
CRITICAL ILLNESS – PLAN DESCRIPTION

Face Amount: \$2,500

The CPCO critical illness insurance focuses on the four (4) most common critical illnesses:

1. **Cancer**
2. **Heart Attack (Myocardial Infarction)**
3. **Stroke**
4. **Renal (Kidney) Failure**

Critical illness insurance provides a lump sum benefit after the covered individual is diagnosed with any one of the 4 covered critical illness conditions as defined in the master policy and providing you survive for a period of thirty (30) days following the date of the initial diagnosis (or such longer periods as described in the master policy).

In addition, benefits will not be payable if you:

1. suffer a heart attack, or
2. have any symptoms or medical problems which initiate a investigation leading to the diagnosis of cancer,

within ninety (90) days following the effective date of coverage.

Critical illness coverage terminates on the earlier of a) termination of the Long-Term Disability coverage, or b) a Critical Illness benefit is paid. The critical illness benefit is payable only once during your lifetime.

Pre-existing exclusion – no critical illness benefit will be paid if you are attended to or received medical treatment, consultation, care or services by a physician, including diagnostic measure for any symptoms or medical problem which leads to a diagnosis or a treatment of a critical illness condition twenty-four (24) months immediately prior to the effective day of your coverage. Benefits are not payable as a result of any pre-existing critical illness unless the diagnosis of the critical illness condition occurs after twenty-four months from the effective date of your coverage.

DEFINITION OF CRITICAL ILLNESS

1. **Cancer**

Cancer means an invasive malignancy characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue.

First occurrence for cancer

If you (the insured person) have had any form of cancer prior to the policy date, a subsequent occurrence of cancer will not qualify for payment, even if the location or type of cancer differs from the first occurrence.

Cancer Exclusions

The following Cancers are specifically and totally excluded from coverage under this definition:

- carcinoma in situ;
- malignant melanoma to a depth of 0.75 mm or less and any skin cancer that has not spread beyond the deepest layer of the skin;
- chronic lymphocytic leukemia;
- stage "A" prostate cancer;
- Kaposi's sarcoma;
- pre-malignant lesions, benign tumors or polyps;
- stage 1 and 2 Hodgkin's Disease;
- Duke's A colo-rectal cancer; and
- cancer in the presence of HIV.

In addition to the specifically excluded cancers, if you (the insured person) have had any symptom or medical problem which initiated any investigation leading to the diagnosis of cancer which commenced prior to the ninety-first (91) day following the policy date, or most recent date of reinstatement, the critical illness benefit will not be payable.

2. Heart Attack (myocardial infarction)

Heart attack (myocardial infarction) means the death of a portion of the heart muscle as a result of inadequate blood supply. The diagnosis must be based on a specific event and consist of evidence of all of the following:

- 1) new electrocardiographic (ECG) changes indicative of a myocardial infarction, and
- 2) the elevation of cardiac enzymes.

An incidental finding of ECG changes suggesting a prior myocardial infarction, in the absence of a corroborating event, is not covered.

Heart Attack Exclusions

If you (the insured person) suffer a heart attack within ninety (90) days following the policy date, or most recent date of reinstatement, the critical illness benefit will not be payable.

No benefits will be payable for a heart attack occurring after the policy date you had coronary artery disease prior to the policy date or most recent date of reinstatement.

3. Stroke

Stroke means an acute cerebral vascular accident (CVA), producing neurological sequelae lasting more than thirty (30) days and caused by intracranial thrombosis, hemorrhage, or embolism from an extra-cranial source. There must be evidence of a measurable, objective neurological deficit.

Stroke Exclusions

No critical illness benefit will be payable for stroke occurring after the policy date if you (the insured person) have had any form of vascular or coronary heart disease prior to the policy date or most recent date of reinstatement.

Transient ischemic attacks (TIAs) are not covered. TIA is a brief focal neurological deficit that resolves without any permanent neurological impairment.

4. Renal (kidney) failure

Renal (kidney) failure means "end stage renal disease" presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular hemodialysis, peritoneal dialysis or renal transplantation is initiated.

CRITICAL ILLNESS – FAQ

Do I need disability insurance and critical illness insurance?

Yes, because these two types of insurance offer very different types of protection. Disability insurance will pay a monthly benefit that will help pay for day-to-day living expenses. Critical illness insurance, on the other hand, will pay a single lump sum benefit to help cover additional expenses associated with a critical illness.

What is the survival period?

You (the insured person) must survive 30 days following the date of the initial diagnosis. Sometimes longer periods are required so be certain to carefully read the details of your specific policy.

Are there any restrictions on how I use the money?

No, because everyone is different and will have different needs. Once you have received the money, it's yours to spend any way you wish.

What are my chances of suffering a critical illness?

Unfortunately, the risk of you or someone in your family suffering a critical illness is more likely than you might think. Consider the following statistics:

- 1 in 2 men and 1 in 3 women aged 40 and under will develop coronary heart disease
- 40, 000 to 50,000 Canadians suffer a stroke each year
- 1 in 2 Canadians will develop cancer
- More than 50,000 Canadians have Multiple Sclerosis
- Surviving a critical illness is also more likely
- 95% of hospitalized heart attack victims survive the initial occurrence
- 75% of stroke victims survive the initial event

What kinds of expenses are often associated with a critical illness?

The exact kinds of expenses associated with a critical illness will vary from person to person. But there are some things that you can ask yourself to help you determine whether or not you're comfortable with your level of coverage. For example, if you or a family member had a critical illness, could you afford to:

- renovate your home to accommodate your illness, doing such things as building a wheel chair ramp or modifying your kitchen, bathroom, doorways and stairs?
- purchase lifestyle equipment such as a motorized wheelchair or specially equipped vehicle?
- provide home care, a private nurse or arrange for help with childcare, home cleaning and meal preparation? seek non-insured treatment outside of Canada, which would ultimately mean additional expenses such as airfare, car rental, accommodations and non-insured medical and drug costs?

How do you submit a claim?

Should you be diagnosed with one of the critical illnesses covered under your plan, simply call our Claims Department at **1.877.709.5853** or email at **cpcoclaims@johnson.ca**. Our staff will forward the required claim forms to you and facilitate your claims submission to the insurer, the product insurer and claims payor.

Disclaimer:

This on-line Plan Description is an overview of the coverage available and is not a valid contract. If there are any discrepancies between this information and the Master Policy, the provisions of the Master Policy shall govern.