

Health Care Spending Account FAQ's CUPE 136 Full Time Employees

What is a Health Care Spending Account?

A health care spending account (HCSA) is an employee benefit that offers reimbursement for a wide range of health and dental expenses. You can use your HCSA to cover eligible expenses that are not paid, or not paid in full, under your group plan, your spouse's plan (if applicable), or any government-sponsored plan.

What expenses are considered eligible?

This [communication](#) from Sun Life provides a list of some HCSA eligible expenses.

Expenses must be eligible under the Income Tax Act. You can view a list of [eligible medical expenses](#) on the Canada Revenue Agency website.

If you have any questions about eligibility, please contact Sun Life at 1-800-361-6212.

How much is my HCSA? What happens if I don't use it?

Effective January 1, 2026, the HCSA amount will be **\$100** for the benefit year.

Effective January 1, 2027, the HCSA amount will increase to **\$300** for the benefit year.

The benefit year runs from January to December. Any unused amount can be carried forward for 1 year only.

Once you start making claims, you will be able to view your HCSA balance at any time at www.mysunlife.ca.

Who can I make claims for?

Your HCSA can cover expenses for you and your dependents if they are considered eligible under the Income Tax Act. This could include:

- your spouse
- your parents, grandparents, brother, sister, uncle, aunt, niece, nephew, or those of your spouse, as long as that person:
 - is a resident of Canada at any time in the year, and
 - is dependent on you for financial support at any time in the year.
- your child or grandchild or your spouse's child or grandchild, so long as that person is dependent on you for financial support at any time in the year

It is your responsibility to ensure that the person you claim for is an eligible dependent.

When submitting an online HCSA e-claim you will be asked who the claim is for. A list will be provided with the names of your dependents covered under your plan. There is also an "other" option to use if you are making a claim for someone else.

If you are mailing your HCSA claim, you will indicate who the claim is for and their relationship to you. Please be sure to read the authorization section at the end of the form acknowledging that the dependent you are making the claim for is considered eligible.

How do I make claims under my HCSA?

Most HCSA claims can be submitted online at www.mysunlife.ca, others will need to be mailed in to Sun Life.

To maximize your HCSA, you should claim through your regular Sun Life benefit plan first, and then, if applicable, under any other plans (i.e., spousal benefits plan). Use your HCSA last, for any unpaid balance on the claim.

Below are your options for submitting a claim online:

Submit a claim

Your plan allows you to submit an online claim for the following types of expenses. Click on the type of claim you would like to submit:

-  [Vision Care e-claim](#)
-  [Medical e-claim](#)
-  [Dental e-claim](#)
-  [Health Spending Account e-claim](#)
-  [Disability claim](#)

If you are making the claim under your regular benefits plan, select the applicable type of claim (vision, medical, dental). You will be prompted with some options, including “If there is an unpaid balance on your claim, do you want to submit that Health Spending Account claim?”

If you are submitting an HCSA claim, you will select “Health Spending Account e-claim.” A drop down list for the types of HCSA claims will be provided. If the expense you are claiming for is not on the list, you will have to mail in a paper claim.

If you are mailing in your form, use the form applicable to the type of claim, [medical](#) or [dental](#). Be sure to complete the HCSA section on the paper claims form.

You don't want to use your HCSA for this claim.

You might use this option if you are claiming any unpaid portion under another plan (i.e., spousal benefit plan).

You want us to assess this claim under your HCSA only.

If you have already submitted the claim under the regular benefits, and any other plans, and are making a claim for the balance.

You want is to assess this claim under your Extended Health Care/Dental benefit first and then assess any unpaid balance under your HCSA.

You may use this option if you don't have any other coverage, and want the maximum amount covered between your benefits plan and the HCSA.

What is the deadline for making claims?

The deadline for making HCSA is the same as any other benefit claims. You have 90 days into the following year to make prior year claims. For example, any 2026 claims must be received by Sun Life by the end of March 2027. Please take mailing time into consideration.

If your coverage ends at any other time during the year, your 90 days will be from your benefit termination date

Questions?

Please refer to your [Group Benefit Booklet](#).

If you have specific questions on eligible expenses or coverage, please contact Sun Life directly at 1-800-361-6212.

If you have any other questions, please contact us at benefits@oakville.ca

Just a quick reminder:

Please use the Town of Oakville's Health Care Spending Account and benefits as they are intended. This helps keep the program fair and affordable for everyone. Submitting claims for expenses that are not covered can increase costs and affect others—and intentionally submitting false claims may be considered fraud under the Employee Code of Conduct.

If you're ever unsure about what's eligible, Sun Life is happy to help at **1-800-361-6212**. And if you need personal support, our Employee and Family Assistance Program is always available at **1-877-318-4472**.