



Optional Critical Illness Plan

No Medical
Evidence
Required!





CRITICAL ILLNESS INSURANCE PROTECTION FOR YOU AND YOUR FAMILY

Critical Illness insurance provides a lump sum benefit following the diagnosis of a covered condition that can be used any way the insured wishes.

Coverage is available to all eligible employee members and spouses under age 65, as well as eligible dependent children.

WHAT IS THE RISK?

Despite the staggering increase of incidents of the most common critical conditions—cancer, heart attack and stroke—we continue to see a DECREASE in mortality rates. This is GREAT NEWS, but it can come with a hefty price tag.

Provincial plans do not take care of all that is needed when an individual is diagnosed with a critical condition. At a time when incomes are potentially reduced, and expenses increase (due to medical needs), a critical illness plan is the best way to fund a possibly lengthy recovery period.

DID YOU KNOW?

An estimated 196,900 new cases of cancer occurred in Canada in 2015¹.

- There are an estimated 70,000 heart attacks each year in Canada. That's one heart attack every 7 minutes².
- Up to 40,000 cardiac arrests occur each year in Canada. That's one cardiac arrest every 12 minutes².
- There are estimated 62,000 strokes in Canada each year. That's one stroke every 10 minutes².

1. Canadian Cancer Society 2. Heart and Stroke Foundation

WHERE DOES CRITICAL ILLNESS FIT?

Critical illness is a tax-free lump sum benefit (based on current CRA guidelines) paid when you are diagnosed with one of the listed covered conditions. It is insurance that helps fill the gap between life and disability insurance by providing coverage for conditions that are life altering.

When an individual receives the news they have been diagnosed with a critical condition and are bracing themselves for a long recovery battle, the emotional impact is immeasurable. Critical illness coverage provides the kind of financial assistance that allows an individual to focus on the important things during recovery, like getting better!

WHAT CONDITIONS ARE COVERED?

- Heart Attack
- Cancer
- Stroke
- Kidney Failure
- Coronary Artery Bypass Surgery
- Blindness
- Paralysis
- Major Organ Transplant
- Multiple Sclerosis
- Amyotrophic Lateral Sclerosis
- Alzheimer's Disease
- Coma
- Deafness
- Parkinson's Disease
- Severe Burn

WHEN DOES THE POLICY PAY?

Benefits become payable if you are diagnosed, for the first time in your lifetime, with a listed covered condition and you survive 30 days (365 days for paralysis).

Coverage must be in effect for 90 days before a diagnosis of cancer is eligible. This benefit payment does not replace or reduce disability coverage.

The benefit amount is only payable once, even if an insured suffers or undergoes more than one of the covered conditions.

WHEN DOES COVERAGE TAKE EFFECT?

Coverage begins on the first day of the month after your application is received by Johnstone's Benefits.

WHEN DOES COVERAGE TERMINATE?

Coverage ends when you terminate your employment, reach age 65, request termination of this coverage, or when the master policy is terminated.

CAN I CONTINUE COVERAGE DURING A LEAVE?

If you are:

- laid-off on a temporary basis,
- temporarily absent from work due to short-term disability,
- on leave of absence, or
- on maternity or paternity leave,

coverage will be extended for 12 months following the beginning of any such absence, provided premiums continue to be paid.

CAN I CONVERT MY COVERAGE?

On the date of termination of employment, or during the 31 day period following termination of employment, you may convert your insurance to an individual insurance policy of Chubb Life. The individual policy will be effective either as of the date that Chubb Life receives the application or on the date that coverage under the group policy ceases, whichever occurs later. The premium will be the same as a person would ordinarily pay when applying for an individual policy at that time.

HOW MUCH CAN I PURCHASE AND WHAT WILL IT COST?

You and your spouse may each purchase up to \$100,000 of coverage in units of \$25,000 without medical evidence.

You can also add \$3,000 of coverage for your dependent children to either yours or your spouse's coverage.

Premium rates are 5-year age-banded and increase with age. In order to qualify for non-smoker rates you must not have smoked tobacco products 12 months prior to the date of enrollment.

Age	Monthly Rate per \$25,000			
	Non-Smoker		Smoker	
	Male	Female	Male	Female
Under 25	4.35	3.75	4.95	4.20
25-29	5.70	4.85	6.40	5.50
30-34	7.40	6.30	8.35	7.15
35-39	7.75	7.10	14.55	13.35
40-44	11.65	11.35	21.85	21.35
45-49	19.10	16.50	45.85	39.55
50-54	32.50	24.70	77.95	59.35
55-59	53.75	35.80	145.70	97.05
60-64	80.65	50.15	218.60	135.85

Monthly Rate for \$3,000 Dependent Children Coverage \$ 0.50/month

Because you are being provided with coverage without answering any medical questions, a pre-existing medical condition limitation is applied to this coverage.

PRE-EXISTING MEDICAL CONDITION

If an insured suffers a sickness or sustains an injury for which medical advice, consultation, investigation, or diagnosis was sought or received, or for which treatment was required or recommended by a doctor, during the 24 months immediately prior to the effective date of coverage, or prior to any increase in the amount of coverage and, which directly or indirectly causes the specified covered condition to occur within the first 24 months from the effective date of coverage, or from any increase in the amount of insurance, a benefit will not be payable.

IF I QUIT SMOKING CAN MY PREMIUM CHANGE?

If you are covered on the basis that you are a smoker and subsequently cease smoking for twelve consecutive months, then you may notify Chubb Life and your premiums will be lowered to the non-smoking rates.

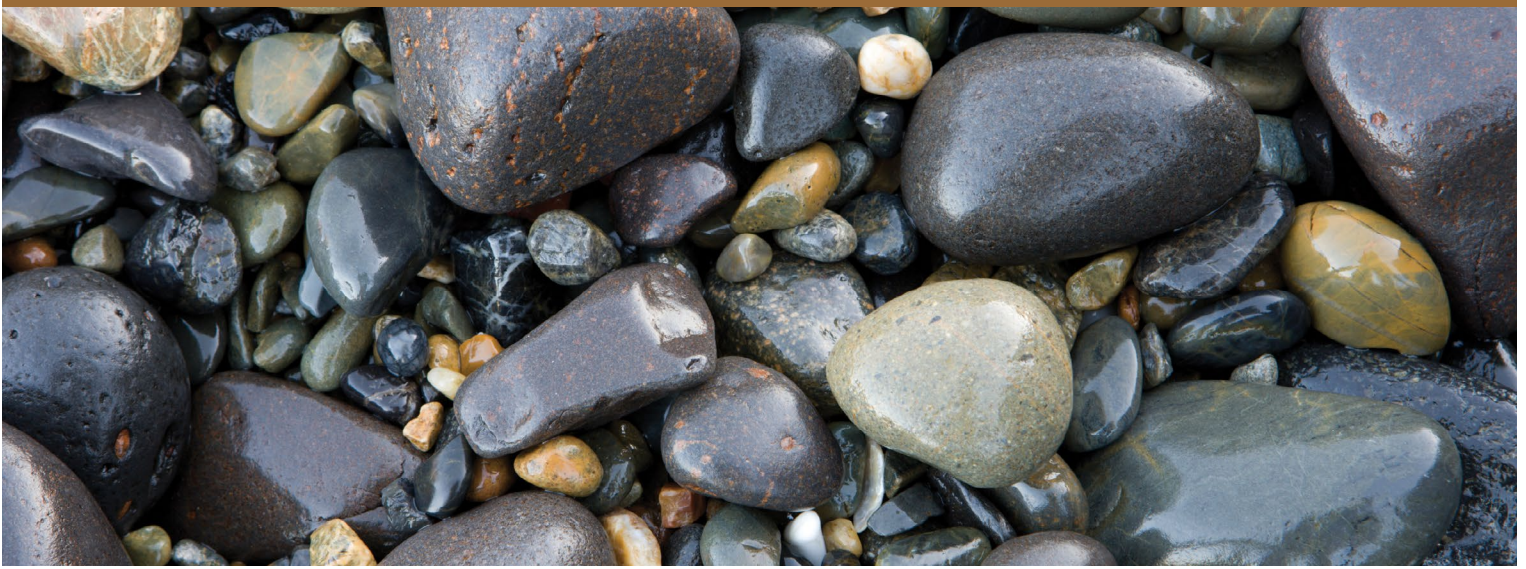
WHEN WILL THE COVERAGE NOT PAY?

The insurer will not pay benefits if diagnosis is caused directly or indirectly, or resulted from:

- intentionally self-inflicted injury; suicide or any attempt thereof, while sane or insane;
- declared or undeclared war or any act thereof;
- injury or sickness, other than the listed covered conditions even though such injury or sickness may have been complicated by one of the covered conditions;
- a complication of human immunodeficiency virus (HIV) infection or any variance thereof including AIDS and AIDS-related complex;
- the use, existence or escape of nuclear weapons; material or ionizing radiation from or contamination by radioactivity from any nuclear fuel or waste from the combustion of nuclear fuel;
- the commission or attempted commission of any act which if adjudicated by a court would be an illegal act under the laws of the jurisdiction where the act was committed;
- misuse of medication or the abuse of drugs or intoxicants;
- a pre-existing medical condition – see PRE-EXISTING MEDICAL CONDITION SECTION.
- any covered condition diagnosed prior to the effective date of coverage.

This summary is intended only as an outline of the insurance plan for your general guidance. A group critical illness insurance policy issued by Chubb Life Insurance Company of Canada (referred to herein as Chubb Life) sets forth in detail the terms and conditions of the plan.

The master policy shall be the governing instrument in all circumstances



Optional Critical Illness Plan

For further details about this and other products contact



Johnstone's Benefits
3095 Woodbine Drive
North Vancouver, BC V7R 2S3
Phone: 604-980-6227
Toll Free: 1-800-432-9707
Fax: 604-983-2935
Website: www.jbenefits.com

Underwritten by
Chubb Life Insurance Company of Canada

CHUBB®

solid group plans made simple

