

Definitions

LifeAdvance and Child LifeAdvance



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About critical illness insurance

World-renowned heart surgeon Dr. Marius Barnard helped develop critical illness insurance.

Dr. Barnard witnessed the emotional strains many of his patients faced after surviving serious illnesses. Financial stress often worked against recovery or, in many cases, left patients struggling to pay bills as they resumed their lives.

With advances in medical science and technology and the increasing life expectancy in Canada, we have a greater chance of experiencing a serious illness and surviving.

As Dr. Barnard says, “Critical illness insurance gives you financial independence when you need it most. You need insurance not only because you are going to die, but because you are going to live.”

Definitions of critical illness insured conditions for LifeAdvance and Child LifeAdvance

LifeAdvance™ pays a one-time lump-sum benefit if the insured person is diagnosed with a critical illness insured condition, as defined in the policy, and satisfies the survival period, if applicable.

Any illness, disorder or surgery not specifically defined under the insured conditions of the policy won't be insured under the policy and no benefit will be paid. Payment is limited to the first critical illness insured condition to occur, as defined in the policy, unless the second-event rider has been added to the policy.

Canada Life™ reserves the right to require examination of the insured and a confirmation of the diagnosis or need for surgery for an insured condition by any doctor determined by Canada Life.

This is sample wording only and is not binding. For the purpose of this brochure, some definitions have been edited to improve comprehension. For exact definition wording, please refer to your policy. In the event of any inconsistency between the information contained in this document and the terms and conditions in the policy, the terms and conditions in the policy will prevail.

A for Adult – **C** for Child

Acquired brain injury **A C**

Acquired brain injury means new damage to brain tissue caused by a traumatic injury, anoxia, hypoxia or encephalitis resulting in signs and symptoms of neurological impairment that:

- Are present and verifiable on clinical examination or neuro-psychological testing;
- Are corroborated by magnetic resonance imaging (MRI) or computerized tomography (CT) studies of the brain showing changes that are consistent in character, location and timing with the new damage; and
- Persist for a period of at least 180 days from the date of the new damage

No benefit will be paid under acquired brain injury for either of the following:

- An abnormality seen on imaging studies of the brain without definite related signs and symptoms
- Neurological signs occurring without symptoms or imaging abnormalities

Aortic surgery **A C**

Aortic surgery means the undergoing of surgery for disease of the aorta requiring excision and surgical replacement of any part of the diseased aorta with a graft. Aorta means the thoracic and abdominal aorta but not its branches.

The survival period for aortic surgery is 30 days.

Exclusion: No benefit will be paid under aortic surgery for angioplasty, intra-arterial procedures, percutaneous transcatheter procedures or non-surgical procedures.

Aplastic anaemia **A C**

Aplastic anaemia means chronic persistent bone marrow failure, confirmed by biopsy, which results in anaemia, neutropenia and thrombocytopenia requiring blood product transfusion, and treatment with at least one of the following:

- Marrow stimulating agents
- Immunosuppressive agents
- Bone marrow transplantation

Bacterial meningitis A C

Bacterial meningitis is confirmed by cerebrospinal fluid showing growth of pathogenic bacteria in culture, resulting in neurological deficit documented for at least 90 days from the date of diagnosis.

Exclusion: No benefit will be paid under bacterial meningitis for viral meningitis.

Benign brain tumour A C

Benign brain tumour means a non-malignant tumour located in the cranial vault and limited to the brain, meninges, cranial nerves or pituitary gland. The tumour must require surgery or radiation treatment or cause irreversible objective neurological deficits.

Exclusion: No benefit will be paid under benign brain tumour for pituitary adenomas less than 10 mm.

Benefits for benign brain tumour are subject to the exclusion for certain insured conditions provision of the policy.

Blindness A C

Blindness means the total and irreversible loss of vision in both eyes, evidenced by either of the following:

- The corrected visual acuity being 20/200 or less in both eyes
- The field of vision being less than 20 degrees in both eyes

Cerebral palsy C

Cerebral palsy means a non-progressive clinical disorder characterized by spasticity or incoordination of movements.

Coma A C

Coma means a state of unconsciousness with no reaction to external stimuli or response to internal needs for a continuous period of at least 96 hours and for which period the Glasgow coma score must be 4.0 or less.

Exclusion: No benefit will be paid under coma for a medically induced coma.

Congenital heart disease C

Congenital heart disease means any one of the following heart defects described below:

- Total anomalous pulmonary venous connection
- Transposition of the great arteries
- Atresia of any heart valve
- Single ventricle
- Hypoplastic left heart syndrome
- Truncus arteriosus
- Tetralogy of Fallot
- Eisenmenger syndrome
- Ebstein's anomaly
- Double outlet left or right ventricle

The following heart defects also satisfy the definition of congenital heart disease, if surgery is performed for correction of the heart defect:

- Coarctation of the aorta
- Pulmonary stenosis
- Aortic stenosis
- Discrete subvalvular aortic stenosis
- Ventricular septal defect
- Atrial septal defect

The diagnosis must be corroborated by cardiac imaging.

The survival period for congenital heart disease is 30 days.

Non-surgical or trans-catheter techniques such as balloon valvuloplasty and percutaneous atrial septal defect closure don't satisfy the definition of surgery.

Coronary artery bypass surgery A C

Coronary artery bypass surgery means the undergoing of heart surgery to correct narrowing or blockage of one or more coronary arteries with bypass grafts.

The survival period for coronary artery bypass surgery is 30 days.

Exclusion: No benefit will be paid under coronary artery bypass surgery for angioplasty, intra-arterial procedures, percutaneous trans-catheter procedures or non-surgical procedures.

Cystic fibrosis C

Cystic fibrosis means a condition resulting in chronic lung disease or pancreatic insufficiency. The diagnosis must be confirmed by a positive sweat test.

Deafness **A C**

Deafness means the total and irreversible loss of hearing in both ears, with an auditory threshold of 90 decibels or greater within the speech threshold of 500 to 3,000 hertz.

Dementia, including Alzheimer's disease **A**

Dementia, including Alzheimer's disease, must be characterized by a progressive deterioration of memory and at least one of the following areas of cognitive function:

- Aphasia (a disorder of speech)
- Apraxia (difficulty performing familiar tasks)
- Agnosia (difficulty recognizing objects)
- Disturbance in executive functioning (e.g. inability to think abstractly and to plan, initiate, sequence, monitor and stop complex behaviour), which is affecting daily life

The insured must exhibit both:

- Dementia of at least moderate severity, which must be evidenced by a Mini Mental State Exam of 20/30 or less, or equivalent score on another generally medically accepted test or tests of cognitive function; and
- Evidence of progressive worsening in cognitive and daily functioning either by serial cognitive tests or by history over at least a 6 month period

Exclusion: No benefit will be paid under dementia, including Alzheimer's disease for affective or schizophrenic disorders or delirium.

For purposes of dementia, including Alzheimer's disease, reference to the Mini Mental State Exam is to MF Folstein, SE Folstein, PR McHugh, J Psychiatr Res. 1975; 12(3):189.

Heart attack **A C**

Heart attack means the death of heart muscle due to obstruction of blood flow that results in the rise and fall of biochemical cardiac markers to levels considered diagnostic of myocardial infarction, with at least one of the following:

- Heart attack symptoms
- New electrocardiogram (ECG) changes consistent with a heart attack
- Development of new Q waves during or immediately following an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty

The survival period for heart attack is 30 days.

Exclusion: No benefit will be paid under heart attack for elevated biochemical cardiac markers after an intra-arterial cardiac procedure including, but not limited to, coronary angiography and coronary angioplasty, in the absence of new Q waves.

ECG changes suggesting a prior myocardial infarction don't satisfy the above definition of heart attack.

Heart valve replacement or repair **A C**

Heart valve replacement or repair means undergoing surgery to replace any heart valve with either a natural or mechanical valve or to repair heart valve defects or abnormalities.

The survival period for heart valve replacement or repair is 30 days.

Exclusion: No benefit will be paid under heart valve replacement or repair for angioplasty, intra-arterial procedures, percutaneous trans-catheter procedures or non-surgical procedures.

Kidney failure **A C**

Kidney failure means chronic irreversible failure of both kidneys to function, as a result of which regular haemodialysis, peritoneal dialysis or renal transplantation is initiated.

Life-threatening cancer **A C**

Life-threatening cancer means a tumour that must be characterized by the uncontrolled growth and spread of malignant cells and the invasion of tissue. Types of cancer include carcinoma, melanoma, leukemia, lymphoma and sarcoma.

Exclusion: No benefit will be paid under life-threatening cancer for any of the following:

- Lesions described as benign, pre-malignant, uncertain, borderline, non-invasive, carcinoma in situ (Tis), or tumours classified as Ta
- Malignant melanoma skin cancer that is less than or equal to 1.0 mm in thickness, unless it is ulcerated or is accompanied by lymph node or distant metastasis
- Any non-melanoma skin cancer, without lymph node or distant metastasis
- Prostate cancer classified as T1a or T1b, without lymph node or distant metastasis
- Papillary thyroid cancer or follicular thyroid cancer, or both, that is less than or equal to 2.0 cm in greatest diameter and classified as T1, without lymph node or distant metastasis
- Chronic lymphocytic leukemia classified less than Rai stage 1
- Malignant gastrointestinal stromal tumours (GIST) and malignant carcinoid tumours, classified less than American Joint Committee on Cancer (AJCC) stage 2

For purposes of life-threatening cancer, the terms:

- Tis, Ta, T1a, T1b, T1 and AJCC stage 2 are to be applied as defined in the AJCC cancer staging manual, 7th Edition, 2010
- Rai staging is to be applied as set out in KR Rai, A Sawitsky, EP Cronkite, AD Chanana, RN Levy and BS Pasternack: Clinical staging of chronic lymphocytic leukemia. Blood 46:219, 1975

Benefits for life-threatening cancer are subject to the exclusion for certain insured conditions provision of the policy.

Loss of limbs A C

Loss of limbs means the complete severance of two or more limbs at or above the wrist or ankle joint as the result of an accident or medically required amputation.

Loss of speech A C

Loss of speech means the total and irreversible loss of the ability to speak as a result of physical injury or disease for a period of at least 180 days.

Exclusion: No benefit will be paid under loss of speech for all psychiatric related causes.

Major organ failure on waiting list A C

Major organ failure on waiting list means irreversible failure of the heart, both lungs, liver, both kidneys or bone marrow and transplantation must be medically necessary. To qualify under major organ failure on waiting list, the insured must become enrolled as the recipient in a recognized transplant centre in Canada or the United States that performs the required transplant. For greater certainty, the date of diagnosis is the date of the insured's enrollment in the transplant centre.

Major organ transplant A C

Major organ transplant means irreversible failure of the heart, both lungs, liver, both kidneys or bone marrow and transplantation must be medically necessary. To qualify under major organ transplant, the insured must undergo a transplantation procedure as the recipient of a heart, lung, liver, kidney or bone marrow and limited to these entities.

Motor neuron disease A

Motor neuron disease means one of the following, limited to these conditions:

- Amyotrophic lateral sclerosis (ALS or Lou Gehrig's disease)
- Primary lateral sclerosis
- Progressive spinal muscular atrophy
- Progressive bulbar palsy
- Pseudo bulbar palsy

Multiple sclerosis A C

Multiple sclerosis means at least one of the following:

- Two or more separate clinical attacks, confirmed by magnetic resonance imaging (MRI) of the nervous system, showing multiple lesions of demyelination
- Well-defined neurological abnormalities lasting more than six months, confirmed by MRI imaging of the nervous system, showing multiple lesions of demyelination
- A single attack, confirmed by repeated MRI imaging of the nervous system, which shows multiple lesions of demyelination which have developed at intervals at least one month apart

Muscular dystrophy C

Muscular dystrophy means dystrophy of skeletal muscles confirmed by electromyography and muscle biopsy.

Spinal muscular atrophy does not satisfy the definition of muscular dystrophy.

Occupational HIV infection A

Occupational HIV infection means infection with human immunodeficiency virus (HIV) resulting from accidental injury during the course of the insured's normal occupation, which exposed the person to HIV contaminated body fluids.

The accidental injury leading to the infection must have occurred following the later of the date of issue of the policy or the effective date of last reinstatement of the policy.

Payment under occupational HIV infection requires satisfaction of all of the following:

- The accidental injury must be reported to us within 14 days of the accidental injury
- A serum HIV test must be taken within 14 days of the accidental injury and the result must be negative
- A serum HIV test must be taken between 90 days and 180 days after the accidental injury and the result must be positive

- All HIV tests must be performed by a duly licensed laboratory in Canada or the United States
- The accidental injury must have been reported, investigated and documented in accordance with current Canadian or United States workplace guidelines

Exclusions: No benefit will be paid under occupational HIV infection if either:

- The insured has elected not to take any available licensed vaccine offering protection against HIV
- A licensed cure for HIV infection has become available prior to the accidental injury

Non-accidental injury including, but not limited to, sexual transmission or intravenous (IV) drug use doesn't satisfy the definition of an occupational HIV infection.

Paralysis A C

Paralysis means total loss of muscle function of two or more limbs as a result of injury or disease to the nerve supply of those limbs, for a period of at least 90 days following the precipitating event.

Parkinson's disease and specified atypical Parkinsonian disorders A

Parkinson's disease means primary Parkinson's disease, a permanent neurologic condition which must be characterized by bradykinesia (slowness of movement) and either muscular rigidity or rest tremor. The insured must exhibit objective signs of progressive deterioration in function for at least one year, for which the treating neurologist has recommended dopaminergic medication or other generally medically accepted equivalent treatment for Parkinson's disease.

Specified atypical Parkinsonian disorders mean progressive supranuclear palsy, corticobasal degeneration, or multiple system atrophy.

Exception: No benefit will be paid under Parkinson's disease and specified atypical Parkinsonian disorders for any other type of Parkinsonism.

Benefits for Parkinson's disease and specified atypical Parkinsonian disorders are subject to the exclusion for certain insured conditions provision of the policy.

Severe burns A C

Severe burns mean third degree burns over at least 20% of the body surface.

Stroke A C

Stroke means an acute cerebrovascular event caused by intra-cranial thrombosis or haemorrhage, or embolism from an extra-cranial source, with both:

- Acute onset of new neurological symptoms
- New objective neurological deficits on clinical examination

These new symptoms and deficits must be confirmed by diagnostic imaging testing and persist for more than 30 days following the date of diagnosis.

The survival period for stroke is 30 days.

Exclusion: No benefit will be paid under stroke for either:

- Transient ischaemic attacks
- Intracerebral vascular events due to trauma

Lacunar infarcts, which don't have the neurological symptoms and deficits set out above and that persist for more than 30 days, don't satisfy the definition of stroke.

Type 1 diabetes mellitus C

Type 1 diabetes mellitus is characterized by insulin deficiency and continuous dependence on exogenous insulin for survival.

The survival period for type 1 diabetes mellitus is 90 days from the date of diagnosis, during which there must be evidence of dependence on insulin for survival.

Definitions of insured conditions under the illness assist benefit

The illness assist benefit provides the owner with a lump sum of 15% of the critical illness benefit up to \$50,000 for LifeAdvance and \$37,500 for Child LifeAdvance™. The illness assist benefit is payable a maximum of four times, provided each payment is for a different illness assist insured condition.

Payment of the illness assist benefit won't cause the policy to terminate and the critical illness insurance benefit won't be reduced by the amount of the illness assist benefit paid unless, within 90 days of payment of the illness assist benefit, further investigations or procedures confirm a diagnosis of a related critical illness insured condition.

The illness assist benefit is paid if the insured receives a written diagnosis for one of the following:

Coronary angioplasty A C

Coronary angioplasty means undergoing an interventional procedure to unblock or widen a coronary artery that supplies blood to the heart to allow an uninterrupted flow of blood.

The survival period for coronary angioplasty is 30 days.

Ductal breast cancer in-situ A C

Ductal breast cancer in-situ means ductal carcinoma in-situ of the breast, as confirmed by biopsy.

Early chronic lymphocytic leukemia A C

Early chronic lymphocytic leukemia is classified less than Rai stage 1, as confirmed by biopsy.

Early prostate cancer A C

Early prostate cancer means prostate cancer classified as T1a or T1b, without lymph node or distant metastasis, as confirmed by biopsy.

Early thyroid cancer A C

Early thyroid cancer means papillary thyroid cancer or follicular thyroid cancer, or both, that is less than or equal to 2.0 cm in greatest diameter and classified as T1, without lymph node or distant metastasis, as confirmed by biopsy.

Gastrointestinal stromal tumours A C

Gastrointestinal stromal tumours means tumours classified as AJCC Stage 1.

Grade 1 neuroendocrine tumours (carcinoid) A C

Grade 1 neuroendocrine tumours (carcinoid) means tumours confined to the affected organ, treated with surgery alone and requiring no additional treatment, other than perioperative medication to counteract the effects from hormonal oversecretion by the tumour.

Superficial malignant melanoma A C

Superficial malignant melanoma means skin cancer that is less than or equal to 1.0 mm in thickness, unless it is ulcerated or is accompanied by lymph node or distant metastasis, as confirmed by biopsy.

For purposes of the illness assist insured conditions, the terms:

- a) Tis, Ta, T1a, T1b, T1, Grade 1 and AJCC Stage 1 are to be applied as defined in the AJCC cancer staging manual, 7th Edition, 2010; and
- b) Rai staging is to be applied as set out in KR Rai, A Sawitsky, EP Cronkite, AD Chanana, RN Levy and BS Pasternack: Clinical staging of chronic lymphocytic leukemia. Blood 46:219, 1975.

Loss of independent existence **A**

Loss of independent existence is an optional rider on LifeAdvance critical illness insurance. If the policy includes the loss of independent existence rider, loss of independent existence will be included as a critical illness insured condition under the policy.

Loss of independent existence means the total inability to perform, by oneself, at least two of the following six activities of daily living for a continuous period of at least 90 days with no reasonable chance of recovery.

Activities of daily living are:

- **Bathing** – the ability to wash oneself in a bathtub, shower or by sponge bath, with or without the aid of assistive devices
- **Dressing** – the ability to put on and remove necessary clothing, braces, artificial limbs or other surgical appliances with or without the aid of assistive devices
- **Toileting** – the ability to get on and off the toilet and maintain personal hygiene with or without the aid of assistive devices
- **Bladder and bowel continence** – the ability to manage bowel and bladder function with or without protective undergarments or surgical appliances so that a reasonable level of hygiene is maintained
- **Transferring** – the ability to move in and out of a bed, chair or wheelchair, with or without the aid of assistive devices
- **Feeding** – the ability to consume food or drink that already have been prepared and made available, with or without the use of assistive devices



Other important definitions

Below are other important definitions for LifeAdvance and Child LifeAdvance policies.

This is sample policy wording only and is not binding. In the event of a discrepancy between this document and the actual policy, the policy will prevail.

■ **Diagnosis** means the written confirmation of the existence of an insured condition that is covered under the policy by a specialist. The diagnosis must be supported by objective medical evidence. At the time of diagnosis you must be alive and must not have experienced irreversible cessation of all functions of the brain.

In the absence or unavailability of a specialist, and as approved by Canada Life, an insured condition may be diagnosed by a doctor other than a specialist.

- **Doctor** means a licensed medical doctor, practicing within the scope of the medical doctor's licensed authority, who:
- Isn't related by blood or marriage to the insured or the owner
 - Isn't in a business relationship with the insured or the owner
 - Is practicing medicine in Canada, the United States or in such other jurisdiction as Canada Life may approve
- **Irreversible** means the condition can't be improved by medical or surgical treatment at the time of diagnosis. The medical or surgical treatment doesn't need to be undertaken if it would involve an undue risk to the insured's health.

■ **Specialist** means a licensed medical doctor who has been trained in the specific area of medicine relevant to the insured condition for which benefit is being claimed and who has been certified by a specialty examining board. In the absence or unavailability of a specialist, and as approved by Canada Life, a condition may be diagnosed by a qualified doctor.

Specialist includes, but is not limited to, cardiologist, neurologist, nephrologist, oncologist, ophthalmologist, burn specialist and internist. The specialist must:

- not be related by blood or marriage to the insured or the owner
 - not be in a business relationship with the insured or the owner and;
 - be practising medicine in Canada, the United States or in such other jurisdiction as Canada Life may approve
- **Surgery** means the insured undergoes medically necessary surgery, which is performed on the written advice of a doctor. The surgery must be performed by a doctor in Canada, the United States or in such other jurisdiction as Canada Life may approve.
- **Charitable donation** means that once a critical illness benefit becomes payable, Canada Life will make a \$500 donation to an approved charitable organization (as directed by the owner). The donation doesn't result in any change to the lump-sum critical illness benefit payable to the owner. The charitable donation will only be made once.
- **Note:** The critical illness charitable donation doesn't form part of the LifeAdvance policy. Canada Life is not obligated to make the donation and may cancel this feature at any time without notice.
 - A tax receipt won't be issued to the owner.

Survival period

The survival period means the minimum number of consecutive days, immediately following the date of diagnosis or surgery, which you must survive before a critical illness benefit or illness assist benefit may become payable.

Provided the insured is still living and hasn't experienced irreversible cessation of all functions of the brain, a lump-sum benefit will be paid after the diagnosis of or surgery for one of the critical illness insured conditions, with the following exceptions, where certain survival periods would apply:

30 days

- Aortic surgery **A C**
- Congenital heart disease **C**
- Coronary artery bypass surgery **A C**
- Heart attack **A C**
- Heart valve replacement or repair **A C**
- Stroke **A C**
- Coronary angioplasty (illness assist condition) **A C**

90 days

- Bacterial meningitis **A C**
- Loss-of-independent existence (if included in the policy) **A**
- Paralysis **A C**
- Type 1 diabetes mellitus **C**

180 days

- Acquired brain injury **A C**
- Loss of speech **A C**

6 months

- Dementia, including Alzheimer's disease **A**

1 year

- Parkinson's disease **A**

The number of days until the serum HIV tests are taken as specified in the definition for occupational HIV infection. **A**





Exclusions

General exclusions

No critical illness benefit, illness assist benefit or surgery advance will be payable if the insured condition results, directly or indirectly, from any of the causes described below:

- The insured's attempt to take his or her own life, or intentionally inflict injuries on himself or herself, whether or not the insured has a mental illness or understands or intends the consequences of his or her action(s)
- The insured's attempt to commit or commission any assault, battery or criminal offence, whether or not the insured has been charged with that offence
- The insured's use or intake of any drug, poisonous substance, intoxicant or narcotic, other than as prescribed and taken in accordance with the instruction of a licensed medical doctor
- War, whether such war is declared or undeclared, hostile action of the armed forces of any country, insurrection or civil commotion, whether or not the insured was a participant
- The insured's operation or control of any motorized vehicle, while his or her blood alcohol concentration is in excess of 80 mg of alcohol per 100 ml of blood
- The insured's operation or control of any motorized vehicle if, while the insured operates or controls such vehicle or within a period of two hours after ceasing to operate or control said vehicle:
 - The insured's blood drug concentration is equal to or in excess of the prescribed amounts under the Blood Drug Concentration Regulation, as may be amended or replaced from time to time, under the Criminal Code of Canada or;
 - The combination of the insured's blood alcohol concentration and the insured's blood drug concentration is equal to or in excess of the prescribed amounts under the Blood Drug Concentration Regulation, as may be amended or replaced from time to time, under the Criminal Code of Canada
- Intentional injury inflicted by the owner or by a person who stands to gain directly or indirectly from any benefit otherwise payable under the policy **C**

Exclusion for certain insured conditions

Certain insured condition means:

Benign brain tumour	A C
Parkinson's disease	A
Specified atypical Parkinsonian disorders	A
Life-threatening cancer	A C
Any forms of cancer set out in the illness assist insured conditions	A C

No benefit will be paid for a certain insured condition:

- For benign brain tumour, life-threatening cancer or any form of cancer set out in the illness assist insured conditions within the first 90 days following the latest of the policy date, date of issue and the last date of reinstatement of the policy
- For Parkinson's disease or specified atypical Parkinsonian disorders, within the first year following the latest of the policy date, date of issue and the last date of reinstatement of the policy

if the insured has any of the following:

- Signs, symptoms or investigations that lead to a diagnosis of a certain insured condition or any other type of cancer (covered or excluded under the policy) or Parkinsonism, regardless of when the diagnosis is made
- A diagnosis of a certain insured condition or any other type of cancer (covered or excluded under the policy) or Parkinsonism

Medical information about the diagnosis and any signs, symptoms or investigations leading to the diagnosis must be reported to Canada Life within six months of the date of diagnosis. If this information isn't provided within this period, Canada Life has the right to deny any claim for the certain insured condition or any critical illness insured condition caused by such certain insured condition or its treatment.

Upon receipt of the medical information, Canada Life will provide confirmation to the owner that the exclusion for certain insured conditions provision applies. The owner may, by written request, elect to maintain the policy in force provided the written request is received by Canada Life within 30 days of the date the confirmation is provided to the owner. Otherwise, the policy will terminate and any premium paid will be refunded from the latest of the policy date, date of issue and the last date of reinstatement of the policy.

If the owner elects to maintain the policy in force and the insured is diagnosed with benign brain tumour, life-threatening cancer or any form of cancer set out in the illness assist insured conditions, benefits aren't payable under the policy for any of the following:

- Benign brain tumour
- Life-threatening cancer
- Any form of cancer within the illness assist insured conditions
- Any other critical illness insured condition caused by such certain insured condition for which the insured was diagnosed with or its treatment
- Any other type of cancer (covered or excluded under the policy)

If the owner elects to maintain the policy in force and the insured is diagnosed with Parkinson's disease or atypical Parkinsonian disorders, benefits aren't payable under the policy for any of the following:

- Parkinson's disease
- Specified atypical Parkinsonian disorders
- Any other critical illness insured condition caused by such certain insured condition for which the insured was diagnosed with or its treatment

In all other respects, Canada Life's rights and the rights of the owner will remain the same under the policy.

For more information about how LifeAdvance and Child LifeAdvance critical illness insurance may fit your needs, ask your advisor for an illustration.



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