installation, home alteration, and operating costs
- Artificial limb
- Blood sugar level measuring devices for diabetics
- Brace for a limb including elasticized stockings if carefully fitted to measurement or made to measure
- Catheters, catheter trays, tubing, diapers and disposable briefs or other products required by persons who are incontinent by virtue of illness, injury, or affliction

- Colostomy pads and related supplies
- Contact lenses — prescribed
- Crutches, canes, walkers
- Devices designed exclusively to enable an individual with a mobility impairment to operate a vehicle*
- Devices designed to assist an individual in walking where the individual has a mobility impairment*
- Devices or equipment, including a replacement part, designed exclusively for use for a chronic respiratory ailment or a severe chronic immune system deregulation *
- Devices to aid the hearing of a deaf person, including bone-conduction telephone receivers, extra-loud audible signals, and devices to permit volume adjustment of telephone equipment above normal levels
- Devices or equipment designed to assist a person in entering or leaving a bathtub or shower, or getting on or off a toilet*
- Electronic speech synthesizers that enable mute persons to communicate using a portable keyboard *
- Environmental control systems (electronic or computerized) designed exclusively for the use of an individual with severe and prolonged mobility restrictions *
- Equipment and accessories that enable deaf or mute persons to make and receive telephone calls, including visual ringing indicators, acoustic couplers, teletypewriters (Amounts paid in providing additional equipment and accessories to others in order to make telephone communication possible with those other persons are also allowed as medical expenses.*)
- External breast prosthesis required because of a mastectomy *
- Extremity pumps or elastic support hose designed exclusively to reduce swelling caused by lymphedema *
- Eyeglasses — prescribed
- Heart monitoring or pacing devices *
- Hospital bed, including prescribed attachments, if required in home *
- Hydraulic wheelchair lifts for a vehicle that has been prescribed by a qualified medical practitioner
- Ileostomy pads and related supplies
- Inductive coupling osteo-genesis stimulators for treating non-union of fractures or aiding in bone fusion *
- Infusion pumps, including disposable peripherals, used in the treatment of diabetes *
- Laryngeal speaking aid
- Needles and syringes *
- Optical scanners or similar devices designed to be used to enable blind persons to read print *

- Orthopedic shoes and boots or shoe or boot inserts if needed to overcome a physical disability*
- Oxygen tent and equipment *
- Portable chest respirator
- Power-operated guided chair installation to be used solely in a stairway *
- Power-operated lifts or transportation equipment designed exclusively for use by or for disabled persons to allow them access to different areas or levels of a building or to assist them to gain access to a vehicle or to place a wheelchair in or on a vehicle *
- Reasonable expenses relating to renovations or alterations to a dwelling of a patient who lacks normal physical development or has a severe and prolonged mobility impairment (one that may be expected to last 12 months or more), to enable the patient to gain access to, or to be mobile or functional within, the dwelling
- Rocking bed for a person with poliomyelitis
- Spinal brace
- Sudden infant death syndrome monitor/alarms *
- Synthetic speech systems, Braille printers, and large print, on-screen devices that enable blind persons to utilize computers *
- Television closed-caption decoders for the deaf *
- Truss for hernia
- Wheelchairs
- Wigs made for individuals who have suffered abnormal hair loss owing to disease, accident, or medical treatment *
- Any apparatus or material — where payment was made directly to a doctor, dentist, nurse, or hospital

Miscellaneous

- Ambulance charges to or from hospital, or transportation costs to or from hospital, clinic, or doctor's office to obtain services not otherwise available nearer home
- Birth-control devices, non-prescription
- Birth-control pills (prescription)
- Canadian Red Cross — Home Maker Service
- Costs of an animal specially trained to assist a person who is blind, deaf, or severely impaired in the use of arms or legs. In addition to the cost of the animal, its care and maintenance (including food and veterinary care) are eligible expenses, as are travel expenses to a training facility to learn how to handle the animal.
- Premiums paid to a non-government medical or hospital care plan
- Reasonable expenses relating to rehabilitative therapy, including training in lip reading and sign language, as incurred to adjust for a patient's loss of hearing or speech
- Smoking-cessation counseling or weight-loss counseling (if recommended by a physician to treat a specific ailment and provided by a licensed practitioner)

- Tutoring for an individual who has a learning disability or other mental impairment
- Victorian Order of Nurses — home care
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EXCLUSIONS

The following are examples of expenses that are not eligible under the HSA:

- Air cleaners, air conditioners, dehumidifiers, or humidifiers
- Antiseptic diaper services
- Athletic club expenses to keep physically fit
- Botulinum infections
- Cosmetic surgery
- Cost of special food or beverages — unless they have no nutritional value and are taken only to treat or alleviate an illness
- Funeral, cremation, or burials, or cemetery plot, monument, or mausoleum
- Hair replacement procedures
- Health programs offered by resort hotels, health clubs, and gyms
- Illegal operations, treatments, or drugs illegally procured
- Liposuction
- Maternity clothes
- Medical expenses for which a member is reimbursed or is entitled to be reimbursed
- Payments to a municipality where the municipality employed a doctor to provide medical services to the residents of the municipality
- Scales for weighing food
- Teeth whitening
- Toothpaste or toothbrushes
- Wigs — unless made to order for individuals who have suffered abnormal hair loss owing to disease, medical treatment, or accident

CLAIM PROCEDURES

All Health Benefits are on a reimbursement basis. Claims must be submitted within 90 days of the end of the calendar year of receiving the service or supplies. Claims incurred prior to employment terminating must be submitted within 90 days of the date of termination. You can submit your claim in one of two ways:

Online/Mobile App (e-claim)

Sign up to *my Sun Life* at www.mysunlife.ca and enter your access ID and password. If you do not have an access ID, click on **Register now** and follow the steps. You will need your member ID (your university employee number) and contract number (150798).

Once you have logged in, sign up for direct deposit. You can submit claims online or from your phone and have your payment deposited directly into your bank account, usually within 24 to 48 hours from the time your claim has been processed. Please retain your original receipts for 12 months as they may be required to support your online claim. When your claim has been processed, Sun Life 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. Complete Sun Life's "Extended Health Care and Health Spending Account Claim Form", enclose the original receipts and mail it to the address below. Be sure to keep a copy of the claim form and receipts for your records.

When completing your claim, please note

- Policy Number - the University's group policy number is 150798
- Member ID – your university employee number

All Mail Claim Forms are to be Forwarded to:

Sun Life Assurance Company of Canada
PO Box 2010 Stn Waterloo
Waterloo, ON N2J 0A6

Telephone: 1-800-361-6212

Online: www.sunlife.ca

HEALTH SPENDING ACCOUNT INFORMATION

If the member's HSA reaches a zero balance at any time during the benefit year, any further expenses will not be carried forward. If there is a credit remaining in the HAS at the end of the benefit year, it can be carried forward to the next benefit year. Credits can not be carried forward more than one benefit year.

Any unused credit amounts are forfeited by the member and revert back to the University of Saskatchewan.

COORDINATION OF BENEFITS

If a member has similar benefits through any other policy or arrangement, the amount payable through this plan shall be coordinated so that total payment from all other sources will not exceed the actual expenses incurred.

CONTINUATION OF COVERAGE

The HSA is in effect while a member is actively at work. If a member is on an approved leave of absence, and has continued extended health benefits, the member's eligibility

for the Health Spending Account will continue. If a member is on an unpaid leave of absence on January 1, they will receive their new allocation upon their return to work.

TERMINATION OF COVERAGE

Coverage will cease on the event of:

- a member's employment termination,
- a member's retirement,
- a member's death,
- a change in a member's eligibility,
- a member's waiver of extended health coverage when on leave of absence, or
- the program termination.

Any unused credit amounts are forfeited by the member and revert back to the University of Saskatchewan.

The above information is intended only as a summary of the Health Spending Account with Sun Life Financial policy number 150798. In the event of any misunderstanding or discrepancy, benefits will be paid according to the policy and applicable legislation.