

Doctors of BC Accidental Death and Dismemberment (AD&D) Insurance

Affordable protection designed especially for Doctors of BC members



doctors of bc

Better. Together.

Accidents happen...

Doctors of BC Accidental Death and Dismemberment (AD&D) Insurance is designed to help protect you and your family against the financial burden of an unforeseen accidental injury or death.

Enjoy outdoors activities and travel with peace of mind knowing you are covered. Tax-free, lump-sum benefits are paid for covered losses occurring within 365 days of an accidental injury. Coverage is easy to apply for with automatic enrollment upon completion of a simple form, and no proof of good health required. Premiums are very low cost regardless of age or health and allows you coverage 24/7 anywhere in the world.

Who is eligible?

You are eligible to apply for AD&D insurance if you are:

- 1. under age 69 on the date of application; and,
- 2. an active member of Doctors of BC or YMA.

You can enroll for coverage for yourself only or for your whole family. All eligible members and their families are guaranteed enrollment in the plan upon completion of the application form. Proof of good health is not required.

Once enrolled, your coverage will remain in force until age 75, provided premiums are paid and you remain a Doctors of BC or YMA member.

Eligible members

How much coverage can I apply for?

AD&D insurance is available in units of \$100,000 up to a maximum of \$2,000,000. The amount you elect is your Principal Sum.

Eligible dependents

If you choose the family coverage option, you, your spouse and all of your dependent children will be insured for a percentage of your Principal Sum as follows:

Insured Member Selected Principal Sum

Spouse Only

(No Dependent Children) 50% of Principal Sum

Spouse and Dependent Children

Spouse 40% of Principal Sum Each Dependent Child 10% of Principal Sum

Dependent Children Only

(No Spouse) 15% of Principal Sum

"Spouse" means the lawful Spouse age 74 and under, or a partner of the same or opposite sex age 74 and under, who immediately prior to the loss resided with the Insured Member for at least 1 year, and who was publicly represented as the partner of the Insured Member during such period.

"Dependent Child" means unmarried child of the Member who is age 20 or under, or under age 25, unmarried, not regularly employed on a full-time basis, and is in full-time attendance in Post-Secondary education. The age limitations will not apply to an Insured Member's unmarried child who is incapable of self-support due to a mental disability or physical handicap.

"Insured Person" means any member or family member covered under an AD&D policy.

What are the benefits?

AD&D insurance provides payment for losses resulting from accidental bodily injury occurring anywhere in the world, 24 hours a day. In the event of your death, benefits will be paid to your named beneficiary. In the event of the death of one of your insured dependents, benefits will be paid to you.

Benefits for all other losses will be paid to you. For covered injuries resulting from and occurring within 365 days of an accident, the plan will pay:

Coverage Schedule

Loss of:	Benefit % of Principal Sum:
Life	100%
Both Arms or Both Legs	100%
Both Hands or Both Feet or Entire Sight of Both Eyes	100%
1 Hand and 1 Foot	100%
Either Hand or Foot and Sight of 1 Eye	100%
Speech and Hearing in Both Ears	100%
1 Arm or 1 Leg	75%
1 Hand or 1 Foot or Sight of 1 Eye	67%
Speech or Hearing in Both Ears	67%
Hearing (in 1 Ear)	33%
Thumb and Index Finger of Either Hand	33%
4 Fingers of Any 1 Hand	33%
All Toes on Any 1 Foot	25%
Quadriplegia (total paralysis of all 4 limbs)	200%
Paraplegia (total paralysis of both legs)	200%
Hemiplegia (total paralysis of 1 arm and leg on 1 side of body)	200%
Brain Death	100%
Use of Both Arms or Use of Both Legs	100%
Use of Both Hands or Use of Both Feet	100%
Use of 1 Hand and 1 Foot	100%
Use of Either Hand or Foot and Entire Sight of 1 Eye	100%
Use of 1 Arm or Use of 1 Leg	75%
Use of 1 Hand or Use of 1 Foot	67%

Only the largest amount (shown on the Coverage Schedule) is payable for all losses resulting from any 1 accident.

Benefits for loss of use shall be paid if the loss is permanent, total and irrecoverable and continuous for 12 months.

Loss of a hand or foot means severance at or above the





wrist or ankle joint.

Loss of an arm or leg means severance at or above the elbow or knee joint.

Loss of a thumb or index finger means severance at joint nearest the hand.

Loss of sight, speech or hearing means complete and irrecoverable loss.

Paralysis means total loss of use.

With regard to quadriplegia, paraplegia and hemiplegia, total paralysis means permanent and irrecoverable paralysis of such limbs.

The term "loss" with reference to Brain Death means irreversible unconsciousness with total loss of brain function and complete absence of electrical activity of the brain, even though the heart is still beating.

What are the air travel, exposure, and disappearance features? Air Travel

This Policy includes bodily Injury sustained while riding as a passenger in (but not while operating, learning to operate or serving as a member of a crew of) any aircraft having a valid airworthiness certificate and flown by a licensed pilot. This excludes injury during flights while crop dusting, crop spraying, seeding, sky-writing, racing, testing, exploration or any other purpose except transportation.

Exposure

If the Insured Person is unavoidably exposed to the elements because of a Covered Accident and sustains a loss as described in the Coverage Schedule within 365 days of the accident, it will be covered under this policy.

Disappearance

If the Insured Person disappears and his/her body is not found within 1 year after disappearance and sufficient evidence is produced to the Insurer that leads to the conclusion that he/she sustained accidental bodily injury and that such injury caused his/her death, the Insurer will pay the Principal Sum, provided that the person or persons to whom such sum is paid, signs an undertaking to refund payment if the Insured Person is subsequently found to be living.

What are the additional accident

benefits?

Unless specifically noted otherwise, the additional accident benefits below are paid in addition to any other AD&D benefits, provided the insured person is also eligible for a covered loss in the Coverage Schedule:

Comatose Benefit

(Applies to Member and covered Family members)
If you or your insured dependents become permanently comatose as a result of and within 365 days of an accident, you will be paid the principal sum, less any other amounts payable as result of the same accident.

"Comatose" means being in a state of total unconsciousness with no reaction to external stimuli or internal needs, persisting continuously with the use of life support systems, resulting in a neurological deficit for 31 consecutive days, after which, as determined by a licensed Physician, and in the opinion of the Insurer, is of a permanent nature.

Identification Benefit

(Applies to Member and covered Family members) In the event accidental loss of life is sustained by an Insured Person at least 50 kms from the Insured Person's normal place of residence and identification of the body by a member of the immediate family is requested by the police or a similar governmental authority, the Insurer will reimburse the reasonable and customary expenses for transportation and hotel accommodation to a maximum of \$15,000.

If transportation occurs in a vehicle other than by a licensed common carrier, then reimbursement of transportation expenses will be limited to a maximum of \$0.25 per kilometre travelled.

Rehabilitation Benefit

(Applies to Member and covered Spouse)

If you are accidentally injured and sustain a covered loss, and must undergo special training to engage in a new occupation, the Insurer will reimburse you for retraining expenses up to a maximum of \$15,000.

Funeral Expense Benefit

(Applies to Member and covered Family members)
If an Insured Person accidentally dies away from home, the Insurer will pay up to \$5,000 for the services and materials provided by a mortician, undertaker, crematorium or funeral home, related to the burial or cremation of the deceased Insured Person.

Repatriation Benefit

(Applies to Member and covered Family members)

If you or your insured dependents die due to an accident that occurred more than 50 kms from the Insured Person's residence, the Insurer will pay expenses incurred for preparation for burial/ cremation and transportation of the Insured Person to their place of residence, up to the maximum of \$15,000.

Home Alteration and Vehicle Modification Benefit

(Applies to Member and covered Family members) If you or your insured dependents are injured in an accident and permanently require a wheelchair, the Insurer will reimburse the one-time costs of home and/or vehicle modifications for wheelchair accessibility, up to the greater of \$15,000 or 10% of the principal sum to a maximum of \$25,000.

Rehabilitative Physical Therapy Benefit

(Applies to Member and covered Family members)
If you or your insured dependents are injured in an accident and Rehabilitative Physical Therapy is prescribed by the attending physician, the Insurer will reimburse you for such therapy up to a maximum of \$10,000.

"Rehabilitative Physical Therapy" means treatments through special exercises and equipment to facilitate the process of recovery from accidental injury to as normal a condition as possible. Surgical intervention is specifically excluded.

Spousal Retraining Benefit

(Applies to Member only, payable to Spouse)

If you die due a covered accident, your spouse will also be reimbursed for reasonable expenses incurred for formal occupational training, if they were not gainfully employed prior to the date of the accident. The Insurer will reimburse expense incurred to a maximum of \$15,000 within 3 years from the date of the accident.

Hospital Confinement Monthly Income Benefit

(Applies to Member and covered Family Members) If you or your insured dependent are hospitalized as a result of an accident for at least 1 day, the Insurer will pay for each full month of confinement, 1% of your principal sum to a maximum of \$2,500, or one-thirtieth of such monthly benefit for each day of a partial month. to an aggregate maximum of 365 days of inpatient hospitalization.

"Inpatient" means an Insured Person admitted to a Hospital as a resident or bed-patient.



Day Care Benefit

(Applies to Member and covered Spouse)

If you or your covered spouse die due to an accident and your children under the age of 13 require daycare within 365 days following your death, the Insurer will reimburse daycare expenses up to 5% of your principal sum, to a maximum of \$5,000 for up to 4 consecutive years for each child.

If at the time of death, the Insured Person has Dependent Children who are over age 13 or do not require daycare, the Insurer will pay an additional benefit of \$2,500 to the beneficiary.

Child Enhancement Benefit

(Applies to Member and covered Spouse)

If an Insured Person's Dependent Child sustains an injury shown in the Coverage Schedule within 1 year of the accident, the Insurer will pay 2 times the Schedule amount up to a maximum of \$200,000.

Bereavement Benefit

(Applies to Member and covered Spouse)

If you, or your insured spouse die as a result of an accident payable under the terms of this policy, the Insurer will also pay reasonable and necessary expenses for you or your Spouse and Dependent Children for 6 grief counselling sessions to a maximum of \$1,500.

Special Education Benefit

(Applies to Member and covered Spouse)

If you or your covered spouse die due to an accident and at the time of your death, any of your children were enrolled as a full-time student in any post-secondary institution/or at the secondary school level and then enrolls as a full-time student in a post-secondary institution within 365 days following the accident, the insurer will reimburse post-secondary education expenses up to 5% of your principal sum to a maximum of \$10,000 for up to 4 consecutive years for each child.

If at the time of death, you have Dependent Children not eligible for the Special Education Benefit, the Insurer will pay an additional benefit of \$2,500 to the beneficiary.

Common Disaster Benefit

(Applies to covered Spouse)

If you and you insured spouse die as a result of the same accident, the Insurer will increase the payment for your spouse's death up to your principal amount, but in no event to exceed \$1,000,000 for Spouse benefits.

"Common Accident" means the same accident or separate accidents occurring within the same twenty-four hour period.

Family Transportation Benefit

(Applies to Member and covered Family members)

If you or your insured dependent are confined as an inpatient in a hospital because of injuries sustained due to a covered accident, and subsequently require the personal attendance of a Member of the Immediate Family as recommended by the attending physician, the Insurer will pay the reasonable expenses actually incurred by the member of the immediate family for accommodation and transportation by the most direct route to you, up to a maximum of \$15,000.

"Member of the immediate family" means the spouse, (or common-law spouse), parents, grandparents, children over age 18, brother or sister of the Insured Person.

If transportation occurs in a vehicle other than by a licensed common carrier, then reimbursement of transportation expenses will be limited to a maximum of \$0.35 per kilometre travelled.

Seat Belt Benefit

(Applies to Member and covered Family members)
When an injury is covered by this policy, the Insurer will
increase the benefit amount payable by an additional 10%,
provided that:

- 1. the loss occurs while the Insured Person is a passenger or driver of a private passenger type Vehicle;
- 2. the Seat Belt is properly fastened; and
- 3. verification of the actual use of the Seat Belt is part of the official report of the accident or certified by the investigating officer.
- 4. The driver was licensed and not under the influence of an intoxicant.

Workplace Accommodation and Alteration Benefit

(Applies to Member Only)

If you are injured in an accident where a benefit is paid under this policy and you require special adaptive equipment and/or workplace alteration in order to reasonably accommodate your return to active full-time employment, the Insurer will pay the reasonable and necessary expenses actually incurred by the Employer provided:

 The Employer agrees in writing to provide the special adaptive equipment and/or make alterations to the workplace for the purpose of making it accessible for you;





- 2. The Employer acknowledges in writing that the performance of the essential duties your occupation may be altered;
- 3. The proposed special adaptive equipment and/or workplace alteration must have prior written approval by the Insurer;
- 4. The Insurer reserves the right to examine you to evaluate the appropriateness of the proposed alteration.

This benefit will be paid to the Employer upon your return to active full-time employment with the Employer and when the Insurer is provided with written proof of the expenses incurred. This benefit is not payable if the Employer does not incur any cost in providing the special adaptive equipment and/or workplace alterations.

The maximum amount payable under this benefit is \$7,000.

Critical Disease Benefit

(Applies to Member and covered Family member)
If an Insured Person, age 64 or under, is diagnosed with any of the following diseases while this Policy is in force, the Insurer will pay up to 5% of the Insured's Principal Sum up to a maximum of \$25.000:

- Acute Poliomyelitis
- Acute Rheumatic Fever
- Amyotrophic Lateral Sclerosis (ALS)
- Encephalitis
- Huntington's Disease
- Meningococcal Meningitis
- Necrotizing Fasciitis
- Parkinson's Disease
- Tuberculosis
- Typhoid Fever
- Yersinia Pestis

The Insured Person must be totally disabled from the covered disease(s) for at least 9 months following the date of the diagnosis.

Payment of the Critical Disease Benefit is limited to only the first covered disease to occur.

"Totally disabled" means that the Insured Person is wholly and permanently disabled and prevented for the remainder of his or her life, from engaging in any and every occupation, profession, or employment for compensation for which he or she is reasonably or may reasonably become qualified by education, training or experience.

Parental Care Benefit

(Applies to Member and covered Spouse)

If as the result of an accident, you or your spouse die, the Insurer will pay 10% of the applicable Principal Sum up a maximum of \$10,000 to or on behalf of any Dependent Parents as defined below.

The Parental Care Benefit will be payable in equal shares to the Dependent Parents. Only 1 Parental Care Benefit will be payable, regardless of the number of Dependent Parents.

"Dependent Parent(s)" means you or your spouse's parents, parents-in-law, grandparents, grandparents-in-law, great-grandparents or great-grandparents-in-law (whether natural, step or adoptive), who are:

- 1. not regularly employed on a full-time basis;
- primarily dependent upon you or your spouse for support due to a proven mental disability or physical handicap;
- 3. residing in your home.

Psychological Therapy Benefit

(Applies to Member and covered Family members)
For a payable accidental injury, the Insurer will increase the benefit amount payable up to a maximum of \$5,000 for the Reasonable and Customary charges for treatment or counseling for Psychological Therapy as determined by a Physician.

Benefit payments will be made until the earlier of the following:

- 1. the maximum benefit amount is paid; or
- 2. 2 years have elapsed from the date of the Accident; or
- 3. death of the Insured Person.

Psychological Therapy must be provided by a therapist or counsellor (other than the Insured Person or a Member of the Immediate Family) who is licensed to provide such treatment, whether on an out-patient basis or while a patient at a medical facility licensed to provide such treatment.

Child Enhancement Benefit

(Applies to Member and covered Spouse)

If an Insured Person's Dependent Child sustains a covered accidental injury, within 52 weeks of the accident other than loss of life, the Insurer will pay 2 times the scheduled amount up to the maximum amount of \$200,000.

Felonious Assault Benefit

(Applies to Member Only)

When an Occupational Illness or Injury results in accidental death, the Insurer will increase the benefit amount payable by an additional 10%, up to a maximum of \$25,000 provided that the loss occurs:

- 1. as a result of a Criminal Act of Violence; and
- 2. while the Insured Person is engaged in the business of the Employer, whether on or off the premises of the Employer.

Hearing Aids and Vision Benefit

(Applies to Member and covered Family members)
When, as a result of damage caused by a direct accidental blow occurring while insured under this Policy, an Insured Person requires the immediate replacement of hearing aids, prescription eyeglasses or contact lenses, the Insurer will pay for the reasonable and customary expenses actually incurred, up to a maximum of \$1,000 provided expenses are incurred within 12 months of the covered accident.

Burn Benefit

(Applies to Member and covered Family members) If you or your insured dependent, as the result of an Injury, are disfigured due to a third degree burn, the Insurer will determine the payment according to the Burn Schedule below. The maximum benefit amount is \$25,000.

Burn Schedule

Body Part:	Maximum Percentage of Benefit Amount Payable:
Face, Neck, Head	100%
1 Hand & Forearm	25%
1 Upper Arm	10%
Front or Back Torso	35%
1 Thigh or 1 Lower Leg (below the knee)	10%

Survivor Extended Insurance Benefit

(Applies to Family coverage only)

If a Member dies while insured for this benefit and while his or her Dependents are covered under the Policy, the Insurer will continue the Dependent (both spouse and eligible children) coverage for a period of up to 2 years. Premium payments will be waived for this continued coverage.

Continuation of Coverage Benefit

(Applies to Member and Family coverage)
Coverage under this Policy will be continued on any
Insured Person while on an approved leave of absence,
lay-off or on maternity leave, up to a maximum of
12 months. Payment of premiums must be continuous
throughout leave.

Waiver of Premium Benefit

(Applies to Member only)

If, while this Policy is in force and as a result of total disability from an accident or sickness, the Member's Doctors of BC life insurance is extended under a waiver of premium provision provided under the Doctors of BC Term Life Insurance Policy, coverage under this benefit shall also be extended.

Premium payments will be waived until the earlier occurrence of the following:

- a) recovery of the Member from total disability;
- b) the Member's attainment of maximum eligibility age under the Doctors of BC Term Life Insurance policy or termination of eligibility; or
- c) the Member's attainment of the maximum eligibility age under this Policy or termination of eligibility; or
- d) termination of this Policy.

Conversion Privilege

(Applies to Member only)

If this Policy is terminated due to any reason other than non-payment of premium or attainment of age 70, the Member shall be entitled to have issued to him or her by the Insurer, an individual Policy.

To convert coverage, the Member must make application and pay the initial premium for the Converted Insurance to Sutton Special Risk Inc. within 60 days after the date of termination from this Policy. The Member is eligible to convert only AD&D coverage up to the same Principal Sum, subject to a maximum of \$500,000.

What are the exclusions to coverage?

Benefits will not be paid for losses due to:

- declared or undeclared War or any act thereof or invasion.
- actively participating in Acts of Terrorism, civil commotions or riots of any kind;
- training, serving, or taking part in any capacity in the armed forces (land, sea or air) or their operations, of any country or international authority;

- being in, or on, or boarding an aircraft for the purpose of flying it, or alighting from it following a flight, except as provided in the Section entitled "Air Travel";
- suicide or attempted suicide or intentional self-injury;
- injury sustained while riding in, boarding, or alighting from an aircraft owned or leased, by or on behalf of the Employer or any subsidiary or affiliate of such Employer, unless specific written agreement is obtained from the Insurer; or
- Acts of Terrorism which involve the use of, or release
 of, or the threat of any nuclear weapon or device
 or chemical or biological agent, regardless of any
 contributory cause(s).

When does coverage terminate?

Coverage terminates the earlier of:

- The date the Insured Person enters full-time active duty in the armed forces of any country or international authority;
- 2. The last day of the last period for which premiums were paid
- The date the Member ceases membership with Doctors of BC or the YMA, provided all required premiums are paid, unless otherwise provided in this Policy
- 4. The next premium due date after the date the Insured Member is no longer eligible for coverage
- 5. The next premium due date after the Member attains age 75.
- 6. With respect to a Dependent Spouse or Child, the date of death of the Member, the date of divorce from the Member, the date the Member's coverage terminates or the date the Dependent is no longer eligible for coverage under the Policy.

How do I make a claim?

If you or your insured dependent(s) die or suffer a covered injury as a result of an accident, you or your beneficiary should email insurance@doctorsofbc.ca or call the contact numbers listed below to make arrangements for claiming benefits.

How much does it cost?

AD&D insurance is available to you in units of \$100,000 up to a maximum of \$2,000,000 at rates of:

Member Only Rate: \$1.30 per month per \$100,000 Family Rate: \$2.00 per month per \$100,000

To calculate your monthly premium:

Instruction	Example
STEP 1 Determine the amount of coverage you want	\$1,000,000
STEP 2 Express it as a unit of \$100,000 of coverage	\$1,000,000/\$100,000 = 10 units
STEP 3 Choose between Member only or Family coverage	Family Rate = \$2.00
STEP 4 Multiply the units of coverage by the premium rate to obtain your monthly premium	\$2 X 10 units = \$20

How do I enroll?

To enroll in the Plan, simply complete and submit an application to the Doctors of BC Insurance Department. Do not send any money with your application. You will receive an invoice when your coverage is approved.

To help protect your financial future and your assets

Doctors of BC offers and administers a comprehensive array of insurance products beyond AD&D insurance, that includes:

- INCOME**protect™** Disability Insurance
- Physicians' Disability Insurance (Government Funded Premiums)
- Professional Expense Insurance
- Life 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: 1800 665 2262 ext 2904



Email: insurance@doctorsofbc.ca

This brochure provides the highlights and not the details of Doctors of BC AD&D Insurance.





