



FAQ

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Please read the following along with the Plan Booklet (for additional information on plan provisions), found on [the Hub](#).
If you have any questions that have not been answered by this FAQ or your leader, please reach out to the HR Service Centre.





About Eligibility

Q1. Who is eligible for the Bargaining Unit Benefits Program?

A1. All Bargaining Unit (BU) permanent regular employees, including part-time employees (who work at least three days per week). This includes employees on leave (including parental leave, leave of absence, sick leave, or long-term disability).

You can extend your benefits to your dependents, including your spouse and children, who meet eligibility requirements. The [definition of dependents is available on the Hub](#).

About Coverage and Pay Impacts

Q2. What is my coverage?

A2. To confirm your current level of coverage, visit mysunlife.ca. For information on detailed plan provisions, including new provisions coming into effect on January 1, 2024, consult the Benefits Plan Booklet on [the Hub](#).

Q3. How do I change my coverage if I experience a life event?

A3. If you experience a life event, you have 30 days to update your coverage to reflect your new dependents.

Eligible life events include:

- New legal spouse or common-law relationship
- Divorce, legal separation, or end of a common-law relationship
- Birth or adoption of a child
- New eligible dependents
- Your spouse gains or loses benefits coverage
- Death of a spouse or child (please contact HR Service Centre directly)

To make a change following a life event, log into your mysunlife.ca account. Under the Benefits section click on **Enrollment and coverage summary** to access the group benefits enrollment page. Under **Manage**, click on **Employment or life event change** and choose the applicable change and follow instructions.



Q4. What is covered under travel insurance?

A4. Emergency out-of-Canada coverage is \$1 million per person per lifetime. This applies whether you are on leisure or business travel. We also offer additional coverage while you travel on business. Consult the Benefits Plan Booklet on [the Hub](#) for details.

About Claims

Q5. What is the deadline for submitting claims?

A5. You have until the end of the calendar year following the year in which an eligible expense is incurred to submit that claim. For example, you have until December 31, 2024 to submit claims for eligible expenses incurred in 2023.

Q6. How will I make a claim?

A6. You can make a claim by following instructions on [mysunlife.ca](#) or Sun Life mobile app.

About Insurance

Q7. If I purchase optional insurance for which I need to submit evidence of good health, where do I find the Health Statement to be completed?

A7. If a Health Statement is required, your coverage will be marked as *pending* on the Sun Life site until you have completed a Health Statement and it has been approved. The Health Statement is available in the Sun Life online enrollment tool. Under the **Benefits** section click on **Enrolment and coverage summary** to access the group benefits enrolment page. Under **Forms**, select **Health Statement** on the drop down tab.

To complete the form, please use Class: 2 and Billing group: 002 in section 1. Please print and sign the completed form and mail it directly to Sun Life as per instructions on the statement. Sun Life will notify you once they have reviewed the form.



Q8. If I purchase optional life insurance or critical illness insurance in an amount for which I need to submit a health questionnaire, will I have to do that every year in order to keep the same coverage?

A8. No. You only need to submit evidence of good health in the future if you want to increase the coverage.

Q9. I understand that if I purchase optional life insurance and/or critical illness insurance, Sun Life will use gender information they have on file to determine my premiums. Why is Sun Life using "Male" or "Female" only and what do I do if I do not identify in that way?

A9. The above categories are what Sun Life currently uses to determine premiums. Although Sun Life refers to the information they collect as 'Gender', the responses that are offered use the sex-based binary terms 'Female and Male'. ICBC recognizes that 'Gender' refers to a person's deeply held lived identity and that these options do not acknowledge the social aspects of gender or the broader range of gender spectrums, gender identities and gender expressions. ICBC continues to advocate for changes to be made to the data that is collected. For now, when you purchase optional coverage, please ensure that the gender Sun Life has on file based on their Female/Male categories (shown in the enrollment tool) is closest to your current gender identity or expression. Please contact HR Service Centre if you want to make a change.

Q10. If I already have optional insurance through Sun Life or another provider, can I buy more? Given that I already have life insurance and disability insurance through ICBC, why would I buy accidental death and dismemberment insurance (AD&D) or critical illness insurance?

A10. You can purchase additional coverage even if you have coverage with another provider. Based on your personal circumstances, please ensure that your current coverage level meets your needs.

Here is a quick overview of the different types of insurance:

- Life insurance provides financial security to a person's beneficiary(ies) in the event the insured person passes away for any reason.
- Disability insurance provides some income replacement if you are ever unable to work due to injury or illness.



- Critical illness insurance is a living benefit and provides financial resources to assist in the recovery from one of the covered illnesses in the plan. This benefit is payable regardless of the insured person's ability to work.
- Accidental death and dismemberment insurance (AD&D) provides additional financial security in case of death or dismemberment of an insured person due to an accident. For example, if the insured person passes away due to an accident (not illness), both the life insurance and the AD&D benefit could be payable.

Payment under one of the above types of insurance does not affect payment under another one.

Q11. For critical illness, please provide examples of what would be considered pre-existing conditions and what would not.

A11. The exclusion for pre-existing conditions applies if you have symptoms of a covered condition in the first 12 months of coverage.

It's important to note that risk factors are different from symptoms. For example, if an employee has high blood pressure and is taking medication for it, this would be considered a risk factor but not a symptom of a covered condition such as heart attack. High blood pressure on its own would not be considered a pre-existing condition – there would have to be some other physical symptoms to rule the condition out as pre-existing.

Q12. I understand that if I purchase critical illness insurance, I will have access to Teladoc Medical Experts. What does that service offer?

A12. Teladoc Medical Experts service is available as soon as you sign up for the critical illness insurance. It offers a number of services to you, your spouse, your children, your parents and your parents-in-law. Services included (not limited to the covered conditions under the critical illness insurance):

- Expert Medical Opinion – provides a second opinion of your diagnosis and/or treatment options.
- Find a Doctor – conducts a customized physician search and recommends leading Canadian specialists who are accepting new patients.
- Personal Health Navigator – provides you with medical information and resources, 1-on-1 support and customized health coaching for a wide range of health concerns.
- Mental Health Navigator – provides guidance or a second opinion on a mental health condition.



Q13. How many times can you collect on critical illness insurance? For example, if someone gets a second life-threatening illness different from the first illness, can they claim again?

A13. The policy pays for the first diagnosed critical illness. Once a critical illness is diagnosed and the claim has been paid, the policy terminates for that individual; other covered dependents would continue to be covered.

Q14. What happens to my optional insurance coverage when I leave ICBC (including impact on premiums)?

A14. To view your current coverage, visit mysunlife.ca. After you sign in, under **Benefits**, click on **Enrollment and Coverage Summary** on the bottom right part of the page. Under **View**, select the **Coverage Summary Calendar**. You can use the drop down option in the calendar to select the date on which you want to confirm coverage. The information found on the Coverage Summary will reflect the coverage you had on that specific date.

If you leave ICBC, your group policies with ICBC will terminate. However, you will have the opportunity to convert your existing coverage to an individual plan by contacting Sun Life within 31 days following your termination of employment. Premiums will reflect those of individual Sun Life products.

About Actions Required and Resources

Q15. What decisions do I need to make and what actions do I need to take?

A15.

For details on fall 2023 campaign and actions to take, please refer to the related announcement on [the Hub](#).

New hires have 30 days from their date of permanent hire to enroll in the benefits plan and add their eligible dependents. When you enroll on mysunlife.ca, please follow these steps:

- Add your [eligible dependents](#);



- Select your desired level of optional insurance coverage for optional life insurance, critical illness insurance and/or accidental death and dismemberment insurance; and
- Add your insurance beneficiaries.

For instructions on updating dependents and beneficiaries, please visit [the Hub](#).

Q16. How do I find answers to my questions?

A16. To learn more about your coverage and help with your decision, you'll find the plan booklet on [the Hub](#). You may also want to attend or watch recordings of webinars hosted in November 2023.

For questions on your current coverage, Sun Life's website or to resolve any technical issues, contact Sun Life at:

Call: 1-866-896-6976, Monday to Friday, 5 a.m. to 5 p.m. PT

Chat: Click to chat from [mysunlife.ca](#). Find the chat box at the top of the page under **Help > Contact us > Profile**

Email: Select the envelope icon above the blue navigation bar and follow the prompts to send a secure message from [mysunlife.ca](#)

App: Call from the **my Sun Life mobile app**. Click **Contact us**.

If you use the Chat, Email or App options above, you won't need to enter your policy information. If you call them, please be sure to enter your policy information when prompted. You will find the info on [mysunlife.ca](#) or on your drug card. For your convenience, your contract number is **152435**. Your member ID is your Payroll ID (your Employee Number).

For questions on optional life insurance or critical illness insurance, please contact Sun Life by email at voluntary.benefits@sunlife.com (you can also call them at 1-866-539-7678 between November 22 and December 6, 2023).

For any other questions, please contact HR Service Centre Monday to Friday 8:30 a.m. – 4:30 p.m. PT by phone: **604-982-6675** (Lower Mainland) or **1-844-982-6675** (Rest of B.C.) or by [email](#).

This document is only an overview of the benefits and programs for eligible employees of ICBC. The terms of each benefits plan are dictated by the official plan documents, which will exercise authority in the event of any conflict or difference between the plan and the information in this document. ICBC reserves the right to terminate or amend the benefits program at any time. Such amendment may include a reduction or elimination of benefits, or an increase in costs.
