



Advisor
Individual
insurance

Term Plus

Product description



Table of Contents

1. Term Plus: A multi-purpose life insurance solution!	4
2. Term Plus at a glance	5
3. Term Plus coverage description	8
3.1 Insurance amount	8
3.2 Coverage types	8
3.3 Available terms	8
3.4 Issue ages	9
3.5 Renewal	9
3.6 Insurability benefit	10
3.7 Extreme disability benefit (EDB)	10
3.8 Conversion privilege	11
3.9 Modifications to the policy – Individual insurance	11
3.10 Modifications to the policy – Joint insurance	11
3.11 Termination of benefit	12
4. Total disability rider	12
4.1 Eligibility	12
4.2 Issue ages	13
4.3 Definition of total disability	13
4.4 Monthly indemnity	13
4.5 Indemnity period and waiting period	14
4.6 Eligible loans	15
4.7 Eligible monthly payments	16
4.8 Benefit payable	17
4.9 Insurability benefit	18
4.10 Assistance benefit	18
4.11 Limitations	19
4.12 Termination of benefit	19
4.13 Other characteristics	20
5. Critical illness rider	20
5.1 Issue ages	20
5.2 Benefit amount	20
5.3 Covered illnesses	20
5.4 Other characteristics	20
5.5 Benefit payable following a diagnosis	21
5.6 Assistance benefit	21
5.7 Termination of benefit	21
6. Waiver of premium	21
6.1 Issue ages	21
6.2 Coverage range	21
6.3 Other characteristics	21
6.4 Definition of total disability applicable to the waiver of premium benefit	22
6.5 Termination of benefit	22

7. Child rider	22
7.1 Issue ages	22
7.2 Insurance amount.....	22
7.3 Conversion	23
7.4 Other characteristics.....	23
7.5 Termination of benefit	23
8. Accidental death and dismemberment.....	24
8.1 Issue ages.....	24
8.2 Insurance amount	24
8.3 Termination of benefit.....	24
9. Benefit in case of fracture	25
9.1 Issue ages.....	25
9.2 Termination of benefit.....	25
10. Appendix	26
10.1 Decreasing insurance amount table.....	26
10.2 List of non-insurable occupations (applicable to total disability rider)	27
10.3 List of occupations eligible for an indemnity periode of 2 years only (applicable to total disability rider)...	28
10.4 Contractual definitions of covered critical illnesses	29

1. Term Plus: A multi-purpose life insurance solution!

Term Plus is a multi-purpose life insurance product designed to offer a flexible, comprehensive and competitive solution tailored to meet the personal and business protection needs of your clients.

- Flexibility to combine multiple terms of 10, 15, 20, 25, 30 or 35 years with a choice of level or decreasing life insurance amount
- Option to enhance the life coverage with additional riders:
 - Disability rider for credit protection purposes (2 years, 5 years or up to age 65)
 - \$20,000 critical illness rider covering the 3 most common illnesses – **automatically granted when the life insurance is approved at a standard rate and without any exclusions!** An easy way to introduce the benefits of critical illness coverage to your clients.
- Competitive premiums and preferred underwriting
- Convertible and renewable coverage every 5 years after the initial term
- Guarantee of future insurability included with life insurance and disability rider
- Distinctive Extreme Disability Benefit that provides an advance payment in case of a prolonged extreme disability

Plus, in addition to the available riders, you may combine Term Plus with Whole Life, Critical Illness and other Term Life insurance products, making for a complete insurance protection all in one policy!

The flexibility offered by Term Plus allows you to build a well-suited protection to address your clients' multiple insurance needs:

- Coverage for personal loans and other debts
- Coverage for business loans and financial expenses
- Income protection
- Estate planning

2. Term Plus at a glance

Basic Coverage – Term Life Insurance

Coverage Type	<ul style="list-style-type: none"> Individual or Multi-Life Joint First to Die (<i>2 to 5 lives</i>) 	
Available Terms	<ul style="list-style-type: none"> 10, 15, 20, 25, 30 or 35 years 	
Issue Ages	<ul style="list-style-type: none"> Term Plus 10: 18 to 75 Term Plus 15: 18 to 70 Term Plus 20: 18 to 65 	<ul style="list-style-type: none"> Term Plus 25: 18 to 60 Term Plus 30: 18 to 55 Term Plus 35: 18 to 50
Insurance Amount	<ul style="list-style-type: none"> Minimum: \$25,000 	<ul style="list-style-type: none"> Maximum: \$10,000,000
Type of Insurance Amount	<ul style="list-style-type: none"> Level Decreasing to 50% of the initial insurance amount 	
Rate Bands	<ul style="list-style-type: none"> \$25,000 - \$99,999 \$100,000 - \$249,999 \$250,000 - \$499,999 	<ul style="list-style-type: none"> \$500,000 - \$999,999 \$1 million and over <p><i>Preferred underwriting offered starting at \$250,000</i></p>
Insurability Benefit <i>(included)</i>	<p>It is possible to increase the insurance amount, without new evidence of insurability, upon certain life events or when obtaining a new loan or increasing an existing one. The insurance amount may be increased before the age of 60, up to 25% of the initial insurance amount, to a maximum of \$100,000. Any additional coverage will carry a level type of insurance amount.</p>	
Extreme Disability Benefit <i>(included)</i>	<p>Before the age of 60, 50% (<i>if insurance amount is level</i>) or 25% (<i>if insurance amount is decreasing</i>) of the initial insurance amount may be payable in advance, up to a maximum of \$250,000. The benefit is paid when the insured is in a state of extreme disability for a continued period of 6 months.</p>	
Renewal	<p>Renewable every 5 years, after the initial term, up to age 85, without new evidence of insurability.</p>	
Conversion	<p>Convertible into a permanent life insurance, up to age 70, without new evidence of insurability.</p>	
Multi-Life Privilege	<p>Option to continue the benefit as a separate policy without new evidence of insurability.</p>	
Insurability Privilege <i>(joint coverage)</i>	<p>May be exercised without new evidence of insurability:</p> <ul style="list-style-type: none"> Upon the first death of one of the insureds, the surviving insured(s) may request, within a 90-day period, to have this benefit replaced by any available permanent life insurance benefit. Within 18 months following the dissolution of the union or association, the insured may request to replace the benefit with another life insurance benefit. 	
Simultaneous Deaths <i>(joint coverage)</i>	<p>An additional death benefit will be paid if a surviving insured dies during the 90 days following the first death to have occurred, while being under the age of 65.</p>	
Additional Benefits	<ul style="list-style-type: none"> Total Disability Rider (credit protection) Critical Illness Rider (3 illnesses, \$20,000) Child Rider (life insurance for dependent children) Waiver of Premium in case of total disability (waiting period: 4 or 6 months) Accidental Death and Dismemberment Benefit in case of fracture 	

Complementary Protection

Term Plus insurance can be combined with Term Life, Whole Life and Critical Illness insurance products.

Policy Fees

- \$60 for the main insured – Individual coverage type
 - \$60 – Joint First to Die coverage type
 - \$25 for each additional insured – Multi-Life coverage type
 - No additional fees for multiple coverages on the same life insured
-

ADDITIONAL BENEFITS

Total disability rider

*(issue age 18 to 55 for indemnity period of 2 or 5 years;
issue age 18 to 60 for indemnity period up to age 65)*

A monthly indemnity that provides credit protection in case of total disability with proof of eligible loans required at time of claim only.

The insured must:

- subscribe to Term Plus life insurance;
- work at least 21 hours per week; and
- must have worked 8 months or more during the last 12 months at a rate of at least 21 hours per week.

Monthly indemnity:

- Minimum: \$300
- Maximum: 1.5% of the life insurance amount, up to an overall maximum of \$3,500 per insured for all disability riders combined

A stay at home spouse or spouse on parental leave is eligible for:

- a monthly indemnity only when a working spouse subscribes to Term Plus life insurance
- a maximum eligible monthly indemnity of \$1,000
- an indemnity period of 2 years

Types of loans covered:

- Mortgage loan or mortgage line of credit
- Personal loan or personal line of credit
- Car loan
- Student loan
- Commercial loan
- Loan for investment purposes

Indemnity periods offered: 2 years, 5 years or up to age 65

Waiting period – 2 or 5 years:

- 90 days, retroactive to the 31st day
- 30 days, if total disability results directly from an accident, a hospitalization for a continuous period of at least 72 hours, or day surgery

Waiting period – up to age 65:

- 90 days

Built-in Insurability Benefit: option to increase the monthly indemnity coverage. This option must be exercised at the same time as the Insurability Benefit that is included in the Term Plus life insurance coverage.

Built-in Assistance Benefit: an array of assistance services including second medical opinion and medical referral services.

ADDITIONAL BENEFITS (cont.)

Critical illness rider

(issue age 18 to 60)

Critical illness protection is automatically granted when requested, without any additional underwriting requirements, if the Term Plus life insurance is approved at a standard rate and without any exclusions. The rider must be requested at the same time as the Term Plus life coverage.

Insurance amount: \$20,000

Illnesses covered (with survival period of 30 days): cancer, heart attack and stroke.

This rider may be transferred in case of conversion from Term Plus life insurance to a permanent life insurance product. The rates applicable at time of issue of the rider will continue to apply.

Built-in Assistance Benefit: an array of assistance services including second medical opinion and medical referral services.

Child rider

(issue age 18 to 55)

Life insurance protection for all of the insured's dependent children from 15 days old up to age 25.

Insurance amount:

- Minimum: \$5,000 per child
- Maximum: \$25,000 per child

Conversion to a permanent life insurance available, without evidence of insurability, for an amount up to 5 times the coverage in force, up to a maximum of \$100,000.

Waiver of premium

(issue age 18 to 55)

When a total disability occurs for a consecutive period of either 4 or 6 months, depending on the waiting period selected, the policy premiums due will be waived until the end of the disability period.

Accidental death and dismemberment

(issue age 18 to 60)

Additional coverage available in the event of an accidental death or serious injury.

In case of dismemberment or accidental death, the following benefits are payable:

- 100% of the sum insured in case of death or the loss of two limbs
- 100% of the sum insured in case of quadriplegia, hemiplegia or paraplegia
- 50% of the sum insured for the loss of one limb

Maximum benefit: \$500,000, not exceeding the insurance amount of the coverage to which it is added.

Benefit in case of fracture

(issue age 18 to 60)

Additional coverage available in case of accidental fracture or severance.

In the event of accidental fracture or severance, the following benefits are payable:

- skull, spine, pelvis (ilium bone) and femur: \$5,000
 - breastbone, larynx, windpipe, shoulder blade, radius, humerus, kneecap, ulna, tibia and fibula: \$1,500
 - bone not mentioned above: \$750
-

3. Term Plus coverage description

3.1 Insurance amount

The insured may choose his or her term life insurance benefits with either a level or decreasing insurance amount, based on his or her needs.

With the decreasing option, well-suited for covering a mortgage loan or other loans, the insurance amount gradually decreases to 50% of the initial amount, and then remains constant until the benefit terminates. The decrease is calculated in accordance with a mortgage amortization calendar using an interest rate of 7%. The decreasing insurance amount table is available as an appendix in section 10.1.

It is possible for an insured to change the type of insurance amount chosen, but only prior to the first anniversary of the benefit.

The insurance amounts offered: \$25,000 to \$10,000,000.

3.2 Coverage types

- Individual: Only one person is insured under the policy;
- Multi-Life: Up to 6 individuals may be insured under the same policy (maximum of 20 coverages); or
- Joint First to Die: 2 to 5 lives may be insured for a benefit payable upon the first death to occur among the insureds.

It is possible to combine different coverage types under a single policy to better meet your client's needs.

3.3 Available terms

Many term choices are available to meet different coverage needs: terms for 10 years, 15 years, 20 years, 25 years, 30 years or 35 years; all terms are renewable every 5 years after the initial term. The insured may also group multiple Term Plus life plans in one policy with different terms and insurance amount combinations. This allows to better match insurance coverage to personal or business insurance needs in addition to saving on policy fees.

Under a single policy, the insured can therefore subscribe to different coverage types made up of different terms and insurance amount combinations. Here are a few examples:

	Coverage Type	Term	Insurance Amount
Example 1 Combination of Joint First to Die coverages	Coverage 1 Joint First to Die Insured 1 Insured 2	T30, Level	\$250,000
	Coverage 2 Joint First to Die Insured 1 Insured 2	T25, Decreasing	\$150,000
Example 2 Combination of Joint First to Die and Individual/Multi-life coverages	Coverage 1 Joint First to Die Insured 1 Insured 2	T30, Level	\$250,000
	Coverage 2 Individual/Multi-Life Insured 3	T10, Level	\$100,000
	Coverage 3 Individual/Multi-Life Insured 1	T10, Decreasing	\$100,000

3.4 Issue ages

- Term Plus 10: 18 to 75;
- Term Plus 15: 18 to 70;
- Term Plus 20: 18 to 65;
- Term Plus 25: 18 to 60;
- Term Plus 30: 18 to 55;
- Term Plus 35: 18 to 50.

3.5 Renewal

All Term Plus plans are renewable every 5 years at the end of the initial term. The benefit terminates on the insurance anniversary closest to the insured’s 85th birthday or on the insurance anniversary date closest to the 85th birthday of the eldest insured in the case of a joint life insurance.

The renewal premiums are guaranteed at policy issue. The insurance amount for the renewal will carry a level type of insurance amount.

If a disability rider, a \$20,000 critical illness rider, an accidental death and dismemberment or a fracture benefit are added to the policy, these will also renew automatically and their premiums will remain unchanged.

3.6 Insurability benefit

This benefit is included in the Term Plus coverage. It offers the insured the option to increase the insurance amount, without new evidence of insurability, under certain conditions:

- the insured must be 60 years old or younger;
- the insured must not be in a state of total disability;
- the option must be exercised within 60 days of acquiring a new loan or increasing an existing loan or upon any of the following events: marriage of either of the Insureds, adoption or birth of a child for either of the insureds, the obtainment, by either of the insureds, of a bachelor's degree, a master's degree or a doctorate;
- the option may be exercised more than once, as long as the increase does not exceed 25% of the initial insurance amount, to a maximum of \$100,000.

The premium related to the increase of the insurance amount is determined based on the rates in effect at the moment the increase is requested, the age of the insured, and according to the insured's initial risks classification.

If this option is exercised, any additional insurance amount will be level.

3.7 Extreme disability benefit (EDB)

If the insured is in a state of extreme disability before the age of 60, for a continued period of 6 months, a percentage of the insurance amount is payable in advance, upon the policyowner's request, up to a maximum of \$250,000.

In the case of a level insurance amount, the percentage payable in advance is equal to 50% of the initial amount insured.

In the case of a decreasing insurance amount, the percentage payable in advance is equal to 25% of the initial amount insured.

Upon the death of the insured, the insurance amount will be paid to the beneficiary, less any amount paid in advance under the Extreme Disability Benefit.

Contractual definition of extreme disability

Extreme disability means the insured is affected by a medical condition that renders him or her in a state of total and irrecoverable disability as a result of which the insured cannot perform four (4) out of the following six (6) activities of daily living without a reasonable expectancy of recovery as determined by a physician:

- Bathing – the ability to wash oneself in a bathtub, shower or by sponge bath, with or without the aid of equipment;
- Dressing – the ability to put on and remove necessary clothing including braces, artificial limbs or other surgical appliances;
- Toileting – the ability to get on and off the toilet and maintain personal hygiene;
- Bladder and Bowel Continence – the ability to manage bowel and bladder function with or without protective undergarments or surgical appliances so that a reasonable level of hygiene is maintained;
- Transferring – the ability to move in and out of a bed, chair or wheelchair, with or without the use of equipment;
- Feeding – the ability to consume food or drink that already has been prepared and made available, with or without the use of adaptive utensils.

The benefit will be paid after the insured has been in a state of extreme disability for a consecutive period of 6 months from the commencement of the extreme disability.

Once this benefit is paid, no further benefit will be payable under the EDB.

3.8 Conversion privilege

The Term Plus coverage may be converted, without any evidence of insurability, to a permanent life insurance plan available at the time of conversion, for the insured amount at the time the conversion is processed (minimum of \$10,000). The conversion request must be performed before the policy anniversary date closest to the 70th birthday of the insured.

The premiums of the new benefit will be calculated based on the age of the insured at the time of the conversion.

3.9 Modifications to the policy – Individual insurance

Multi-Life privilege

In the case of a Multi-Life policy, the policyowner may request to continue the benefit as a separate individual policy, without any new evidence of insurability.

In the event the benefit is cancelled by the policyowner, the insureds may request, within 60 days following the cancellation, to continue to be insured under a separate policy without having to provide evidence of insurability.

The insurance amount of the new benefit must not exceed the insurance amount in force of the previous benefit. The premium for each new benefit issued will be the same as if it were issued as a separate policy on the date the benefit became effective.

3.10 Modifications to the policy – Joint insurance

Insurability privilege upon first death

Upon the first death of one of the insureds, the surviving insured under the age of 65 may request, within a 90 day period, to have the Term Plus coverage replaced by a permanent life insurance benefit offered at the time of the request, without evidence of insurability.

The insurance amount of the new benefit must not exceed the insurance amount of the previous benefit. The premium of the new benefit will be calculated in accordance with the age of the insured at the time this privilege is exercised.

Simultaneous deaths

A second death benefit will be paid if another insured covered under the Term Plus insurance benefit dies during the 90 days following the first death to have occurred, while being under the age of 65.

Insurability privilege in case of dissolution

An insured who is 65 years old or less may request, during the 18-month period following the dissolution of the union or association, to replace the joint benefit by another individual life insurance benefit offered at the time of

the request. The replacement is processed without evidence of insurability. The insurance amount of the new benefit must not exceed the insurance amount of the previous benefit divided by the number of insureds covered.

The premiums of the new benefit will be calculated in accordance with the age of the insured at the time this privilege is exercised.

3.11 Termination of benefit

The Term Plus coverage terminates on the earliest of the following events:

- on the insured's 85th birthday or the eldest insured's 85th birthday in the case of a Joint First to Die;
- on the cancellation date of the benefit or the policy;
- on the date a new benefit comes into effect under a conversion;
- in the case of joint insurance, the 30th day following the first exercise of the insurability privilege in case of dissolution; or
- upon the insured's death.

4. Total disability rider

The Total Disability Rider is a credit protection benefit offered as an optional coverage on Term Plus insurance. It can be added to any Term Plus life insurance plan on an individual basis and allows for a monthly benefit in case of total disability of the insured.

This benefit enables the insured to meet the financial commitments related to his or her loan(s) eligible for disability coverage. The Total Disability Rider is considered as a credit protection benefit, not an income replacement benefit. The payment of the benefit is in accordance with the amount of eligible loans and monthly payments. Proof of loan(s) is required at the time of a claim.

At the time of a claim, the benefit payable corresponds to the lesser of the following amounts:

- the amount of monthly indemnity indicated on the policy; or
- the total amount of monthly payments eligible at the time of the claim. Eligible monthly loans and payments are detailed in section 4.6 and 4.7.

4.1 Eligibility

To be eligible for the Total Disability Rider, the insured must:

- subscribe to Term Plus life insurance;
- work at least 21 hours per week; and
- have worked 8 months or more during the last 12 months at a rate of at least 21 hours per week.

A stay at home spouse or a spouse on parental leave is eligible for a monthly indemnity only when a working spouse subscribes to Term Plus life insurance. The maximum eligible monthly amount is \$1,000, for an indemnity period of 2 years only. Note that a spouse on parental leave must have a regular occupation insurable according to our criteria to be eligible for a maximum amount of \$1,000. It is important to remember that all insureds must be borrowers or co-borrowers of the loan for which the Total Disability Rider has been purchased.

Note that rated policies may still be eligible for the Total Disability Rider.

4.2 Issue ages

For indemnity periods of 2 or 5 years, the insured must be between 18 and 55 years old.

For indemnity period of up to age 65, the insured must be between 18 and 60 years old.

4.3 Definition of total disability

Total disability means a condition of continuous incapacity affecting an insured owing to sickness or accident, that began while this benefit was in force and which condition is such that:

- for the insured who has a gainful occupation at the time of the commencement of total disability, the insured is unable to perform the principal duties of his or her regular occupation during the first 24 months of the condition, and thereafter, while the condition subsequently continues, to engage in any occupation that he or she is reasonably fit to engage in based on his or her education, training or experience, whether acquired before or after the commencement of total disability;
- the insured who is, at the time of the commencement of total disability, jobless, unemployed, retired, a student, on parental leave or self-employed without income, is unable to engage in any occupation that he or she is reasonably fit to engage in based on his or her education, training or experience, whether acquired before or after the commencement of total disability.

4.4 Monthly indemnity

The amount of monthly indemnity is established according to the insurance needs analysis. The minimum amount that can be requested is \$300, while the maximum amount will correspond to the lesser of:

- 1.5% of the total life insurance amount; or
- \$3,500 per insured for all disability riders combined.

For a Joint First to Die Term Plus insurance policy, the total amount of monthly indemnity for all insureds is limited to 1.5% of the total amount of joint Term Plus life insurance (maximum of \$3,500). The total disability riders are issued individually.

For a stay at home spouse or a spouse on parental leave, the maximum monthly indemnity corresponds to the lesser of:

- 1.5% of the total life insurance sum insured; or
- \$1,000 per insured.

The indemnity benefit period is 2 years.

When many insureds are simultaneously totally disabled, the sum of the monthly indemnities payable for all totally disabled insureds will be limited to the monthly payment required by the financial institution with regard to the eligible loan(s) taken out jointly and exclusively by the insureds.

Importance of the needs analysis

By choosing the Term Plus Total Disability Rider for credit protection needs, your clients will receive a monthly benefit in case of a total disability to help maintain their financial commitments and relieve financial worries.

The monthly indemnity amount requested by the insured should be based on a needs analysis, considering the insured's personal and business needs as well as eligible loans and monthly payments.

In order to help you determine an appropriate amount of monthly indemnity with your clients, you will find a needs analysis worksheet, *Needs Analysis – Term Plus Total Disability Rider (FIND0167A)*, available in the library of our Illustration Software.

It is important for advisors and the insureds to meet periodically to ensure that the disability credit protection at any given time corresponds to the insured's needs.

4.5 Indemnity period and waiting period

The premiums for the Total Disability Rider are level and guaranteed, and payable for the entire duration of the benefit.

Three choices of indemnity period are offered: 2 years, 5 years or up to age 65

For indemnity periods of 2 or 5 years, the maximum number of continuous payments made for one disability is 24 or 60 payments, depending on the insured's choice of indemnity period. The maximum number of cumulative payments of the monthly indemnity, for all total disability periods of one insured for the duration of the benefit, cannot exceed:

- 60 months, if the 2 year period was chosen; or
- 84 months, if the 5 year period was chosen.

For indemnity period up to age 65, the number of continuous payments made for one disability can continue up to age 65.

The following limitations apply for indemnity period up to age 65:

- If, during the payment of benefit upon total disability, the vehicle lease agreement is replaced with a new one, the payments will continue. However, the maximum number of monthly indemnity payments is limited to 120.
- For home equity line of credit providing for interest only to be repaid and the personal line of credit, the maximum number of monthly indemnity payments is 120.

Waiting period

Indemnity periods of 2 or 5 years:

- The waiting period is 90 days, retroactive to the 31st day. As such, 91 days after the start of disability, an amount corresponding to two monthly indemnity payments will be paid, and the other payments will afterwards be paid monthly for the duration of the total disability period.
- The waiting period is 30 days if total disability results directly from an accident, a hospitalization for a continuous period of at least 72 hours, or day surgery.

Indemnity period up to age 65:

- The waiting period is 90 days.

Recurrent total disability

If the insured becomes disabled again as a result of the same cause or of a related cause in the 6 months following the end of the previous total disability, the disability will be considered a continuation of the prior disability and no new waiting period will be applicable.

Disability	Waiting period	Maximum indemnity period	Maximum cumulative indemnity period
Total disability is a result of the same cause or of a related cause within 6 months following the end of the prior disability.	None	Depending on the chosen indemnity period, either: <ul style="list-style-type: none"> • 24 payments, if the 2 year period was chosen; 	Depending on the chosen indemnity period, either: <ul style="list-style-type: none"> • 60 payments, if the 2 year period was chosen;
Total disability is a result of a different cause within 6 months following the end of the prior disability.	90 days*	or <ul style="list-style-type: none"> • 60 payments, if the 5 year period was chosen; 	or <ul style="list-style-type: none"> • 84 payments, if the 5 year period was chosen;
Total disability occurs more than 6 months following the end of the prior disability, and is due to the same cause.	90 days*	or <ul style="list-style-type: none"> • Up to age 65; 	or <ul style="list-style-type: none"> • Up to age 65.
Total disability occurs more than 6 months following the end of the prior disability, and is due to a different cause.	90 days*	up to the limit of the maximum cumulative indemnity period.	

* The waiting period is 30 days if total disability results directly from an accident, a hospitalization for a continuous period of at least 72 hours, or day surgery (applicable to indemnity periods of 2 or 5 years only).

4.6 Eligible loans

To be eligible for coverage in case of total disability, a loan must have been taken out with a financial institution. The following loans are eligible:

- a mortgage loan;
- a mortgage line of credit;
- a personal loan;
- a personal line of credit;
- a loan for the purchase or lease of an automobile, motorcycle, boat or recreational vehicle;
- a student loan;
- a loan for investment purposes;
- a farm loan;
- a commercial loan.

Loan for an apartment building

A loan for an apartment building is considered eligible if:

- the insured owns and lives in the building; and

- the building has no more than 6 apartments, including that of the insured.

Loan for a building housing a business

A loan for a building housing a business is considered eligible if:

- the insured owns the business;
- the business occupies at least 50% of the building’s inhabitable area; and
- the business revenues are generated from the occupation carried out at this location.

The following loans are not considered eligible loans:

- Loans between individuals and credit card balances
- Any loan already covered under another disability insurance policy

Proof of eligible loans is required at the time a claim is made.

A document from the financial institution is required at the time a claim is made. The name of the insured(s) as holder(s) of the loan or line of credit, the monthly amount required and the remaining balance of the loan or line of credit must be indicated in the document.

4.7 Eligible monthly payments

Depending on the eligible loans, the eligible monthly payments are defined as follows:

Type of loan	Eligible monthly payments
Mortgage loan, personal loan, student loan, loan or lease of a car, motorcycle, boat or recreational vehicle	Amount of monthly payment required by the financial institution.
Mortgage or personal line of credit* → with reimbursement of interest only	Minimum amount of interest required by the financial institution plus 0.5% of the balance.
Mortgage or personal line of credit * → with reimbursement of principal + interest	Lesser between: <ul style="list-style-type: none"> • 1.5% of the line of credit balance; and • the amount required by the financial institution.
Loan for investment purposes	Amount that corresponds to the monthly payment required by the financial institution, excluding the margin call, if applicable.
Commercial loan	Amount of the monthly payment required by the financial institution proportional to the part owned by the insured in the company.

* For a line of credit, the determined amount of eligible monthly payment remains level for the duration of the chosen indemnity period.

4.8 Benefit payable

The benefit payable upon total disability corresponds to the lesser of:

- the total of the eligible monthly payments of the eligible loans outstanding at the start of the total disability; and
- the monthly indemnity amount indicated in the policy.

The benefit payable upon total disability will not be integrated with any other benefits received under any private or public health insurance plans.

However, any loan already covered under another disability insurance policy will not be considered eligible.

Examples of benefits payable at the time of a claim:

- 1) If the total of the eligible monthly payments is equal to or greater than the monthly indemnity in the policy, the benefit payable corresponds to the monthly indemnity in the policy.

Eligible loans	Eligible monthly payments	Monthly indemnity in the policy
Mortgage payment	\$800	
Car payment	\$250	\$1,000
Total	\$1,050	
Benefit payable		\$1,000

- 2) If the total of the eligible monthly payments is equal to or lesser than the monthly indemnity in the policy, the benefit payable corresponds to the sum of eligible monthly payments.

Eligible loans	Eligible monthly payments	Monthly indemnity in the policy
Mortgage payment	\$800	
Car payment	\$250	\$1,500
Total	\$1,050	
Benefit payable		\$1,050

No retroactive reimbursements or premium adjustments will be made. It is important for advisors and the insureds to meet periodically to ensure that the disability credit protection at any given time corresponds to the insured's actual needs.

In the event that the insured has no eligible loans and there is no benefit payable upon total disability, a reimbursement of premiums paid for this benefit, since the time the eligible loan was paid off, will be considered for a period that will not exceed 18 months preceding the commencement date of total disability.

4.9 Insurability benefit

This benefit is included with the disability rider. It offers the insured the option to increase the monthly indemnity amount, without new evidence of insurability, under certain conditions:

- the option must be exercised at the same time as the Insurability Benefit option included in the Term Plus life insurance coverage. The increase in the monthly indemnity amount should be proportional to the increase in the life insurance amount;
- the insured must be 55 years old or younger at the time the option is exercised;
- the insured must not be in a state of total disability;
- the option must be exercised within 60 days of acquiring a new loan or increasing an existing loan or upon any of the following events: marriage of either of the insureds, adoption or birth of a child for either of the insureds, the obtainment, by either of the insureds, of a bachelor's degree, a master's degree or a doctorate;
- the option can be exercised more than once, as long as the monthly indemnity does not exceed the lesser of:
 - 1.5% of the total Term Plus life insurance amount; or
 - \$3,500 per insured for all disability riders combined.

The premium related to the increase in the monthly indemnity is calculated based on the age of the insured at the time the option is exercised, according to the class of risks that he or she belongs to when such coverage becomes effective, and applying the rates in effect at the company at the time the option is exercised. Insureds with rated policies are eligible to exercise the insurability benefit.

4.10 Assistance benefit

The Assistance Benefit is included with the Total Disability Rider. When the insured is in a state of total disability, consultation services, medical support and assistance are offered through a toll-free number, 24 hours a day, 7 days a week*.

- **Second medical opinion:** this service, based on an analysis of the insured person's medical reports, assesses the key elements of the diagnosis received and produces recommendations from a doctor specializing in the relevant field.
- **Medical referral:** this service provides the insured person with the names of up to three doctors who are best qualified to deal with the case.
- **Administrative services:** this service allows the insured person to receive administrative support such as verification of billing, to ensure that bills are justified and free from any duplication, error or over billing.
- **Hospital admission and accommodation assistance outside the province or country:** this service arranges appointments with doctors, hospital admission, hotel reservations, transportation or interpreter services. It also verifies that discounts have been obtained through the Preferred Provider Organization (PPO) of the Excellence Centres.
- **Psychological assistance:** this service, upon request, provides the insured person, their spouse and their children with professional psychological services, up to a limit of \$750 CDN.
- **Medical assistance:** this service, offered by registered nurses, upon request from the insured person, provides answers to health, lifestyle and medical related questions.
- **Convalescence assistance:** this service provides the insured person with health professional referrals to meet the insured person's needs in case of convalescence.
- **Concierge services:** this service provides the insured person with answers to daily questions as well as professional referrals.

- **Legal assistance:** access to legal advice including legal assistance in the event of identity theft. This service, offered by lawyers, provides the insured person with legal information about all legal related matters. The main fields are the following:
 - Civil and common law
 - Property law
 - Family and estate law
 - Consumer law
 - Criminal law

Assistance Benefit services are provided even if a claim is pending or has been refused. In addition, concierge services and legal assistance are offered at all times as soon as the policy is issued. For more information, please refer to the Assistance Benefit brochure (DIND0073A).

** Legal assistance is offered Monday through Friday from 9 a.m. to 8 p.m. and Saturday from 10 a.m. to 5 p.m (EST).*

4.11 Limitations

- The monthly indemnity payable in the event of total disability is determined by the monthly payments of the eligible loan(s) in force and will not exceed the monthly indemnity amount of the policy.
- Any loan, other than the one for which this benefit was purchased, taken out less than 90 days before the commencement of total disability or the onset of the first symptoms leading to the total disability condition, or taken out while the insured is totally disabled, will not be considered an eligible loan and no benefit upon total disability will be payable in respect of such loan. This limitation does not apply to the renewal of a mortgage loan with identical conditions, or a loan for the residual value of a vehicle lease agreement.
- The lists of non-insurable occupations or occupations eligible for indemnity period of 2 years only applicable to Total Disability Rider are available in the appendix sections 10.2 and 10.3 of this document. These lists represent most of the occupations that are non-insurable or those that are eligible for an indemnity period of 2 years only. However, it is possible that an occupation not mentioned in the lists above will carry a high risk and will be subject to individual consideration.

For more information about the limitations of this benefit, please refer to the applicable insurance policy specimen.

4.12 Termination of benefit

Indemnity periods of 2 or 5 years:

- The Total Disability Rider will terminate on the earliest of:
 - the policy anniversary closest to insured's 60th birthday, if he or she is not in a state of total disability;
 - the policy anniversary closest to insured's 65th birthday;
 - the date as of which the Term Plus benefit to which this Benefit is attached is no longer in force;
 - the date a written request for cancellation of this benefit is received by the company from the policyowner, or the date indicated in the request, if later;
 - the date the insured under this benefit dies;
 - the date the Total Disability Rider is cancelled and becomes void;
 - the date where the maximum number of monthly benefit payments in case of total disability has been met.

Indemnity period up to age 65:

- The Total Disability Rider will terminate on the earliest of:
 - the policy anniversary closest to insured's 65th birthday;
 - the date as of which the Term Plus benefit to which this Benefit is attached is no longer in force;
 - the date a written request for cancellation of this benefit is received by the company from the policyowner, or the date indicated in the request, if later;
 - the date the insured under this benefit dies;
 - the date the Total Disability Rider is cancelled and becomes void;
 - the date where the maximum number of monthly benefit payments in case of total disability has been met.

4.13 Other characteristics

- The Total Disability Rider is not convertible.
- Upon renewal of the Term Plus life insurance plan, the Total Disability Rider is automatically renewed with the same premium.

5. Critical illness rider

The Critical Illness Rider is offered as an additional benefit on Term Plus insurance. It can be added at issue to any of the Term Plus life insurance plans on an individual basis. This benefit covers the three most common critical illnesses and completes your clients' Term Plus life insurance coverage. Developed to financially support the insured in case of critical illness, this benefit provides a lump-sum tax-free benefit of \$20,000 after the diagnosis of a covered critical illness, following a survival period of 30 days.

5.1 Issue ages

The insured must be between 18 and 60 years old.

5.2 Benefit amount

A lump-sum tax-free benefit of \$20,000.

5.3 Covered illnesses

- Cancer;
- Heart attack; and
- Stroke.

For the contractual definitions of these illnesses, consult appendix 10.4 of this document.

5.4 Other characteristics

- Premiums are level and guaranteed.

- If the insured qualifies for Term Plus life insurance (approved at a standard rate and without any exclusions) then he or she also automatically qualifies for the Critical Illness Rider.
- The Critical Illness Rider is only available when the initial Term Plus life insurance request is submitted or when a request to increase the insurance amount for which evidence of insurability is required is submitted.
- The Critical Illness Rider can be transferred if the Term Plus life insurance coverage is converted to a permanent life insurance product. The rates applicable at time of issue of the rider will continue to apply.
- Upon renewal of the Term Plus life insurance benefit, the Critical Illness Rider is automatically renewed with the same premium.

5.5 Benefit payable following a diagnosis

The insured must survive 30 days following the diagnosis of a covered critical illness to receive the benefit. The benefit is payable to the beneficiary(ies).

5.6 Assistance benefit

The Assistance Benefit is included with the Critical Illness Rider. Following the diagnosis of a covered critical illness, consultation services, medical support and assistance are offered through a toll-free number, 24 hours a day, 7 days a week*.

- **Second medical opinion:** this service, based on an analysis of the insured person's medical reports, assesses the key elements of the diagnosis received and produces recommendations from a doctor specializing in the relevant field.
- **Medical referral:** this service provides the insured person with the names of up to three doctors who are best qualified to deal with the case.
- **Administrative services:** this service allows the insured person to receive administrative support such as verification of billing, to ensure that bills are justified and free from any duplication, error or over billing.
- **Hospital admission and accommodation assistance outside the province or country:** this service arranges appointments with doctors, hospital admission, hotel reservations, transportation or interpreter services. It also verifies that discounts have been obtained through the Preferred Provider Organization (PPO) of the Excellence Centres.
- **Psychological assistance:** this service, upon request, provides the insured person, their spouse and their children with professional psychological services, up to a limit of \$750 CDN.
- **Medical assistance:** this service, offered by registered nurses, upon request from the insured person, provides answers to health, lifestyle and medical related questions.
- **Convalescence assistance:** this service provides the insured person with health professional referrals to meet the insured person's needs in case of convalescence.
- **Concierge services:** this service provides the insured person with answers to daily questions as well as professional referrals.
- **Legal assistance:** access to legal advice including legal assistance in the event of identity theft. This service, offered by lawyers, provides the insured person with legal information about all legal related matters. The main fields are the following:
 - Civil and common law
 - Property law
 - Family and estate law
 - Consumer law
 - Criminal law

Assistance Benefit services are provided even if a claim is pending or has been refused. In addition, concierge services and legal assistance are offered at all times as soon as the policy is issued. For more information, please refer to the Assistance Benefit brochure (DIND0073A).

** Legal assistance is offered Monday through Friday from 9 a.m. to 8 p.m. and Saturday from 10 a.m. to 5 p.m (EST).*

5.7 Termination of benefit

The Critical Illness Rider ends on the first of the following events:

- the policy anniversary closest to insured's 85th birthday;
- the date the Critical Illness Rider is cancelled;
- the date the Term Plus life insurance, to which this benefit is attached, is no longer in force;
- the date the policyowner presents a claim for the obtainment of the benefit following a diagnosis of a covered critical illness;
- upon the insured's death.

6. Waiver of premium

Offered as an additional benefit, the total disability waiver of premium benefit further completes the coverage offered by Term Plus insurance. It complements the Term Plus life insurance coverage by waiving all policy premiums in the event of total disability of the insured or the policyowner.

6.1 Issue ages

The insured must be between 18 and 55 years old.

6.2 Coverage range

This benefit exempts the premiums in case of total disability of the policyowner or the insured. After a continued period of total disability of 4 or 6 months depending on the waiting period selected, premium payments that come due until the end of the total disability period will be waived.

6.3 Other characteristics

A choice of waiting period of 4 or 6 months.

Upon renewal of the Term Plus life insurance benefit, the waiver of premium benefit is also renewed. The premium of this benefit is linked to the premium of the policy, and as such is recalculated according to the renewed policy premium.

6.4 Definition of total disability applicable to the waiver of premium benefit

Total disability means a continuous inability of the insured, due to sickness or injury, having begun while this benefit was in force and that the insured isn't able:

- to perform any of the duties of his or her principal occupation during the first 24 months of this condition; and
- after, to engage, while this condition subsequently continues, in any occupation for which he or she is reasonably fitted by education, training or experience, whether acquired before or after the total disability began.

6.5 Termination of benefit

The waiver of premium benefit ends at the policy anniversary nearest to the 60th birthday of the policyowner or the insured. The benefit will terminate, for an insured, on the earliest of:

- the date a written request from the policyowner is received for cancellation of the insured benefit under this benefit or the date indicated in the request, if later;
- the end of the premium payment period for the insured benefit;
- the date the insured benefit terminates.

The benefit will terminate on the earliest of:

- the policy anniversary date nearest the insured's 60th birthday;
- the date a written request for cancellation of this benefit is received from the policyowner or the date indicated in the request, if later;
- the date no insured benefit remains covered under this benefit;
- the date this policy is cancelled and becomes void.

7. Child rider

Offered as an additional benefit, a Child Rider enhances the Term Plus coverage by offering the possibility to purchase life insurance for the insured's dependent children. The insured must be the policyowner to subscribe to this rider. The life insurance protection is available for all of the insured's dependent children from 15 days old up to age 25.

7.1 Issue ages

The rider is offered to policyowners between the ages of 18 to 55.

7.2 Insurance amount

- Minimum amount: \$5,000
- Additional protection can be added to the minimum protection, up to a maximum of \$25,000 per child

7.3 Conversion

Conversion to a permanent life insurance is available, without evidence of insurability, to an amount up to 5 times the coverage in force, up to a maximum of \$100,000.

The conversion request must be made by the policyowner before the earliest of:

- the policy anniversary date nearest the insured's 25th birthday;
- the day the insured gets married;
- the termination date of the benefit to which this rider was added.

7.4 Other characteristics

Additional death benefits following prolonged hospitalization

When the cause of death of a child entailed over 30 days of hospitalization in the 12 months prior to his or her death, the death benefit is increased by \$75 per day of hospitalization (as of the first day) up to a maximum of 50% of the death benefit. This benefit is an additional amount added to the basic amount.

Benefit in case of death of the parents

The rider includes a waiver of premium benefit following the death of the policyowner to which this rider is added.

Automatic protection for newborns

This benefit automatically covers all of the policyowner's children born after this benefit becomes effective as soon as they reach the age of 15 days or as of the date they leave the hospital, if later. No additional premium is required for this protection.

7.5 Termination of benefit

The benefit will terminate for an insured on the earliest of:

- the policy anniversary date nearest the insured's 25th birthday;
- the date a written request for replacement of this benefit on the life of the insured with another policy is made;
- the date the insured gets married.

The benefit will terminate on the earliest of:

- the policy anniversary date nearest the date when all of the insureds covered under this benefit have reached age 25;
- the date a written request from the policyowner is received for the cancellation of this benefit or the date indicated in the request, if later;
- the date no insured remains under this benefit;
- the date this policy is cancelled and becomes void.

8. Accidental death and dismemberment

In case of dismemberment or accidental death, the following benefits are payable:

Loss	Percentage (%) of chosen coverage amount
Of life	100%
Of both eyes, both hands or both feet	100%
Of one hand and one foot, one hand and one eye or one foot and one eye	100%
Of use of limbs (quadriplegia, hemiplegia or paraplegia)	100%
Of one hand, one foot or one eye	50%

If more than one loss is sustained by the insured as a result of an accident, the benefit payable shall be for the greatest loss sustained only.

The benefits are doubled when the accident occurs in public transportation, an escalator or a public elevator, during a fire in a government building, a hurricane, a cyclone or when the insured is hit by lightning.

Definition

A limb may be an arm or a leg. The loss must occur within 180 days following the accident.

8.1 Issue ages

The insured must be between 18 and 60 years old

8.2 Insurance amount

- Minimum: \$5,000
- Maximum: \$500,000, without exceeding the insurance amount of the coverage to which it was added.

8.3 Termination of benefit

The benefit will terminate on the earliest of:

- the policy anniversary date nearest the insured's 65th birthday;
- the date a written request from the policyowner is received for cancellation of this benefit or of the benefit to which this benefit is attached or the date indicated in the request, if later;
- the date the benefit to which this benefit is attached terminates;
- the date the insured under this benefit dies;
- the date this policy is cancelled and becomes void.

9. Benefit in case of fracture

In case of accidental fracture or severance, the following benefits are payable:

Fracture	Indemnity
Skull, spine, pelvis (ilium bone) and femur	\$5,000
Breastbone, larynx, windpipe, shoulder blade, humerus, ulna, radius, kneecap, tibia and fibula	\$1,500
Bone not mentioned above	\$750

The benefits are doubled when the accident occurs in public transportation, an escalator or a public elevator, during a fire in a government building, a hurricane, a cyclone or when the insured is hit by lightning.

Definition

Fracture means the violent rupture of a bone or a strong cartilage.

Severance means separation of the bone in at least two parts resulting in its complete and permanent loss.

The diagnosis of fracture or severance must be made within 30 days of the accident for the benefit to be payable.

9.1 Issue ages

The insured must be between 18 and 60 years old

9.2 Termination of benefit

The benefit will terminate on the earliest of:

- the policy anniversary date nearest the insured's 70th birthday;
- the date a written request from the policyowner for cancellation of this benefit or of the benefit to which this benefit is attached is received or the date indicated in the request, if later;
- the date the benefit to which this benefit is attached terminates;
- the date this policy is cancelled.

10. Appendix

10.1 Decreasing insurance amount table

Life Insurance Benefit with Decreasing Insurance Amount Option Decreasing Insurance Amount Table per \$1,000 of Insurance

Benefit Anniversary	10 years	15 years	20 years	25 years	30 years	35 years
1	1,000	1,000	1,000	1,000	1,000	1,000
2	928	961	976	985	990	993
3	852	919	951	968	979	986
4	769	874	923	951	967	978
5	681	826	894	932	955	969
6	586	774	863	912	941	960
7	500	719	829	890	927	951
8	500	659	793	867	911	940
9	500	596	754	842	895	929
10	500	527	712	815	877	917
11	500	500	668	786	858	904
12	500	500	620	756	838	890
13	500	500	569	723	816	875
14	500	500	514	687	792	859
15	500	500	500	649	767	842
16	500	500	500	609	740	824
17	500	500	500	565	711	804
18	500	500	500	518	680	783
19	500	500	500	500	647	761
20	500	500	500	500	611	737
21	500	500	500	500	573	711
22	500	500	500	500	532	683
23	500	500	500	500	500	653
24	500	500	500	500	500	621
25	500	500	500	500	500	587
26	500	500	500	500	500	550
27	500	500	500	500	500	511
28	500	500	500	500	500	500
29	500	500	500	500	500	500
30	500	500	500	500	500	500
31	500	500	500	500	500	500
32	500	500	500	500	500	500
33	500	500	500	500	500	500
34	500	500	500	500	500	500
35 and over	500	500	500	500	500	500

10.2 List of non-insurable occupations (applicable to total disability rider)

Your client cannot add the Total Disability Rider if his/her occupation is found in the following list:

Aeronautics and aviation: Instructor, pilot, co-pilot, crew member

Armed forces

Artist: Actor, craftsperson, author, stuntman, singer, comedian, composer, dancer, writer, entertainer, wardrobe dresser, film producer, humorist, mannequin, make-up artist, musician, painter, screenwriter, sculptor, show or event planner, tattoo artist

Barman, waiter, busboy (where the main sale is the sale of alcohol)

Bodyguard

Bookbinder

Casino (private)

Correctional officer, prison guard (armed or not)

Disc-jockey, host (MC)

Door-to-door sales or from home

Driver (taxi or/and limousine)

Fireman (on board of an aircraft)

Foster home (hosting children, elderly or handicapped persons)

Games gallery, arcade

Hazardous or toxic materials (such as explosives, toxic fumes, etc.): distribution, storage, manufacturing, manipulation, protection, handling, treatment or transportation

Home-based childcare or at clients' home (more than 50% of time home-based or at clients' home)

Home-based licensed massage therapist or at clients' home (more than 50% of time home-based or at clients' home)

Home-based personal services (such as hairstyling, electrolysis, aesthetics, weight loss studio, beauty, tanning and manicure salon, health club) or at clients' home (more than 50% of time home-based or at clients' home)

Hunter, trapper

Jockey, equine management

Lumberjack, draper

Motorized vehicle racer

Massage therapist (non-licensed)

Pawnbroker

Physical fitness: Instructor/trainer home-based or at clients' home (more than 50% of time home-based or at clients' home)

Policeman (member of riot or bomb squad)

Professional athlete: Boxing, wrestling or any other professional sport

Prototype driver

Residential housekeeper (more than 50% of time at clients' home)

Rodeo

Sandblasting cleaning

Security guard (armed)

Truck driver: Wooden logs, toxic or hazardous materials

Underwater workers: Scuba (deep sea) diver, Scuba (deep sea) diving assistant, diver, diver assistant, instructor

Underground workers including mine workers

10.3 List of occupations eligible for an indemnity period of 2 years only (applicable to total disability rider)

If the occupation of your client is found in the following list, then your client can select the benefits to be payable during an indemnity period of 2 years only:

Alpine guide

Building concierge, building supervisor

Docker (without hazardous materials)

Driver (armored truck)

Fireman (not on board of an aircraft)

Forest warden, game warden, fish warden

Freelancer

Home-based childcare or at clients' home (50% of time or less home-based or at clients' home) or childcare facility

Home-based licensed massage therapist or at clients' home (50% of time or less home-based or at clients' home) or licensed massage therapist working at a health center or spa

Home-based personal services (such as hairstyling, electrolysis, aesthetics, weight loss studio, beauty, tanning and manicure salon, health club) or at clients' home (50% of time or less home-based or at clients' home) or working in a salon

Newspaper carrier

Physical fitness: Instructor/trainer home-based or at clients' home (50% of time or less home-based or at clients' home) or instructor/trainer in a fitness center

Policeman (other than member of riot or bomb squad)

Residential housekeeper (50% of time or less at clients' home)

Rofer, building mover, demolition worker, excavator, heavy equipment operator, unskilled worker

Security guard (unarmed)

Septic tank cleaner

Tree-trimmer

Truck driver: Long distance +250km/day and/or heavy weights

Window washer (more than 2 stories)

Worker in quarries (open pit mine), **concentration or purification of ore** (unless worker handles explosives)

Worker on antenna, dam, bridge, well, electric pylon, steel structure, lineworker

If the occupation of your client is not found in either list, the Total Disability Rider can be selected and all indemnity periods are available. These lists represent most of the occupations that are non-insurable or those that are eligible for an indemnity period of 2 years only. However, it is possible that an occupation not mentioned in these lists will carry a high risk and will be subject to individual consideration.

A stay at home spouse or on parental leave at the time of subscription

Eligible for the Total Disability Rider for the indemnity period of 2 years only and monthly indemnity of up to \$1,000. The working spouse must subscribe to a life insurance protection with SSQ Insurance under the same policy as his/her spouse.

Note that a spouse on parental leave must have a regular occupation insurable according to our criteria to be eligible for a maximum amount of \$1,000.

10.4 Contractual definitions of covered critical illnesses

Cancer (life-threatening)

A definite diagnosis of a tumour characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis of cancer must be made by a specialist.

EXCLUSIONS

No benefit will be payable under this condition for the following non life-threatening cancers:

- carcinoma in situ; or
- Stage 1A malignant melanoma (melanoma less than or equal to 1.0 mm in thickness, not ulcerated and without Clark level IV or V invasion); or
- any non-melanoma skin cancer that has not metastasized; or
- Stage A (T1a or T1b) prostate cancer.

MORATORIUM PERIOD EXCLUSION

No benefit will be payable under this condition if:

Within the first 90 days following the later of:

- the effective date of the policy; or
- the effective date of last reinstatement of the policy,

the insured person has any of the following:

- signs, symptoms or investigations that lead to a diagnosis of cancer (covered or excluded under the policy), regardless of when the diagnosis is made; or
- a diagnosis of cancer (covered or excluded under the policy).

The medical information as described above must be reported to the Company within six (6) months of the date of the diagnosis. If this information is not provided, the Company has the right to deny any claim for cancer or, any critical illness caused by any cancer or its treatment.

Heart attack (myocardial infarction)

A definite diagnosis of the death of heart muscle due to obstruction of blood flow, that results in:

Rise and fall of biochemical cardiac markers to levels considered diagnostic of myocardial infarction, with at least one (1) of the following:

- heart attack symptoms;
- new electrocardiogram (ECG) changes consistent with a heart attack; or
- development of new Q waves during or immediately following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty.

The diagnosis of heart attack must be made by a specialist.

EXCLUSIONS

No benefit will be payable under this condition for:

- elevated biochemical cardiac markers as a result of an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty, in the absence of new Q waves; or
- ECG changes suggesting a prior myocardial infarction, which do not meet the heart attack definition as described above.

Stroke (cerebrovascular accident)

A definite diagnosis of an acute cerebrovascular event caused by intra-cranial thrombosis or haemorrhage, or embolism from an extra-cranial source, with:

- acute onset of new neurological symptoms; and
- new objective neurological deficits on clinical examination, persisting for more than 30 days following the date of diagnosis.

These new symptoms and deficits must be corroborated by diagnostic imaging testing.

The diagnosis of stroke must be made by a specialist.

EXCLUSIONS

No benefit will be payable under this condition for:

- transient ischemic attacks; or
- intracerebral vascular events due to trauma; or
- lacunar infarcts which do not meet the definition of stroke as described above.

About SSQ Insurance

Founded in 1944, SSQ Insurance is a mutualist company that puts community at the heart of insurance. With assets under management of \$12 billion, SSQ Insurance is one of the largest companies in the industry. Working for a community of over three million customers, SSQ Insurance employs 2,000 people. Leader in group insurance, the company also sets itself apart through its expertise in individual life and health insurance, general insurance and the investment sector.



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