



# Critical Illness Recovery Plan Product Summary



Insurance

The Critical Illness Recovery Plan™ offered by RBC Insurance® pays an agreed-on benefit amount if you are diagnosed with a serious illness, such as cancer, a heart attack or a stroke. Facing a critical illness can be one of the most difficult challenges in life. There is so much to consider, from finding proper care to meeting your family’s day-to-day needs. The Critical Illness Recovery Plan is designed to help you when you need it most.

This document summarizes some of the most important things to consider as you decide whether this insurance product meets your needs.

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*This Product Summary provides an overview of our Critical Illness Recovery Plan. It is not part of the policy contract. For full product details and definitions, please review the policy contract.*

*Throughout this document, the use of “you” or “your” refers to the person insured by the policy.*

## 1. How can critical illness insurance help me?

Critical illness insurance will pay you an agreed-on benefit amount if you are diagnosed with a covered serious illness. The types of illnesses covered under critical illness insurance differ across products and insurance providers, but usually cancer, heart attack and stroke are included.

**The money can be used in any way you choose. Some examples are:**

### To maintain financial stability

- Pay bills, mortgage or loan payments and other living expenses
- Keep a business going; pay business expenses or hire staff
- Protect or grow savings for retirement, education, etc.

### To support treatment and recovery

- Make changes to a home or vehicle or other changes that accommodate special needs
- Pay for specialized medical treatment, out-of-country treatment or treatments not covered by the government
- Pay for service to help in recovery, such as post-surgery care or rehabilitation services

### To take time off work

- Focus on yourself
- Spend time with loved ones
- Travel

Critical illness insurance may be right for you if you:

- worry about how you would pay your bills or save for the future if you became critically ill
- would want to take time off work to spend with loved ones while you are critically ill
- want additional funds to cover unplanned costs resulting from being critically ill
- want access to specialized medical support services if you become critically ill (as offered for free by RBC Insurance) or
- do not have or qualify for insurance that replaces your income if you cannot work due to an illness

Get trusted guidance from a licensed insurance advisor, who will help you make the best choice. They will also support you through the application process. To apply for critical illness insurance, you will need to complete an application form, which will include questions about you and your medical history.

- Your occupation, financial situation and activities help us understand the coverage that is right for you.
- Your health experiences and those of your family members are strong indicators of the health risks you may face.

There are some limitations to the coverage (including a survival period after diagnosis) and when benefits will be paid. Be sure to review Section 3.4 below for details.

## 2. Why should I choose the Critical Illness Recovery Plan?

### 2.1 Get coverage for a broad range of illnesses

With the Critical Illness Recovery Plan, you may qualify for the full benefit amount if you are diagnosed by a medical specialist with any of the following:

- Cancer (life-threatening): Includes carcinoma, melanoma, leukemia, lymphoma and sarcoma. A detailed explanation of a life-threatening cancer is included in the policy contract.
- Heart attack
- Heart condition requiring:
  - Aortic surgery
  - Coronary artery bypass surgery
  - Heart valve replacement or repair
- Stroke
- Other brain diseases:
  - Bacterial meningitis
  - Benign brain tumor
  - Multiple sclerosis
  - Motor neuron disease
  - Dementia including Alzheimer’s disease
  - Parkinson’s disease and specified atypical parkinsonian disorders
- Loss of sense, limb or mobility:
  - Blindness (total and irreversible in both eyes)
  - Deafness (total and irreversible in both ears)
  - Loss of speech (total and irreversible loss)
  - Loss of limbs (total severance of two or more limbs)
  - Paralysis (total loss of muscle function of two or more limbs)
- Organ failure/transplant:
  - Kidney failure
  - Major organ failure on waiting list
  - Major organ transplant
- Other:
  - Coma
  - Aplastic anemia
  - Loss of independent existence
  - Occupational HIV infection (accidental infection while you are working)
  - Severe burns

In addition, you may qualify for 10% of the benefit amount (up to \$50,000) the first time you are diagnosed with an early stage cancer from this list:

- Early prostate cancer
- Early skin cancer
- Early stage intestinal cancer
- Early thyroid cancer
- Early stage blood cancer
- Early stage breast cancer

If you require a coronary angioplasty, you may also qualify for 10% of the benefit amount (up to \$50,000).

In all cases, to qualify for the benefit amount, you must complete the survival period that is defined for each condition. Information on survival periods is in Section 3.1 below.

### 2.2 Choose the amount and options that are right for you

Define the amount of coverage:

- The benefit amount can range from \$25,000 to \$2,000,000.

Select how long you are covered for:

- Until you are 65 or
- Until you are 75

Choose the pricing option to fit your budget:

- The cost of insurance is set for 10 years and resets for each 10-year period, or
- The cost of insurance is set for the length of the contract (to age 75), but it will cost a little more, or
- The cost of insurance will be lower initially, but the cost may increase over time. This increase will only happen if there is an increase in the risk of illness for an entire group of policyholders sharing similar characteristics. Your policy will not be singled out for an increase. If the price is changing, we will notify the policy owners.

	Plan 1	Plan 2	Plan 3	Plan 4
<b>Plan description</b>	10-year term Renewable to age 75	Level cost to age 75	Renewable to age 65	Renewable to age 75
<b>Coverage amount</b>	\$25,000 to \$2,000,000			
<b>Age to apply</b>	18-64	18-65	18-60	18-65
<b>Length of coverage</b>	To age 75	To age 75	To age 65	To age 75
<b>Pricing option</b>	Fixed cost for each 10-year period	Fixed cost	Cost could increase	Cost could increase
<b>Option to change your critical illness plan</b>	Yes	No	No	No
<b>Cancellable by RBC Insurance</b>	No	No	No	No
<b>Relative cost</b>	\$ (for the first 10 years)	\$\$\$	\$\$	\$\$
<b>Sample policy contract</b>	<a href="#">10-year term Renewable to age 75</a>	<a href="#">Level cost to age 75</a>	<a href="#">Renewable to age 65</a>	<a href="#">Renewable to age 75</a>

The actual cost of the insurance will depend on:

- Your age, gender and smoking status
- Your health and medical history
- The approved amount and type of coverage

Your insurance advisor will help you select which plan is right for you and guide you through the application process. It is important to provide complete and accurate information when buying critical illness insurance. If any of the information is found to be incomplete or inaccurate, the coverage may be void and a claim may not be paid.

Insurance coverage will start on the effective date approved for your policy provided that:

- The policy has been delivered to you
- Any requirements defined when the policy was delivered have been completed, and
- The information included with your application has not changed

This policy will end on the earliest of:

- The date the full benefit amount is paid
- The date the policy is converted to a long term care insurance policy
- The policy anniversary date in the year you turn 65 or 75 based on the plan chosen
- The date we receive a policy cancellation request from the policy owner (see section 4.2 Cancel the insurance policy)
- 31 days after one of the scheduled payments for the policy remains unpaid
- The date of your death

## 2.3 Get free access to valuable medical support services

The Critical Illness Recovery Plan also offers valuable assistance services, which provide resources and support to help you through the entire process and keep you focused on your recovery. These services include:

**Teladoc Medical Experts<sup>‡</sup> service:** Offers access to health care resources, specialists and world renowned experts who will review your medical records to confirm your diagnosis.

**“The Healing Journey” program:** Provides support to help you deal with the stress associated with a critical illness.

## 2.4 Convert to long term care insurance

From age 55 to 65, all or some of the coverage can be converted to long term care insurance without providing health or medical information. There are some limitations on when the policy can be converted that are outlined in the contract. For example, the policy must have been active for at least two years and you must not have been diagnosed with a critical illness.

## 2.5 Include optional coverages

RBC Insurance offers the following optional coverages to further customize the Critical Illness Recovery Plan.

**Increase the benefit amount over 10 years.** The benefit amount will increase every two years for the first 10 years. The increases and the costs are set when the policy is purchased so you’ll know what to expect. You must be age 18-45 to apply for this coverage.

**Get a refund if you die while the policy is active.** If you die while the policy is active, we will refund the cost of insurance for this policy to the policy owner or the policy owner’s estate. The cost of insurance will be calculated as the total amount paid by the policy owner for the duration of the policy, without interest, to a maximum refund of \$2,000,000.

**Don’t pay while unable to work because you are injured or ill.** If you become ill or injured and cannot work for more than 90 consecutive days in any occupation that aligns with your education, training or experience, we will:

- Waive the regular payments for your Critical Illness Recovery Plan for as long as you are unable to work and
- Refund the payments for your Critical Illness Recovery Plan that were made while you were unable to work after the start of your illness or injury

You must be age 18-55 to apply for this coverage.



## 3. How do I make a claim?

### 3.1 Qualify to receive the benefit amount

RBC Insurance will pay the critical illness benefit if:

- You are diagnosed with, or have surgery for, one of the covered critical illnesses listed in Section 2.1 above. The contract outlines the requirements that must be evaluated to confirm the diagnosis – including specific tests or symptoms and required timelines;

*and*

- After diagnosis, you complete the survival period applicable to that critical illness. The minimum survival period for most conditions is 30 days. There are a few exceptions listed below:

Survival period is 90 days for:

- Bacterial meningitis
- Loss of independent existence

Survival period is 180 days for:

- Loss of speech
- Multiple sclerosis

### 3.2 Submit a claim

Dealing with a critical illness can be stressful. We are here to help support you and make things as easy as possible.

If you receive a diagnosis of a critical illness covered within the policy, you should notify RBC Insurance in writing within 90 days of your diagnosis. We understand that given the diagnosis, this may not always be easy. You may submit your claim form up to one year after diagnosis.

To start your claim, contact RBC Insurance at **1-877-519-9501** or [intake@rbc.com](mailto:intake@rbc.com). We will provide claim forms for you and your medical specialist to complete. There may be times when we need more information to support your claim. In that case, we will contact both you and your medical specialist.

### 3.3 Receive the benefit amount

When the claim is approved, RBC Insurance will pay you the benefit amount unless the policy owner has declared that someone else should receive it. Payment will be made within 60 days of receiving your completed claim forms and all the information we requested from your medical specialist.



### 3.4 Situations where a claim may not be approved

There are certain situations where we will not pay benefits, provide services or waive monthly payments. This includes situations where a critical illness occurs as a result of:

- Intoxication by drugs, alcohol or otherwise
- Abuse of prescription or non-prescription drugs or alcohol, or other substance abuse
- A suicide attempt or other intentionally self-inflicted harm
- An act of declared or undeclared war, riot, insurrection or public disturbance or
- Committing or attempting to commit a criminal offence

We will not pay benefits for a covered critical illness if that critical illness was excluded at the time your policy was approved. If this is the case, we will list that critical illness by name in an endorsement or amendment to your policy contract that you sign at the time you buy your policy.

Coverage for cancers and benign brain tumors does not begin until 90 days after the policy becomes effective. In the policy these 90 days are called a moratorium period. During those 90 days, if you have signs, symptoms or investigations that lead to a diagnosis of cancer, your policy will not provide coverage for any form of cancer. During those 90 days, if you have signs, symptoms or investigations that lead to a diagnosis of benign brain tumor, your policy will not provide coverage for a benign brain tumor. Similar moratorium periods will apply if the policy ends and is then reactivated.

Coverage for Parkinson's disease and specified atypical parkinsonian disorders does not begin until one year after the policy becomes active. In the policy, this year is called a moratorium period. During this year, if you have signs, symptoms or investigations that lead to a diagnosis of Parkinson's disease or specified atypical parkinsonian disorders, your policy will not provide coverage for that critical illness. A similar moratorium period will apply if the policy ends and is then reactivated.

Please refer to the policy contract Exclusions and Limitations section for full details.





### 3.5 Appeal the decision if your claim is not approved

If your claim is not approved, we will call you to explain and provide our reasons to you in writing.

If you disagree with our decision, you have the option to appeal. You can submit the request directly to your claim specialist or email the claims intake team at [intake@rbc.com](mailto:intake@rbc.com). An independent appeals team within RBC Insurance will review your claim with the new information.

You will need to submit your appeal in writing within 90 days from the day we sent the written explanation of why your claim was not approved. You will need to outline your concerns and resolution expectations. You will also need to send us any new information or documentation to support your position. This could include:

- Physician's office notes
- Specialists' consultation reports or detailed narratives
- Results of any investigative procedures
- Restrictions and limitations placed on your activities
- Current and proposed treatment plan, including medications and dosages
- Response to treatment
- Financial/occupational details

There is a time limit for starting a legal action. The time limit varies by province and will depend on where you live. If you want to start an action in court, we recommend you seek independent legal advice on your rights and the applicable time limit.



## 4. How do I contact RBC Insurance?

### 4.1 Ask about an existing policy

The Critical Illness Recovery Plan is underwritten by RBC Life Insurance Company. Once the policy is active, you can contact us:



1-888-604-3434



RBC Life Insurance Company, P.O. Box 515, Station A, Mississauga, ON, L5A 4M3



[rbcinsurance.com](https://www.rbcinsurance.com)

You can also contact your insurance advisor at any time about the Critical Illness Recovery Plan.

### 4.2 Cancel the insurance policy

The policy owner can cancel the policy at any time.

In the first 10 days after the policy is delivered to the policy owner, they can cancel the policy and receive a full refund. The policy must be returned to their insurance advisor with written instructions to cancel the policy by midnight on the 10th day.

After 10 days, the policy owner can cancel the policy by contacting their insurance advisor or the RBC Insurance Client Service team at 1-888-604-3434 to get the cancellation forms. Once the forms have been completed and signed, they can be submitted to either the advisor or the Client Service team to be processed. The policy owner may also send a signed letter to RBC Insurance with directions to cancel the policy.

For more information on cancelling the insurance policy, please refer to the Premium Provisions and Termination of coverage sections of the policy contract.

### 4.3 Make a complaint

At RBC Insurance, we are committed to helping resolve any complaints in a timely manner. We encourage you to collect all the relevant information and contact us through one of the following methods:



1-800-461-1413



[feedback@rbcinsurance.com](mailto:feedback@rbcinsurance.com)

The complete process to file a complaint can be accessed at [rbc.com/customer-care](https://www.rbc.com/customer-care).

Thank you for considering RBC Insurance and the Critical Illness Recovery Plan. If you have any questions, please speak to your insurance advisor.



Insurance

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