

Benefit Summary

This summary must be read together with the benefits described in this booklet.



Employee Critical Illness Insurance \$10,000

CRITICAL ILLNESS INSURANCE

If you are diagnosed with one of the illnesses defined below while you are insured, Great-West Life will pay you the critical illness insurance benefit. Check the **Benefit Summary** for the amount. The benefit is payable after a waiting period of 30 days following the date of diagnosis or at the end of the waiting period, if any, specified for the condition below, whichever is longer. In addition to this benefit, provided it is \$10,000 or more, Great-West Life will make a \$500 donation in your name to a registered charitable organization of your choice. Only one critical illness benefit is payable in your lifetime. Once a benefit has been paid, no further critical illness insurance is available.

Your critical illness insurance terminates when you reach age 65.

Covered Illnesses

Any of the following conditions is considered a critical illness if it meets the defined criteria and has been diagnosed by a physician practicing medicine in Canada or the United States. For all of the listed covered illnesses, testing performed or diagnoses provided outside Canada or the United States must be confirmed by Best Doctors[®].

- **“heart attack”** - means the acute presentation of heart symptoms accompanied by the death of a portion of heart muscle as a result of inadequate blood supply and as evidenced by:
 - new electrocardiographic (ECG) changes indicative of a myocardial infarction; and
 - the elevation of cardiac markers to levels considered diagnostic for acute myocardial infarction in accordance with the standardized laboratory values for the accredited hospital in Canada or the United States performing the test and with criteria published by one of the following, or a successor organization:
 - (a) the Canadian Cardiovascular Society
 - (b) the American Heart Association.
 - (c) the American College of Cardiology.

For greater certainty, all of the above conditions must be met to satisfy the definition of heart attack. What is commonly referred to as "silent myocardial infarction" may include an incidental finding of ECG changes suggesting a prior myocardial infarction. However, in the absence of a corroborating elevation of cardiac markers as required above under this definition, it does not satisfy the definition of heart attack.

Heart attack does not include elevated cardiac markers after coronary angioplasty unless there are diagnostic changes of new Q wave infarction on the ECG.

- "**stroke**" - means a cerebrovascular event producing neurological sequelae lasting more than 30 days and caused by intracranial thrombosis or haemorrhage, or embolism from an extra-cranial source. There must be evidence of measurable, objective neurological deficit.

For greater certainty, findings on imaging studies, such as lacunar infarcts, which are not compatible with clinical neurological signs due to a cerebrovascular event, do not satisfy the definition of stroke.

Stroke does not include transient ischemic attacks.

For the purposes of this definition, transient ischemic attack means a neurological event caused by focal brain or retinal ischemia with measurable objective evidence of neurological sequelae lasting less than 24 hours with or without imaging study changes.

- "**coronary artery bypass surgery**" - means surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts.

For greater certainty, other revascularization techniques, such as balloon angioplasty, laser relief of an obstruction, and other intra-arterial procedures do not satisfy the definition of coronary artery bypass.

For the purposes of the benefit payment waiting period, the date of diagnosis will be the date the surgery is performed.

- **"life-threatening cancer"** - means a tumour characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue. Life-threatening cancer does not include the following forms of cancer:
 - carcinoma in situ
 - malignant melanoma to a depth of 0.75 mm or less
 - basal cell carcinoma and squamous cell carcinoma of the skin that have not metastasized
 - early prostate cancer diagnosed as T1a or T1b
 - any tumour in the presence of any human immunodeficiency virus (HIV)

- **"kidney failure"** - means end stage renal disease resulting in chronic irreversible failure of both kidneys to function. Regular haemodialysis, peritoneal dialysis or renal transplantation must be initiated as a result of the kidney failure.

- **"blindness"** - means the irreversible loss of sight of both eyes with either:
 - the corrected visual acuity being less than 20/200 in both eyes; or
 - the field of vision must be less than 20 degrees in both eyes.

The findings used in the diagnosis of blindness as defined above, must be confirmed by a physician who is an ophthalmologist.

- **"major organ transplant"** - means the person, due to the irreversible failure of a heart, lung, liver, kidney, or bone marrow:
 - receives such organ or tissue by transplant surgery; the replacement organ or tissue must be from a donor suitable under medical guidelines generally accepted in Canada or the United States; or
 - is in immediate need of a transplant which has been confirmed by a transplant team of a hospital or other recognized transplant centre in Canada or the United States that performs the required form of transplant surgery.

For the purposes of the benefit payment waiting period, the date of diagnosis will be the date the surgery is performed or the date he has been confirmed to be in immediate need of such transplant, whichever is earlier.

- **“Alzheimer’s disease”** - means Alzheimer's disease:
 - supported by evidence of progressive deterioration of memory and the ability to reason and perceive, understand, express and give effect to ideas, in accordance with the criteria listed for Alzheimer's disease in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Ed. (DSM-IV); and
 - where the severity of the condition is such that the person is incapable of independent living and requires a minimum of 8 hours of daily supervision.

Alzheimer’s disease does not include any other dementing brain disorders or psychiatric illnesses.

- **“Parkinson’s disease”** - means primary idiopathic Parkinson's disease, resulting in significant neurological impairment or in loss of cognitive function.

The degree of neurological impairment or loss of cognitive function must be sufficient to cause an inability to perform 2 or more of the following 6 activities of daily living while participating in a drug treatment program generally accepted in Canada or the United States:

- dressing – the ability to put on, remove, fasten and unfasten all necessary clothing, braces, artificial limbs or other surgical appliances
- toileting – the ability to get to and from the toilet and complete related personal hygiene
- transferring – the ability to move into and out of a bed, chair or wheelchair
- feeding – the ability to get food from a plate into the mouth
- driving – the ability to legally operate a motorized vehicle
- mobility – the ability to walk 10 metres without aid

The diagnosis must include a current physical assessment from an occupational therapist who is not related by blood or marriage to the person, and is not in a business relationship with him.

- “**paralysis**” - means the total loss of voluntary movement of both arms, both legs, or one arm and one leg as a result of injury or disease of the nerve supply to the corresponding limbs. The benefit payment waiting period for this condition is 90 days. During the waiting period paralysis must be continuous without any sign of improvement.
- “**multiple sclerosis**” - means clinically definite multiple sclerosis:
 - where there are at least 2 separate clinically documented episodes of well defined neurological abnormalities separated by at least one month and persisting for a continuous period of at least 6 months; and
 - with objective evidence of lesions at more than one site within the central nervous system as confirmed by modern investigative or imaging techniques in accordance with the criteria listed in Paty DW, et al. MRI in the Diagnosis of MS (Neurology 1988;38:180-185).

The findings used in the diagnosis of multiple sclerosis, as defined above, must be confirmed by a physician who is a neurologist.

- “**deafness**” - means the irreversible loss of hearing in both ears, with an auditory threshold averaging 90 decibels or greater at frequencies of 500, 1000 and 2000 hertz in each ear.
- “**loss of speech**” - means the total and irreversible loss of the ability to speak due directly to damage to the speech organs (commonly known as the “voice box”) as the result of injury or disease.
- “**coma**” - means a state of unconsciousness for a continuous period of 96 hours from which the person cannot be aroused and in which external stimulation will produce no more than primitive avoidance reflexes. Life support must be required throughout the period of unconsciousness.

- **"severe burns"** - mean third degree burns over at least 20% of the body surface as measured by the Lund and Browder Chart.
- **"aortic surgery"** - means surgery to remove and replace the diseased thoracic or abdominal aorta with a graft.

For greater certainty, surgical replacement of the branches of the aorta does not satisfy the definition of aortic surgery.

For the purposes of the benefit payment waiting period, the date of diagnosis will be the date the surgery is performed.

- **"benign brain tumour"** - means a non-malignant tumour arising from the brain or its meninges. The benign histologic nature of the tumour must be confirmed by examination of tissue by biopsy or surgical excision.

For greater certainty, the following do not satisfy the definition of benign brain tumour:

- haematomas, cysts or granulomas
- intracranial malformations of the arteries or veins
- tumours in the pituitary gland, spine or cranial nerves

- **"heart valve replacement"** - means surgery for the replacement of any heart valve with either a natural or mechanical valve.

For greater certainty, heart valve repair does not satisfy the definition of heart valve replacement.

For the purposes of the benefit payment waiting period, the date of diagnosis will be the date the surgery is performed.

- **"loss of independent existence"** - means a condition that qualifies under the definition of physical impairment or cognitive impairment set out below and for which there is no reasonable chance of recovery based on the then current medical practice in Canada or the United States.

Physical impairment means the inability to independently perform, whether with or without the use of any equipment, 2 or more of the following 6 activities of daily living:

- bathing – the ability to wash oneself in a bathtub, shower or by sponge bath
- dressing – the ability to put on, remove, fasten and unfasten all necessary clothing, braces, artificial limbs or other surgical appliances
- toileting – the ability to get to and from the toilet and complete related personal hygiene
- bladder and bowel continence – the ability to manage bowel and bladder functions, with or without any protective undergarments or surgical appliances, so that a reasonable level of hygiene is maintained
- transferring – the ability to move into and out of a bed, chair or wheelchair
- eating – the ability to consume food that has already been prepared and made available

The diagnosis for the condition must be accompanied by a current physical assessment from an occupational therapist who is not related by blood or marriage to the person, and is not in a business relationship with him.

Cognitive impairment means mental deterioration and loss of intellectual ability, evidenced by deterioration in memory, orientation and reasoning, which is measurable by neuro-psychometric methods and results from demonstrable organic cause, and where the severity is such that the person is incapable of independent living and requires a minimum of 8 hours of daily supervision.

For greater certainty, any mental or nervous disorder without a demonstrable organic cause, including but not limited to anxiety disorders, mood disorders, sleep disorders, pain disorders, personality disorders and psychotic disorders, does not satisfy the definition of cognitive impairment.

The benefit payment waiting period for this condition is 90 days. During the waiting period, the physical impairment or cognitive impairment must be continuous without any sign of improvement.

- **"loss of limbs"** - means the complete severance of 2 or more limbs at or above the wrist or ankle joint as the result of injury or medically required amputation.
- **"motor neuron disease"** - means upper or lower motor neuron degeneration progressing over a period of at least 6 months, and resulting in one of the following:
 - definite amyotrophic lateral sclerosis (commonly known as Lou Gehrig's disease) which satisfies the World Federation of Neurology El Escorial Revisited Criteria for ALS Diagnosis (Neurology 1998;50:768-772)
 - primary lateral sclerosis
 - progressive muscular atrophy
 - progressive bulbar palsy

Progressive pseudo bulbar palsy, which is not a motor neuron disease but is similar to motor neuron diseases in presentation, will be considered a motor neuron disease.

The findings used in the diagnosis of motor neuron disease, as defined above, must be confirmed by a physician who is a neurologist.

- **"occupational HIV infection"** - means human immunodeficiency virus (HIV) infection as a direct result of accidental exposure to HIV contaminated blood or bodily fluids during the course of the person's regular occupation.

The person must undergo a generally accepted medical testing procedure for HIV infection, performed by a duly licensed medical laboratory in Canada or the United States which is independent of any control by the person:

- within 14 days of the accidental exposure and the result must be negative; and
- between 90 days and 180 days after the accidental exposure and the result must be positive.

For greater certainty, non-accidental exposure including, but not limited to, sexual transmission or intravenous drug use does not satisfy the definition of occupational HIV infection.

Limitations

No benefits are paid for:

- a critical illness that is directly or indirectly related to a condition for which you received medical care within 24 months before your insurance started. This limitation does not apply:
 - if your illness is diagnosed after you have been continuously insured for 24 months, or
 - to any amounts of insurance for which evidence of insurability is required.
- cancer for which the diagnosis or any investigation leading to the diagnosis is initiated by any symptom or medical problem that arises within 90 days:
 - after your insurance started, or
 - after you apply for an increase in insurance that is subject to approval of evidence of insurability.

- occupational HIV infection unless all of the following terms are met:
 - the accidental exposure must have occurred in Canada or the United States while you were insured
 - the accidental exposure must have been reported to Great-West Life within 14 days of the accidental exposure
 - the accidental exposure must have been reported, investigated and documented in accordance with prudent workplace practices and any applicable legislation, regulations or guidelines; and
 - any available licensed treatment customarily recommended for protection against HIV must have been elected.

- a critical illness resulting directly or indirectly from or associated with any of the following:
 - intentionally self-inflicted injury, or attempt at suicide, while sane or insane
 - war, insurrection or voluntary participation in a riot
 - participation in a criminal offence or provoking an assault
 - use of any drug, poisonous substance, intoxicant, or narcotic, unless prescribed for the person by a licensed physician and taken in accordance with directions given by the licensed physician
 - operating a motorized vehicle while the blood alcohol level is higher than 80 milligrams of alcohol per 100 millilitres of blood.

No benefits are paid if death or irreversible cessation of all functions of the brain occurs during the benefit payment waiting period.

How to Make a Claim

- To claim benefits, ask your employer for a claim form. Complete it and return it to the address shown on the form.

- Claims should be submitted as soon as possible, but no later than 3 months after the end of the benefit payment waiting period or 3 months after the plan terminates, whichever is earlier.