



Advisor  
Individual  
insurance

# General information



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# 1. Multi-Life concept

## 1.1. Description

The Multi-Life concept enables several members of the same family or the same company to join several permanent (excluding Universal life) or temporary plans, under a single policy, and benefit from lower fixed policy fees.

## 1.2. Number of insureds and coverages

The Multi-Life concept insures up to six individuals under a single policy, with a maximum of 20 coverages.

## 1.3. Policyowner

An individual or company is designated as the policyowner or two individuals can be named as co-policyowners.

## 1.4. Choice of the main insured

The main insured is determined among insureds whose coverage meets the policy's requirements for both the minimum premium and minimum insurance amount.

The main insured is the oldest insured covered under a permanent plan, or the oldest insured covered under a temporary plan if no permanent plan is chosen.

## 1.5. Fixed policy fees

Fixed policy fee of \$60 is applicable to the main insured's basic coverage for all policies. For every term life insurance, permanent life insurance or critical illness benefit added on the life of an additional insured, fixed policy fee of \$25 will apply.

For universal life insurance, fixed policy fee of \$60 (\$5 monthly fee) is applicable on the policy. For every term life insurance or critical illness benefit added on the life of the main insured, fixed policy fee of \$25 will apply.

## 1.6. Premium calculation

The premium can be calculated with our Illustration Software. Illustrations will show the premium and any applicable fixed policy fees.

## 1.7. Changes

Policies can evolve according to individual, family and corporate needs. New insureds can be added to a policy after it has been issued (excluding Universal life) and a policy can also be divided into separate policies.

- **Addition of an insured to an in force policy**

The premium can be calculated with our Illustration Software.

- **Change from smoker rate to non-smoker rate**

Evidence of insurability will be required including the urinalysis. The non-smoker rate used will be based on the insured's age at the time the policy was issued. For insureds under the age of 18 at issue, the non-smoker rate used will be that at age 18 according to the rate in force when the policy is issued. The request of change must be made in adulthood only.

- **Dividing the Multi-Life policy into separate policies**

It is possible to divide the Multi-Life policy into separate policies in the following circumstances:

- The policyowner requests that the coverage of one or several insureds be transferred into separate policies.
- Within 60 days of the insured's coverage termination following the policyowner's request, the insured makes a request for continuation of the coverage under a separate policy.

The insurer will then issue a new policy without evidence of insurability. The plan, premium, values and conditions of the new policy become the same as those of an identical individual policy issued on the same date as that of the Multi-Life protection. Policy modification fees of \$25 will apply to every new policy.

## 1.8. Death or withdrawal of the main insured

In the case of death or withdrawal of the main insured's coverage in the case of a Multi-Life policy, a new main insured is chosen among the other insureds according to the method described above in section "1.4. Choice of the main insured". The policy premium is adjusted accordingly.

## 2. Description of additional benefits

### 2.1. Waiver of Premium (WP)

#### a) Description – waiting period of 4 months

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 months** or more, the insurer waives all premiums due during the entire total disability period.

- **Issue ages**

18 to 55

- **Availability**

Can be added at issue, or at a later date (with proof of insurability), to Term, Term Plus, Whole Life, Term 100, Critical Illness Insurance and Universal Life products. For Universal Life, one of two waivers offered may be selected: waiver of minimum premium or waiver of billing premium. Waiver of premium is available only on policies owned by individuals (not companies).

- **Waiver of premium benefit rate – 4 months**

<b>Insured age 18 to 55</b>	<b>Premium rate as a percentage (%)</b>
Male	9.0%
Female	12.0%

## b) Description – waiting period of 6 months

This benefit exempts the premiums in case of total disability of the policyowner or the insured. After a continued period of total disability of **6 months** or more, the insurer waives all premiums due during the entire total disability period.

- **Issue ages**

18 to 55

- **Availability**

Can be added at issue, or at a later date (with proof of insurability), to Term, Term Plus, Whole Life, Term 100, Critical Illness Insurance and Universal Life products. For Universal Life, one of two waivers offered may be selected: *waiver of minimum premium* or *waiver of billing premium*. Waiver of premium is available only on policies owned by individuals (not companies).

- **Waiver of premium benefit rate – 6 months**

<b>Insured age 18 to 55</b>	<b>Premium rate as a percentage (%)</b>
Male	5.0%
Female	7.5%

## c) Termination of Waiver of Premium benefit (4 or 6 months)

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.

## 2.2. Critical Illness Rider

- **Description**

The Critical Illness Rider is offered as an additional benefit and can be added to Term, Term Plus, Whole Life, Term 100 and Universal Life products. It is offered at issue, on an individual basis.

- **Definition**

Illnesses covered: cancer, heart attack and stroke.

For complete definitions of covered critical illnesses, refer to the applicable insurance policy specimen.

- **Issue ages**

18 to 60

- **Benefit amount**

\$20,000 lump-sum. The insured must survive 30 days following the diagnosis of a covered critical illness to receive the benefit.

- **Other characteristics**

- Premiums are level and guaranteed.
- The Critical Illness Rider can be transferred if the term 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.
- The Assistance Benefit is included with the Critical Illness Rider.
- Only one Critical Illness Rider is allowed per insured.

- **Availability**

This rider is available with Term, Term Plus, Whole Life, Term 100 and Universal life products.

The Critical Illness Rider is only offered when the initial life insurance request is submitted or when a request to increase the sum insured (for which evidence of insurability is required) is submitted.

The Critical Illness Rider is automatically granted when requested, without any additional underwriting requirements, if the life insurance coverage is approved at a standard rate and without any exclusions.

- **Termination of benefit**

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

- the policy anniversary closest to insured's 85<sup>th</sup> birthday;
- the date the Critical Illness Rider is cancelled;
- the date the 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.

## 2.3. Child Rider (CR)

- **Description**

***Family protection***

This benefit offers a life insurance protection to all of the dependent children of the insured, up to age 25. The insured must be the policyowner to subscribe to this rider.

Minimum insurance amount: \$5,000

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

***Additional death benefit following a 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 benefit is increased by \$75 per day of hospitalization (as of the first day) up to a maximum of 50% of the insurance amount.

### ***Conversion privilege***

This rider can be converted into a permanent life insurance policy offered by the insurer at the time the request is made, without new evidence of insurability, to an amount that can reach five times the protection in force, up to a maximum of \$100,000. The conversion request must be made before the date nearest to one of the following events:

- the insured child's 25<sup>th</sup> birthday;
- the insured child's wedding date;
- the termination date of the benefit to which this rider was added.

### ***Benefit in case of death of the parent policyowner***

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 insured's dependent children born after the 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.

- **Rates**

Minimum insurance amount of \$5,000: \$50 annually to cover all of the insured's children.

Additional protection: \$4 annually per \$1,000 of insurance.

- **Issue ages**

Available to insureds between the ages of 18 to 55.

- **Availability**

This additional benefit is available to the insured's dependent children, from the age of 15 days until the policy anniversary nearest to the 17th birthday. It can be added to Term, Term Plus, Whole Life, Term 100 and Universal Life products.

- **Termination of benefit**

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

- the policy anniversary date nearest the insured's 25<sup>th</sup> birthday;
- the date a written request for replacement of this benefit on the life of the insured by 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.

## 2.4. Children's Endorsement (CE)

- **Description**

***Family protection***

This benefit offers a critical illness protection to all of the insured's dependent children up to age 21 (or 25 if the insured is a full-time student).

Minimum insurance amount: \$5,000

Additional protection can be added, up to a maximum of \$50,000 per child. The amount insured must be the same for each insured child under the same policy.

***Critical illnesses covered***

The following 15 critical illnesses are covered: autism, benign brain tumour, blindness, cancer (life-threatening), cerebral palsy, congenital heart disease, cystic fibrosis, deafness, Down syndrome, kidney failure, major organ failure on waiting list, major organ transplant, muscular dystrophy, paralysis and Type 1 diabetes mellitus.

***Benefit payable following a critical illness diagnosis***

If the insured is diagnosed with a critical illness while the benefit is in force and survives at least 30 days following the diagnosis, the insurer will pay the insurance amount insured to the policyowner. Only one claim is payable under the benefit.

***Benefit in case of death of the parent policyowner***

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 while the benefit is in force. No additional premium is required for this protection.

***Limitation***

A child born within the 10 months after the Children's Endorsement rider is issued will no longer be covered if they receive a diagnosis of critical illness within 30 days of birth.

- **Premium**

Minimum insurance amount of \$5,000: \$75 annually to cover all of the policyowner's children.

Additional protection: \$15 annually per \$1,000 of insurance.

- **Issue ages**

Available to insureds between the ages of 18 to 65.

- **Availability**

This rider is available as an additional benefit, for the policyowner's children, from the age of 30 days to 17 years old. It can be added to any adult Critical Illness Insurance policy.

- **Termination of benefit**

This benefit will terminate for an insured on the earliest of the following dates:

- the policy anniversary date closest to the insured's 21<sup>st</sup> birthday (or 25<sup>th</sup> if the insured is a full-time student);



- the date the insured, born during the first ten (10) months of the benefit, receives a diagnosis of critical illness within 30 days of his or her birth;
- the date the insured of this benefit dies.

This benefit will terminate on the earliest of the following dates:

- the policy anniversary date closest to the date where all insureds under this benefit have reached age 21 (or age 25 if one or all insureds are full-time students);
- the date the policyowner asks for the payment of the benefit following the diagnosis of a critical illness;
- 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 termination date of the critical illness benefit to which the present benefit is attached.

## 2.5. Benefit in case of Fracture

- **Description**

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

<b>Fracture</b>	<b>Indemnity</b>
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.

- **Premium**

- \$45 per year when added to Term, Term Plus, Whole Life 100, Term 100, Critical Illness Insurance or Universal Life products;
- \$55 per year when added to Whole Life 20 product (premiums are paid over 20 years).

Note: premiums are non-guaranteed.

- **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.

- **Issue ages**

0 to 60

- **Availability**

This benefit can be added at issue to Term, Term Plus, Whole Life, Term 100, Critical Illness Insurance and Universal Life products.

- **Termination of benefit**

The benefit will terminate on the earliest of:

- the policy anniversary date nearest the insured's 70<sup>th</sup> 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.

## 2.6. Accidental Death and Dismemberment (AD&D)

- **Description**

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

<b>Loss</b>	<b>Percentage (%) of chosen coverage</b>
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%

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.

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.

- **Definition**

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

- **Issue ages**

0 to 60

- **Death benefit**

Minimum: \$5,000

Maximum: \$500,000, without exceeding the death benefit of the coverage to which it was added.

- **Availability**

This benefit can be added at issue to Term, Term Plus, Whole Life, Term 100 and Universal Life products.

- **Termination of benefit**

The benefit will terminate on the earliest of:

- the policy anniversary date nearest the insured's 65<sup>th</sup> 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.

## 3. Description of included benefits

### 3.1. Renewal option

- **Description**

The renewal benefit applies to term insurance plans or short-term additional benefits. These insurance plans and additional benefits can be renewed without new evidence of insurability for specific successive periods according to each type of coverage.

The premium is guaranteed for the initial term of the policy as well as for any additional benefit(s) and for each renewal.

- **Availability**

This benefit is included with Term 10, Term 20, Term Plus as well as Critical Illness Insurance Term 10 and Term 20 plans.

### 3.2. Conversion privilege

- **Description**

This benefit allows for the conversion of a temporary life insurance benefit into a permanent life insurance policy.

When the temporary benefit is not the main benefit of the policy but an additional one, the conversion will result in the creation of a second policy and the fixed policy fees then in effect at the company will apply to the policy.

The insurance amount of the new policy cannot exceed the amount in force at the time of the conversion request. Any indexation of the insurance amount under the new benefit is excluded from the new policy.

No new evidence of insurability is necessary for the life insurance conversion. However, to convert any other benefit, new evidence of insurability is required.

The premium of the new policy is calculated according to the age of the insured at the time of conversion, according to his or her risk class, by using the rate in effect at the time of conversion.

This benefit also allows for the conversion of a temporary critical illness insurance benefit (T10 and T20) into a T75 or T100 critical illness insurance benefit.

- **Availability**

This benefit is included with Term 10, Term 20, Term Plus as well as Critical Illness Insurance Term 10 and Term 20 plans.

The conversion request must be made before the policy anniversary specified for each policy:

- Term 10: on the policy anniversary date nearest to the insured's 70<sup>th</sup> birthday;
- Term 20: on the policy anniversary date nearest to the insured's 70<sup>th</sup> birthday;
- Term 70: on the policy anniversary date nearest to the insured's 65<sup>th</sup> birthday;
- Term Plus: on the policy anniversary date nearest to the insured's 70<sup>th</sup> birthday;
- Critical Illness Insurance Term 10 & Term 20 plans: on the policy anniversary date nearest to the insured's 65<sup>th</sup> birthday.

### 3.3. Extreme Disability Benefit (EDB)

- **Description**

Before the age of 60, 50% of the insurance amount (or 25% of the insurance amount for Term Plus decreasing policies) may be payable in advance, up to a maximum of \$250,000 per insured. The benefit is paid when the insured is in a state of irrecoverable extreme disability for a continued period of 6 months, upon request by the policyowner.

Upon the death of the insured, the insurance amount will be paid to the beneficiary, less the total amount paid in advance as extreme disability.

For a complete description of this benefit and the contractual definition of Extreme Disability, refer to the applicable insurance policy specimen.

- **Maximum benefit**

The benefit cannot exceed \$250,000, taking into account all of the policies in force at that time that include this benefit.

- **Issue ages**

0 to 59

- **Availability**

Depending on eligibility and underwriting, this benefit may be included with Term, Term Plus, Whole Life, Term 100 and Universal Life products.

The Extreme Disability Benefit can be added at issue only.

- **Termination of benefit**

The policy anniversary nearest to the insured's 60<sup>th</sup> birthday.

### 3.4. Indexation rider

- **Description**

An indexation rider may be added to a Term 10 product at the time of issue, at no additional cost, upon the policyowner's request. This benefit allows the policyowner to increase his or her insurance amount, on each of the first five anniversary dates, by 30%, 25%, 20%, 15% and 10% of the initial insurance amount.

For each of the first five years of the policy, the insurance amount will be increased at the time of invoicing by a percentage of the initial insurance amount: 30% on the first anniversary date, 25%, 20%, 15% and 10% for each subsequent anniversary. The premium will be adjusted accordingly to reflect the

increase. If the policyowner declines the indexation for a given year, the benefit will be cancelled for subsequent years. If the policyowner requests less coverage than the maximum indexation allowed, the indexation for the subsequent years will be reduced accordingly.

- **Eligibility**

The insured must be under 75 years of age to be eligible. The indexation privilege is not available when the Term 10 product is a Joint First to Die policy.

- **Optional**

The policyowner may request the rider and then choose to exercise the option to increase the insurance amount at a later date, in accordance with his or her changing insurance needs. This rider is offered only at time of issue of the Term 10 product.

- **No additional charge**

The privilege is offered at no additional cost. The premium for the insurance portion related to the increase is calculated according to the original age. The commission paid on the premium increase will be equal to the service commission of the Term 10 product. The indexation rider is offered only to insureds approved at a standard rating (not applicable if premium was rated).

- **Insurance amount**

The indexation privilege may be offered to insureds who request insurance amounts from \$100,000 to \$5,000,000. For any insurance amount over \$5,000,000 please contact the head office.

- **Underwriting**

The financial security advisor must request evidence of insurability as required for an insurance amount equal to 150% of the insured's basic insurance amount.

- **Invoicing**

On each of the first five policy anniversaries, the policyowner will receive his or her invoice including the allowable increase of the initial insurance amount. If he or she only pays the original premium (hence refusing the increase), the indexation privilege will be cancelled. The insurance amount will consequently remain unchanged in future years.

If the actual premium paid corresponds to a lesser insurance amount than that allowed by the maximum indexation for that year, the insurance amount for subsequent years cannot be higher than that insurance amount.

Upon renewal of the basic coverage, i.e. on the tenth anniversary date of the Term 10 product, the renewal premium will be calculated based on the total insurance amount.

## 4. General underwriting rules

### 4.1. Application form

The application form is used as the basis for drawing up the policy. Therefore, it is very important that it is filled out very carefully by providing complete and accurate answers. The advisor must comply with the company's instructions on the use of the application forms.

Newborns: no application should be filled out until a newborn is at least 15 days old for life insurance and at least 30 days old for critical illness insurance.

In the event an error is made while filling out the application, the information must not be erased or covered with correction fluid. Furthermore, the advisor must ensure that the insured or the policyowner initials all corrections.

## 4.2. Eligibility and preliminary application

When in doubt as to the insurability of an applicant or when an applicant was previously rejected by another company, a preliminary application must be used and:

- no money must be collected; and
- no medical exam is to be requested.

## 4.3. Policy delivery – Right to inspect the policy

The insurer allows a 10-day period starting on the policy delivery date for the policyowner to review the policy. The policyowner may, within this period, cancel the policy and be reimbursed for any premium paid. In this case, the policy must be returned to the head office no later than 30 days after the insurer delivered the policy to the advisor.

## 4.4. Inspection report

Depending on the insurance amount requested and the age and occupation of the applicant, an inspection report may be requested.

In order to avoid any unfavourable reactions, the advisor must inform his or her applicant that an inspection might be carried out and that it is part of the regular process of studying a life insurance application.

## 4.5. Medical or paramedical exam

The advisor must request the medical or paramedical exam and indicate it in the space provided on the application form. The medical exam must not be performed by the applicant's attending physician. The paramedical exam is a summary examination done by a qualified nurse who works in a clinic approved by the insurer.

For an existing insured, the amount at risk includes any insurance amount acquired by the insured through the company, within the last 6 months.

The insurer may request any other type of exam when deemed necessary.

# 5. Pricing

## 5.1. Non-smoking rates

People who have not used tobacco products (cigarettes, cigars, pipes, other) in the last 12 months preceding the insurance application are eligible for the non-smoking rates (refer to point "5.4. Preferred risks and selection criteria").

## 5.2. Establishing the age

Age is established according to the insured's age on his or her birthday nearest to the date that the benefit takes effect.

## 5.3. Premium payment

- **Pre-authorized debit**

The amount of a pre-authorized monthly payment = annual premium X 0.09 (for universal life, the pre-authorized monthly payment = annual premium X 1/12)

The following documents must be sent to the insurer along with the application form (or, if applicable, with the *Policy Reinstatement* and *Policy change* forms):

- A cheque in the amount of the premium or authorization to withdraw the payment by pre-authorized debit; and
- A cheque specimen.

The "Pre-authorized Debit Agreement" section of the application form must be properly completed with necessary signature(s) and must contain all of the following information:

- The application or policy number(s);
- The name and address of the financial institution branch;
- The branch, financial institution number and account number;
- The name and signature of the payor (signatory) as shown in the financial institution's books;
- If the account is joint, the name and signature of all of the account signatories.

The same procedure must be followed in situations such as:

- Conversion;
- Internal replacement;
- Change of signatories;
- Change of financial institution;
- Change of account.

- **Credit card (1<sup>st</sup> premium only)**

- If the premium payment frequency is annual, the amount payable by credit card is limited to 1/12<sup>th</sup> of the annual premium (or 1/12<sup>th</sup> of the minimum annual premium for Universal Life insurance), subject to a maximum of \$5,000.
- If the premium payment frequency is monthly, the amount payable by credit card is limited to the first monthly premium (or first minimum monthly premium for Universal Life insurance), subject to a maximum of \$5,000.

## 5.4. Preferred risks and selection criteria

Preferred risks are available with Term and Term Plus products for insurance amounts starting at \$250,000.

- **Four non-smoker classes are available:**

- Class 1 non-smoker: no tobacco use in the last 60 months;
- Class 2 non-smoker: no tobacco use in the last 24 months;
- Class 3 non-smoker: no tobacco use in the last 12 months;
- Class 4 non-smoker: rates for pipe and cigar only and no use of other tobacco products in the last 12 months.

- **Two smoker classes are available:**

- Class 1 smoker: best of the two smoker classes;
- Class 2 smoker: second best rates of the two smoker classes.

- **The insured's classification will be based on the following selection criteria:**
  - Tobacco use
  - Family medical history
  - Personal medical history
  - Lifestyle
  - Blood pressure
  - Blood profile
  - Height and weight
  - Driving record
  - Aviation practice
  - Dangerous sports practice
  - Citizenship and travels

## 6. Particulars

### 6.1. Temporary Insurance Agreement (TIA)

The insurer offers a temporary insurance which provides the insured with immediate protection according to the insurance amount requested, up to a maximum of \$500,000, including any other coverage issued by the company.

The Temporary Insurance Agreement receipt must be filled out and sent to the policyowner if the conditions stipulated on the back are met:

- All answers to the questionnaire must be negative.
- The application must be accompanied by a payment equal to a monthly premium or to 1/12<sup>th</sup> of the annual premium. Furthermore, this payment must be honoured by the financial institution the first time it is presented.

The Temporary Insurance Agreement does not apply:

- For any requested additional benefits, including the Accidental Death and Dismemberment, Benefit in case of Fracture, Waiver of premium, Child Rider and the Children's Endorsement;
- For any critical illness product, including Critical Illness Rider;
- For Total Disability Rider added to a Term Plus coverage;
- For insureds younger than 15 days old or 66 years of age and over on the nearest birthday;
- In the event of suicide, fraud or misrepresentation.

The TIA expires either 90 days after the signature of the agreement, on the date the advisor receives a counter offer, or on the effective date of the policy, whichever comes first. The insurer can end the TIA at any time by notifying the policyowner and by returning the premium paid.

### 6.2. Policy on internal replacement among SSQ Insurance financial advisors

We will not accept an application as a replacement for an insurance policy in force with SSQ Insurance if this application already belongs to a financial advisor who has a contract agreement with the company.

This policy is intended to provide stability among insureds and permanence for financial advisors.

## 7. Other

### 7.1. Joint insurance

Protection that jointly covers the life of the insured individuals for the full insurance amount upon the death of one or several of the individuals.



Concepts offered

- **Joint First to Die: Amount payable following the first death**
  - Term 10 (2 lives)
  - Term 20 (2 lives)
  - Term Plus (5 lives)
  - Term 100 (5 lives)
  - Whole Life 100 (5 lives)
  - Universal Life (5 lives)
- **Joint Last to Die: Amount payable following the last death**
  - Term 20 (2 lives)
  - Term 100 (2 lives)
  - Whole Life 100 (2 lives)
  - Universal Life (5 lives)

**a) Calculation of the premium**

The premium of the Joint First to Die concept for Term 10, Term 20 and Term Plus products is calculated using the sum of each of the insureds' premium multiplied by a factor of 95.0%, plus the \$60 fixed policy fees.

For other products offered as a joint concept, a calculation for the insureds' equivalent age is used to determine the premium. This equation is detailed below.

- **Methodology**

If more than two insureds, calculation is prepared as follows:

1. A list of all insureds is made, from the youngest to the oldest;
2. An equivalent age is calculated with the two youngest insureds (first two on the list);
3. The same calculation is made with the equivalent age just found and the next age on the list;
4. The last equivalent age found is used for the calculation of the premium.

- **Adjustment of age, sex, and status of the insureds**

1. Determine each applicant's age at nearest birthday;
2. Subtract 3 years of age for a non-smoker female;
3. Subtract 4 years of age for a smoker female;
4. If only one of the applicants is a smoker, add to his or her age the appropriate number listed below:

<b>Age</b>	<b>0-35</b>	<b>36-55</b>	<b>56-65</b>	<b>66-70</b>	<b>71 +</b>
Add	7	6	5	4	3

- **Adjustment for preferred risk**

This adjustment is used to convert non-smoker class 1, class 2 or class 4 to a non-smoker class 3, and smoker class 1 to a smoker class 2.

### Calculation of the adjustment

- Determine each applicant's age at nearest birthday;
- Apply the adjustment listed below to the age of each applicant according to their initial class.

<b>Modification</b>	<b>Adjustment</b>
NS C1 → NS C3	- 2 years
NS C2 → NS C3	- 1 year
NS C4 → NS C3	+ 2 years
S C1 → S C2	- 2 years

- **Calculation of the equivalent age**

Set the equivalent age by using the adjusted ages and the following tables:

**First to Die (add to the highest adjusted age)**

<b>Age difference</b>	<b>0-1</b>	<b>2-3</b>	<b>4-6</b>	<b>7-9</b>	<b>10-13</b>	<b>14-18</b>	<b>19-23</b>	<b>24-35</b>	<b>36 +</b>
Add	8	7	6	5	4	3	2	1	0

**Last to Die (subtract from the lowest adjusted age)**

<b>Age difference</b>	<b>0-1</b>	<b>2-3</b>	<b>4-6</b>	<b>7-9</b>	<b>10-13</b>	<b>14-18</b>	<b>19-23</b>	<b>24+</b>
Subtract	7	6	5	4	3	2	1	0

- If both applicants are smokers, use a male smoker rate. Otherwise, use a male non-smoker rate.
- Add the policy fee of \$60.

Minimum and maximum ages: the minimum and maximum ages for each product are the same as for an individual concept. However, the equivalent age may not be under 18 years old. If it is, use age 18.

### **b) Basic benefits included at no additional cost**

The benefit applies if available on the plan chosen.

- **Extreme Disability Benefit (EDB)**

Before the age of 60, 50% of the insurance amount (or 25% of the insurance amount for Term Plus decreasing policies) may be payable in advance, up to a maximum of \$250,000 per insured. The benefit is paid when the insured is in a state of irrecoverable extreme disability for a continued period of 6 months, upon request of the policyowner. Upon the death of the insured, the insurance amount will be paid to the beneficiary, less the total amount paid in advance as extreme disability.

For a complete description of this benefit and the contractual definition of Extreme Disability, refer to the applicable insurance policy specimen.

- Joint First to Die: The benefit will be paid following the first extreme disability if all insureds have not reached age 60.
- Joint Last to Die: The benefit will be paid following the last extreme disability if the insureds have not reached age 60.

Depending on eligibility and underwriting, this benefit may be included with Term 10, Term 20, Term Plus, Whole Life 100, Term 100 and Universal Life products.

### c) **Additional benefits**

Each insured can ask to have the following additional benefits on his or her own life.

Available for Joint First to Die or Joint Last to Die:

- **Waiver of Premium (WP)**

In case of total disability of the insured during an uninterrupted period of 4 months or more:

- 9.0% of the total premium for a male.
- 12.0% of the total premium for a female.

In case of total disability of the insured during an uninterrupted period of 6 months or more:

- 5.0% of the total premium for a male.
- 7.5% of the total premium for a female.

- **Critical Illness Rider – only one Critical Illness Rider is allowed per insured**

Availability: Term 10, Term 20, Term Plus, Whole Life 100 and Term 100.

- **Child Rider (CR) – only one Child Rider is allowed per joint insurance policy**

Availability: Term 10, Term 20, Term Plus, Whole Life 100, Term 100 and Universal Life products.

- **Accidental Death and Dismemberment (AD&D)**

The rate will then be calculated according to the actual age of each insured.

Availability: Term 10, Term 20, Term Plus, Whole Life 100, Term 100 and Universal Life products.

- **Benefit in case of Fracture**

Availability: Term 10, Term 20, Term Plus, Whole Life 100, Term 100 and Universal Life products.

## 7.2. Premium Deposit Account (PDA)

It is possible to deposit, for all insurance plans, an amount corresponding to premiums paid in advance. To ensure that the insurance policy remains tax exempt, a T5 slip (interest taxation) is sent on an annual basis.

- **Detailed procedures**

- The additional deposit, also available on existing policies, must be made at the time of issue or on each subsequent anniversary date.
- No guarantee will be given as to the number of future premiums that can be paid by a deposit.
- The renewal premium will be automatically withdrawn from the premium deposit account. When the account is down to zero, the normal invoicing process will be reinstated.
- No commission will be paid when the deposit is made. However, the regular service commission will be paid to the advisor for each premium taken from the deposit account.
- A one-year guaranteed interest rate will be credited on the deposit.
- A T5 slip (interest taxation) will be sent each year to the policyowner.
- There will be no penalty when the premium deposit account is surrendered, but the market value principle will be applied.

## 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.



**For more information,  
go to [ssq.ca](http://ssq.ca).**

The purpose of this document is to provide a summary description of an insurance product offered by SSQ Insurance Company Inc. It is not intended to describe all the provisions, exclusions and limitations applicable to a benefit or to a specific insurance policy. For a complete description of the provisions, exclusions and limitations, please refer to the policy.