

### Overview for the Members of the U.C.C.M Anishnaabe Police

#### What is critical illness insurance?

Critical illness insurance pays a lump sum benefit when an insured person is diagnosed with a covered critical illness and survives thirty days following the diagnosis.

#### Is this plan mandatory and who pays the premium?

You are automatically covered for the member only mandatory critical illness benefit of \$10,000. This coverage is provided at no cost to the plan member.

#### Do I have to answer any health questions?

There are no health questions to answer and member enrollment is guaranteed for the coverage amount of \$10,000.

#### How many illnesses are there and what are they?

You would be covered for the following 31 illnesses:

Alzheimer's Disease	Deafness	Loss of Independent Existence	Occupational HIV
Aortic Surgery	Dilated Cardiomyopathy	Loss of Limbs	Paralysis
Aplastic Anemia	Fulminant Viral Hepatitis Heart	Loss of Speech	Parkinson's Disease
Bacterial Meningitis	Attack	Major Organ Failure - Waiting	Primary Pulmonary
Benign Brain Tumour Blindness	Heart Valve Replacement	List Major Organ Transplant	Hypertension Progressive
Coma	Kidney Failure	Motor Neuron Disease	Systemic Sclerosis Severe
Coronary Artery Bypass Surgery	Life Threatening Cancer	Multiple Sclerosis	Burns
	Liver Failure of Advanced Stage	Muscular Dystrophy	Stroke

#### What is an early diagnosis benefit?

Early stages of certain illnesses are not always covered under critical illness insurance policies. If you are diagnosed with one of the four early stage illnesses covered under this plan, the plan will pay out 15% of your benefit amount, up to \$1,500, without any impact on potential future benefits. The four covered early stage illnesses are: Coronary angioplasty, Ductal carcinoma in situ of the breast, Stage A (T1a or T1b) prostate cancer, and Stage 1A malignant melanoma.

#### How do I enroll?

You will automatically be enrolled for mandatory critical illness coverage.

#### I have a pre-existing condition, will I still be covered?

The pre-existing condition exclusion is 24/24 which means that in the first 24 months of coverage, a claim cannot be made for a condition treated in the 24 months preceding the effective date of the insured person's coverage.

#### When is the Psychological Therapy Benefit payable?

If an insured person is diagnosed with a covered critical illness and a benefit is paid under this plan, the insured person will be reimbursed for reasonable and customary charges for treatment or counselling provided by a therapist or counsellor within 2 years from the date of diagnosis, up to a maximum of \$1,000.

#### I had cancer, should I still enroll in the program?

In certain circumstances, you could still receive a benefit for the diagnosis of another cancer or even the same cancer if it metastasizes. Payment of the full benefit amount is made upon subsequent diagnosis of Life Threatening Cancer when over 60 months have passed since the previous cancer diagnosis, and no treatment relating directly or indirectly to cancer has been received within that 60 month period (treatment does not include preventative medications and follow up visits to the doctor). For more details please consult the member booklet.

**What are some important things to know about the cancer benefits?**

No payment will be made if, within the 90 days following the effective date of the insured person's insurance, there has been diagnosis of cancer OR any sign, symptom or investigation that lead to a diagnosis of cancer, regardless of when the diagnosis is made. In the case of a cancer that manifests itself before the insured person's insurance effective date and recurs or metastasizes after the effective date, no payment will be made unless all the requirements in the "Cancer Recurrence Benefit" section have been met.

**When does my insurance start?**

Your insurance will begin on the 1st of the month coinciding with or following the date the enrollment is confirmed. However, you must be actively at work on the date that the insurance begins. If you are not actively at work on the date coverage would otherwise begin, the insurance will take effect on the date you return to work.

**How do I file a claim?**

Filing a claim is very simple. Notify Target Benefit Administrators of your claim, either in writing or verbally as soon as an insured person is diagnosed with a covered illness. Target Benefit Administrators will verify your coverage and notify the Insurer that they received a notice of claim from you. Target Benefit Administrators will send you claim forms and assist with the claim submission.

**What happens if I am diagnosed with more than one of the covered illnesses?**

When the insured is diagnosed with one of the covered illnesses for which a benefit has been paid, AND is diagnosed with a different covered illness at least 90 days after the payment, the insured will then be paid another equivalent benefit, subject to limitations described in the "Re-Entry Exclusions" section of the contract.

**When does the coverage terminate?**

The coverage terminates on the member's 70th birthday, or the date the participant ceases to be an active member of United Chiefs and Councils of Manitoulin Police Services, whichever occurs first. Please refer to the member booklet for full list of events that affect termination of coverage.

**Are there any exclusions?**

No benefit will be paid if the illness results directly or indirectly from one of the following situations: the insured person does not satisfy the 30-day survival period limitation; intentionally self-inflicted injury or sickness, whether the Insured Person is sane or insane; and the use of illicit drugs other than as prescribed, recommended or administered by or in accordance with instructions of a licensed medical practitioner.