



Added protection for you and your family

Group benefits – optional group critical illness insurance

Making recovery your priority

Thank you for making Optional Group Critical Illness coverage an important part of your overall benefits plan. Whether you selected coverage for yourself, your spouse or your eligible dependent children, you should feel confident that you have an extra layer of financial protection should anyone you've covered become critically ill.

This benefit is designed to supplement the coverage provided through your health, life and disability plans.

If you, your spouse or your dependent children are medically diagnosed with a covered condition defined within your plan, your Optional Group Critical Illness benefit will pay a one-time, lump-sum cash benefit that you can use in any manner you wish, for example: seeking other treatment options, making mortgage or credit card payments, hiring a caregiver, buying specialized equipment, or taking time for family or other interests.

Optional Group Critical Illness Insurance provides you with:

- ✓ affordable group rates; typically, lower cost than individual coverage.
- ✓ flexibility – you choose the amount of coverage that's right for you;
- ✓ convenient payroll deduction for premium payments;
- ✓ a non-taxable lump-sum benefit you can use in any way you wish; and
- ✓ access to valuable health information and navigation services.

Coverage for a critical illness applies only to those conditions that are defined within the terms of the group benefits contract.

Definitions for covered conditions are available on Manulife's plan member site at www.manulife.ca/planmember, under Tools and Resources, select Covered conditions for your critical illness or by contacting our Customer Service Centre.

The specific covered conditions are recognized within the medical profession as being critical in nature. As medical advances and treatment of critical illnesses evolve, the contract definitions for conditions covered under this benefit may change.

Your Optional Group Critical Illness benefit provides coverage for the following conditions depending on whether you selected coverage for you, your spouse or your dependent children.

Group Critical Illness covered conditions	You and your spouse	Your child
Alzheimer's Disease	✓	✓
Aortic Surgery	✓	✓
Benign Brain Tumour	✓	✓
Blindness	✓	✓
Cancer (Life-Threatening)	✓	✓
Coma	✓	✓
Coronary Artery Bypass Surgery	✓	✓
Deafness	✓	✓
Heart Attack (Myocardial Infarction)	✓	✓
Heart Valve Replacement	✓	✓
Kidney Failure	✓	✓
Loss Of Limbs	✓	✓
Loss Of Speech	✓	✓
Major Organ Failure on Waiting List	✓	✓
Major Organ Transplant	✓	✓
Motor Neuron Disease	✓	✓
Multiple Sclerosis	✓	✓
Occupational HIV Infection	✓	✓
Paralysis	✓	✓
Parkinson's Disease	✓	✓
Severe Burns	✓	✓
Stroke (Cerebrovascular Accident)	✓	✓
Autism		✓
Cerebral Palsy		✓
Congenital Heart Disease (for which corrective surgery has been performed)		✓
Cystic Fibrosis		✓
Down Syndrome		✓
Muscular Dystrophy		✓
Type 1 Diabetes Mellitus		✓

As with most insurance, a few conditions apply:

- You must survive at least 30 days following the diagnosis of a covered condition in order to receive the benefit.
- Within the first 90 days of coverage no benefit will be paid for cancer or benign brain tumour if the insured exhibits or receives any of the following:
 - a. signs or symptoms that lead to a diagnosis of cancer or benign brain tumour, regardless of the date when the diagnosis is made; or
 - b. medical consultations, tests or any form of clinical evaluation, that lead to a diagnosis of cancer or benign brain tumour, regardless of when the diagnosis is made; or
 - c. a diagnosis of cancer or benign brain tumour.
- Benefits are payable for the first diagnosis only and coverage terminates once a claim has been paid.

See your benefits booklet for a complete list of exclusions.

Medical Second Opinion

In addition to financial support, your Optional Critical Illness benefit also provides you with access to valuable health information and medical second opinion services.

Medical Second Opinion is a phone and web-based health resource centre that is designed to help you find the best medical, treatment and therapeutic information available for your health situation.

Our second opinion service and health navigation features are provided to both you and your immediate family members.

Through this service, you may even obtain referrals to specialized treatment facilities outside of Canada where you can get help managing a covered condition.

There is no charge to you for using this health information, second opinion and referral service. However, fees for treatments, services or facilities that you choose to access through Medical Second Opinion are your responsibility and may not be covered under your group benefits plan.



Questions?

Claim forms and contract definitions for covered conditions are available on the plan member site. Go to **www.manulife.ca**, click on the sign in button located at the top of the screen, and select My Group Benefits. Follow the simple onscreen prompts to register or log in to your account.