Doctors of BC
Critical Illness Insurance
It’s always tough to think about, but as a doctor, you know it happens every day: a critical illness diagnosis. It’s difficult enough to deal with emotionally, so the financial difficulties it can cause can make a bad situation even worse. What’s most important is to focus on recovery.

Critical Illness Insurance is designed to help you reduce that financial stress if you’re diagnosed with a covered medical condition. It will provide you with a lump-sum payment that you can use however you choose. Not all medical costs are covered by disability insurance, supplemental health insurance and/or government health care plans. This plan can help fill the gaps in coverage so that you can maintain your lifestyle and reduce that financial stress.
Eligibility requirements

The Doctors of BC Critical Illness Insurance Plan is available to you, your spouse, and your dependent children. To be eligible, you must be:

1. A member of Doctors of BC or the Yukon Medical Association, and
2. A Canadian resident, and over the age of 18 and under the age of 65.

To be eligible for spouse coverage, your spouse must:

1. Meet the requirements of the definition of Spouse,
2. Be over the age of 18 and under age 65, and
3. Be a resident of Canada.

For any coverage issued without proof of good health, a member must be actively at work for at least 20 hours per week and a spouse must be actively pursuing normal activities.

Throughout this brochure, “I” and “you” will refer to you as the member as well as your spouse.

Here’s how Critical Illness Insurance can help

This plan helps you recover on your terms. It provides you with:

- **Freedom to spend your benefit as you wish**
  How you spend the benefit payment is entirely up to you. Use it to meet expenses not covered by your provincial health care plan or other existing insurance plan. Or use the benefit payment to pay outstanding debts such as your mortgage payments or line of credit, or the loss of income of a loved one while they take time off work to care for you.

- **A unique plan that complements your existing benefits**
  Unlike disability insurance, which provides income replacement for a period of time while you are unable to work, Critical Illness Insurance provides a lump-sum benefit whether or not you are able to work.

- **A living benefit**
  As long as you meet the conditions to receive a benefit payment, it’s paid to you even if you make a full recovery.

How to choose a coverage amount

Affordable coverage is available from a minimum of $50,000 to a maximum of $500,000, in units of $10,000. Coverage will become effective on the date the application is approved by Manulife and your first premium payment is received by Doctors of BC.

The amount of coverage you select will depend on your personal circumstances, such as your existing financial resources, the age of any dependent children you might have, the working status of your spouse, and your current expenses. To help determine how much coverage you may need, ask yourself if you became seriously ill, would you have enough protection to cover the financial impact of additional expenses and losses you may incur, such as:

- medicines and treatments not covered by your Extended Health Care plan or provincial health care coverage;
- loss of income if your partner or spouse is unable to work while caring for you;
- modifications you may need to make to your home;
- the cost for childcare or home caregiver.

Ideally, you may want enough insurance to cover day-to-day expenses and additional costs that may come with recovery, so you don’t have to deplete your hard-earned savings.
Covered critical conditions

The plan for you and your spouse covers 25 critical conditions (listed alphabetically):

- Alzheimer’s disease
- Aortic surgery
- Aplastic anemia
- Bacterial meningitis
- Benign brain tumor**
- Blindness
- Cancer**
- Coma
- Coronary artery bypass surgery
- Deafness
- Heart attack
- Heart valve replacement
- Kidney failure
- Loss of independent existence
- Loss of limbs
- Loss of speech
- Major organ failure on waiting list
- Major organ transplant
- Motor neuron diseases
- Multiple Sclerosis
- Occupational HIV infections
- Paralysis
- Parkinson’s disease
- Severe burns
- Stroke

**There is no coverage for cancer and/or benign brain tumour of any type if the insured is diagnosed with such condition and the diagnosis was made, or any symptom or medical problem was determined, which initiated the investigation leading to a diagnosis of cancer and/or benign brain tumour, within ninety (90) days following the effective date of the coverage. However, insurance coverage under all other covered illnesses excluding cancer and/or benign brain tumour will remain in force.

Pre-existing conditions limitation

For Critical Illness Insurance amounts issued without proof of good health, no benefit will be paid for any critical illness that occurs within 24 months of an insured person’s effective date of coverage, and that result from any injury, sickness or medical condition (whether or not they were diagnosed) for which an insured person:

- had symptoms, consulted a physician or other health care practitioner, or
- was provided any health-related care, advice or treatment, or
- that a reasonably prudent person with such injury, sickness or medical condition would have consulted a physician or any other health care practitioner.

Coverage is portable

If you are insured, you may continue your coverage under this plan anywhere in the world, subject to the policy exclusions under “What is not covered by this plan?” found within this brochure, provided you remain a member of Doctors of BC or the Yukon Medical Association (YMA). Doctors of BC has a low-cost out-of-province/Canada membership category to assist you in maintaining your insurance coverage.

Optional benefits

Optional waiver of premium provision

Waiver of premium is available to you and your spouse for purchase as an optional rider. If you or your spouse become totally disabled before age 65 and the disability lasts for at least six consecutive months, premiums for the insured’s Critical Illness Insurance coverage will be waived from the date of disability. This benefit will apply for as long as the insured person continues to be totally disabled and will end on the Premium Due Date that follows the insured person’s 75th birthday, or on the Premium Due Date if the insured turns 75 on that day. Totally disabled means the insured is unable to perform the duties of any occupation.
Coverage for dependent children

Your plan includes an optional child rider offering units of $5,000 to a maximum of $20,000. If added, the coverage amount chosen will apply to each child. And you pay one low premium no matter how many children you have or will have.

Your children are covered for the conditions listed on page 3, plus these six child-specific conditions (listed alphabetically):

- Cerebral Palsy
- Congenital Heart Disease
- Cystic Fibrosis
- Down’s Syndrome
- Muscular Dystrophy
- Type 1 Diabetes

Child moratorium

Critical Illness Insurance will be unavailable for children:

a) who are the Insured’s children and are born during the period beginning ninety (90) days prior to the effective date of the Insured’s coverage for Dependent Child Critical Illness and ending ten (10) months after such date, the Dependent Child Moratorium Period Exclusion applies.

b) who are the Insured’s children and are born or adopted later than ten (10) months after the effective date of the Insured’s coverage for Dependent Child Critical Illness, neither the Dependent Child Moratorium Period Exclusion or the Pre-existing Conditions provision apply.

c) other than those described above, the Pre-existing Conditions provision applies unless evidence of insurability is required for the Dependent Child’s coverage.

When benefits are paid

When you have Critical Illness Insurance, you’ll receive a benefit when these three steps occur:

1. the diagnosis of a covered condition or surgery for one of the covered conditions;
2. the completion of the prescribed survival period; and
3. the approval of the critical illness insurance claim.
**Affordable annual premiums**

As a member of Doctors of BC, you can take advantage of many benefits the association offers, including very affordable group rates for insurance. The rates are based on your age, gender and whether or not you smoke.\(^5\)

**Annual rates per $10,000 of base coverage (without rider).**

<table>
<thead>
<tr>
<th>Age</th>
<th>Non-Smoker</th>
<th></th>
<th>Smoker</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
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<td>Female</td>
</tr>
<tr>
<td>Under 30</td>
<td>$11.47</td>
<td>$10.91</td>
<td>$14.88</td>
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<td>30-34</td>
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* Renewal rates only.

**Additional annual rates per $10,000 for waiver of premium rider**

<table>
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<tr>
<th>Age</th>
<th>Non-Smoker</th>
<th></th>
<th>Smoker</th>
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<tr>
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<tr>
<td>70-75*</td>
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<td>n/a</td>
<td>n/a</td>
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</table>

* Waiver of premium provision ends at age 65.
Child rider annual rate per $5,000 of coverage

One annual rate regardless of how many children you cover!
You or your spouse need to purchase coverage in order to buy child coverage.

Child Rider Rates:

<table>
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<tr>
<th>Amount of Coverage</th>
<th>Rate</th>
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<tr>
<td>$5,000</td>
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<tr>
<td>$20,000</td>
<td>$126.72</td>
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</table>

How to calculate your annual premium:

- **Step 1**: Determine the amount of coverage you want. $100,000
- **Step 2**: Express it as units of $10,000 of coverage. $100,000/$10,000 = 10 units
- **Step 3**: Locate the base premium rate on the table based on your age, gender and smoking status. $11.47
- **Step 4**: If you wish to include the waiver of premium rider, add the corresponding premium. $0.69 + $11.47 = $12.16
- **Step 5**: Multiply the units of coverage by your premium rate to obtain your annual premium. $12.16 x 10 = $121.60
- **Step 6**: If you wish to include the child rider, determine the amount of coverage. $10,000
- **Step 7**: Add the corresponding premium to your annual premium. $63.36 + $121.60 = $184.96
What is not covered by this plan?
This benefit is not payable for claims resulting directly or indirectly from:
• declared or undeclared war, insurrection or rebellion;
• voluntary participation in a riot or act of civil disobedience;
• intentionally self-inflicted injuries or attempted suicide, regardless of whether the person has a mental illness or understands the consequences of their actions;
• the act of committing or attempting to commit a criminal offence;
• the use of illegal or illicit drugs or substances, misuse of drugs or alcohol; or
• the death of the insured during the required survival period.

When will the coverage under this plan terminate?
Your coverage will end on the earliest of the following:
• the date of termination of your membership in Doctors of BC or YMA;
• the Premium Due Date coincident with or next following your 75th birthday;
• the 1st of the month coincident with or next following the date any Critical Illness benefit is paid;
• the date we receive your written request to cancel coverage;
• the date the group policy is terminated by Doctors of BC;
• the date the premium is due if you fail to pay your premium, subject to the grace period;
• the date you die.

Coverage for your spouse ends:
• the date the policy no longer includes spouse coverage;
• the date of termination of your membership in Doctors of BC or YMA;
• the date the Critical Illness benefit is paid.

Coverage for dependent children will end on the earliest of the following:
• the date on which Doctors of BC terminates the Policy;
• the date you no longer have a dependent child;
• the 1st of the month following the date you fail to pay your dependent child premium payment, subject to the grace period;
• the date the Policy no longer includes dependent child coverage;
• the 1st of the month following the date any Critical Illness benefit is paid to you for such dependent child;
• the 1st of the month following the date the dependent child no longer satisfies the required definition; or
• the date that you no longer have Critical Illness coverage.
Guarantee of satisfaction

To help protect your financial future and your assets, Doctors of BC offers and administers a comprehensive array of insurance products that includes:

- INCOMEprotect™ for Practicing Physicians
- Physicians’ Disability Insurance (PDI) Plan
- Professional Expense Insurance
- Life Insurance
- Accidental Death and Dismemberment Insurance
- Critical Illness Insurance
- Health Benefits Trust Fund, providing health/dental benefits for physicians and office staff

Information and application forms for all Doctors of BC insurance plans may be found at doctorsofbc.ca/insurance.

To contact a Doctors of BC Insurance Administrator or to book an appointment with a non-commissioned Insurance Advisor:

Tel: 604 638 2904    Toll Free: 1 800 665 2262 ext 2904

Email: insurance@doctorsofbc.ca

This brochure provides the highlights and not the details of Doctors of BC Critical Illness plan.

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1 Spouse means your spouse by marriage or under any other formal union recognized by law, or a person of the opposite or same sex who has been publicly represented as your spouse for at least the previous 12 months and who is over the age of 18 and under age 65 at the date of becoming eligible for insurance.

2 Dependent child means your or your spouse’s child, other than a foster child, who is not married or in any other formal union recognized by law, and who is: under age 21, or age 21 or over but under age 25 who is a full-time student attending an educational institution recognized under the income tax act (Canada) and is entirely dependent on you or your spouse for financial support. A child who becomes handicapped before the limiting age continues to qualify as long as the child: a) is incapable of financial self-support because of a physical or mental disability, b) depends on you or your spouse for financial support, and c) is not married nor in any other formal union recognized by law. Whose application for insurance has been accepted by Manulife and for whom insurance is in force.

3 Diagnosis of a critical illness must occur after the effective date of coverage and you must complete a survival period (usually 30 days) and the claim is approved by Manulife. Based on the current tax laws, we believe that any cash benefit from a group critical illness insurance plan will not presently be taxed when the premiums are paid for by you and the benefit is payable to you.

4 At time of application. Critical Illness Insurance that does not require health information and will not cover any pre-existing medical conditions.

5 Rates are reviewed every year, may change, and will increase as you move into the next age band (at the time of renewal). Rates are calculated based on your age as of the effective date of coverage.

6 Premiums are subject to provincial sales tax within Ontario, Quebec or Manitoba.

7 A grace period of 31 days will be granted to the member for the payment of each premium falling due after the first premium. During the grace period the insured’s coverage will remain in force. The member will be liable to the Company for all premiums while coverage is in force, including during the grace period.

All claims must be approved by the Manufacturers Life Insurance Company. Doctors of BC administers the Critical Illness Insurance Plans, and is available to answer questions regarding coverage and provide any necessary forms.

This brochure provides the highlights but not all the details of Doctors of BC Critical Illness Insurance Plans. The complete terms, conditions, exclusions and limitations governing the insurance coverage are found in the group insurance policy number 59993 issued to the British Columbia Medical Association by The Manufacturers Life Insurance Company. If there is a discrepancy between information in this brochure and the policy, the policy takes precedence.

Manulife

Plans underwritten by

The Manufacturers Life Insurance Company (Manulife).