

ScotiaLife® Critical Illness Insurance

Important details on:

Definitions

Exclusions

Termination

Any covered critical illness benefit is payable only on an insured person's first covered critical illness. The insured person's coverage then terminates.

Definitions

Heart attack means a definite diagnosis of the death of heart muscle due to obstruction of blood flow, that results in a rise and fall of biochemical cardiac markers to levels considered diagnostic of myocardial infarction, with at least one of the following:

- heart attack symptoms;
- new electrocardiogram (ECG) changes consistent with a heart attack;
- 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. The insured person must survive for thirty (30) days following the date of diagnosis.

Exclusions: what is not covered

No benefit will be payable 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 definition provided for a heart attack.

Stroke (Cerebrovascular Accident) means 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 thirty (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. The insured person must survive for thirty (30) days following the date of diagnosis.

Exclusions: what is not covered

No benefit will be payable for:

- transient ischaemic attacks;
- intracerebral vascular events due to trauma; or
- lacunar infarcts, which do not meet the definition of a stroke.

Cancer (Life-Threatening) means 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. The Insured Person must survive for thirty (30) days following the date of diagnosis.

Exclusions: what is not covered

No benefit will be payable for:

- carcinoma in situ;
- 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);
- any non-melanoma skin cancer that has not become metastatic (spread to distant organs); or
- Stage A (T1a or T1b) prostate cancer.

Moratorium period exclusion

No benefit will be payable under this condition, if, within the first ninety (90) days following an insured person's effective date of coverage, the insured person has any of the following:

- signs, symptoms or investigations that lead to a diagnosis of cancer (covered or excluded under the Group Policy) regardless of the date of such diagnosis; or
- a diagnosis of cancer (covered or excluded under the Group Policy).

This information described above must be reported to our underwriter, Sun Life, within six (6) months of the date of the diagnosis. If this information is not provided, our underwriter has the right to deny any claim for cancer or any other covered critical illness caused by any cancer or its treatment.

What is not covered by this plan?

No benefits are payable for claims resulting directly or indirectly from any of the following:

- intentionally self-inflicted injury or attempted suicide, while sane or insane;
- the hostile action of any armed forces, insurrection or participation in a riot or civil commotion;
- participation in a criminal offence;
- use of illegal or illicit drugs or substances, misuse of drugs or alcohol;
- the death of the insured person during the required survival period.

No benefits are payable in respect of any illness, disorder, or surgery that is excluded or omitted from the covered critical illnesses.

When will your coverage end?

Your coverage will end on the earliest of the following:

- the first of the month coinciding with or next following your seventieth (70th) birthday;
- the date your premium is due, if you fail to pay the premium required to keep coverage in force, subject to a grace period;
- the first day of the month coinciding with or next following the date that Sun Life receives notification from you that coverage is to be cancelled;
- the date you cease to reside in Canada;
- the date the Group Policy terminates;
- the date a Critical Illness Insurance benefit is paid;
- the date of your death.

Who may be an insured person's attending physician

The diagnosis, surgery, treatment, tests or examinations performed to satisfy the covered critical illness definition may not be done by any medical doctor who is:

- the insured person himself, or
- any relative or business associate of the insured person.

The Certificate of Insurance contains a description of the principal provisions of the coverage. It will be sent to you in your welcome package if you are approved for coverage. Coverage is subject to all the provisions contained in the applicable Group Policy. In the event of any conflict between any documents, including this brochure and the Certificate of Insurance, the Group Policy shall govern.

ScotiaLife Critical Illness Insurance is underwritten by Sun Life Assurance Company of Canada.

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